



Hampshire Planning and Public Health Position Statement

Public Health

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1. Purpose

- 1.1. This position statement sets out how Hampshire County Council and partners can deliver the County Council's statutory public health responsibilities and District Councils duties to deliver relevant elements of the National Planning Policy Framework through the planning system.
- 1.2. This position statement gives details of actions that the County Council and District Councils can take to improve the health and wellbeing of our residents and the support the County Council can provide to facilitate this.

2. Background

- 2.1. Improving both physical and mental health and wellbeing is integral to land use planning; not least place-making, design, regeneration, sustainable development, green infrastructure, sustainable transport and development management. These links are recognised in the National Planning Policy Framework (NPPF) and its accompanying Practice Guidance (NPPG) which both include chapters devoted to 'promoting healthy communities' (NPPF) and 'health and wellbeing' (NPPG).
- 2.2. It is recognised that whilst most of the public health agenda is nothing new for land use planners or for local authorities, there is now an opportunity to add value to existing work.
- 2.3. This position statement has been developed through the auspices of the Hampshire & Isle of Wight Planning Officer's Group (HIPOG) and in conjunction with County Council and District Council planning officers in order to build consensus and mutual understanding.

3. National Policy Context

- 3.1. In April 2013 the *Health and Social Care Act (2012)* gave upper tier and unitary authorities a new duty to improve the health of people in their area including encouraging healthier lifestyles and addressing health inequalities. The transfer of responsibilities from the National Health Service (NHS) to local government was intended to shift the emphasis from treatment towards a more preventative agenda which tackles the wider social determinants of health such as the environment, housing education and employment.
- 3.2. As part of the Health and Social Care Act local areas had to establish multi-agency Health and Wellbeing Boards. The Boards are charged with producing the Joint Strategic Needs Assessment and a Joint Health and Wellbeing Strategy for their local areas.
- 3.3. The *National Planning Policy Framework (NPPF)* contains section 8 "Promoting healthy communities" which notes that: "69. The planning system can play an important role in facilitating social interaction and creating healthy, inclusive communities."

- 3.4. The NPPF charges planners with the task of facilitating social interaction, creating healthy, inclusive communities, delivering the social, recreational and cultural facilities and services communities need, providing and protecting green open space and enhancing rights of way and accessibility networks. It recognises that good planning and design can encourage active travel and behaviour, facilitate access to greenspace and the countryside and control and manage the use of land and property where this is deemed contrary to the public health agenda.
- 3.5. The *National Planning Practice Guidance* (NPPG) supports the NPPF. It highlights the many and various links between planning and health and sets out that many elements of the NPPF, not just section 8 on healthy communities, support the delivery of health objectives. It states that: “Local planning authorities should ensure that health and wellbeing, and health infrastructure are considered in local and neighbourhood plans and in planning decision making.” See Appendix 1 for further details.
- 3.6. Section 110 of the 2011 Localism Act introduced the duty to co-operate (DTC) which requires local planning authorities to provide evidence that they have worked with each other and with other bodies when preparing their local plans and to show how that co-operation has informed and influenced the policies and proposals in those plans. This requirement is elaborated in paragraphs 178 to 181 of the NPPF. Paragraph 180 of the NPPF specifically identifies the need for co-operation on relevant matters between county and district authorities in two-tier areas.
- 3.7. The new responsibility for public health does provide the opportunity to consider what other actions the County Council might take beyond what has been done to date using the evidence base provided by Joint Strategic Needs Assessments (JSNA) and Joint Health and Wellbeing Strategies (JHWS). Having this evidence would allow us to target those localities with the greatest health needs.

4. Local strategy and policy

- 4.1. The Hampshire Joint Health and Wellbeing Strategy has 4 key priorities:
 - Starting Well – supporting every child to thrive and do well by helping them to feel safe and be physically and emotionally healthy
 - Living Well – enabling people to live healthy lives and encouraging people to take action to stay healthy through access to information and support
 - Ageing Well – enabling people to remain independent; have choice and control and timely access to high quality services
 - Healthy Communities – ensuring people live in strong and supportive communities – targeting communities with greatest health inequalities
 - 4.2. The second and fourth priority areas impinge strongly on the land use planning system.
 - 4.3. The Hampshire Healthy Weight Strategy was endorsed, in draft form by the Health and Wellbeing Board in February 2015 with the final version published in September
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2015 following a stakeholder consultation. Given the scientific evidence on the causes of obesity, the built and transport environment is a key factor in tackling obesity, one of the most important public health problems facing our society.

