

Planning Carlisle's Future

Proposed Submission draft

Carlisle District Local Plan

2015-2030

Health Impact Assessment

Desktop approach



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Introduction

The City Council is writing a new Local Plan (Carlisle District Local Plan 2015-2030) to set out where different kinds of development should be located, to meet the needs of the whole community. The Local Plan will contain policies to guide new housing, business development and infrastructure, and to guide decisions on important issues such as climate change and the natural and historic environment. The City Council is working closely with the community, businesses, health, education and utility providers to identify and plan for the needs of the area.

This plan will set out the guidelines for development in the district for the next 15 years. Preferred options have been identified for sites to be allocated for a range of development including housing, employment and community uses up to 2030. These allocations will help to meet the objectives of the strategic housing and employment policies.

Health Impact Assessment (HIA)

The purpose of a HIA is to identify potential health impacts of a policy or project on a population. The HIA will look to highlight how decision makers can maximise the positive impacts and minimise the negative impacts of the change. HIA can be delivered at three levels:

1. Health impact policy audit (desktop exercise)
2. Intermediate HIA
3. Comprehensive HIA

The Healthy City Steering Group has agreed to undertake a desktop HIA (level 1) focused on the policies within the new Local Plan.

Stakeholders

This assessment will be shared with a wide range of stakeholders across the health economy with interests in single or multiple issues and determinants.

Summary of impact assessment activity

The Local Plan policies have been screened for impacts. The impacts have been screened against a set of indicators and priorities, established in the Cumbria Health & Wellbeing Strategy.

During this summer consultation a group selected from the Carlisle Healthy City Steering Group met (12th September 2013) to discuss the screening and the impact assessment. Following this work the Healthy City Steering Group workshop made the following recommendations:

1. Health Impact Assessments needed to be targeted at developments that trigger the subset of policies that are most relevant to a Healthy City.

2. A threshold value based on scale or potential impact needs to be agreed so that the use of HIA remains both proportionate and achievable.

These recommendations have been supported by a letter from the Clinical Commissioning Group Trust and a letter from a local councillor. The latter recommended more emphasis on the scale of development requiring a Health Impact Assessment.

In addition to this work, the wider consultations on the Local Plan have to date generated a number of responses related to health and wellbeing. These issues and responses are presented in summary below:

Area of Plan/Policy No.	Rep No	Issue raised	Response and relevant changes made
STAGE 1 REPRESENTATIONS			
Chapter 8	0170	We object to the exclusion of the word 'social' in the title and the absence of any reference to 'cultural' wellbeing	<p>We suggest the title to this section should be amended to Health, Education and Community. Given the 'wellbeing' element, is intangible rather than practical, it has not been addressed and overlaps with other sections of the document.</p> <p>The chapter title has been amended to 'Health, Education and Community'.</p>
46	0563	Brampton medical centre ...concerns regarding the sudden designation of a major site for an eccentric medical centre to the south west of the centre	<p>One of the main reasons for the allocation of a new medical centre is that the current surgery is no longer fit for purpose. Whilst their current position within the centre of Brampton is ideal, its nature as a historical market town has meant that there are limited opportunities for the surgery to expand. The creation of a new medical centre would allow for new modern facilities and adequate parking to be achieved. Brampton Medical Practice is supportive of this site having considered a number of other sites in previous years. Bus provider Stagecoach has suggested that whilst there is not a route passing the site at present, this is something that could be achieved. This will help to improve the accessibility of this site.</p> <p>There is no proposed change to the Policy in response to this comment</p>
46	0399	Botcherby is classed as a deprived area and it would be nice to see the encouragement of a Health Centre within its ward where a GP practice, dentists and other health profession practices to community can be built and encouraged, an area for this would be as suggestion Rosehill car park which is I believe our land.	<p>The role of this Local Plan Policy is to guide the development of medical facilities towards the most appropriate locations. Whilst the Local Plan can help in the identification and allocation of new sites for the provision of such medical facilities, it is not the role of the Local Plan to provide these services. It is therefore not the place of the Local Plan to allocate new sites for such need speculatively however if it is considered by medical professions/NHS that new services are required, the Local Plan will play a supportive role in their development.</p>

Area of Plan/Policy No.	Rep No	Issue raised	Response and relevant changes made
			There is no proposed change to the Policy in response to this comment.
46	1122	Facilities are currently limited and over stretched. In particular dentistry, NHS patients find it difficult to find a practice willing to take them on. There needs to be a planned upgrade of Health services to adequately cover any additional growth to the City and surrounding areas, both in terms of doctors and dentists.	<p>Whilst the Local Plan can help in the identification and allocation of new sites for the provision of such medical facilities, it is not the role of the Local Plan to provide these services. It is therefore not the place of the Local Plan to allocate new sites for such need speculatively.</p> <p>There is no proposed change to the Policy in response to this comment.</p>
46	1030	This policy sets out the criteria against which proposals for new doctors surgeries are considered and is welcomed. A proposal for a new Medical Centre in Brampton has been noted. Suggested Changes:Review options for the provision of a new medical centre in Brampton.	<p>One of the main reasons for the allocation of a new medical centre is that the current surgery is no longer fit for purpose. The creation of a new medical centre would allow for new modern facilities and adequate parking to be achieved. Brampton Medical Practice is supportive of this site having considered a number of other sites in previous years. Bus provider Stagecoach has suggested that whilst there is not a route passing the site at present, this is something that could be achieved.</p> <p>There is no proposed change to the Policy in response to this comment.</p>
50	1034	Crime and the fear of crime can create significant costs for communities both in terms of physical and mental harm but also financially. This policy, which sets out principles developments should adhere to minimise the risk of crime is broadly welcomed. Nevertheless, it is considered that criteria 4, which seeks to restrict escape routes, should not be at the expense of providing appropriate levels of permeability and accessibility. Suggested changes: remove reference to 'or a choice of escape routes' from paragraph 4 and replace with 'or an excess of routes that could aid escape'.	<p>Comments are noted.</p> <p>This Policy has been amended accordingly.</p>
52	0409	New development should be located an acceptable distance away from existing operational businesses with the potential for noise, odour or traffic generation.	<p>Comments are noted. The suggested paragraph will be added to the Policy Justification.</p> <p>The suggested paragraph has been added to the Policy Justification.</p>
55	0965	This Policy may be too restrictive	It is considered that it is important that development of contaminated land is given full consideration as certain types of development can be particularly sensitive to land contamination e.g. Housing where contaminated land could have an adverse

