

Title	Planning and Health and Wellbeing
Date	31 March 2016
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Purpose of this report:

The Health and Wellbeing Board has requested a paper to consider how it might jointly influence local planning by responding to local planning applications and engaging with the planning processes. The objective of this is to ensure that health and wellbeing and appropriate health and social care facilities are designed into new developments.

Summary of main issues:

There is a wealth of evidence highlighting how the built and natural environment can have significant impacts on people's health and wellbeing. The physical environments in which people live, work and socialise can shape behaviours and social interaction within communities. The impact can be direct (for example, poor internal or external air quality exacerbating respiratory conditions) or indirect (for example, poorly designed physical environments can create barriers to being physically active). The built environment also provides physical infrastructure for the provision of health and social care services.

There are evidence based ways to develop a healthy physical environment, these include:

- Well-designed homes and other public buildings that are insulated, dry, warm and spacious enough to meet the needs of the home owner/tenant
- Well-designed public space that includes opportunities for people to socialise, safe play areas, street plans that support connectivity, good local amenities, access to quality green space
- Well-designed local infrastructure that enables work opportunities and opportunities for travel
- Good management of the public realm including keeping areas tidy and tackling vacant or derelict land
- Addressing environmental issues such as noise, flood, internal and external air quality and traffic

Smaller projects to develop better links between planning and health have been undertaken:

• For example, the Buckinghamshire Thames Valley Local Economic Partnership, Public Health and the NHS worked together on a bid for the Woodlands development site which was submitted to the NHS Healthy Towns Programme.



Feedback on the bid identified that the involvement of the Local Enterprise Partnership, was a key strength and they were impressed with the way the bid took a holistic approach to supporting a broad-based approach to tackling the determinants of poor health, and the developed thinking on integrating Woodlands into wider sustainable travel networks.

It was considered that the bid would have been stronger with a more in-depth analysis of the anticipated population profile and their likely health needs. At the time of the application Woodlands was at formal pre-application stage and this demonstrates the difficulties of assessing health and wellbeing impact in the absence of more detailed information on the housing mix, which will influence the population profile. The assessors also commented on the bid could have benefitted from greater ambitions around an Innovation Hub focussed on integrated care, particularly thinking about how design and built environment changes can contribute to this agenda.

• The Healthy Communities Partnership held a workshop to network representatives from health, transport, natural environment and planners to explore the potential of promoting health and wellbeing through the 'place' agenda. A report from that workshop will be considered at the Healthy Communities Partnership Board in April.

The Health and Wellbeing Board can offer a key perspective on proposed new development. This can include issues such as ensuring the number of health and social care facilities or primary care services in a local area are sufficient, but also moving beyond this to promote physical and mental wellbeing and supporting community networking and community cohesion. Planning for health and wellbeing incorporates understanding how the form of the built and natural environments can impact on delivering healthier communities.

Within Buckinghamshire, the Health and Wellbeing Board has the opportunity to engage with three local plan development schemes; one for Aylesbury Vale District Council, one for Wycombe District Council, and a joint plan for Chiltern and South Bucks District Councils. Local plans set out a vision and framework for future development of the area, addressing local population needs and opportunities in relation to housing, the economy, infrastructure and community facilities. Therefore it is important that the Health and Wellbeing Board takes the opportunity to influence planning policies and potential site allocations. The Health and Wellbeing Board can also engage with local planning authorities on major planning applications which could have significant health impacts on the local population.

National Planning Policy Framework (NPPF) has recognised the important role local infrastructure planning has in the creation of healthy communities. It highlights how the planning system can facilitate social interaction and achieve long term health and wellbeing out comes. The NPPF's core planning principles encourage local planning authorities (LPA) to engage with relevant organisations as stated in the Planning Practice Guidance (PPG). This should ensure that local strategies to improving health and wellbeing, and the provision of health infrastructure are supported and taken into account in local and neighbourhood plans and in planning decision making. Statutory consultees who are consulted as part of the local plan process within BCC include Highways Development Management, Education, Archaeology, Public Rights of Way, Flood Management and Ecology. Other statutory consultees which must be consulted on certain



planning applications include Historic England, Environment Agency, Highways Agency and Natural England.

