

# **Master Plan Delhi – 2041**

## **(MPD – 2041)**

### **Review & Recommendations**

**On**

### **Elderly Care Facilities**

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## Foreword

The objective of this review and recommendations report is not to find faults or loopholes in the Master Plan Delhi – 2041, rather it is a feedback report from a concerned citizen. As an individual I am not formally qualified in the area of Elderly Care, but with whatever little knowledge and experience I have acquired during my professional stint in the Elderly Care Sector, I have tried to share my views on the subject matter.

Being an armchair critic is one of the simplest things to do in life. We often tend to crib that the City / National level policies and plans are flawed and the government should have incorporated certain points. The larger point is, as individuals what are we doing about it.

Policy makers and planners do not work in isolation. They take suggestions and inputs from various stakeholders before coming out with policies and plans. It is up to the citizens to either participate and share their inputs or review the same and give their recommendations.

I took up the challenge to review the MPD – 2041 in my personal capacity. The main objective was, the planning of today would impact everyone's future tomorrow. The second objective was, to be an advocate for the underprivileged and disadvantaged elders who do not have the means to understand the implications of future planning.

The 487 pages of MPD – 2041 was not an easy task and to add to it another 250 pages of MPD – 2021.

Highlights of my recommendations of this report are as follows;

- 1) Review on the Terminologies Used: Replace the word Old Age Home(s) (OAH) with Elderly Care Home(s) / Assisted Living Home etc. The word OAH(s) features 14 times in MPD – 2021 and 7 times in MPD – 2041. A detailed page wise use of the words are given as part of annexure 2.
- 2) A common base document on population figures should be used because as part of the MPD - 2041 Introduction there is no mention on the population size of the elderly, whereas it was present in the MPD – 2021. The planning for Elderly Care Facilities would be directly impacted.
- 3) The calculation of 1 OAH per 5 lakhs people has been enhanced to 5 Community Facilities for 5 lakhs from the previous MPD, unfortunately there is no scientific calculation to back the logic.
- 4) Based on the calculations Delhi should have built 46 old age homes of 1000 sq.m. each during the period of 2001 to 2021 and would require a total of 60 old age homes/ elderly care homes by 2041.
- 5) The MPD – 2041 primarily classifies Old Age Home under the sub category of Community Facility (Type -II) whereas it was a main category in MPD – 2021.
- 6) Focus on elderly care is either under the Health Facilities with a floor area ratio (FAR) of 150 or under Community facilities with a FAR of 120. Under the housing / shelter there is not much focus and have been generally mentioned as retirement homes / assisted living without giving any explanation on the terminologies.

Detailed chapter wise review and recommendations are attached.

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## A. Introduction

MPD – 2041			
S.No.	Point No / Sub Point / Table No	Page No	Details
1	Introduction, Five-Year Growth Projections For Delhi	4	The analysis also indicates increase in the proportion of persons in the age group of 60 years and above. This, signals the need for specific provisions for the elderly in the Plan.

### As per MPD – 2041

Delhi's population in 2041 is estimated at 30.9 million, 29.1 million and 27.8 million as per the high, medium and low growth scenarios respectively, based on growth assumptions across various parameters. Accounting for the decline in rate of growth in the last two decades, the medium growth scenario (29.1 million) has been adopted as the most likely estimate. This may need recalibration when the Census is updated. Table 1 shows five-yearly growth projections:

#### Five-year growth projections for Delhi

Year	Male (in million)	Female (in million)	Total (in million)
2021 (base year)	11	9.5	20.6
2026	12.2	10.4	22.6
2031	13.4	11.4	24.8
2036	14.6	12.3	26.9
2041	15.9	13.3	29.2

Two important shifts are likely in the demographic profile of the city. A significant increase is projected in the proportion of persons of working age (age group-25-60 years), indicating the need to create adequate employment opportunities and to harness the potential economic benefits presented by this demographic dividend. ***The analysis also indicates increase in the proportion of persons in the age group of 60 years and above. This, signals the need for specific provisions for the elderly in the Plan.***

### As per MPD – 2021

#### Population Estimates At Five Year Intervals

The population estimates for NCTD at five year intervals are given in the following table:

Table 2.2 Five Yearly estimates of Projected Population

Year	Population (In lakh)
2001	138.0
2006	162.0
2011	182.0
2016	199.0
2021	230.0

Source: *Census of India and projections by DDA Sub-Group (MPD- 2021)*

## Elderly And Children Population

The DDA Sub-group (MPD-2021) projected that the Rate of elderly population (persons aged +60) is expected to increase from 5.9% in 2001 to 10.7% in 2021. At the same time population of children (aged 0-14 years) would decrease from 29.5% in 2001 to 21.75 % in 2021. The details break-up of elderly people and children are given below.

**Table 2.4. Elderly and Children population**

Year	Population in lakh	
	Elderly (+60year)	Children (0-14year)
1991	4.5 (4.8%)	32.8 (34.8%)
2001	8.1 (5.9%)	40.6 (29.5%)
2011	14.2 (7.8%)	45.0(24.7%)
2021	24.6 (10.7%)	49.9 (21.7%)

*Figures (in bracket) indicate percentages to the total population.*

Source: Census of India and projections by DDA Sub-Group (MPD- 2021)

The above age-group wise distribution of population should form the basis for providing special facilities to the elderly such as old age homes, low floor buses, special seats in buses, special seats in public toilets and ramps in public buildings.

## Review & Recommendations:

1. The total population projected in the MPD – 2021 and the population taken as base year has a difference of 14.5%. In 2021 it was projected that the population would be 230 lakhs whereas the 2041 plan has taken 206 lakhs.
2. The MPD – 2021 shows the elderly population in numbers and the projected percentage increase from 4.8% to 10.7% whereas there is no mention on the data for elderly in the MPD – 2041.
3. It is recommended that the statistics of elderly population be included in the MPD – 2041 as that would give the real picture which the city planners and private operators can refer to.
4. In the MPD – 2021 it projected the elderly population to be 10.7% of the total population whereas the Census 2011 states 9.3%. The same report Of 2019 by the technical group projects the elderly population to be 14.2% in the year 2036.
5. It is recommended that a common base document should be used for giving the projected population numbers since the social and private infrastructure planning for the elderly care facilities may have an impact.
6. For simplifying the process, I have included screenshots for the Census Of India 2011 Population Projections. The projections in MPD – 2041, MPD – 2121 and the Census 2011 have a certain amount of difference.

Census Of India 2011 Population Projections For India And States 2011 – 2036, Report Of The Technical Group  
On Population Projections, November, 2019

T-17 Projected Population Characteristics As On 1st March : 2011 - 2036 NCT OF DELHI						
Indicator	2011	2016	2021	2026	2031	2036
1	2	3	4	5	6	7
<b>Population (000')</b>						
<b>Total</b>	16788	18677	20571	22540	24552	26591
Male	8987	9980	10963	11970	12983	14002
Female	7801	8697	9609	10570	11569	12589
<b>Sex Ratio</b>	868	871	876	883	891	899
<b>Population Density (Sq. Km.)</b>	11320	12594	13871	15199	16556	17930
<b>Population by broad age-group (000')</b>						
18 years and above						
0-14	4570	4499	4478	4586	4723	4910
15-59	11055	12683	14189	15529	16772	17904
60+	1163	1496	1904	2425	3057	3777
<b>Proportion (percent)</b>						
0-14	27.2	24.1	21.8	20.3	19.2	18.5
15-59	65.9	67.9	69.0	68.9	68.3	67.3
15-49 (female population)	58.3	59.5	59.5	58.6	57.1	55.4
60+	6.9	8.0	9.3	10.8	12.5	14.2
<b>Median age (years)</b>	26.22	28.18	30.04	31.91	33.59	35.13
<b>Dependency Ratio</b>						
Young (0-14)	413	355	316	295	282	274
Old (60+)	105	118	134	156	182	211
<b>Total (Young and old)</b>	518	473	450	451	464	485

Age group	2011			2016			2021		
	Person	Male	Female	Person	Male	Female	Person	Male	Female
	1	2	3	4	5	6	7	8	9
0-4	8.4	8.4	8.5	7.7	7.8	7.6	7.0	7.0	6.9
5-9	9.1	9.2	9.0	7.9	7.9	7.9	7.3	7.5	7.1
10-14	9.7	9.9	9.5	8.5	8.6	8.3	7.5	7.6	7.4
15-19	10.1	10.3	9.8	9.5	9.5	9.4	8.5	8.5	8.4
20-24	10.2	10.3	10.1	10.3	10.1	10.5	9.8	9.5	10.2
25-29	9.7	9.6	9.8	9.7	9.9	9.6	9.9	9.8	10.0
30-34	8.7	8.6	8.9	9.1	9.1	9.0	9.1	9.4	8.9
35-39	7.7	7.6	7.8	8.0	8.0	8.1	8.4	8.5	8.3
40-44	6.6	6.6	6.6	7.0	7.0	7.0	7.3	7.4	7.3
45-49	5.4	5.5	5.3	6.0	6.0	5.9	6.4	6.4	6.4
50-54	4.2	4.2	4.1	4.8	4.8	4.7	5.3	5.3	5.3
55-59	3.2	3.2	3.3	3.7	3.7	3.6	4.2	4.3	4.2
60-64	2.6	2.5	2.7	2.8	2.7	2.8	3.2	3.2	3.2
65-69	1.8	1.7	1.9	2.1	2.0	2.3	2.3	2.3	2.4
70-74	1.3	1.2	1.4	1.4	1.3	1.5	1.7	1.6	1.9
75-79	0.8	0.8	0.8	1.0	0.9	1.0	1.1	1.0	1.2
80+	0.5	0.4	0.5	0.7	0.7	0.7	0.9	0.9	1.0
<b>Total</b>	<b>100</b>								

