



The value of rural proofing

Rural proofing is shorthand for a process that involves assessing how policies will work for rural people and places and, so, ensure that the policies are implemented fairly and effectively.

The benefits of rural proofing to **good policy making** are wide ranging. They include:

Better decision making

Weighing how a policy will impact on rural and urban areas is the best way to find an effective way to roll it out to everyone, wherever they live.

Improved communication

Using strong evidence to explain why certain strategies are being used in rural areas makes it easier for people to understand departmental reasoning, and improves community acceptance of policy decisions.

Strengthening relationships

Identifying and engaging rural stakeholders will improve a department's understanding of, and responses to, the needs of rural people.

Building capacity

By helping rural interest groups to contribute to a policy's development and its evaluation, communities gain opportunities to engage meaningfully with the policy making process, now and in future.





Commission for
Rural Communities

Tackling rural disadvantage

Rural proofing
guidance

The Commission for Rural Communities acts as the advocate for England's rural communities, as an expert adviser to government, and as a watchdog to ensure that government actions, policies and programmes recognise and respond effectively to rural needs, with a particular focus on disadvantage.

It has three key functions:

Rural advocate:

the voice for rural people, businesses and communities

Expert adviser:

giving evidence-based, objective advice to government and others

Independent watchdog:

monitoring, reporting on and seeking to mainstream rural into the delivery of policies nationally, regionally and locally

This guidance has been prepared by the Commission for Rural Communities. It is designed to be used alongside other appraisal systems, including Sustainable Development Action Plans and the formal Impact Assessment process within Government. It does not duplicate or substitute these systems; instead, it complements and enhances them.

The questions below will help you to work out if your initiative is likely to encounter the challenges posed by rural circumstances. Some potential solutions are also indicated, to help you consider helpful adjustments.

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Step One: The policy development process

Most departments have tailored guidance covering how policy should be developed. What follows is a recap of the general stages, highlighting where 'thinking rural' will be most useful.

- What are the **objectives** of the proposed policy?
- What are its **intended impacts or outcomes**?
- Which **areas, groups or organisations** are supposed to benefit?
- What is the **current situation** and why is it not delivering the outcomes required?
 - How will you **move** from the current situation to where you want to be? What's the **rationale** for intervention? How will you deliver what is needed? Are all realistic **options** being appraised?
 - Where answers reveal a **potentially different impact** for rural areas/people, or uncertainty, investigate further. Evidence-based decisions are key to good policy-making. Use Step Two (below) to help to rural proof your policy and consider what evidence you may need.
 - Where the impact in rural areas will be significantly different, explore how to **adjust policy options** to produce the desired outcomes in rural areas or avoid/mitigate any undesirable impacts. This exercise may also highlight opportunities to maximise positive impacts in rural areas.
 - **Seek advice**, as necessary, including from the Commission for Rural Communities and other rural stakeholders and experts.
- On implementation, monitor change - evaluate the impact the policy is having, using appropriate data collection, and assess what is, or isn't being achieved.

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Step Two: Rural proofing policy development

In order to consider the themes, questions and prompts below, the availability of a strong and credible evidence base is essential. Such evidence could include:

- Existing research, surveys or analysis that includes a rural dimension
- Specially commissioned data and research
- Use of the ONS Rural and Urban Areas definition to interpret data sets.

Service provision and availability

The current recession is likely to affect many programme budgets. When you are considering methods of reducing budget spend, services delivered to rural communities should not be perceived as a source of 'quick-fix' budget savings.

Rural communities are particularly vulnerable to service cuts as they are already reliant on a limited number and have reduced access to alternatives. Therefore, the CRC urges careful consideration of rural circumstances, and the options listed below, prior to any budget cuts being made.

Will the policy affect the availability of public and private services? Will it result in closures or centralisation? Will this have a disproportionate effect in rural areas (where services are already more limited)?

For nearly all service types, availability has fallen in rural areas since 2000, with NHS dental surgeries, Post Offices and Job Centres most affected.¹

Rural Solutions

- Share premises or staff with other service providers to maintain or create a rural outlet ('joint provision').
- Provide additional funding to rural outlets to maintain service standards.
- Improve transport/accessibility to compensate for the centralisation of services.
- Encourage alternative funding streams for threatened rural services.

