

Planning, health and wellbeing

An LGiU essential guide



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Contents

Background	2
What role do planners have to improve health and wellbeing?	2
Government guidance to support health and wellbeing in planning	3
Guidance and support from other organisations	7
Putting guidance into practice	9
Challenges and tensions	10
Final thoughts	13
References	14

Background

The [National Planning Policy Framework](#) (NPPF) and [National Planning Practice Guidance](#) (NPPG) set out a role for planners to consider health and wellbeing in plan-making and decision-taking.

Other organisations and agencies have published a range of supporting guides, and these set out practical ways that council departments can work with each other, and with outside organisations, sectors and communities, to embed an integrated approach to promoting public health and wellbeing through planning.

Since winter 2013 LGiU has published a number of briefings that summarise this guidance. The purpose of this Essential Guide is to pull these together into a single resource for local authority councillors, planners, public health practitioners and others with a stake in planning healthier communities. The briefings have not been exhaustive and LGiU welcomes your feedback on other guides and resources you find useful in your health and planning work.

What role do planners have to improve health and wellbeing?

According to the [National Planning Practice Guidance](#) (NPPG) the built and natural environments are 'major determinants of health and wellbeing'.

The origins of planning practice are rooted firmly in enabling changes to the physical environment to improve people's health. As Carl Petrokofsky from Public Health England and I noted in a recent editorial for [Town & Country Planning](#):

"Planning transformed the lives of millions of people in the UK who previously would have died an early death from an infectious disease due to, or exacerbated by, poor housing, sanitation or food, or lack of access to good medical care."

Local authority planners continue to influence health and wellbeing through the layout of physical environments, but the focus has shifted towards so-called 'lifestyle diseases' which are affected by where we live. In the same editorial we write:

"It has become increasingly clear that a number of current public health priorities, such as cardiovascular diseases, stroke, respiratory diseases, and mental and physical health, have a significant spatial dimension."

The NPPG defines a healthy community as a place that 'supports healthy behaviours and supports reductions in health inequalities'. This includes:

- helping to make active healthy lifestyles easy through the pattern of development, good urban design, good access to local services and facilities

- enabling the creation of healthy living environments for people of all ages which supports social interaction.

In numbers: the case for planning healthier communities:	
£900 million	The amount that could be saved in the UK annually if everyone exercised as much as the suggested recommendations, such as walking for 20 minutes 5 days a week (RIBA, 2013)
40 per cent	The increase in trade that has been reported when places are made more attractive for walking (Living Streets, 2013)
168:1	The outcomes versus costs when modelling the health benefits of improving cycling infrastructure using 'high-standard' spatial planning (NICE, 2010)
£7,000	The amount ecotherapy can save the public purse each year for every person with mental health problems that is referred (Mind, 2013)
£4 million +	The estimated mean annual health benefits that can be attributed to cycling levels in Glasgow (GCPH, 2013)
£223 million	The total annual health benefit to Copenhagen based on the number of people cycling (City of Copenhagen, cited in 2012)
Source: Reuniting Planning and Health Capacity Building (Belfast Healthy Cities, 2014)	

Government guidance to support health and wellbeing in planning

The [National Planning Policy Framework](#) (NPPF) is based on the three pillars of sustainable development, which include a responsibility to:

“create a high quality built environment, with accessible local services that reflect the community’s needs and support its health, social and cultural well-being.”

Other elements are equally important for maintaining good health and wellbeing, such as minimising waste and pollution and adapting to climate change.

The NPPF also has a whole chapter devoted to [promoting healthy communities](#).

The NPPG has a section called [health and wellbeing](#). This guidance instructs planners to consider health and wellbeing through both the plan-making and decision-making processes. The local plan should:

- promote health, social and cultural wellbeing and support the reduction of health inequalities
- consider the local health and wellbeing strategy and other relevant health improvement strategies in the area
- enable an environment that supports people of all ages to make healthy choices by

promoting active travel and physical activity, access to healthier food, high quality open spaces and opportunities for play, sport and recreation

- promote access to the whole community by all sections of the community, whether able-bodied or disabled.