The PPG reflects on a range of issues which could be considered through the plan making process in respect of health infrastructure; these include development proposals which can support strong, vibrant and healthy communities, local plans which promote health, social and cultural wellbeing, and which consider health improvement strategies to ensure that opportunities for healthy lifestyles have been included. Specifically this includes:

- planning for an environment which supports people of all ages
- helping to promote active travel and physical activity
- promoting access to healthier food
- providing high quality open space, green infrastructure and opportunities for recreation

The PPG highlights the first point of contact on population health and wellbeing issues as the Director Public Health at the County Council, and working with the advice of the Director of Public Health, their team and local authority planners, they should also consider engaging with the Health and Wellbeing Board.

The Health and Wellbeing Board has the potential to utilise its position as a valuable forum through which partners can help ensure that planning proposals are likely to have positive impacts on the health and wellbeing of local communities. Each HBW Board is responsible for producing a Health and Wellbeing Strategy which is underpinned by a JSNA. Local planning authorities should also consult local Clinical Commissioning Groups, NHS England and local communities.

The district planners should consider consulting the Director of Public Health and HWB on any planning applications which are likely to have significant impacts on health and wellbeing of the local population, and then the three bodies can work together on any necessary mitigation measures. The Health and Wellbeing Board and BCC could also consider using a health impact assessment on developments where there could be significant health impacts. Information gathered from this engagement should assist local planning authorities when considering whether the identified impact(s) should be addressed through a Section 106 obligation or a planning condition.

Issues for discussion:

There are some initial questions in relation to the future role of the Health and Wellbeing Board in relation to planning:

- How can Health and Wellbeing Board members engage with LPA colleagues on major applications and work with LPA colleagues on mitigation measures?
- How are LPA's assessing and communicating the population profile of future populations and advising on the size and type populations that are expected in key developments – how can we influence the population profile we want to see in the future?



How much resource can/should the HWB commit to this? If the work is to be delivered
within existing resources the HWB could use existing staff designated from member
organisations to review plans. This will ensure that responses to planning
consultations cover all the key aspects related to health and wellbeing, but will not
allow more detailed analysis and will restrict the number of plans that can be
considered.

Alternatively the HWB may decide to fund a dedicated resource to support this work. This post could engage with member organisations, develop more detailed responses and review more plans. With the appropriate experience this resource could also support the completion of Health Impact Assessments.

Potential Actions for the Health and Wellbeing Board:

There are a number of ways in which the HWB could participate in and engage with the planning process. These need to be considered in light of the constraints on existing capacity so that effort can be targeted at priority applications and issues.

Some potential future steps for discussion are:

- For major planning applications, the BCC Strategic Planning and Infrastructure team suggests that local planning teams are approached to agree to notify the HWB of applications which could have a significant health impacts for the local community. In order to enable this, the HWB would need to identify their areas of interest to assist local planning teams with identifying and prioritising relevant plans.
- A set of health and wellbeing screening questions could be agreed which the assist the HWB to produce responses to consultations for strategically important developments. Examples of potential questions are provided in Appendix 1.
- For developments where the screening questions identify significant impacts, the HWB can consider undertaking full health impact assessments.
- In-fill development, which is not subject to the same level of consultation, may also
 present a challenge in terms of health and wellbeing and service infrastructure. It is
 proposed that the HWB identify areas where there existing pressures or gaps in
 services and proactively engage with planning teams so that they are kept aware of
 pressure points in the health care system.



APPENDIX 1 – SAMPLE QUESTIONS (responses to be Yes, No, Not Applicable)

Access and opportunities for open space

Does the plan include walking and cycling routes?

Does the plan include public space which is safe and visible?

Does the plan include play areas for children and young people?

Active Travel

Does the proposal address road safety and safe crossing points?

Does the proposal connect public realm and internal routes to local and strategic cycle and walking networks?

Air quality and noise

Does the proposal minimise air pollution caused by traffic and energy facilities? Does the proposal minimise noise pollution caused by traffic and commercial uses?

Access to healthy food

Does the proposal provide a range of retail uses including food stores? Does the proposal avoid contributing towards and over concentration of hot food takeaways in the local area?

Accessibility for people with disabilities

Does the proposal create public realm and open space that is accessible for all?

Healthy Communities

Does the design of the public realm maximise the opportunities for social interaction and connect the proposal with neighbouring communities?

Access to healthcare services

Can any additional healthcare needs generated by the proposal be accommodated within the existing services?

Does the proposal include provision or replacement of healthcare facilities and if does this meet NHS requirements?

Access to social care services

Can the additional social care needs generated by the proposal be accommodated within the existing services?

Does the proposal include provision or replacement of day, residential care or nursing care facilities?

Co-location of services

Does the plan explore the opportunities or offer opportunities for co-location of services?

Lifetime Homes – Does the plan include properties that meet lifetime homes specifications?