¹ Commission for Rural Communities, *State of the Countryside Report 2008*, p26

Will the policy rely on existing service outlets, such as schools, libraries and GP surgeries? How will you ensure rural residents can access services in areas where such outlets are few and far between?

The number of service outlets is declining in urban and rural areas. Such reductions tend to be felt more keenly in rural areas. Generally, rural people already have to travel further to access key services than their urban counterparts, and are losing services more quickly than elsewhere.²

Rural Solutions

- Use mobile and outreach services.
- Use ICT to avoid the need to visit outlets.
- Deliver effective public and community transport solutions.
- Share premises or staff with other service providers to maintain or create a rural outlet ('joint provision').

Will the policy rely on the private sector or a public-private partnership? Will the smaller and scattered nature of rural populations provide a sufficient market to attract the private sector? Will there be similar opportunities for choice and competition? Does the private sector in rural areas have a capacity to deliver?

The 2007 Index of Multiple Deprivation shows rural areas have, on average, lower concentrations of deprivation than urban areas.³

Rural Solutions

- Consider the use of regulation, including universal service obligations.
- Set (different?) rural delivery targets.
- Draw up contracts which prevent cherry picking of the most profitable (urban) markets.
- Encourage commercial providers with incentives.
- Offset higher rural costs (e.g. through rate relief).

² Commission for Rural Communities, *State of the Countryside Report 2008*, p33

³ Commission for Rural Communities, *State of the Countryside Report 2008*, p12

Delivery costs

Will the cost of delivery be higher in rural areas where clients are more widely dispersed and economies of scale can be harder to achieve? Will longer travel times or distances add to the cost of service provision? Will services need to operate out of smaller outlets, so losing economies of scale?

[Rurality] leads to increased travel by both health professionals and patients. Nurses have reported that they see a lower number of patients in a day than their urban counterparts because of the travel distances involved. GPs found that they did more home visits in rural areas because they knew that many of their patients had no transport and could not travel to the surgery.⁴

Rural Solutions

- Allow for higher unit delivery costs in funding formulae (e.g. a sparsity factor) or when specifying cost-efficiency criteria.
- Encourage joint provision to reduce costs.

Will the policy rely on local institutions for delivery? Will the policy be as effective in rural areas, where private, public and voluntary sector organisations tend to be smaller and may have less capacity to build partnerships? If funds or services are to be allocated via a bidding process, will small organisations be able to compete fairly?

Since 2004, GPs have been able to transfer responsibility and costs for out-of-hours services to their local Primary Care Trust. For strategic reasons, this may mean that services in rural areas are located further afield.⁵

Rural Solutions

- Provide specific support for capacity building.
- Allow longer timescales for bidding.
- Simplify the bidding process.
- Allow for an increased level of public or voluntary sector input to compensate for the possibility of limited private sector input.

⁴ Swindlehurst H in Commission for Rural Communities, Fact sheet: Health care in peripheral and remote rural areas, p1

⁵ Rural Reference Bulletin 2, February 2009, Commission for Rural Communities, p1

Accessibility and infrastructure

Will the policy affect travel needs or the ease/cost of travel?

Will the impact be different in sparsely populated or remote rural areas where, typically, journey times are longer, public transport is poor, and alternative travel options are limited or expensive, especially for low income groups?

Rural residents travel greater distances in their daily lives than urban people, and more of their travel is by car. During 2006 urban traffic levels fell by 2% but grew by 1% on rural roads, and 2% on motorways.⁶

Rural Solutions

- Reduce the need to travel by using mobile services or local delivery or telephone/internet.
- Address travel difficulties by co-ordinating and improving transport links (e.g. additional services, demand-responsive transport, community transport schemes).
- Alleviate the costs of travel either by subsidising services or individuals (remembering that there may be no public transport service between many rural locations).
- Consider operating times – late night or weekend hours may be more useful to one-vehicle rural households where the main breadwinner needs private transport for work.

Does the policy rely on infrastructure (e.g. broadband ICT, main roads, utilities) for delivery? How will the policy work in rural areas, where the existing infrastructure is typically weaker (e.g. roads, broadband quality), some infrastructures don't exist (cable TV, mains gas supply) and the upgrading of infrastructure may be difficult or expensive?