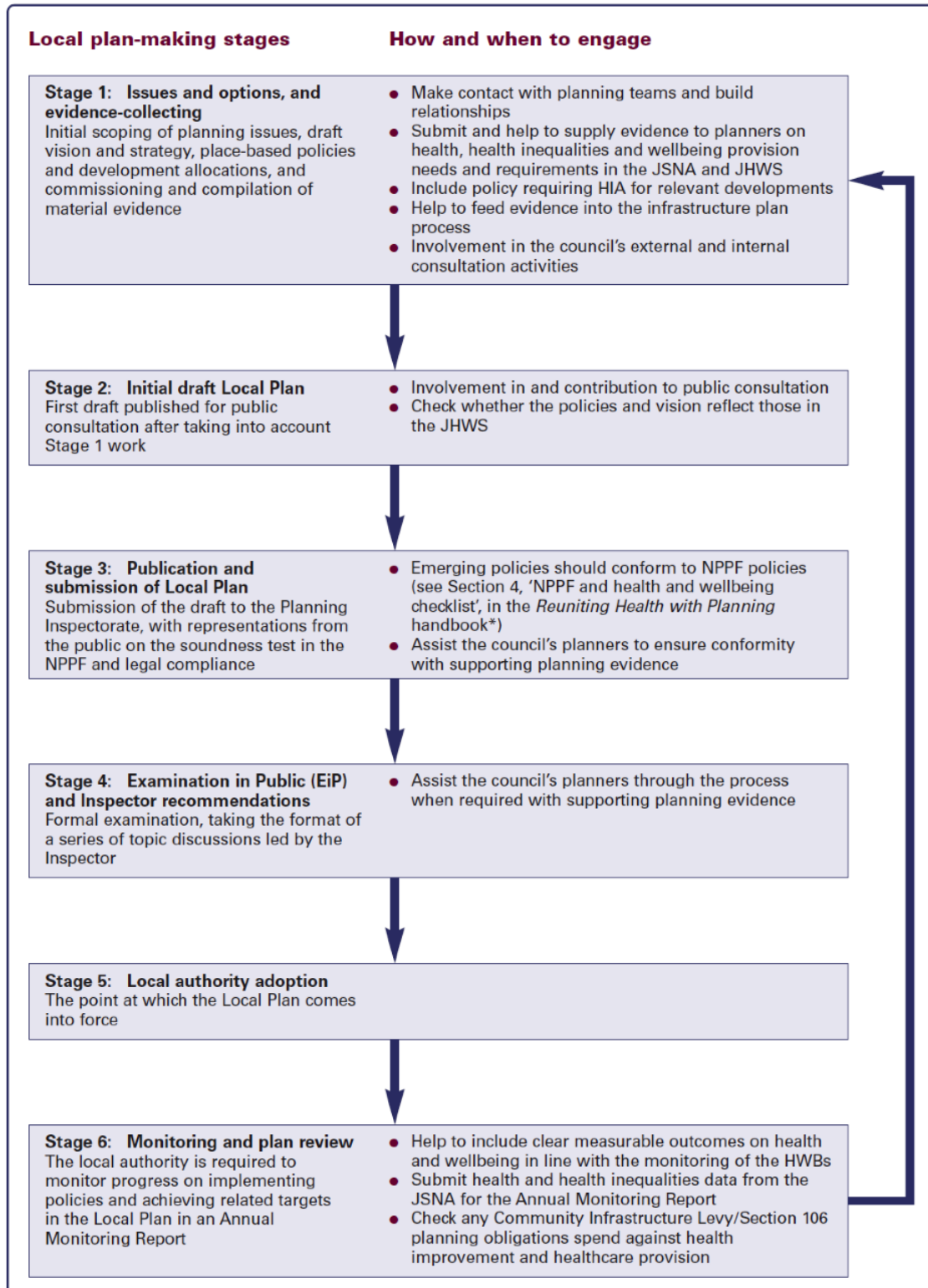


Diagram 1: Consideration for health and wellbeing during stages of preparing local planning documents
Source: Planning Healthier Places (TCPA, 2013)

Development proposals should:

- 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
- consider the implications for provision of local healthcare infrastructure
- consider the potential pollution and other environmental hazards that might lead to an adverse impact on human health.