Age group	TABLE-19 (contd...)								
	2026			2031			2036		
	Person	Male	Female	Person	Male	Female	Person	Male	Female
1	11	12	13	14	15	16	17	18	19
0-4	6.7	6.7	6.6	6.3	6.3	6.3	6.0	6.0	6.0
5-9	6.7	6.8	6.5	6.5	6.6	6.3	6.2	6.2	6.1
10-14	7.0	7.3	6.7	6.5	6.7	6.2	6.3	6.5	6.1
15-19	7.6	7.6	7.6	7.2	7.3	7.0	6.7	6.8	6.6
20-24	9.0	8.6	9.4	8.3	7.8	8.7	7.9	7.7	8.2
25-29	9.5	9.3	9.8	8.8	8.5	9.1	8.2	7.9	8.5
30-34	9.3	9.3	9.3	9.1	9.0	9.2	8.5	8.3	8.6
35-39	8.5	8.8	8.2	8.7	8.9	8.6	8.6	8.6	8.5
40-44	7.7	7.9	7.6	7.9	8.2	7.5	8.1	8.3	7.9
45-49	6.7	6.8	6.7	7.1	7.3	7.0	7.3	7.6	6.9
50-54	5.7	5.7	5.8	6.1	6.1	6.1	6.5	6.6	6.4
55-59	4.8	4.8	4.8	5.2	5.1	5.2	5.5	5.5	5.5
60-64	3.7	3.7	3.7	4.2	4.2	4.2	4.6	4.5	4.6
65-69	2.7	2.7	2.7	3.2	3.1	3.2	3.6	3.6	3.7
70-74	1.9	1.8	2.0	2.2	2.2	2.3	2.6	2.6	2.7
75-79	1.3	1.2	1.4	1.5	1.4	1.6	1.7	1.7	1.8
80+	1.1	1.1	1.2	1.4	1.3	1.5	1.6	1.5	1.7
<b>Total</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>	<b>100</b>

MPD – 2041			
S.No.	Point No / Sub Point / Table No	Page No	Details
2	Introduction, Key Focus Areas For The Master Plan, Mobility. Point (iv)	5	<b>Mobility:</b> There is availability of good quality public transport but the city has large number of private vehicles leading to congestion, unorganised parking, air pollution, etc. Last mile connectivity and infrastructure for walking and cycling to be provided for improving the mobility of citizens especially for persons with disabilities, the elderly and children.

**Review & Recommendations:** MPD – 2041 is definitely a future vision of the State of Delhi which can be seen in the policy document. However the implementation of the plans are to be monitored regularly. Also with so much of focus on Mobility and Transportation for all segments of the society including people with special needs, it is recommended if the policy document highlights the number of wheel chair users who have used the low floor busses or the metro over the past 5 years. This will not only show give valuable insights in the accessibility but also give planners an insight on how much and where the planning focus should be.

## B. Section 1 - Environment

### 1. Chapter – 2, Addressing Pollution And Climate Change

MPD – 2041			
S.No.	Point No / Sub Point / Table No	Page No	Details
1	2.5 Other Strategies, Point. 2.5.4.v	17	All new developments shall locate facilities like hospitals, schools, old age homes etc., away from high-speed traffic corridors.

**Review & Recommendations:** The strategy is a positive step forward and needs to be implemented with proper monitoring mechanisms.

### 2. Chapter – 3, Enhancing Green Blue Infrastructure

MPD – 2041			
S.No.	Point No / Sub Point / Table No	Page No	Details
1	3.3 Creation Of New Green-Blue Assets, 3.3.4 Other Initiatives: All-Abilities Parks: Point 5	22	<b>All-abilities parks:</b> All-abilities parks shall be created across the city by earmarking land or retrofitting existing parks. These parks have to be designed for play and recreational activities especially catering to the needs of people with disability, elderly, toddlers and infants with caregivers.

**Review & Recommendations:** Accessibility for all is a key policy feature for an inclusive society. The strategy is a positive step forward and needs to be implemented with proper monitoring mechanisms. It is recommended to list the locations of all abilities parks and the necessary changes made or proposed in a specific time period. Support facilities like washrooms, pathways, benches, sensory gardens etc. needs to be in line with the accessibility standards.

## C. Section – 3, Heritage, Culture And Public Spaces

### 1. Background And Key Policy Concerns - Public Spaces In Delhi

MPD – 2041			
S.No.	Point No / Sub Point / Table No	Page No	Details
1	Background And Key Policy Concerns, Public Spaces In Delhi	38	There is a need to enhance the public realm to make all public spaces and places safer, more inclusive and vibrant for all users especially for people with disability, pregnant women, elderly and children.

**Review & Recommendations:** Accessibility for all is a key policy feature for an inclusive society. The strategy is a positive step forward and needs to be implemented with proper monitoring mechanisms.

## D. Section 4: Shelter & Social Infrastructure

### 1. Chapter – 7, Strategizing Shelter

MPD – 2041			
S.No.	Point No / Sub Point / Table No	Page No	Details
1	7.3 Housing In New Development Areas, Point.7.3.2	53	On Low Density Residential Plots (LDRP), residential typology of low density residential dwelling units, retirement homes, assisted living for elderly and those with special needs, etc., shall be permitted.

**Review & Recommendations:** Shelter is one of the most important features of a safe and healthy retirement living.

The chapter of Strategizing Shelter emphasis is given for retirement homes and assisted living for elderly under the Housing in New Development Areas and that too on Low Density residential Plots. Unfortunately the remaining elements like redevelopment housing, affordable public rental housing, housing for urban poor / EWS, land pooling do not specify any policies for Senior Citizens Housing / Elder Care Homes.

Since Delhi does not have much land parcels for setting up retirement homes, it is recommended that high rise housing should be included which are senior friendly and a part of the integrated development.

It is also suggested if the total housing requirement for the next 20 years is projected w.r.t how much need would arise for the elderly population. This would assist the private and public agencies in taking informed decisions on the housing front.

Under the **DEV1 – Development of new areas through Land Pooling**, the MPD – 2014 states that; **7.2 Overall approach for improving housing supply**, 7.2.1 Future housing supply in Delhi shall be met through: i) large scale development of sectors in the greenfield areas of the city using the model of land pooling. Identified land pooling areas have the potential to develop 17-20 lakh dwelling units; (ref: DEV1).

If the total housing requirement can be linked with the new developments and the land pooling or re-development housing then the picture on housing needs can be much clear and senior citizens housing demand can be extrapolated.

### 2. Chapter – 8, Provision Of Social Infrastructure

MPD – 2041			
S.No.	Point No / Sub Point / Table No	Page No	Details
1	8.2 Key Strategies For Improving Availability Of Social Infrastructure, 8.2.3 Ensuring Facilities For All, Point.8.2.3.1	56	Facilities for children, women, elderly, people with special abilities and families from economically weaker background are to be provided as per DCN.

**Review & Recommendations:** Social infrastructure is key to a successful and vibrant community. While it is a positive step forward to talk about elderly people with respect to the DCN (Development Control Norms) however the list of such facilities need to be documented on public forum where people can see the locations and also relate it to real time progress.

MPD – 2041			
S.No.	Point No / Sub Point / Table No	Page No	Details
2	8.4 Types Of Social Infrastructure And Facilities, 8.4.1 Healthcare, Point 8.4.1.1(ii)	57	Care facilities for elderly, persons with disabilities and for people with special needs, facilities for physical and mental healthcare, de- addiction centres/ drug-rehabilitation centres, after-care centres etc.

**Review & Recommendations:** It is a progressive move to state under point no 8.4.1.1 that Emerging needs in healthcare services shall be addressed by provision of adequate facilities as mentioned under 8.4.1.1(ii).

It is recommended that the definition of Care facilities for Elderly should be spelled out clearly. Since many terms have been used like Geriatric Care Centres, Respite Care, Assisted Living, Old Age Homes etc there is a possibility of confusion which can unnecessarily create hurdles and also have tax implications on the operations of the project.

MPD – 2041			
S.No.	Point No / Sub Point / Table No	Page No	Details
3	8.4.3 Socio-Cultural Facilities, Point.8.4.3.3	58	Local level socio-cultural facilities shall be strengthened to serve diverse needs such as those of senior citizens, youth, families, etc. Multi-purpose spaces will accommodate the local needs for skill development centres/ training centres/ gathering spaces/ libraries/ child-care facilities, etc.

**Review & Recommendations:** Local level integration of communities is important. Multi-purpose spaces is a good move to maximize the socio-cultural spaces available.

MPD – 2041			
S.No.	Point No / Sub Point / Table No	Page No	Details
4	8.4 Types Of Social Infrastructure And Facilities, 8.4.8 Public Conveniences, Point. 8.4.8.1	59	Public conveniences shall be developed as prescribed in UBBL and as per provisions of Advisory on Public and Community Toilets issued by Central Government (2018). Such facilities shall be sensitive to the needs of children, women, elderly and persons with special abilities and also accommodate child care facilities.

**Review & Recommendations:** Accessible and barrier free is the first step to becoming an inclusive society. UBBL - Unified Building Bye Laws should be followed in spirit and should be monitored on a regular basis.

MPD – 2041			
S.No.	Point No / Sub Point / Table No	Page No	Details
5	8.4.9 Other Community Facilities, Point. 8.4.9.1	59	Other community facilities such as religious facilities, care centres, old-age homes, orphanages, women homes, corrective/ remedial facilities, juvenile homes, observation centres, detention facilities, etc shall be provided as per plan.

**Review & Recommendations:** Instead of categorizing old-age homes under other community facilities, it is recommended to feature it under the main category of shelter, health care and social infrastructure.

## E. Section 5: Transport & Mobility

### 1. Chapter – 11, Making Delhi Walkable And Cyclable

MPD – 2041			
S.No.	Point No / Sub Point / Table No	Page No	Details
1	11.2 Street Design For Promoting Active Travel, Point. 11.2.3.2 (iii)	78	Installation of pedestrian signals shall be preferred over grade- separated crossings to ensure ease of use for pedestrians, wheelchair users, and cyclists. Pelican crossing system shall be installed near schools and other major pedestrian crossings, especially for children, elderly and people with disabilities.

**Review & Recommendations:** A positive step towards accessibility, however the monitoring mechanism and upkeep requires regular checks.