Initiatives started in 1998 mean that the percentage of people living within 10 minutes of an hourly or better bus service has risen. However, rural transport provision is still a major concern and many rural areas remain poorly served by public transport.⁷

Rural Solutions

- Consider using regulation or licences to encourage the development of improved infrastructure.
- Encourage or co-ordinate demand to make supply viable.
- Use the public sector's collective demand to stimulate supply.
- Provide alternative means of accessing the service.

⁶ Commission for Rural Communities, *State of the Countryside Report 2008*, p39

⁷ Commission for Rural Communities, *State of the Countryside Report 2008*, p157

Will delivery of the policy be challenging at the ‘edges’ of administrative areas? Many rural people live in the borderlands of regions/local authorities and sometimes find it easier to cross an administrative boundary to access services. Particular effort may be needed to make sure that a policy does not disadvantage border communities.

The East Riding of Yorkshire is a very large unitary local authority covering 2,408 square kilometres and with a population of some 321,000. Its main administrative seats are Beverley and Bridlington yet for many westerly communities, York, in the neighbouring local authority area, is very much closer. The smallest English unitary authority is Rutland County Council with a population of 35,000, all within fairly easy reach of Peterborough, Leicester and Nottingham.⁸

Rural Solutions

Encourage ‘postcode blindness’ and the reciprocal sharing of service provision across administrative borders where this makes sense (as is already the case with some emergency services).

Is the policy dependant on new buildings or development sites?

Where will these go in rural areas, given that there are fewer brownfield sites, more planning restrictions, and certain locations where development may be unacceptable?

Government guidance to planning authorities sets a target of at least 60% of new housing to be built on previously developed (brownfield) land. There has been an increase in the area of brownfield land that has been redeveloped between 1998 and 2005 and this has occurred more in urban than rural areas.⁹

Rural Solutions

- Check any proposals with local planning authorities
- Create flexibility for development to be located where it is most appropriate and needed (e.g. in market towns or villages).
- Opt for high quality development that will contribute to local character and distinctiveness.

⁸ Commission for Rural Communities, Discussion Paper: Shire local government – time for change? 2006, p5

⁹ Commission for Rural Communities, State of the Countryside Report 2008, p115

Communications

Does the policy rely on communicating information to clients?

How will clients access information in rural areas, where there are fewer (formal) places to obtain advice and information?

Most rural communities benefit from a long established form of statutory neighbourhood council, the parish and town councils. England has over 10,000 of these councils (2004 figure) of which about 9,000 are in rural areas.¹⁰

Rural Solutions

- Be flexible about using the rural networks and meeting points that do exist e.g. post offices, village halls, parish noticeboards.
- Link up with other information providers, (including parish and town councils).
- Use local radio, newspapers and websites.
- Provide mobile advisors.
- Use the internet and information technology.

¹⁰ Commission for Rural Communities, *State of the Countryside Report 2008*, p52

Economies

Will the policy impact on rural businesses, including the self employed? Will it have a different effect on smaller businesses (which employ a greater proportion of the workforce in rural areas) or those sectors which are typically more significant in rural areas? Will the higher proportion of self-employed people in rural areas be affected by the policy (including women running part time businesses)?

In 2006, more than 1 in 4 (26.8%) of employees worked in small firms (employing less than 10 people) in less sparse villages, compared with only 11% of employed people in urban areas.¹¹

Rural Solutions

- Ensure the needs of smaller businesses are specifically addressed.
- Take support, advice and training out to businesses.
- Where possible avoid regulatory or other burdens that will disproportionately affect small firms.

Will the policy affect land-based industries and, perhaps, rural economies and environments? How will the policy affect agriculture and/or local mining, extraction and water industries (which have a particular importance in many rural areas)? Will there be a knock-on effect on the environment? What might the impacts be for businesses which rely on a high-quality environment – such as farming, tourism, leisure, renewable energy and food production?

Employment in agriculture has fallen by about 7% since 1999, and by 39% for full-time farm workers.¹²

Rural Solutions

- Identify 'win – win' solutions which will deliver economic and environmental benefits (e.g. promoting local supply chains, especially between food producers and consumers).
- Consider incentives for environmentally-friendly practices.
- Allow for, and encourage, a diverse range of rural enterprises.