The guidance also advises on who planners should be liaising with to ensure that planning policies reflect the health needs and concerns of the local population. These include:

- director of public health for the local authority (or county in two-tier areas)
- health and wellbeing board members
- clinical commissioning group members and representatives of NHS England (which are listed as consultees for local plans), especially in relation to providing sufficient health infrastructure
- Healthwatch members (as the local group representing users of health and social care services).

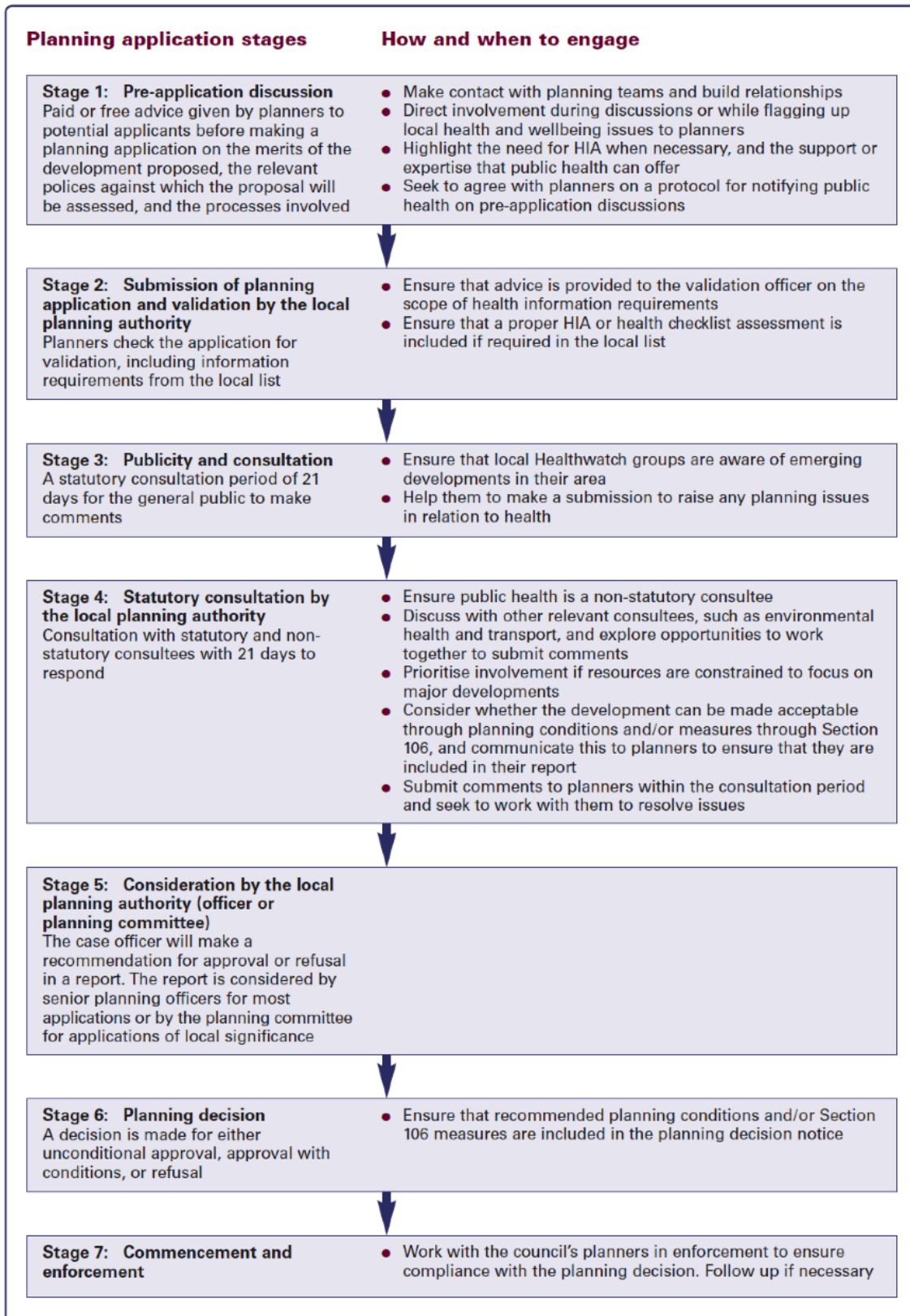


Diagram 2: Considerations for health and wellbeing during stages of the planning application for a development

