

Health and Wellbeing in Planning – Ashford’s emerging local plan – Agenda Item No.6

The National Planning policy framework makes clear that planning should address sustainable development on three fronts – Economic, Social, and Environmental. More specifically, the NPPF requires that:

“Local planning authorities should work with public health leads and health organisations to understand and take account of the health status and needs of the local population (such as for sports, recreation and places of worship), including expected future changes, and any information about relevant barriers to improving health and well-being”. (NPPF: Para 171)

In many ways planning authorities have sought to deliver this outcome as part of achieving ‘sustainable development’, ensuring that access to local facilities and services is central to the spatial strategy - and where it’s not, ensuring that additional or improved facilities can be supplied. If anything, LPAs have often gone further than this, and considered health and well-being in a much wider context, with the theme also being addressed as part of economic or environmental policies. However the new requirement in the NPPF requires LPAs to articulate how health and wellbeing can, and will, be delivered through planning.

Traditionally, Health and Wellbeing is achieved in planning in three ways;

- The overall spatial strategy – encouraging cycling, walking, sustainable spatial allocation of development
- The management of new development – good design, environmental mitigation, on-site facilities, the use of land
- Delivering additional infrastructure or facilitating additional services – contributions to new community facilities, developing the critical mass for better bus services.

It is important for service providers to consider all avenues to help implement health and wellbeing, not simply the investment side.

The overall Spatial Strategy

The adopted core strategy (2008) sought to increase accessibility to key services through increasing public transport, walking and cycling provision, as well as the provision of new facilities where possible (particularly in the strategic development sites). While this will remain the ambition of the council, the reduction in public sector funding – particularly the revenue funding available to key service providers – will require a more considered look at existing capacity rather than rely on the provision of new facilities.

An early piece of work being developed with Kent County Council is to 'map' the provision of key services and facilities, and to identify areas with either existing capacity or where improved provision could be accommodated with the greatest cost effectiveness. This approach is mutually beneficial to the council and service providers, as it should be noted that while the council may be able to safeguard land for facilities, or even secure some funding for capital investment – the revenue implications of operating services will be borne on service providers.

With impending cuts to revenue funding, service providers should see the process of developing the spatial strategy as an opportunity to revitalise existing services rather than solely provide new capacity, such as the potential opportunities to co-locate services (and redevelop existing assets).

The management of new development

Implementing improvements to health and wellbeing can be achieved through development management policies, such as the restrictions on 'bad neighbour uses,' restrictions on takeaways, or the allocation of sites to be reserved for park land. While implementing such policies does not have a 'cost' on the council or service providers as such, they nonetheless require justification. The council will look to all stakeholders to provide assistance, and evidence, for the justification of such policies.

With regards to more specific site policies, the NPPF champions sustainable development and calls on LPAs to seek "secure high quality design and a good standard of amenity for all existing and future occupants of land and buildings". However, the NPPF also introduces a relatively new requirement - to demonstrate 'whole plan' viability:

"Pursuing sustainable development requires careful attention to viability and costs in plan-making and decision-taking. Plans should be deliverable. Therefore, the sites and the scale of development identified in the plan should not be subject to such a scale of obligations and policy burdens that their ability to be developed viably is threatened". (NPPF: Para 173)

In short, the provision of enhanced design, or the requirement for a developer to provide a new facility, must be balanced against economic viability –LPAs are to make 'hard choices' on what it will ask of development. This includes the 'cost' of introducing the Community Infrastructure Levy, which must be set at a rate that is largely affordable to most development. For Larger, more viable sites, the council will still be able to use the Section 106 mechanism to secure on-site infrastructure. It is therefore likely that LPAs will be more able to accommodate the requests of service providers if specific solutions are identified as part of site policies, rather than such projects competing for funding via CIL.

For example, the provision of health care facilities may be best achieved through a developer supplying as part of their proposal a building at ‘peppercorn’ rent. – which would have a nominal cost on the developer. This is not only limited to infrastructure. The council also has the opportunity to encourage developers to use local labour or local suppliers – which would provide good opportunities for apprenticeships (a similar agreement is being progressed as part of the Chilmington Green proposal).

Delivering additional infrastructure or facilitating additional services

Inevitably, some new services and infrastructure will have to be supplied. Initial work undertaken to scope potential CIL revenue in the Borough indicates that CIL alone will not be able to meet the borough’s infrastructure requirements. While the council has not set its CIL expenditure priorities, it is likely that requests for funding from CIL will be more successful if projects lever additional funding from other sources, or indeed demonstrate an ability to actually reduce costs to the public sector over the longer term.

Due to the limitations of CIL revenue, service providers should engage early with the council to develop proposals that are affordable and represent value for money to the public. The council may be able to secure funding from other sources, or identify an opportunity to deliver components through S106. It may also be the case that the council does not have the funding to deliver the preferred option, but could deliver a partial option in the interim. In short, active engagement with the council on the outcomes sought and the planning of facilities is far more likely to arrive at a solution that is of benefit to the local community

Key thoughts

- Local Planning Policies have traditionally sought to deliver the same health and wellbeing objectives as those promoted by service providers and stakeholders. However, coordination between the two has not always been sympathetic, and sometimes too ad hoc. How and when do stakeholders envisage their involvement?
- There is no one-size-fits-all solution. The model of delivery of a particular service in Ashford may differ from those in other parts of the UK, and so may the way in which those needs are met through the planning system. What are the emerging models of delivery?
- Direct financial contributions to service provision from development will be limited – can the local plan assist in a more innovative way? Can the local plan assist with ‘making the case’ for service providers to access funding from

other sources? Is behavioural change the key? How can this be put effectively into policy?

- Some issues will require cross-boundary coordination; some will be local or even development specific. What are the key strategic issues? What issues can be addressed at what level and what stage of the planning process?

Moving forward: Key stages in the local plan preparation - where do stakeholders feel their objectives are best served?

- Defining capacity constraints and opportunities
- Developing the spatial strategy and site allocations
- Drafting of core thematic policies
- Drafting of 'Development Management' and 'Site Allocation' policies
- Infrastructure Delivery Plan
- Monitoring