MPD – 2041			
S.No.	Point No / Sub Point / Table No	Page No	Details
2	11.2 Street Design For Promoting Active Travel, Point.11.2.4	78	All walking and cycling infrastructure, and street improvements will be based on design standards and guidelines prescribed in the Street Design Regulations (ref: Annexure 7). Compliance with the Harmonised Guidelines and Space Standards for Barrier Free Built Environment for Persons with Disability and Elderly Persons 2016 of MoHUA shall be ensured to facilitate accessibility to the elderly, children and persons with disabilities.

**Review & Recommendations:** A positive step towards accessibility, however the monitoring mechanism and upkeep requires regular checks.

MPD – 2041			
S.No.	Point No / Sub Point / Table No	Page No	Details
3	11.5 Other strategies for promoting active travel, 11.5.2 Micro-mobility	79	<b>Micro-mobility:</b> Battery-operated e-bikes and other green-mobility options may be encouraged. Parking provision and PBS systems for such vehicles in ATAs and along Strategic Active Corridors must be encouraged to serve the elderly as well as people with restricted mobility.

**Review & Recommendations:** A positive step towards accessibility, however the monitoring mechanism and upkeep requires regular checks. **PBS - Public Bicycle Share** is a good initiative however it may pose a risk of falls amongst the elderly. **Active Travel Area (ATA)** which is, A precinct/area identified, to promote Active Travel by improving the density of NMT streets and/or retrofitting the existing network in that area, can be actively promoted.

MPD – 2041			
S.No.	Point No / Sub Point / Table No	Page No	Details
4	11.5 Other strategies for promoting active travel, 11.5.3 Citizen Engagement: Point (i)	80	Concerned agencies, local bodies etc. may undertake dedicated campaigns for various citizen groups including school children, women, elderly and people with disability to raise awareness about benefits of active travel, traffic rules, regulations and penalties, pedestrian first principle, etc.

**Review & Recommendations:** Public awareness is a great initiative and should be encouraged at the local locality and community level. The monitoring mechanism needs to be dynamic enough to capture the number of campaigns actually held vis-vis planned.

## F. Section 7: Spatial Development Framework

### 1. Chapter – 20, Transit Oriented Development

MPD – 2041			
S.No.	Point No / Sub Point / Table No	Page No	Details
1	20.4 TOD Schemes, Point. 20.4.9.2	149	Educational institutions, anganwadis, creches, old age homes, etc., are not combined with hospitals, penal institutions such as correction facilities, jails, etc. or manufacturing and/or warehousing facilities

Under Point No. 20.4.7 it states that TOD Schemes may comprise of plots under different land uses/use premises. The permissible mix of uses for each plot in a TOD Scheme depending upon the assigned land use/use premise shall be as per the Table below:

Table 20.1: Mix of Uses / Distribution of FAR in TOD				
Land use/ use premise of plot as per ZDP/ Layout Plan	Permissible Mix of Uses (distribution of FAR in TOD Scheme)			
	Minimum % of FAR for Residential uses	Minimum % of FAR for Commercial uses	Minimum % of FAR for PSP and/or utilities	Other uses
Residential	50%	10%	20%	Other uses* are permitted up to 20%.
Commercial	30%	50%	10%	Other uses* are permitted up to 10%.
Industrial	30%	10%	10%	Remaining 50% of FAR to be for Industrial use.
Government	30%	10%	10%	Remaining 50% of FAR may be for any Government use.
Transportation	30%	10%	10%	Remaining 50% of FAR may be for any use* after meeting all operational requirements for transportation facilities.
PSP (only housing and neighbourhood level PSP plots allowed as per Clause 20.4.2)	The FAR for such plots shall be entirely utilised for PSPs and/or utilities in the TOD Scheme.			

\* This remaining FAR can be utilised as a mix of residential, commercial and PSP in any proportion as per project requirement.

20.4.9 FAR and mix of uses will be separately calculated for each constituent plot in a TOD Scheme. The overall mix of uses for a TOD Scheme shall be a sum total of the mix computed for each constituent plot. The DE shall have the flexibility to utilise such overall mix on the entire reconstituted scheme area as per design considerations. The prescribed mix can also be achieved through vertical mixing of uses within buildings, provided that:

20.4.9.2 Educational institutions, anganwadis, creches, old age homes, etc., are not combined with hospitals, penal institutions such as correction facilities, jails, etc. or manufacturing and/or warehousing facilities,

**Review & Recommendations:** While it is appreciated that the FAR in TOD has been spelt out clearly however it is recommended that old age homes to have a provision to be combined with hospitals. Internationally specialized care like Memory Care (Dementia, Alzheimer's Care and other high dependency care) are often linked to a hospital. Alternatively the terms can spell out clearly that Geriatric Care which is focused on medical care rather than shelter can be allowed as a part of the hospitals.

MPD – 2041			
S.No.	Point No / Sub Point / Table No	Page No	Details
2	20.5 Development Control Norms For Tod Schemes, 20.5.7 Other Controls, 20.5.7.2 Location Of Various Use Premises: Point (ii)	153	Facilities such as creches, day care centres for children and elderly shall be provided as part of the TOD Scheme. Such facilities shall be located on a public road created within the scheme with access to public greens planned within the scheme.

**Review & Recommendations:** Day care centres for elderly can play an important role in the social and recreational wellbeing. These designated places give the seniors an opportunity to interact with their fellow residents which helps in reducing isolation and neglect.

MPD – 2041			
S.No.	Point No / Sub Point / Table No	Page No	Details
3	20.5 Development Control Norms For Tod Schemes, 20.5.7.5 Universal Barrier - Free Access	154	<b>Universal Barrier - Free Access</b> - All public spaces, roads, Green Public Spaces, parking areas, buildings, etc. within TOD Schemes and all area improvement works taken up as per the approved IZPs shall be designed for barrier free universal access as per Harmonised Guidelines and Space Standards for Barrier Free Built Environment for Persons with Disability and Elderly Persons, 2016 of the Ministry of Housing and Urban Affairs, Government of India.

20.5.7.5 **Universal Barrier - Free Access** - All public spaces, roads, Green Public Spaces, parking areas, buildings, etc. within TOD Schemes and all area improvement works taken up as per the approved IZPs shall be designed for barrier free universal access as per Harmonised Guidelines and Space Standards for Barrier Free Built Environment for Persons with Disability and Elderly Persons, 2016 of the Ministry of Housing and Urban Affairs, Government of India.

**Review & Recommendations:** While it is much appreciated that the agencies are working on standards and guidelines for universal accessibility and barrier free movement however it is recommended that the heading of point no. 20.5.7.5 be reviewed again. At present it reads like Universal Barrier rather than Barrier-Free Access. It is suggested to either call it accessibility standards or barrier-free movement or universal design standards.

## G. Section 9: Development Code & Development Control Norms

### 1. Chapter – 22, Development Control Norms

MPD – 2041			
S.No.	Point No / Sub Point / Table No	Page No	Details
1	22.8 Residential, B. Permissible Activities, Table 22.4: Use Premises And Activities Permitted: Residential	172	Senior Citizen Recreation Room

The development control norms states the following permitted activities under the residential category.

B. Permissible Activities							
S. No.	Use Zone Use Premise	Residential Area (RD)					
		1 Group Housing	2 Plotted Housing	3 Studio Apartment	4 Dharamshala or its equivalent	5 State Bhawan/ State Guest House	6 Affordable Rental Housing
1	Residence (Plotted)		✓				
2	Residential (Flats)	✓		✓			✓
3	Retail Shops (on ground floor with an area up to 20 Sq.m. each)	✓		✓	✓		✓
4	Mixed use activity	✓	✓				
5	Society Office / Registered RWA Office	✓	✓	✓	✓	✓	✓
6	Community Room/ Basti Vikas Kendra	✓		✓			✓
7	Crèche / Day Care Centre/ Anganwari	✓	✓	✓			✓
8	Senior Citizen Recreation Room	✓		✓			✓
9	Recreational Club/ Hall	✓		✓			✓
10	Swimming pool	✓		✓			
11	Religious	✓		✓			✓

**Review & Recommendations:** While it is appreciated that the clarity on Senior Citizen Recreation Room has been clearly defined under the residential areas use, however it is recommended that Dharamshala or its equivalent be allowed to have senior citizen recreation rooms. The logic being that Delhi is short of space especially social spaces which are within easy travel distances. If this is permitted then the neighborhood senior citizens can benefit and the Dharamshala can be of use to a larger population size and act as a multi facility interaction point.

MPD – 2041			
S.No.	Point No / Sub Point / Table No	Page No	Details
2	22.0 Development Control Norms, 22.8 Residential, C. Development Control Norms, Table 22.5: Group Housing, Point (iii)	174	Additional floor area of 400 sq.m. or at the rate 6% of permissible FAR, whichever is less shall be allowed, free from FAR, to cater to community needs such as community / recreational hall, crèche/ day care, library, reading room, senior citizen recreation room / club and society office.

C. Development Control Norms					
Table 22. 5 : Group Housing					
Use Premise	Minimum Plot Area	Maximum Ground Coverage	FAR	Min. ROW (M)	Height (M)
Group Housing	3000 sq.m.	33.33% (in case of addition/ alteration of existing DUs for availing balance FAR, ground coverage upto 40% may be allowed)	200	18	NR (Subject to clearance from AAI/ Fire Dept. and other statutory bodies)
Other Controls					
i. The upper limit of density will be taken as 200 DUs/ha (900pph) with flexible Dwelling Unit sizes to achieve optimal utilization of land. The Central Government in consultation with the DDA may relax density and other norms for public housing and projects of national importance. ii. Group Housing plots in Special Area / Village (Lal Dora / Firni) / Extended Lal Dora/ unauthorised colonies shall be 2000 Sqm. and roads with minimum Row 7.5m. These conditions are subject to meeting parking requirements within the plot and NOC from the Traffic Police Deptt. and the Delhi Fire Service (DFS) of GNCTD. Such plots shall be incorporated as group housing plots in the Development/Layout Plans of these areas to be prepared, subsequently, if such, plans are not already approved. iii. Additional floor area of 400 sq.m. or at the rate 6% of permissible FAR, whichever is less shall be allowed, free from FAR, to cater to community needs such as community / recreational hall, crèche/ day care, library, reading room, senior citizen recreation room / club and society office.					