¹¹ Commission for Rural Communities, *State of the Countryside Report 2008*, p97

¹² Commission for Rural Communities, *State of the Countryside Report 2008*, p102

Will the policy affect people on low wages or in part-time or seasonal employment? Wages tend to be lower on average in rural areas and a higher proportion of the workforce relies on part-time or seasonal employment. Will the proposal affect wage levels or access to quality employment? Will it affect the type of businesses that tend to pay low wages or offer seasonal/part time work (e.g. agriculture, tourism)?

The Annual Small Business Survey conducted for the Small Business Service showed that business in rural areas are more likely to employ some staff on the minimum wage than non rural.¹³

Rural Solutions

- Check the effects of your proposal against other (especially welfare) policies to ensure that the transition between wages/benefits and employment/unemployment is sufficiently flexible and supportive.
- Consider measures to improve the choice of work (e.g. increasing skills, improving local childcare, improving transport to work).

¹³ Commission for Rural Communities, *England's Rural areas: steps to release their economic potential 2008*, p22

Disadvantage

Will the policy target disadvantaged people or places? How will this work in rural areas where disadvantage is rarely concentrated? Do the indicators being used to identify deprivation take account of uniquely rural challenges, such as access to services, job opportunities, low earnings, transport and the affordability of housing?

Only 2.4% of the small-areas in the bottom fifth of England's index of worst deprived places are rural. But other indicators, based on statistics about individuals, show that 15% of the country's most deprived people are rural residents.¹⁴

Rural Solutions

- Target population groups rather than deprived areas.
- Use small-area statistics to identify the smallest pockets of deprivation.
- Adjust the indicators, or their weighting, to accommodate both urban and rural aspects of deprivation.
- Designate larger areas for targeting, to pick up scattered disadvantage.

¹⁴ Commission for Rural Communities, *State of the Countryside Report 2008*, p72

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Step Three: Policy implementation and evaluation

Like many aspects of good policy development, rural proofing is an ongoing process. Once a policy initiative has been implemented, it is important that any evaluation mechanism includes the rural perspective.

Implementation

Implementation is a key part of any policy process. Unless properly implemented, a policy is unlikely to achieve the outcomes intended.

It is at implementation that the decisions made during the policy design and delivery stages make their impact felt. This is also when issues that are particular to rural areas can arise. Traditionally, the implementation phase is when tweaks are made to accommodate rural needs and challenges. But good, and early, rural proofing should result in fewer flaws surfacing at this point - because the needs of rural locations and communities have been taken into account already.

Evaluation

Evaluation has become a key part of contemporary policy making. Once a policy or programme is in place, it is important to provide evidence of its effectiveness and it is equally important to make rural communities part of the evaluation process. An evaluation which ignores the effects of a policy on people in rural areas will fail to show if a mainstream policy is truly effective.

**Commission for
Rural Communities**

John Dower House Crescent Place
Cheltenham Glos. GL50 3RA

Telephone 01242 521381

Facsimile 01242 584270

Email info@ruralcommunities.gov.uk

www ruralcommunities.gov.uk



Rural Proofing for Health: A guide for Primary Care Organisations

It is a guiding tenet of the UK's National Health Service (NHS) that all citizens should have equal access to the healthcare services they need, free of charge at the point of delivery.

This principle was first set when the NHS began in the 1940s and has been repeated often since then, including when new national standards of consultation and provision were introduced in 2001 and in recent actions and investments to reduce hospital waiting lists, to give better access to family doctors and to develop the NHS Direct service.

Nonetheless, inequalities in health and in access to healthcare persist, including among people who live in rural areas and aren't always within easy reach of the same broad range of health services as their urban counterparts.

In 1997, the differences were recognised with the founding of the Institute of Rural Health (IRH), an academic institution, using research, education and policy development to bring sustainable health benefits to rural places, and improve the well-being of rural people.

In 2001, the IRH published *THINK RURAL HEALTH* – a guide for Primary Care Organisations (PCOs) in rural areas. To follow up, it then developed a methodology of rural proofing across the health sector, with funding from the Department of Health and Department for Environment, Food and Rural Affairs.