- 4.4. The Joint Strategic Needs Assessment provides a detailed information base on the health of the local population in a number of areas relevant to planning, including housing, access to services, physical activity and obesity. Information, such as the Child Measurement Programme (NCMP), can be broken down to defined geographies for example to identify childhood obesity 'hotspots'.
- 4.5. Local planning policy is determined by Local Development Plans. These are statutory policies which set out the plan for the future development of the local area. They are prepared by the local planning authority (the District Councils).
- 4.6. Hampshire County Council is the planning authority for minerals and waste and its own development (e.g. schools) only. The County Council also produces an infrastructure plan which informs Local Development Plans. Hampshire County Council works closely with District Councils in order to discharge its statutory functions - for example as the Highways Authority and Education Authority.
- 4.7. Hampshire County Council is a significant landowner in its own right. This has implications both for developments on Hampshire County Council's landholdings and for the County Council as a local stakeholder in relevant developments.
- 4.8. Whilst the statutory public health duty is relatively new the aim of improving the physical and mental health and wellbeing of Hampshire's citizens is not. In its widest sense 'health and wellbeing' has been a feature both of Government policy and the local governments' own policies and priorities for a number of years. Therefore a lot of activity is already taking place throughout local government which, although ostensibly meeting other departmental objectives and priorities, is also contributing to improving health and wellbeing.

5. Actions

The County Council will:

- Work proactively with local planning authorities to develop programmes and policies which address public health objectives through the land use planning process
- Make the JSNA evidence base relevant and available to local planning authorities and provide advice and support in interpreting it and applying it to local circumstances. Where required submit further evidence on national and local policies, health and healthcare provision needs
- Prepare model text and policy wording which can be used as a template for inclusion in local plans and related documents or can be customised to local circumstances as appropriate Support the district councils should any health and wellbeing policy or initiative be challenged through the local plan preparation process, including

providing evidence for the examination process and attending sessions where required

- Will provide a named Public Health link for each District and develop a process for District Councils to consult the County Council on Local Plans and major planning applications
- By acting as a point of liaison, the County Council will encourage and support health service commissioners in responding to consultations on local plans and major planning applications. This should ensure the requirements for healthcare facilities are given full consideration
- Work with Hampshire Property Services to ensure in-house developments enable opportunities to enhance health
- Influence major developments as a landowner to ensure they enable opportunities to enhance health
- Support District Councils in conducting Health Impact Assessments¹ of Local Plans if required.

District Councils will:

- Ensure that the principles of health and wellbeing are enshrined in local plans and related documents, including involving public health colleagues at an early stage in plan development. This should include an initial draft stage check, health specific policies including any requirements for Health Impact Assessments
- Ensure health and wellbeing principles in local plans are supported by policies thus enabling a response to challenges from developers
- Use the JSNA, academic evidence and other sources of intelligence as the evidence base for policy making and decision taking and ensure local plans reflect the issues set out
- Include measurable outcomes on health and submit health data for monitoring and plan review (for instance, integrating relevant indicators from the Public Health Outcomes Framework²)
- Ensure that health-related infrastructure is factored into infrastructure assessments produced in support of the Community Infrastructure Levy

¹ Health Impact Assessment (HIA) is a means of assessing the health impacts of policies, plans and projects in diverse economic sectors using quantitative, qualitative and participatory techniques. HIA helps decision-makers make choices about alternatives and improvements to prevent disease/injury and to actively promote health.

² Public Health Outcomes Framework www.phoutcomes.info

- Ensure health and wellbeing is adequately incorporated into the Sustainability Appraisal of Local Plans or consider requirement for a separate Health Impact Assessment (HIA)
- Consider the requirement for a Health Impact Assessment (HIA) for all developments of 100 units and above. Involve public health in pre-application discussions for major developments of 100 units and above
- Consult the County Council in its statutory Public Health role on all planning applications for development and change of use or prior approval notification of developments where a potential public health impact is expected or developments above the 100 unit size threshold.

6. Further Information

1. What is the role of health and wellbeing in planning?

Local planning authorities should ensure that health and wellbeing, and health infrastructure are considered in local and neighbourhood plans and in planning decision making. Public health organisations, health service organisations, commissioners and providers, and local communities should use this guidance to help them work effectively with local planning authorities in order to promote healthy communities and support appropriate health infrastructure.

2. What are the links between health and planning?

The link between planning and health has been long established. The built and natural environments are major determinants of health and wellbeing. The importance of this role is highlighted in the [promoting health communities section](#). This is further supported by the three dimensions to sustainable development (see National Planning Policy Framework [paragraph 7](#)).