**Review & Recommendations:** It is appreciated that the clarity on Senior Citizen Recreation Room has been clearly defined under the Group Housing, under sub point no.(iii) which states additional floor area of 400 sq.m. is permitted. This is a positive move to allow it under free FAR.

MPD – 2041			
S.No.	Point No / Sub Point / Table No	Page No	Details
3	22.8 Residential, C. Development Control Norms, Table 22.8: Studio Apartment	177	Additional floor area 400 sq.m or at the rate 6% of permissible FAR, whichever is less shall be allowed free from FAR to cater to community needs such as community / recreational hall, crèche, library, reading room, senior citizen recreation room / club and society office.

Table 22. 8 : Studio Apartment					
Use Premise	Minimum Plot Area	Maximum Ground Coverage	FAR	Minimum ROW (M)	Height (M)
Studio Apartment	2000 sq.m.	33.33%	200	12	NR (Subject to clearance from AAI/ Fire Dept. and other statutory bodies)
<b>Other Controls</b>					
i. The maximum carpet area of flat will be 60 sq.m. ii. Additional floor area 400 sq.m or at the rate 6% of permissible FAR, whichever is less shall be allowed free from FAR to cater to community needs such as community / recreational hall, crèche, library, reading room, senior citizen recreation room / club and society office.					

**Review & Recommendations:** It is appreciated that the clarity on Senior Citizen Recreation Room has been clearly defined under the Group Housing, under sub point no.(iii) which states additional floor area of 400 sq.m. is permitted. This is a positive move to allow it under free FAR.

MPD – 2041			
S.No.	Point No / Sub Point / Table No	Page No	Details
4	22.10 Industries, 22.10.1 Planned Industrial Area, D. Permissible Uses For Use Conversion In Planned Industrial Areas, Table 22.31: Permissible Uses For Use Conversion In Planned Industrial Areas, Point. 2.E	200	Restaurant, Recreational Club, Hostel & Old age home, Community and Recreational hall, Nursing Home & Health Centre are permitted as part of modification in layout plan of industrial area. DCN of respective use shall be applicable

#### D. Permissible Uses for Use Conversion in Planned Industrial Areas

Table 22. 31 : Permissible Uses for Use Conversion in Planned Industrial Areas

S. No	Permissible Use premises as part of modification in layout plan of industrial area/ redevelopment scheme*		
		Subject to Conditions	
		Min. Plot size (sq.m.)	Min ROW (m)
2	<b>PSP</b>		
e.	Restaurant, Recreational Club, Hostel & Old age home, Community and Recreational hall, Nursing Home & Health Centre are permitted as part of modification in layout plan of industrial area. DCN of respective use shall be applicable	Norms as prescribed by DCNs of original land use	

**Review & Recommendations:** It is much appreciated that the permission to develop Old age home is permitted under the PSP - Public & Semi-Public spaces in the permissible use as part of modification in layout plan of industrial area / redevelopment scheme. This will help small and medium entrepreneurs who want to venture into new business models but do not have access to new land. The only thing to be careful is that the senior citizen homes should not be part of polluting industrial areas.

MPD – 2041			
S.No.	Point No / Sub Point / Table No	Page No	Details
5	Table 22. 45 Parking Norms, Social Infrastructure	227	Old Age Home/ Adult Education Centre/ Orphanage/ Children's Centre

Table 22. 45 Parking Norms			
Use Zones	Parking Provisions*	Deductions	
		PTAL	MLCP
<b>Social Infrastructure</b>			
Old Age Home/ Adult Education Centre/Orphanage/Children's Centre	1.8 ECS / 100 sq.m. of built-up area	P	P
Residential Care Centre for differently abled persons/Mentally challenged	1.8 ECS / 100 sq.m. of built-up area	NP	NP

**Review & Recommendations:** It is a reasonable parking space formula to recommend 1.8 Equivalent Car Spaces (ECS) for 100 sq.m. of built-up area. The permission under PTAL - Public Transport Accessibility Levels and Multi-Level Car Parking (MLCP).

MPD – 2041			
S.No.	Point No / Sub Point / Table No	Page No	Details
6	22.15 Public And Semi-Public – Social Infrastructure, 22.15.1 Health Facilities, Table 22. 54 Use Premises And Definition – Health Facilities, Bedded Health Facility (Small), Point.3	233	A premise having medical facilities for treatment/ care for both indoor and outdoor patients having upto 50 beds. Such premises may also include health-care facilities for persons with special needs, elderly, etc. and facilities for pathological/ radiological evaluation of a person's health condition for confirmation of any ailment/ disease. (eg. Nursing Home/ Maternity Home/ Polyclinic/ PHC / Family Welfare Centre/ Paediatric Centre/ Geriatric Centre/ Transition-homes/ Respite care centres, Voluntary health services, Diagnostic centres, Deaddiction/ Rehabilitation facility, etc.)

## 22.15 Public and Semi-Public – Social Infrastructure

### 22.15.1 Health Facilities

#### A. Use Premise and Definitions

Table 22. 54 Use Premises and Definition – Health Facilities

S. No.	Use Premise	Definition
1	Non-bedded Health facility	A premise with facilities for medical advice, provision of medicine, and/or for carrying out various tests for confirmation of symptoms of a disease. Such facilities may have a few observation beds. (eg. Dispensary/ Clinics/ Clinical laboratory, etc.)
2	Non bedded Health facility (Veterinary)	A premise having facilities for medical advice and provision of medicines. (eg. Dispensary for animals and birds, Pet clinics, etc.)
3	Bedded Health facility (Small)	A premise having medical facilities for treatment/ care for both indoor and outdoor patients having upto 50 beds. Such premises may also include health-care facilities for persons with special needs, elderly, etc. and facilities for pathological/ radiological evaluation of a person's health condition for confirmation of any ailment/ disease. (eg. Nursing Home/ Maternity Home/ Polyclinic/ PHC / Family Welfare Centre/ Paediatric Centre/ Geriatric Centre/ Transition-homes/ Respite care centres, Voluntary health services, Diagnostic centres, Deaddiction/ Rehabilitation facility, etc.)

#### C. Development Control Norms

Table 22. 56 Health facilities

S. No	Use Premise	No. (s)	Min. Plot Area (sqm)/ unit	Max. Ground Coverage (%)	FAR	Min RO W (m)	Height (m)
<b>COMMUNITY LEVEL</b> Population upto 100000							
1	Non-bedded Health facility (Veterinary)	1	300	35%	100	18	
2	Health facility (Small)	6	1000*	30%	150	18	
3	Hospital	3	2000-15000	40%and 5% (MLCP) BRT	250 for RoW less than 24m. 300 for RoW above 24m. 375 for RoW above 30m.	18	

#### Other Controls for the above Use Premises:

- No height restriction subject to clearance from AAI, DFS, DMA, NMA and other statutory bodies.
- For Maternity Home, Nursing Home/ Polyclinic, Primary Health Centre, Family Welfare Centre, Paediatric Centre/ Geriatric Centre, Diagnostic Centre, minimum gross area shall be 60 sq.m per bed and for use premises such as Hospitals, Tertiary Health Care Centre, De-addiction/ Rehabilitation Centres, R&D facilities, Veterinary hospitals for pet and animals, Medical colleges, Veterinary Institutes, minimum gross floor area shall be 80 sq.m per bed.

**Review & Recommendations:** While it is appreciated that Respite Care and Geriatric Centre have been listed under the Health Facilities with a FAR of 150, however it is recommended that a more detailed definition/ explanation should be mentioned in the terminologies chapter. An old age home, respite care centre, assisted living can also be termed as a Geriatric Centre. Hence a bit more clarity on the terminologies should be given.

MPD – 2041			
S.No.	Point No / Sub Point / Table No	Page No	Details
7	22.15.8 Other-Community Facilities, A. Use Premise And Definitions, Table 22. 75 Use Premise And Definition - Other-Community Facilities, Other Community Facility (Type-II), Point.3	258	Premise having facility of caring and training, boarding & lodging of elderly/ differently abled persons/ mentally challenged, women and children. It may also include residential facilities for working women / men and education/ training facilities for adults. (eg. Old Age Home, Care Centre for differently abled persons / mentally challenged, Working women-men hostel, Adult education centre, etc.)

As per the MPD – 2021, page no – 13-35, in the Table 13.27: Socio-Cultural and Community Facilities, under point no 22 states, the word Old Age Home is defined as:

Table 13.27: Socio-Cultural and Community Facilities			
Sl. No.	Use Premises	Definitions	Activities Permitted
22.	Old Age Home/Care Centre for <sup>1</sup> [differently abled persons] / Mentally challenged / Working women/ Men Hostel	A premise having the facility of caring and training boarding & lodging of the elderly / <sup>2</sup> [differently abled persons] / mentally challenged / working women / men.	Care home with residential facility, residence (for management and maintenance staff), primary school, recreational, library, health, gym, canteen, dining facility.

Whereas as per the MPD – 2041, page no – 258, point no 22.15.8 Other-Community Facilities, Table 22. 75 Use Premise and Definition - Other-Community Facilities, Point 3. Other Community Facility (Type-II), the word OAH is defined as:

22.15.8 Other-Community Facilities		
A. Use Premise and Definitions		
Table 22. 75 Use Premise and Definition - Other-Community Facilities		
S. No.	Use Premise	Definition
1	Night Shelter	Premise having the facility for providing the night accommodation to individuals without any charges or with token charges. It may run by local government or voluntary agencies.
2	Other Community Facility (Type-I)	Premises that can accommodate multiple small-scale community/ religious facilities (eg. Small religious facility, etc.)
3	Other Community Facility (Type-II)	Premise having facility of caring and training, boarding & lodging of elderly/ differently abled persons/ mentally challenged, women and children. It may also include residential facilities for working women / men and education/ training facilities for adults. (eg. Old Age Home, Care Centre for differently abled persons / mentally challenged, Working women-men hostel, Adult education centre, etc.)
4	Other Community Facility (Type-III)	Premises with facilities for correction, counselling and accommodation of child in conflict with law or who have committed an offence. Related judicial facilities and services for behavioural reforms may also be located here. (eg. Reformatory/ Observation homes/ Special Homes/ Juvenile homes)

As per the MPD – 2021 under the hierarchy of facilities there was 1 Old Age Home of 1000 sq.m. for a population size of 5 lakhs.