The resulting Rural Proofing for Health project was carried out in three stages:

- A review of published and 'grey' literature about all aspects of rural health and provision, to establish the main issues.
- Consultations with 60 rural Primary Care Trusts (PCTs) in England (via a questionnaire and detailed interviews with health professionals in three rural PCTs) to gather fresh and first hand evidence and ideas.
- Using the evidence and practical trials to develop a Rural Proof for Health toolkit which lets health care providers assess if their services are rurally sensitive and that there are no inequalities in access to care.

The toolkit is arranged in chapters, each providing:

- An introduction to the area of service delivery
- A set of questions covering current service provision in rural areas
- Some helpful suggestions to address the challenges arising
- Examples of good practice



If answers to the questions reveal significant gaps in a policy, readers are directed to possible solutions, either in the toolkit or in the Institute of Rural Health's more extensive database of good practice in rural health and well-being. Others are welcome to consult the database, too. See: <http://www.ruralhealthgoodpractice.org.uk>



The National Health Service – Next Stage Review

In July 2007, Lord Darzi was commissioned by the Government to conduct a review into the planning and delivery of healthcare in rural England.

As our contribution to this review, the Commission for Rural Communities (CRC) conducted a series of consultation meetings around the country - talking to members of the public, patients, and healthcare practitioners about their experiences and the actions they felt rural communities needed. The main findings were that equitable healthcare provision depended on:

- more locally-based health services;
- offering services in the most convenient settings; and
- delivering more accessible and convenient integrated care.

This process resulted in a detailed dossier being submitted to Lord Darzi, titled *Our NHS, Our future: a rural response*. In it, the CRC emphasised the need for flexibility in the design and provision of rural healthcare; pointed out that replicating urban models does not work everywhere, and called for rural needs to be specifically addressed in the planning, commissioning and delivery of services, including with reference to travel times, the availability of public transport and the regularity of service, including opening hours.

In addition, the CRC made recommendations for changes to healthcare policy, including:

- a change in the resource allocation formula, to recognise that rural healthcare may need different costings and that the age profile is different;
- accessible local services – with an emphasis on co-location of a range of services not just healthcare;
- improved commissioning for rural areas and greater emphasis on joint commissioning of health and social care;
- an increase in the number and range of outreach and mobile services to address access issues;
- better emergency response measures for life-threatening conditions; and
- a commitment to improved preventative medicine targeted at the hidden deprivation and disadvantage in rural areas.

The CRC welcomes Lord Darzi's publicised support for local populations having more of a meaningful say over NHS services, and is pleased that his recent report on the state of the healthcare system - High Quality Care For All – NHS Next Stage Review - includes a number of rurally-aware recommendations.



Lord Darzi's report states: "The visions also emphasise the importance of geographical factors in the effectiveness and safety of care. This was reinforced by a submission report to this Review by the Commission for Rural Communities".



Rural Proofing of reforms to young people's education

In 2005, the Department of Children, Schools and Families' (DCSF) published plans for reforming education for 14-19 year olds, to give all young people more opportunities to access higher learning and be equipped for skilled employment.

The policy and implementation plans were based on the principle that all 14-19 year olds are entitled to high quality learning opportunities and support. Key priorities set included:

- An improved focus on basic education
- A greater curriculum choice within the education system
- A more flexible system for young people to accelerate through the system, or to take longer in order to achieve higher standards
- Innovative ways of addressing disadvantage.

The overarching target is for 90 percent of all 17-year-olds to be benefiting from further education by 2015, compared with 70% at present.

In June 2008, DCSF reported on the delivery of 14-19 reforms in rural areas. Its report recognised that rural areas '...face distinct challenges in implementing 14-19 reforms, including low population density; lack of transport infrastructure; long distances between homes, schools and colleges; lower proportion of large employers and lack of employers in some sectors.'

The Department's response has been to provide a range of tools, different guidance, extra investment, examples of good practice and ideas for action, through which the special challenges facing rural communities can be overcome.

The solutions investigated include:

- Appointing 14-19 Transport and Access Coordinators, to help young people find courses which suit them, their location and transport timetables;
- Providing mopeds for young learners over 16, making it possible to travel independently to places of study
- e-learning, reducing the need to travel;
- taking teachers &/or classrooms to where students live
- providing accommodation;
- working with Education Business Partnerships;
- engaging public sector employers.