Source: Planning Healthier Places (TCPA, 2013)

Guidance and support from other organisations

A number of supporting guides and publications from other organisations have been covered in previous LGiU briefings. For your convenience these are summarised below:

Where to go if you are....	Resource	LGiU briefing
Getting started	Planning Healthier Places (TCPA) - Explains links between health and planning policy	Planning Healthier Places: an update on integrating public health and planning (Dec 2013)
Researching evidence	Increasing Physical Activity and Active Travel (PHE)	Planning healthier places: an update on integrating public health and planning (Dec 2013)
	Regulating the Growth of Fast Food Outlets (PHE)	Planning healthier places: an update on integrating public health and planning (Dec 2013)
	Public Health and Landscape (LI)	Planning healthier places: an update on integrating public health and planning (Dec 2013)
	Planning Sustainable Cities and Community Food Growing (Sustain)	The rise of community food growing: what role for local authorities? (Apr 2014)
	RIBA City Health Check - Based on health and spatial evidence for the nine biggest urban areas in England	RIBA City Health Check: an opportunity for local authorities to save lives and money? (Feb 2014)
	Everybody Active, Everyday (PHE) - Includes evidence on levels of physical activity	Update on public health and planning: Winter 2014 (Dec 2014)
	Planning Healthy-Weight Environments (TCPA) - Includes overview of evidence on obesity and place	Update on public health and planning: Winter 2014 (Dec 2014)
	Claiming the Health Dividend (DfT) - Includes overview of evidence of health and financial benefits of active travel	Economic case for active travel (Dec 2014)

Where to go if you are....	Resource	LGiU briefing
Engaging health professionals	Planning Healthier Places (TCPA) - Includes diagrams on how and when public health can input into planning process	Planning healthier places: an update on integrating public health and planning (Dec 2013)
	Everybody Active, Everyday (PHE) - Instructs organisations to align local plan and health strategies	Update on public health and planning: Winter 2014 (Dec 2014)
	Planning Healthy-Weight Environments (TCPA) - Sets out collaborative process for joint working	Update on public health and planning: Winter 2014 (Dec 2014)
Engaging developers	Planning Healthy-Weight Environments (TCPA) - Sets out collaborative process and elements for developers to consider in development proposals	Update on public health and planning: Winter 2014 (Dec 2014)
Engaging communities	Planning Sustainable Cities and Community Food Growing (Sustain)	The rise of community food growing: what role for local authorities? (Apr 2014)
Thinking about health inequalities	Planning Healthier Places (TCPA)	Planning Healthier Places: an update on integrating public health and planning (Dec 2013)
Writing health and wellbeing policies	Planning Healthy-Weight Environments (TCPA)	Update on public health and planning: Winter 2014 (Dec 2014)
	Natural Solutions for Tackling Health Inequalities (IHE)	Update on public health and planning: Winter 2014 (Dec 2014)
	RIBA Health Check	
	Planning Healthy-Weight Environments (TCPA)	Update on public health and planning: Winter 2014 (Dec 2014)
	Active Planning Toolkit 2 (Gloucestershire Conference)	Update on public health and planning: Winter 2014 (Dec 2014)
	Planning Sustainable Cities and Community Food Growing (Sustain)	The rise of community food growing: what role for local authorities? (Apr 2014)

Where to go if you are....	Resource	LGiU briefing
Assessing development proposals	Active Planning Toolkit 2 (Gloucestershire Conference)	Update on public health and planning: Winter 2014 (Dec 2014)
	Planning Healthy-Weight Environments (TCPA)	Update on public health and planning: Winter 2014 (Dec 2014)
	Planning Sustainable Cities and Community Food Growing (Sustain)	The rise of community food growing: what role for local authorities? (Apr 2014)
Evaluating health impact	Active Planning Toolkit 2 (Gloucestershire Conference - Includes evaluation tools)	Update on public health and planning: Winter 2014 (Dec 2014)
	Everybody Active, Everyday (PHE)	Update on public health and planning: Winter 2014 (Dec 2014)

[Note that the LGiU winter 2014 update briefing also includes the [Town & Country Planning special issue on health and planning](#), which is free to download and includes articles on each of these themes.]