Table 3.3: Hierarchy of Urban Development						
Level	Facilities	Area in sq.m.			To be provided/ indicated	
		No	Per Unit	Total	LOP	ZDP
1	2	3	4	5	6	7
4. District Population- 5,00,000	1. Hospital '[-]' 2. Hospital '[-]' 3. Veterinary Hospital for pet animals & birds 4. Vocational Training Centre: (ITI / Polytechnic / Vocational Training Institute / Management Institute / Teacher Training Institute etc.) Research and Development Centre 5. School for Mentally Challenged 6. School for [differently-abled persons] 7. General College 8. Professional College (Engineering) 9. Police Station 10. Fire Station (5 to 7 km radius) 11. Old Age Home 12. Care Centre for Physically/ Mentally Challenged	1 2 1 1 2 2 1 1 2 1 1	25,000-45,000 15,000-25,000 2,000 4,000 2,000 2,000 As per the UGC norms As per the AICTE norms [Upto 1 Ha Upto 1 Ha] [Upto 2 Ha Upto 2 Ha] 1000 1,000	25,000-45,000 30,000-50,000 2,000 4,000 4,000 4,000 [•] • [•] • • 1,000	• • [•] • • • • • [•] • [•]	• • • • • • • • [•] • [•]

Whereas under the MPD – 2041 the no of Old Age Homes for a population size upto 5 lakhs has been increased to 5 nos. The number of 5 @ 5 lakhs with a minimum area of 1000 Sq.m does not actually clarify as to how many old age homes are to be developed, rather it is a collective of various facilities under the category of Other Community Facility (Type-II).

## 22.6 Hierarchy of facilities

For the purpose of devising an equitable and planned development the essential as well as support facilities need to be provided at different level of development hierarchies ranging from local level to city level. The planning standards for all required facilities are as below

Table 22.2 a Hierarchy of facilities

LEVEL	FACILITIES	NO. OF PLOTS	PER UNIT AREA	TO BE PROVIDED	
				LOP	ZDP
Sub- City Level Pop: Upto 5 Lakh	Hospital	3 2 @ 5 Lakh	Min. 1.5 ha	✓	✓
	De-addiction/ Rehabilitation Centres	1 @ 5 Lakh	Min. 2000 Sqm	✓	
	Veterinary hospitals	1 @ 5 Lakh	Min. 2000 Sqm	✓	
	Special Schools	4 @ 5 Lakh	Min. 2000 Sqm	✓	
	Research & Development Centres	1 @ 5 Lakh	Min. 4000 Sqm	✓	✓
	Institute	1 @ 5 Lakh	Min. 4000 Sqm	✓	✓
	College	2 @ 5 Lakh	As per UGC/ AICTE Norms		✓
	Socio-Cultural facility (Type-III)	1 @ 5 Lakh	Min. 5000 Sqm		✓
	Other Community Facility (Type-II)	5 @ 5 Lakh	Min. 1000 Sqm	✓	

### C. Development Control Norms

Table 22. 77 Other-Community facilities

S. No.	Use Premise	No.(s)	Min. Plot Area (sqm)/ unit	Max. Ground Coverage (%)	FAR	Min ROW (m)	Height (m)
<b>SUB-CITY LEVEL</b>							
Population upto 500000							
1	Other Community Facility (Type-II)**	5	1000	40%	120	18	No height restriction subject to clearance from AAI, DFS, DMA, NMA and other statutory bodies.

**Review & Recommendations:** It is rather strange to see that Old Age Home was a prominent facility under the MPD – 2021 and was featured as part of the socio-cultural and Community Facilities, whereas in the new MPD – 2041 the same has been made into a sub category under Other Community Facility-II.

It is also recommended that there should be a scientific formula for defining the number of facilities w.r.t the population size and also the per unit area. The proposed FAR of 120 is too low for an urban city like Delhi, the will make it unviable for investors and other stakeholders to venture into this area.

***If the formula of 1 old age home per 5 lakhs population was to be extrapolated then from 2001 to 2021 (MPD – 2021) Delhi should have had about 46 old age homes of 1000 sq.mt for a projected population size of 230 lakhs, which effectively works out to 46,000 sq mts. Unfortunately the ground reality is completely different.***

***Even if the base year population of MPD – 2041 of 206 lakhs is taken with the projected population to grow to 292 lakhs, still in that case Delhi would require around 60 old age homes of 1000 sq.m. by 2041.***

Another point which has been noticed in the MPD – 2041 is that the sub category of Other Community Facilities – II, there are multiple areas mentioned and old age home is just an example. It basically states that no actual figure has been defined for the old age home category.

Last but not the least there are no standards specifying as to how many residential units can be built on the 1000 sq.m. plot. Should it be a dormitory, single bed, double bed etc, unfortunately nothing has been specified. If a thumb rule of 40 sq.m. per person is assumed along with a FAR of 120 then in 1200 sq.m. there would be only 30 units/ elderly people who can stay. With such low numbers the economies of scale will not work out and it will always be a drain on the public funds.

MPD – 2041			
S.No.	Point No / Sub Point / Table No	Page No	Details
8	22.16 Permission of Use Premises in Use Zones, Table 22. 82 Permission of Use Premises in Use Zones	264	Hostel / Old age home

## 22.16 Permission of Use Premises in Use Zones

As part of approval of layout plan or as a case of special permission from the Authority, Permission of selected Use Premises in Use Zones RD, C1, C2, M, PS are as per the following:

Table 22. 82 Permission of Use Premises in Use Zones

S. No.	Use Premises	Use Zones				
		RD	C <sub>1</sub>	C <sub>2</sub>	M	PS
<b>RD</b>	<b>RESIDENTIAL</b>					
i.	Residential plot – Plotted Housing	P	P**	NP	NP	NP
ii.	Residential plot – Group Housing	P	P	NP	P	P
iii.	Studio Apartment	P	NP	NP	NP	NP
iv.	Residence - cum - Work Plot	P	P	NP	NP	NP
v.	Foreign mission	P	P	NP	NP	NP
vi.	Hostel / Old age home	P	P	NP	P	P

**Review & Recommendations:** It is a good overview on the permission of use under different zones. As per MP – 2041 old age homes can be constructed in the RD- Residential Area, C1 – Commercial (Retail Shopping, General Business and Commerce, District Centre, Community Centre, Non-Hierarchical Commercial Centre), M – Industrial and PS – Public & Semi-Public.

MPD – 2041				
S.No.	Point No / Sub Point / Table No	Page No	Details	
9	22.16 Permission Of Use Premises In Use Zones, Table 22. 82 Permission Of Use Premises In Use Zones, PS1, Public And Semi Public Facilities, Health	265	Primary Health Centre / Family Welfare Centre / Maternity Home / Dispensary etc., Pediatric Centre/ Geriatric Centre, Voluntary Health Services, Extended health-care facilities (like transition- homes, respite care centres, Pathology laboratory, Small collection centres), De-addiction Centres	

## 22.16 Permission of Use Premises in Use Zones

As part of approval of layout plan or as a case of special permission from the Authority, Permission of selected Use Premises in Use Zones RD, C1, C2, M, PS are as per the following:

Table 22. 82 Permission of Use Premises in Use Zones

S. No.	Use Premises	Use Zones				
		RD	C <sub>1</sub>	C <sub>2</sub>	M	PS
<b>PS1</b>	<b>PUBLIC AND SEMI PUBLIC FACILITIES</b>					
<b>Health</b>						
i.	Hospital (0.2 ha. to 1.5 ha.)	P	P	NP	P	P
ii.	Tertiary Health Care Centre	P	P	NP	P	P
iii.	Primary Health Centre / Family Welfare Centre / Maternity Home / Dispensary etc., Pediatric Centre/ Geriatric Centre, Voluntary Health Services, Extended health-care facilities (like transition-homes, respite care centres, Pathology laboratory, Small collection centres), De-addiction Centres	P	P	NP	P	P

**Review & Recommendations:** It is a good overview on the permission of use under different zones. As per MP – 2041 Geriatric Centre, Respite Care Centres can be constructed in the RD- Residential Area, C1 – Commercial (Retail Shopping, General Business and Commerce, District Centre, Community Centre, Non-Hierarchical Commercial Centre), M – Industrial and PS – Public & Semi-Public.

MPD – 2041			
S.No.	Point No / Sub Point / Table No	Page No	Details
10	22.16 Permission Of Use Premises In Use Zones, Facilities, Point (ii)	266	Care centres for differently-abled and mentally challenged, Orphanage/ Children's Centre, Senior citizens' club

#### 22.16 Permission of Use Premises in Use Zones

As part of approval of layout plan or as a case of special permission from the Authority. Permission of selected Use Premises in Use Zones RD, C1, C2, M, PS are as per the following:

Table 22. 82 Permission of Use Premises in Use Zones

S. No.	Use Premises	Use Zones				
		RD	C <sub>1</sub>	C <sub>2</sub>	M	PS
<b>Facilities</b>						
ii.	Care centres for differently-abled and mentally challenged, Orphanage/ Children's Centre, Senior citizens' club	P	NP	NP	P	P

**Review & Recommendations:** It is a good overview on the permission of use under different zones. As per MP – 2041 under the heading Facilities, Senior Citizens Clubs can be constructed in the RD- Residential Area, M – Industrial and PS – Public & Semi-Public.