Further links to planning and health are found throughout the whole of the National Planning Policy Framework. Key areas include the core planning principles (see National Planning Policy Framework [paragraph 17](#)) and the policies on transport (see National Planning Policy Framework [chapter 4](#)), high quality homes (see National Planning Policy Framework [chapter 6](#)), good design (see National Planning Policy Framework [chapter 7](#)), climate change (see National Planning Policy Framework [chapter 10](#)) and the natural environment (see National Planning Policy Framework [chapter 11](#)).

The National Planning Policy Framework encourages local planning authorities to engage with relevant organisations when carrying out their planning function. In the case of health and wellbeing, the key contacts are [set out in this guidance](#). Engagement with these organisations will help ensure that local strategies to improve health and wellbeing) and the provision of the required health infrastructure (see National Planning Policy Framework paragraphs [seven](#), [156](#) and [162](#)) are supported and taken into account in local and neighbourhood plan making and when determining planning applications.

The range of issues that could be considered through the plan-making and decision-making processes, in respect of health and healthcare infrastructure, include how:

- development proposals can support strong, vibrant and healthy communities and help create healthy living environments which should, where possible, include making physical activity easy to do and create places and spaces to meet to support community engagement and social capital;
- the local plan promotes health, social and cultural wellbeing and supports the reduction of health inequalities;
- the local plan considers the local health and wellbeing strategy and other relevant health improvement strategies in the area;
- the healthcare infrastructure implications of any relevant proposed local development have been considered;
- opportunities for healthy lifestyles have been considered (e.g. planning for an environment that supports people of all ages in making healthy choices, helps to promote active travel and physical activity, and promotes access to healthier food, high quality open spaces and opportunities for play, sport and recreation);
- potential pollution and other environmental hazards, which might lead to an adverse impact on human health, are accounted for in the consideration of new development proposals; and
- access to the whole community by all sections of the community, whether able-bodied or disabled, has been promoted.

3. Who are the main health organisations a local authority should contact and why?

The first point of contact on population health and well-being issues, including health inequalities, should be the Director of Public Health for the local authority, or at the County Council for two-tier areas.

Working with the advice and support of the Director of Public Health and their team, local authority planners should also consider engaging and consulting appropriately with the following key groups in the local health and wellbeing system:

- The Health and Wellbeing Board – which can provide a valuable forum through which partners can help ensure that planning proposals, where appropriate, are likely to have a positive impact on the health and wellbeing of local communities. Health and Wellbeing Boards bring together local authorities, the NHS, communities and wider partners to share system leadership across the health and social care system; and have a duty to encourage integrated working between commissioners of services, and between the functions of local government (including planning). Each Health and Wellbeing Board is responsible for producing a Health and Well-being Strategy which is underpinned by a Joint Strategic Needs Assessment. This will be a key strategy for a local planning authority to take into account to improve health and well-being. Other

relevant strategies to note would cover issues such as obesity and healthy eating, physical activity, dementia care and health inequalities. Data and information from Public Health England is also useful as part of the evidence base for plan-making.

- The local Clinical Commissioning Group(s) and NHS England are responsible for the commissioning of healthcare services and facilities which are linked to the work of the Health and Wellbeing Boards and the local Director of Public Health. These bodies are listed as consultees for local plans. These bodies in consultation with local healthcare providers will be able to assist a local planning authority regarding its strategic policy to deliver health facilities and its assessment of the quality and capacity of health infrastructure as well as its ability to meet forecast demand. They will be able to provide information on their current and future strategies to refurbish, expand, reduce or build new facilities to meet the health needs of the existing population as well as those arising as a result of new and future development.
- Engagement with the local community is also important. As part of this work, local planning authorities should consider approaching their local Healthwatch organisation (which represents users of health and social care services) and other community groups as appropriate.

4. How should health and well-being and health infrastructure be considered in planning decision making?

Local authority planners should consider consulting the Director of Public Health on any planning applications (including at the pre-application stage) that are likely to have a significant impact on the health and wellbeing of the local population or particular groups within it. This would allow them to work together on any necessary mitigation measures. A health impact assessment may be a useful tool to use where there are expected to be significant impacts.

5. What is a healthy community?

A healthy community is a good place to grow up and grow old in. It is one which supports healthy behaviours and supports reductions in health inequalities. It should enhance the physical and mental health of the community and, where appropriate, encourage:

- Active healthy lifestyles that are made easy through the pattern of development, good urban design, good access to local services and facilities; green open space and safe places for active play and food growing, and is accessible by walking and cycling and public transport.
- The creation of healthy living environments for people of all ages which supports social interaction. It meets the needs of children and young people to grow and develop, as well as being adaptable to the needs of an increasingly elderly population and those with dementia and other sensory or mobility impairments.