We hope the DCSF will monitor the outcomes of this policy against its targets for delivering the 14-19 educational reform programme to young people.



Investing in sporting opportunities for rural communities

Sport England launched a new series of themed funding rounds on 1 April 2009 with a promise to invest £10 million in sporting opportunities for people in rural areas.

They are introducing themed rounds as a way to target investment in areas and communities where sporting disadvantages and shortfalls are greatest.

Rural people and places have been chosen to benefit first because Sport England research shows that:

- participation in sports is, generally, lower in rural areas;
- rural communities face special barriers to pursuing sports interests

The obstacles include fewer doorstep facilities, a reduced choice of sporting pursuits, more travel challenges and extra expenses for training, tuition and competitions. In addition, small rural populations make it more difficult to sustain sports facilities and opportunities cost-effectively.

The new Rural Communities Themed Round will help a wide range of organisations - from local authorities and sports associations, to community groups and clubs - to develop and deliver innovative ways to overcome the barriers to both rural participation and supply.

At the same time, successful bids will contribute to two of Sport England's strategic outcomes: increasing the level of participation in grassroots sport and sustaining participation by improving the quality of people's sporting experience.

Sport England will define rural communities by using the Government's guidelines on Rural and Urban Areas Classification.

This initiative shows Sport England using a strong evidence base to uncover that rural areas were not getting a fair share of funding at present and, then, responding with policies aimed at redressing this position.



National Policing Improvement Agency – Neighbourhood Policing in Rural Communities

Rural policing needs are different from those in towns and cities. Key differences include the challenge of maintaining a 'visible presence' where a population is small and scattered, and that responding quickly to calls for assistance may be constrained by distance.

To address the issues, the National Policing Improvement Agency (NPIA) and Neighbourhood Policing programme team have designed a guide to assist practitioners at all levels in the service to deliver and sustain Neighbourhood Policing within rural communities.

The guide was developed to recognise and promote what is already happening on the ground in several parts of rural England to improve police coverage, ensure community safety and ease a mounting sense of rural insecurity, despite year-on-year falls in rural crime statistics.

Produced with the help of a variety of organisations, including the National Farmers Union and the Farmers' Union of Wales, the Commission for Rural Communities, and several local authorities, police forces and operational officers, the guide offers:

- information on organisational issues
- ways to give rural communities access to policing through a named point of contact
- methods for enabling rural communities to influence decisions on policing priorities
- examples of successful and sustainable police/community problem-solving
- case studies illustrating community cohesion

The guidance concludes that the ability of police to respond to rural needs is constrained by distance and scattered settlements but that adopting existing best practice can still go a long way to meeting these needs.

NPIA hopes that the Neighbourhood Policing teams nationwide will use the guide's examples and ideas to develop an excellent service that meets the needs of their rural communities.



Infrastructure for rural proofing

The guidance provides questions and tools which enable rural issues to be considered during a policy's development and implementation.

In addition, there are a number of ways to embed rural proofing within the mindset of an organisation, to maintain and promote an ongoing commitment to acknowledging rural circumstances, these include:

- Designating '**rural champions**' at official and non-executive level – not to become solely responsible for rural proofing but to champion the sector's interest and support others to build their knowledge and awareness;
- Setting up **rural advisory groups** to be responsible for raising awareness of rural issues within departments and organisations, and provide expert advice to mainstream policy processes;
- Bringing in **short-term expert advice** and support from relevant organisations, such as the Commission for Rural Communities, to provide specific, tailored, expertise to inform the development of particular policies and initiatives;
- Holding **briefing and training opportunities** for policy-making staff to build knowledge and capacity;
- Make **use of the extensive data, research, evidence and advice** that organisations such as the CRC can offer.



Signposting

The following list illustrates some of those organisations that can provide specific advice and expertise on how proportional policy outcomes can be developed for rural communities.

Defra: www.defra.gov.uk

Commission for Rural Communities: www.ruralcommunities.gov.uk

Action for Communities in Rural England: www.acre.org.uk

Rural Services Network: www.rsnonline.org.uk

National Association for Local Councils: www.nalc.gov.uk

Regional Rural Affairs Fora: www.defra.gov.uk/rural/voice/regional.htm

Government Offices: www.gos.gov.uk