MPD – 2041			
S.No.	Point No / Sub Point / Table No	Page No	Details
11	Table 22. 86 Other activities permitted in identified mixed use areas/ streets and commercial streets, PSP-Types of uses permitted & Other condition	273	In A & B colonies following shall be permitted: <ul style="list-style-type: none"> <li>• Guest House (incl. Lodging houses)</li> <li>• Diagnostic Centre,</li> <li>• Maternity Home, Nursing Home/ Polyclinic, Primary Health Centre, Family Welfare Centre, Pediatric Centre/ Geriatric Centre, Extended health-care facilities (like transition- homes, respite care centres, Special facilities for differently-abled and mentally challenged persons)</li> </ul>

Table 22. 86 Other activities permitted in identified mixed use areas/ streets and commercial streets

Other Activities	Type of uses permitted	Other Condition
PSP	<ul style="list-style-type: none"> <li>• Bank</li> <li>• Dispensary, Clinics, Clinical laboratory, Pathology laboratory, Small collection centres.</li> <li>• Maternity Home, Nursing Home/ Polyclinic/ Primary Health Centre, Nursing home, Family Welfare Centre Pediatric Centre/ Geriatric Centre Diagnostic Centre, etc.</li> <li>• Wellness Centres including day spas/ weight-loss centres/ ayurvedic centres offering ayurvedic treatment/ salons offering fitness and aesthetic medical services</li> <li>• Pre-primary/ Nursery/ Montessori schools; Play schools, Creche &amp; Day care centres</li> <li>• Coaching Centre, Computer training institute</li> <li>• Vocational Training Centre, Skilling centres, Coaching Centres.</li> <li>• Senior citizens' meeting room, Banquet Hall, Indoor games facilities, Fitness centres and Gym, Guest house (including lodging houses) irrespective of number of rooms.</li> </ul>	<ul style="list-style-type: none"> <li>a. Other activities shall be permissible upto 2/3rd of total FAR. In case of Banks it shall be limited to 600 sq.m.</li> <li>b. On plots abutting 24 m RoW/ notified mixed use/ commercial street, other activities shall be permissible upto 100% of permissible FAR</li> <li>c. Banks lockers if part of existing bank shall be allowed in the respective basements of same premises.</li> <li>d. In A &amp; B colonies following shall be permitted: <ul style="list-style-type: none"> <li>• Guest House (incl. Lodging houses)</li> <li>• Diagnostic Centre,</li> <li>• Maternity Home, Nursing Home/ Polyclinic, Primary Health Centre, Family Welfare Centre, Pediatric Centre/ Geriatric Centre, Extended health-care facilities (like transition-homes, respite care centres, Special facilities for differently-abled and mentally challenged persons)</li> <li>• Pre-primary School/ Nursery/ Montessori/ Day Care shall be permissible</li> <li>• Banks, NGOs, Fitness centres and wellness centres shall be permissible as per provisions of MPD-2021.</li> </ul> </li> <li>e. Pre-Primary/Nursery, Montessori/ Creche/ Day Care uses shall not be permitted in basement.</li> <li>f. Skilling centres, Coaching Centres, Computer Training institute uses shall only be permitted on plots with minimum area of 1000 sq.m on roads with 24m ROW.</li> <li>g. Banquet Hall shall only be permitted on 24m and above ROW. These shall be restricted to basement and ground floor.</li> <li>h. In case of Health facilities, radiation-based activities shall not be permitted in Residential areas.</li> <li>i. Only the Non-profit organizations/ NGOs existing as on 07.02.2007 and registered under applicable Acts, may continue to operate.</li> <li>j. Restaurants on ground floor only with</li> </ul>

**Review & Recommendations:** Under the Public & Semi-Public (PSP) the mixed use areas allow Geriatric Centres, Respite Care Centres, Senior Citizens Meeting Room. This will surely give a boost to the Elderly Care operators and service providers.

MPD – 2041			
S.No.	Point No / Sub Point / Table No	Page No	Details
12	22.17 Other Development Codes, 22.17.6 Norms For Non-Residential Use Within Residential Use Premises, Sub Point viii. Permissibility Of Commercial And Other Activities In Mixed Use In Walled City And Cultural Precincts. Table 22. 87 Norms Applicable For Walled City And For Plots Identified As Part Of Cultural Precincts	274	Reading room/ library, Youth Centre, Senior citizens' meeting room, Facilities for meditation/ spiritual training, Banquet Hall, Indoor games facilities, Fitness centres and Gym, Small Religious facility, Post Office Counter

Table 22. 87 Norms applicable for Walled City and for plots identified as part of Cultural Precincts		
Type of uses permitted	ROW requirement	Minimum plot size
Small Shops	No minimum requirement	No minimum requirement. Max. 1 unit per plot.
Retail Shop, Repair Shop, Personnel Service Shop, Office and Restaurant)	Minimum 6m ROW	75 sq.m
Nursing Home/ Polyclinic - Dispensary, Clinics, Clinical laboratory, Pathology laboratory, Small collection centres, - Maternity Home - Primary Health Centre - Family Welfare Centre - Pediatric Centre/ Geriatric Centre - Diagnostic Centre - Pre-primary/ Nursery/ Montessori schools; Play schools - Creche & Day care centres - Coaching Centre, Computer training institute - Vocational Training Centre, Skilling centres, Coaching Centres - Reading room/ library, Youth Centre, Senior citizens' meeting room, Facilities for meditation/ spiritual training, Banquet Hall, Indoor games facilities, Fitness centres and Gym, Small Religious facility, Post Office Counter	Minimum 9m ROW	75 sq.m

**Review & Recommendations:** Under the norms applicable for Walled City, areas allow Geriatric Centres, Senior Citizens Meeting Room. This will surely give a boost to the Elderly Care operators and service providers.

## H. Annexure 1 - MPD – 2021 & 2041 - Definitions

MPD – 2041 is a progressive plan which has incorporated holistic development of the city while addressing concerns of inclusiveness and diversity based on inputs from various stakeholders. Having said that, I feel that there are certain areas w.r.t Elderly Care / Old Age Care / Senior Care, which we need to review and debate about. Since the plans are made for the next 20 years, it was imperative that we understand and contribute in the development of the city planning.

I have tried to review both i.e. MPD – 2021 & MPD – 2041, in order to cross verify and link the previous planning with the new proposed plans. The following are the observations, questions and suggestions.

### 1. Review - Definitions / Words

Using the right definition is critical in positioning any services, product, Govt Scheme, Govt Plan, etc. With the passage of time there are a new words / terms which we incorporate in our daily lives besides replacing old words which in today's times have become obsolete. Over the past few years the term/ word Old Age Home has also been replaced with other softer and non-institutional sounding words. Though the meaning of the two different words may be the same but the approach is more inclusive and humane.

- A) **Old Age Care:** World over very few countries use the word Old Age or Old Age Care anymore. Developed countries use words like Elderly Care, Senior Care, Aged Care, Long Term Care etc.
- B) **Old Age Home (OAH):** In India the word Old Age Home is seen as a taboo, especially in north India. OAH is seen as a place only for the poor, destitute or disadvantaged older people due to which elderly from the middle / lower income groups avoid shifting to these residential care facilities. Developed countries used words like Retirement Homes, Assisted Living, Care Homes, Elderly Care Homes, Senior Care Homes, Housing with Care, Sheltered Housing etc.

#### C) Definitions

C.1.a: **Old Age Home – As per the MPD – 2021**, page no – 13-35, in the Table 13.27: Socio-Cultural and Community Facilities, under point no 22 states, the word OAH is defined as:

Table 13.27: Socio-Cultural and Community Facilities			
Sl. No.	Use Premises	Definitions	Activities Permitted
22.	Old Age Home/Care Centre for <sup>1</sup> [differently abled persons] / Mentally challenged / Working women/ Men Hostel	A premise having the facility of caring and training boarding & lodging of the elderly / <sup>2</sup> [differently abled persons] / mentally challenged / working women / men.	Care home with residential facility, residence (for management and maintenance staff), primary school, recreational, library, health, gym, canteen, dining facility.

C.1.b: **Old Age Home – As per the MPD – 2041**, page no – 258, point no 22.15.8 Other-Community Facilities, Table 22. 75 Use Premise and Definition - Other-Community Facilities, Point 3. Other Community Facility (Type-II), the word OAH is defined as:

### 22.15.8 Other-Community Facilities

#### A. Use Premise and Definitions

Table 22. 75 Use Premise and Definition - Other-Community Facilities

S. No.	Use Premise	Definition
1	Night Shelter	Premise having the facility for providing the night accommodation to individuals without any charges or with token charges. It may run by local government or voluntary agencies.
2	Other Community Facility (Type-I)	Premises that can accommodate multiple small-scale community/ religious facilities (eg. Small religious facility, etc.)
3	Other Community Facility (Type-II)	Premise having facility of caring and training, boarding & lodging of elderly/ differently abled persons/ mentally challenged, women and children. It may also include residential facilities for working women / men and education/ training facilities for adults. (eg. Old Age Home, Care Centre for differently abled persons / mentally challenged, Working women-men hostel, Adult education centre, etc.)

C.2.a: **Geriatric Centre – As per the MPD – 2021**, page no – 13-24, 13.0 Social Infrastructure, 13.1 Health,, Definitions And Permissible Use Premises In Sub Use Zones Table 13.20: Health Facilities, Point 2, the word Geriatric Centre is defined as:

DEFINITIONS AND PERMISSIBLE USE PREMISES IN SUB USE ZONES

Table 13.20: Health Facilities

Sl. No.	Use Premises	Definitions	Activities Permitted
2.	Primary Health Centre/Family Welfare Centre/ Pediatric Centre/ Geriatric Centre/ Diagnostic Centre	A premise having facilities for treating indoor and outdoor patients having upto 10-15 beds. It may be managed by a public or charitable institution on non-commercial basis. It includes family welfare centre & maternity home.	Health Facility Watch & Ward Residence (Upto 20 sqm), Chemist Shop (Upto 20 sqm), Soft Drink & Snack Stall.