Putting guidance into practice

The guides above include a number of examples of local authority areas that are trying to integrate health and wellbeing considerations into the local planning process, such as:

- Brighton & Hove (Planning Sustainable Cities and Food Growing): pioneering Planning Advice Note on food growing, and examples of places that have created new spaces for food growing
- Bristol (Planning Healthier Places): the city council wrote a development protocol between public health and planning that sets out the criteria for when development applications should be forwarded to public health for comment
- Knowsley (Planning Healthier Places): there is good cross-referencing between the health and wellbeing strategy, and the draft local plan
- Lincolnshire (Planning Healthier Places): the county has mapped health and wellbeing data by district area on an interactive tool that planners can use
- Medway (T&CP special issue): a collaboration between public health and planning

has generated public health evidence to support planners to develop policies on healthier eating

- Newham (Planning Healthier Places): the council, along with neighbouring boroughs and the Healthy Urban Development Unit, has drafted a healthy urban checklist for development planners
- Stockport (T&CP special issue): the council is integrating health evidence and collaboration into all stages of the planning process, including evaluation
- Stoke-on-Trent (Active Planning Toolkit 2): the council's Healthy Urban Planning Supplementary Planning Document (SPD) includes a healthy planning checklist and guidance on when to conduct health impact assessments – the 'commitment of city council members' has been an important reason for the success of the SPD.

Challenges and tensions

Evidence – available, applicable, adaptable?

Evidence is crucial to both public health practitioners and planners. One of the biggest lessons to emerge so far from the increasing amount of collaboration between both professions is that what 'counts' as evidence can vary because of the different ways in which it is being used. Planners need evidence that is robust and can be defended in the judicial elements of the system (planning inquiries and appeals). Public health practitioners need to understand the health and wellbeing of the local population and suitable interventions that might improve health overall and reduce health inequalities. While public health can to some extent embrace trial and error, planning departments get hit with a bill if they get the evidence wrong and lose in the courts. Given what we know about place shaping and the complexity of predicting and responding to evolving information and change, this seems an increasingly ill-suited model, but for now it is the one we are stuck with.

One of the benefits of relocating public health departments into local authorities is to increase the focus on generating evidence that planners can use to defend policy and development decisions based on health and wellbeing concerns.

As Hugo Crombie, Public Health researcher at NICE, writes:

"Interventions may have a weak evidence base in conventional terms. Therefore, other ways of assessing their value need to be considered. Evidence about the theoretical link between the intervention and its outcome, as well as knowledge derived from natural experiments, observations and experience, will need to be brought together to identify the likely effect of a proposed intervention."

For an up-to-date snapshot across a range of topics you can download for free a [set of articles published under the sub-title 'public health evidence'](#) as part of a special T&CP issue on health and planning.

Evaluation

The implication from the above discussion on evidence is that local authorities will also have to devise their own evaluation methods, albeit with very limited resources. This message is reinforced in a number of the resources summarised here, for example the scorecards set out in Active Planning Toolkit 2 (see below). There is an opportunity for public health to devise effective and feasible evaluation, which could form part of the evidence for pushing against business as usual. A helpful framework for taking a case study approach to evaluation of health and planning interventions is the article 'Planning for public health – building the local evidence base' (Anderson et al) that was published in the August 2014 issue of [Town & Country Planning](#) (£paywall).

Scorecard 2 Planning and Designing for Physical Activity	Green Strong positive	Amber partial	Red Weak or no coverage	Mitigation/ Enhancement Measures
Urban Design and Transport Criteria				
The proposals demonstrate that they will result in enhanced facilities for pedestrians and cyclists and will result in increased physical activity				
New developments have a mix of compatible uses that will encourage walking and cycling				
Proposed developments are assessed to ensure that there are a range of everyday services within walking distance				
Street patterns in new developments are connected with short trip distances between common destinations				
There is a network of well-connected foot and cycle paths, and provision for cycle storage/parking				
Walking and cycling routes are legible, continuous and attractive				
There are traffic calming schemes in residential and other areas where pedestrian and cyclists are at risk				
There are a significant number of 20 mph zones in residential, town centre and other areas				
Employment sites and campus type developments are accessible by active travel and provide facilities for cyclists				
Movement around campus sites on foot is easy, convenient and pleasant				
All schools are accessible by safe walking and cycling routes				
Staircases in multi storey buildings are prominent, visible and accessible				
Building design, layout and facilities enable and encourage movement during the day				

Scorecard evaluation: A sample page from a simple evaluation tool designed to help assess whether policies and proposals are moving in the right direction to promote physical activity.