C.2.b: **Geriatric Centre – As per the MPD – 2041**, page no – 233, 22.0 Development Control Norms, 22.15 Public And Semi-Public – Social Infrastructure, 22.15.1 Health Facilities, A. Use Premise And Definitions, Table 22. 54 Use Premises And Definition – Health Facilities, S.No-3, Bedded Health Facility (Small), the word Geriatric Centre is defined as:

## 22.15 Public and Semi-Public – Social Infrastructure

### 22.15.1 Health Facilities

#### A. Use Premise and Definitions

Table 22. 54 Use Premises and Definition – Health Facilities

S. No.	Use Premise	Definition
1	Non-bedded Health facility	A premise with facilities for medical advice, provision of medicine, and/or for carrying out various tests for confirmation of symptoms of a disease. Such facilities may have a few observation beds. (eg. Dispensary/ Clinics/ Clinical laboratory, etc.)
2	Non bedded Health facility (Veterinary)	A premise having facilities for medical advice and provision of medicines. (eg. Dispensary for animals and birds, Pet clinics, etc.)
3	Bedded Health facility (Small)	A premise having medical facilities for treatment/ care for both indoor and outdoor patients having upto 50 beds. Such premises may also include health-care facilities for persons with special needs, elderly, etc. and facilities for pathological/ radiological evaluation of a person's health condition for confirmation of any ailment/ disease. (eg. Nursing Home/ Maternity Home/ Polyclinic/ PHC / Family Welfare Centre/ Paediatric Centre/ Geriatric Centre/ Transition-homes/ Respite care centres, Voluntary health services, Diagnostic centres, Deaddiction/ Rehabilitation facility, etc.)

C.3.a: **Respite Care Centre – As per the MPD – 2041**, page no – 233, 22.0 Development Control Norms, 22.15 Public And Semi-Public – Social Infrastructure, 22.15.1 Health Facilities, A. Use Premise And Definitions, Table 22. 54 Use Premises And Definition – Health Facilities, S.No-3, Bedded Health Facility (Small), the word Respite Care Centre is defined as: (no such word has been defined in MPD – 2021)

## 22.15 Public and Semi-Public – Social Infrastructure

### 22.15.1 Health Facilities

#### A. Use Premise and Definitions

Table 22. 54 Use Premises and Definition – Health Facilities

S. No.	Use Premise	Definition
1	Non-bedded Health facility	A premise with facilities for medical advice, provision of medicine, and/or for carrying out various tests for confirmation of symptoms of a disease. Such facilities may have a few observation beds. (eg. Dispensary/ Clinics/ Clinical laboratory, etc.)
2	Non bedded Health facility (Veterinary)	A premise having facilities for medical advice and provision of medicines. (eg. Dispensary for animals and birds, Pet clinics, etc.)
3	Bedded Health facility (Small)	A premise having medical facilities for treatment/ care for both indoor and outdoor patients having upto 50 beds. Such premises may also include health-care facilities for persons with special needs, elderly, etc. and facilities for pathological/ radiological evaluation of a person's health condition for confirmation of any ailment/ disease. (eg. Nursing Home/ Maternity Home/ Polyclinic/ PHC / Family Welfare Centre/ Paediatric Centre/ Geriatric Centre/ Transition-homes/ Respite care centres, Voluntary health services, Diagnostic centres, Deaddiction/ Rehabilitation facility, etc.)

C.3.a: **Assisted Living For Elderly / Retirement Homes – As per the MPD – 2041**, page no – 53, 7.0 Strategizing Shelter, 7.3 Housing In New Development Areas, Point.7.3.2, the words Assisted Living and Retirement Homes have been used but unfortunately there is no definition or explanation on the type / format of the same. (no such word has been defined in MPD – 2021)

### 7.3 Housing in new development areas

- 7.3.1 Development in the land pooling areas provides opportunities for creating multiple housing typologies. Development of rental housing (including affordable rental housing) shall be promoted. At the sector level, 25% of the net residential FAR shall be utilised for creating small-format housing.
- 7.3.2 On Low Density Residential Plots (LDRP), residential typology of low density residential dwelling units, retirement homes, assisted living for elderly and those with special needs, etc., shall be permitted.

#### Review & Recommendations:

Based on the review on the terms / words relevant for the care of older people it is suggested the following.

- 1.1 Replace the word Old Age Home(s) with a word which is at par with international terminology for e.g. Care Home For Elderly, Elderly Care Home, Senior Care Home, Assisted Living Facility etc. This will slowly overcome the taboo associated with the term and would encourage elders / seniors from all economic backgrounds to shift into such facilities.
- 1.2 While using new terms like Respite Care Centre, Retirement Homes and Assisted Living, it is recommended that a proper explanation of the words be given in the terminologies. For general public / architects it is difficult to relate these words in the Indian context.
- 1.3 The word Geriatric Centre in the MPD – 2021, states that it may be managed by a public or charitable institution on non-commercial basis, whereas in MPD – 2041 no such explanation is given, hence it is assumed that it can be operated on a commercial basis also.

## I. Annexure – 2 - MPD – 2041 & MPD – 2021 - Terminologies

The below Chart gives a comparison on the words like Old Age, Old Age Homes, Elderly, Geriatric Centre / Respite Care Centre, Assisted Living which have been used in the MPD – 2021 & MPD – 2041.

### A.1: Old Age Homes Word

S.No.	Term Used	MPD – 2021		MPD – 2041	
		Chapter No. / Point No / Sub Point / Table No	Page No	Chapter No. / Point No / Sub Point / Table No	Page No
1	Old Age Homes	2. Population And Employment, 2.4 Elderly And Children Population, Table 2.4. Elderly And Children Population	2 – 2	2.0 Addressing Pollution And Climate Change, 2.5 Other Strategies, Point. 2.5.4.v	17
2	Old Age Homes	13.0 Social Infrastructure, 13.9 Other Community Facilities	13 – 20	8.0 Provision Of Social Infrastructure, 8.4 Types Of Social Infrastructure And Facilities, 8.4.9 Other Community Facilities, Point. 8.4.9.1	59
3	Old Age Homes	18.0 Plan Review And Monitoring, 18.4.1 Planning Indicators, Sub Point 4, Social Infrastructure	18 – 7	20.0 Transit Oriented Development, 20.4 TOD Schemes, Point. 20.4.9.2	149

### A.2: Old Age Home Word

S.No.	Term Used	MPD – 2021		MPD – 2041	
		Chapter No. / Point No / Sub Point / Table No	Page No	Chapter No. / Point No / Sub Point / Table No	Page No
1	Old Age Home	3.0 Delhi Urban Area – 2021, 3.2.2 Hierarchy Of Urban Development, Table 3.3: Hierarchy Of Urban Development. 4. District Population - 5,00,000	3 – 6	22.0 Development Control Norms, 22.10 Industries, 22.10.1 Planned Industrial Area, D. Permissible Uses For Use Conversion In Planned Industrial Areas, Table 22.31: Permissible Uses For Use Conversion In Planned Industrial Areas, Point. 2.E	200
2	Old Age Home	3.0 Delhi Urban Area – 2021, 3.2.2 Hierarchy Of Urban Development, Table 3.3: Hierarchy Of Urban Development. 5. Zonal / Sub - City Population 10,00,000	3 – 8	22.0 Development Control Norms, Table 22. 45 Parking Norms, Social Infrastructure	227
3	Old Age Home	4.0 Shelter, 4.4 Development Controls For Residential Use	4 – 11	22.0 Development Control Norms, 22.15.8 Other-	258

		Zone, 4.4.2 B Use Premises For Residential Use Zone At Community Level And Above		Community Facilities, Table 22. 75 Use Premise and Definition - Other-Community Facilities, Point 3. Other Community Facility (Type-II)	
4	Old Age Home	4.0 Shelter, 4.4 Development Controls For Residential Use Zone, 4.4.2 B Use Premises For Residential Use Zone At Community Level And Above. Table 4.3: Uses / Use Activities Permitted In Use Premises	4 - 14	22.0 Development Control Norms, 22.16 Permission of Use Premises in Use Zones, Table 22. 82 Permission of Use Premises in Use Zones	264
5	Old Age Home	7.0 Industry, 7.8 Industry Use Zone – Guidelines, Table 7.3: Development Control Norms, Notes: Point (ix)	7 – 10		
6	Old Age Home	13.0 Social Infrastructure, 13.1 Health, Sub Point (ii)	13 – 1		
7	Old Age Home	13.0 Social Infrastructure, 13.9 Other Community Facilities, Table 13.18: Planning Norms And Standards For Other Community Facilities	13 – 21		
8	Old Age Home	13.0 Social Infrastructure, 13.9 Other Community Facilities, Table 13.19: Development Controls for Other Community Facilities	13 – 22		
9	Old Age Home	13.0 Social Infrastructure, 13.11 Public & Semi-Public Facilities / Premises, Definitions And Permissible Use Premises In Sub Use Zones, Table 13.27: Socio-Cultural And Community Facilities, Point 32	13 – 35		
10	Old Age Home	17.0 Development Code, Clause 8.0, Sub Division Of Use Zones, Permission Of Use Premises In Use Zones And Control Of Buildings, Sub / Clause 8(2) Permission Of Use Premises In Use Zones	17 – 6		
11	Old Age Home	18.0 Plan Review And Monitoring, Table 18.1 Monitoring Framework For Development, Sub Point G, Other Community Facilities	18 – 4		

**A.3: Geriatric Centre Word**

S.No.	Term Used	MPD – 2021		MPD – 2041	
		Chapter No. / Point No / Sub Point / Table No	Page No	Chapter No. / Point No / Sub Point / Table No	Page No
1	Geriatric Centre	3.0 Delhi Urban Area – 2021, 3.2 Urban Extension, 3.2.2 Hierarchy Of Urban Development, 3. Community Population - 1,00,000, Table 3.3: Hierarchy Of Urban Development	3 – 5	22.0 Development Control Norms, 22.15 Public And Semi-Public – Social Infrastructure, 22.15.1 Health Facilities, A. Use Premise And Definitions, Table 22. 54 Use Premises And Definition – Health Facilities, S.No-3, Bedded Health Facility (Small)	233
2	Geriatric Centre	4.0 Shelter, 4.4 Development Controls For Residential Use Zone, 4.4.2 B Use Premises For Residential Use Zone At Community Level And Above	4 – 11	22.0 Development Control Norms, 22.15 Public And Semi-Public – Social Infrastructure 22.15.1 Health Facilities, C. Development Control Norms, Table 22. 56 Health Facilities, Other Controls For The Above Use Premises: Point (ii)	237
3	Geriatric Centre	13.0 Social Infrastructure, 13.1 Health, Point (I) C	13 – 2	22.0 Development Control Norms, 22.16 Permission Of Use Premises In Use Zones, Table 22. 82 Permission Of Use Premises In Use Zones, PS1, Public And Semi Public Facilities, Health	265
4	Geriatric Centre	13.0 Social Infrastructure, 13.1 Health, Table 13.1: Planning Norms and Standards for Health Facilities	13 – 2	22.0 Development Control Norms, 22.17 Other Development Codes, 22.17.6 Norms for non-residential use within residential use premises, vii. Permissibility of Commercial and Other activities in mixed use , b. Other activities (ii) Table 22. 86 Other Activities Permitted In Identified Mixed Use Areas/ Streets And Commercial Streets, PSP-Types Of Uses Permitted & Other Condition (2 Times Mentioned)	273

5	Geriatric Centre	13.0 Social Infrastructure, 13.1 Health, Table 13.2: Development Controls for Health Facilities, Sub Point 2.b.iii	13 – 4	22.0 Development Control Norms, 22.17 Other Development Codes, 22.17.6 Norms for non-residential use within residential use premises, vii. Permissibility of Commercial and Other activities in mixed use , b. Other activities, viii. Permissibility of Commercial and Other Activities in Mixed Use in Walled City and Cultural Precincts, Table 22. 87 Norms Applicable For Walled City And For Plots Identified As Part Of Cultural Precincts	274
6	Geriatric Centre	13.0 Social Infrastructure, 13.1 Health,, Definitions And Permissible Use Premises In Sub Use Zones Table 13.20: Health Facilities, Point 2	13 – 24		

#### A.4: Elderly Word

S.No.	Term Used	MPD – 2021		MPD – 2041	
		Chapter No. / Point No / Sub Point / Table No	Page No	Chapter No. / Point No / Sub Point / Table No	Page No
1	Elderly	2. Population And Employment, 2.4 Elderly And Children Population (6 Times)	2 – 2	Introduction, Five-Year Growth Projections For Delhi	4
2	Elderly	2. Population And Employment, 2.6 Projected Work Force For Nctd-2021, Table 2.6: Projected Work Force For Nctd-2021 Point (I)	2 – 3	Introduction, Key Focus Areas For The Master Plan, Mobility. Point (iv)	5
3	Elderly	4.0 Shelter, 4.2 Housing Strategy, 4.2.1 New Housing Areas	4 – 3	3.0 Enhancing Green Blue Infrastructure, 3.3 Creation Of New Green-Blue Assets, 3.3.4 Other Initiatives: All-Abilities Parks: Point 5	22
4	Elderly	12.0 Transportation, Sub Point (ii)	12 – 2	Heritage, Culture And Public Spaces, Background And Key Policy Concerns, Public Spaces In Delhi	38
5	Elderly	12.0 Transportation, Sub Point (iv)	12 – 3	7.0 Strategizing Shelter, 7.3 Housing In New Development Areas, Point.7.3.2	53

6	Elderly	12.0 Transportation, 12.1. Integrated Multi-Modal Transport System	12 – 3	8.0 Provision Of Social Infrastructure, 8.2 Key Strategies For Improving Availability Of Social Infrastructure, 8.2.3 Ensuring Facilities For All, Point.8.2.3.1	56
7	Elderly	12.0 Transportation, 12.3.3. Intersections And Crossings	12 – 7	8.0 Provision Of Social Infrastructure, 8.4 Types Of Social Infrastructure And Facilities, 8.4.1 Healthcare, Point 8.4.1.1(ii)	57
8	Elderly	12.0 Transportation, Annexure-12.0 (I), Street Design Regulations: Point 5. To ensure universal accessibility and amenities for all street users: Sub Point 5B	12 – 37	8.0 Provision Of Social Infrastructure, 8.4 Types Of Social Infrastructure And Facilities, 8.4.8 Public Conveniences, Point. 8.4.8.1	59
9	Elderly	13.0 Social Infrastructure, 13.11 Public & Semi-Public Facilities / Premises, Definitions And Permissible Use Premises In Sub Use Zones, Table 13.27: Socio-Cultural And Community Facilities, Point 22	13 – 35	11.0 Making Delhi Walkable And Cyclable, 11.2 Street Design For Promoting Active Travel, Point. 11.2.3.2 (iii)	78
10	Elderly	15.0 Mixed Use Regulations, 15.7 Other Activity, Point 15.7.3.(iii)	15 - 10	11.0 Making Delhi Walkable And Cyclable, 11.2 Street Design For Promoting Active Travel, Point.11.2.4 (Mentioned 2 Times)	78
11	Elderly			11.0 Making Delhi Walkable And Cyclable, 11.5 Other strategies for promoting active travel, 11.5.2 Micro-mobility	79
12	Elderly			11.0 Making Delhi Walkable And Cyclable, 11.5 Other strategies for promoting active travel, 11.5.3 Citizen Engagement: Point (i)	80
13	Elderly			20.0 Transit Oriented Development, 20.5 Development Control Norms For Tod Schemes, 20.5.7 Other Controls, 20.5.7.2 Location Of Various Use Premises: Point (ii)	153
14	Elderly			20.0 Transit Oriented Development, 20.5	154

				Development Control Norms For Tod Schemes, 20.5.7.5 Universal Barrier - Free Access	
15	Elderly			22.0 Development Control Norms, 22.15 Public And Semi-Public – Social Infrastructure, 22.15.1 Health Facilities, Table 22. 54 Use Premises And Definition – Health Facilities, Bedded Health Facility (Small), Point.3	233
16	Elderly			22.0 Development Control Norms, 22.15.8 Other-Community Facilities, A. Use Premise And Definitions, Table 22. 75 Use Premise And Definition - Other-Community Facilities, Other Community Facility (Type-ii), Point.3	258
17	Elderly			Definitions, Special abilities parks	301
18	Elderly			Annexure 7: Street Design Regulations, Point.5B	316
19	Elderly			Annexure VIII (a): Service Plan for NCT of Delhi for Plastic Waste Management in respect of Draft MPD 41, 6. Information, Education & Communication (IEC) Programme, b) Role of IEC in Waste Management: Point 7	445

#### A.5: Respite Care Word

S.No.	Term Used	MPD – 2021	MPD – 2041		
		Chapter No. / Point No / Sub Point / Table No	Page No	Chapter No. / Point No / Sub Point / Table No	Page No
1	Respite Care Centre			22.0 Development Control Norms, 22.15 Public And Semi-Public – Social Infrastructure, 22.15.1 Health Facilities, A. Use Premise And Definitions, Table 22. 54 Use Premises And Definition – Health Facilities, S.No-3,	233

			Bedded Health Facility (Small)	
2	Respite Care Centre		22.0 Development Control Norms, 22.16 Permission Of Use Premises In Use Zones, Table 22. 82 Permission Of Use Premises In Use Zones, PS1, Public And Semi Public Facilities, Health	265
3	Respite Care Centre		22.0 Development Control Norms, Table 22. 86 Other activities permitted in identified mixed use areas/ streets and commercial streets, PSP-Types of uses permitted & Other condition (2 times mentioned)	273

#### A.6: Assisted Living Term / Retirement Homes

S.No.	Term Used	MPD – 2021		MPD – 2041	
		Chapter No. / Point No / Sub Point / Table No	Page No	Chapter No. / Point No / Sub Point / Table No	Page No
1	Assisted Living			7.0 Strategizing Shelter, 7.3 Housing In New Development Areas, Point.7.3.2	53
2	Retirement Homes			7.0 Strategizing Shelter, 7.3 Housing In New Development Areas, Point.7.3.2	53

#### A.7: Senior Citizens / Senior Citizens' Club / Senior Citizens' Meeting Room

S.No.	Term Used	MPD – 2021		MPD – 2041	
		Chapter No. / Point No / Sub Point / Table No	Page No	Chapter No. / Point No / Sub Point / Table No	Page No
1	Senior Citizens			8.0 Provision Of Social Infrastructure 8.4.3 Socio-Cultural Facilities	58
2	Senior Citizens' Club			22.0 Development Control Norms, 22.16 Permission Of Use Premises In Use Zones, Facilities, Point (ii)	266
3	Senior Citizens' Meeting Room			22.0 Development Control Norms, 22.17 Other Development Codes, 22.17.6 Norms For Non-Residential Use Within Residential Use Premises, Sub Point vii. Permissibility Of Commercial	273

				And Other Activities In Mixed Use, Point B, Other Activities, Table 22. 86 Other Activities Permitted In Identified Mixed Use Areas/ Streets And Commercial Streets	
4	Senior Citizens' Meeting Room			22.0 Development Control Norms, 22.17 Other Development Codes, 22.17.6 Norms For Non-Residential Use Within Residential Use Premises, Sub Point viii. Permissibility Of Commercial And Other Activities In Mixed Use In Walled City And Cultural Precincts. Table 22. 87 Norms Applicable For Walled City And For Plots Identified As Part Of Cultural Precincts	274

#### A.8: Senior Citizen Recreation Room

S.No.	Term Used	MPD – 2021		MPD – 2041	
		Chapter No. / Point No / Sub Point / Table No	Page No	Chapter No. / Point No / Sub Point / Table No	Page No
1	Senior Citizen Recreation Room	4.0 Shelter, 4.4 Development Controls For Residential Use Zone, 4.4.2 B Use Premises For Residential Use Zone At Community Level And Above, Table 4.3: Uses / Use Activities Permitted In Use Premises	4 – 13	22.0 Development Control Norms, 22.8 Residential, B. Permissible Activities, Table 22.4: Use Premises And Activities Permitted: Residential	172
2	Senior Citizen Recreation Room	4.0 Shelter, 4.4 Development Controls For Residential Use Zone, 4.4.3 Control For Building/ Buildings Within Residential Premises, Point B. Residential Plot – Group Housing	4 – 19	22.0 Development Control Norms, 22.8 Residential, C. Development Control Norms, Table 22.5: Group Housing, Point (iii)	174
3	Senior Citizen Recreation Room			22.0 Development Control Norms, 22.8 Residential, C. Development Control Norms, Table 22.8: Studio Apartment	177