Source: Active Planning Toolkit 2 (Gloucestershire Conference, 2014)

Aligning policy

An important element of developing an integrated health and planning approach within a local authority should be policy that aligns across the local plan and the health and wellbeing strategy. This is proving to be a challenge for many authorities. For example, based on findings for the TCPA project on healthy-weight environments, fewer than a third of joint health and wellbeing strategies made reference to the role of the built environment to reduce obesity, despite obesity being a public health priority. The ability of both service areas to make progress will be hampered by this lack of alignment.

Viability

Securing environments that will enable people to look after their health is a stated aim of planning policy. But there continues to be a suspicion that developers have the upper hand in the development process, and that as a result the elements that are fundamental to creating a healthy environment, such as affordable housing or high quality green spaces, get squeezed out of planning obligations, even if the local plan is up to date. The most recent report to restate these doubts is the Communities and Local Government Committee's investigation into the operation of the National Planning Policy Framework (see [LGiU briefing](#)).

Collaboration between health and planning

Multiple projects on health and planning have found that the lack of priority given to collaborative working is hampering the development of a truly integrated health and planning agenda. This is exacerbated in two-tier areas where public health is the responsibility of the county, while most planning functions are carried out by the districts. In some areas there are obvious hurdles, notably a dispersed geographical spread. A lack of understanding of the spatial dimensions of rural health and wellbeing compounds the challenge.

Across authorities of all types there remains a general feeling that collaborative working is something that is 'nice to have', rather than taking seriously the view expressed by the [Marmot Review](#) (IHE, 2010) – and reinforced in many of the resources covered here – that integrating departments across the built environment professions is a necessary precursor to creating healthier environments.

Final thoughts

This Essential Guide shows that councils have the authority to use planning to improve health and wellbeing. Many are taking on the challenge: for example, more than 100 English local authorities have participated in workshops, roundtables and seminars run by the TCPA Reuniting Health With Planning programme.

But this is a complex area of policy and practice. Some places are already in that messy stage of translating energy, enthusiasm and engagement into plans and policies that are legally robust and that can make a difference; many are earlier on in the process and looking to learn from others.

To keep up to date with the latest advice and learning, check in with the following dedicated websites and support, as well as with regional networks:

- [PHE Healthy People, Healthy Places programme](#)
- [TCPA Reuniting Health With Planning programme](#)
- [Design Council Cobe Active by Design](#)
- [Healthy Places website](#)

References

[Allen J and Balfour R \(2014\); Natural Solutions for Tackling Health Inequalities; Institute of Health Equity](#)

[Ballantyne R and Blackshaw N \(2014\); Active Planning Toolkit 2; Gloucestershire Conference](#)

[Davis A \(2014\); Economic Case for Active Travel: the health benefits; Department for Transport](#)

[Department for Communities and Local Government \(2014\); National Planning Practice Guidance; CLG](#)

[Department for Communities and Local Government \(2013\); National Planning Policy Framework; CLG](#)

[Landscape Institute \(2013\); Public Health and Landscape: creating healthy places; Landscape Institute](#)

[Marmot Review Team \(2010\); Fair Society, Healthy Lives \(The Marmot Review\); Institute of Health Equity](#)

[Morgan G \(2014\); Planning Sustainable Cities for Community Food Growing; Sustain](#)

[Public Health England \(2014\); Everybody Active, Every Day: a framework to embed physical activity into everyday life; PHE](#)

[Public Health England and Local Government Association \(2013\); Obesity and the Environment: increasing physical activity and active travel; PHE](#)

[Public Health England, Local Government Association and Chartered Institute of Environmental Health \(2013\); Regulating the Growth of Fast Food Outlets; PHE](#)

[Ross A and Chang M \(2014\); Planning Healthy-Weight Environments; TCPA](#)

[Ross A and Chang M \(2013\); Planning Healthier Places; TCPA](#)

[Royal Institute of British Architects \(2014\); City Health Check: how design can save lives and money; RIBA](#)

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