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			effect on human health. There is no proposed change to the Policy in response to this comment.
55	0382	Good to see allotments specifically stated here as land sensitive to contamination. Community growing projects and/or farming/agriculture should probably also be included.	Justification will be updated to mention community growing projects and farming/agriculture as uses sensitive to land contamination.
STAGE 2 REPRESENTATION			
42	20035	There is no mention of a health centre for the Botcherby area in the plan. It costs families and residents of Botcherby a fortune to visit separate centres quite a distance away. If there is going to be more housing development in our area then that will provide a need for dentists, doctors and other health professions based under one roof. A suitable location would be on the old coop site in Botcherby.	The role of this Local Plan Policy is to guide the development of medical facilities towards the most appropriate locations. Whilst the Local Plan can help in the identification and allocation of new sites for the provision of such medical facilities, it is not the role of the Local Plan to provide these services. It is therefore not the place of the Local Plan to allocate new sites for such need speculatively however if it is considered by medical professions/NHS that new services are required, the Local Plan will play a supportive role in their development. It should be noted that there has been significant dialogue with our health partners and work is ongoing to identify any health infrastructure that may be required as a result of new development. This will be highlighted within the Infrastructure Delivery Plan. No proposed change in response to this comment.
42	20369	Concerns regarding the sudden designation of a major site for an eccentric medical centre to the south west of the centre. No addressing of the significant draining of use of the centre of Brampton and its businesses, if the medical centre is located 'out of town';	One of the main reasons for the allocation of a new medical centre is that the current surgery is understood to be no longer fit for purpose. Whilst the current position within the centre of Brampton is ideal, its nature as a historical market town has meant that there are limited opportunities for the surgery to expand. The creation of a new medical centre would allow for new modern facilities and adequate parking to be achieved. Brampton Medical Practice is supportive of this site having considered a number of other sites in previous years. Bus provider Stagecoach has suggested that whilst there is not a route passing the site at present, this is something that could be achieved. This will help to improve the accessibility of this site. No proposed change in response to this comment.

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42	20362	The first sentence in this policy is too restrictive. It is likely that in the future a new Medical Centre may be built in Dalston but how will the people from Raughton Head, Gaitsgill, Wreay, Ivegill, Welton, Sebergham, Brough, Kirkandrews and Great Orton access it by public transport when there is none.	It is considered entirely appropriate and in keeping with national policy to require that new community infrastructure such as health care provision is located where, as far as is possible, it can be accessed via public transport. No change considered necessary.
S5	20225 Guidance from DCLG makes it clear that local authorities are expected to include robust allotment policies, including information on the map. In the CDLP allotments only feature incidentally as part of other leisure and/or health considerations.....	The Green Infrastructure policy looks to protect all typologies of open space amongst other widely recognised GI components. Allotments are a recognised typology of open space and case law supports that they can be adequately protected through this generic approach, rendering the need for an explicit reference within the policy unnecessary. Notwithstanding this the inclusion of a strategic health policy, which is to be added to the emerging Local Plan, will include an explicit reference to promoting and protecting community growing spaces, including allotments, through recognition of the multiple health benefits these spaces entail. No change.

In response

The Council's Local Plans team have consulted with the Healthy City Steering Group to produce a new strategic policy at the outset of the Local Plan, 'Policy SP 9 Healthy and Thriving Communities', which clearly sets out our new approach to health impacts. The new policy and its justification are presented in full in Appendix A.

Next steps

Following on from the preferred options and policies, the next stages in finalising the plan are:

15 December 2014 - Executive. The Executive are to be asked to consider the Proposed Submission draft of the Carlisle District Local Plan and make it available for consideration by Environment and Economy Overview and Scrutiny Panel before being reported back to Executive on 26 January 2015.

22 January 2015 - Environment and Economy Overview and Scrutiny Panel. The panel will consider the item for scrutiny.

26 January 2015 –Executive. The Executive is to consider feedback from Environment and Economy Overview and Scrutiny Panel and referral to Council on 10 February 2015.

10 February 2015 – Council. For approval to commence a further period of statutory consultation and beyond this the necessary delegated authority to proceed with submitting the Local Plan to the Secretary of State for independent examination.

February 2015 - Statutory consultation. A formal 6 week consultation on 'Publication' (Proposed Submission Draft) Local Plan to commence in February 2015.

May 2015 – Submission. Submission of the Local Plan to the Secretary of State.

August 2015 - Examination in Public [EIP]. Commencement of examination hearing sessions.

April 2016 – Adoption of the Local Plan by the City Council.

Health and Wellbeing Profiles and service information

The following profiles and information have informed the work of the Healthy City Steering Group, this group has driven the work on this impact assessment. The latest Carlisle Health Profile and Tobacco Profile can be found at:

<http://www.apho.org.uk/resource/view.aspx?RID=50215&SEARCH=Carlisle&SPEAR=>

<http://www.lho.org.uk/viewResource.aspx?id=18144>

The Cumbria Observatory have developed a number of health and social demographic profiles. These profiles can be found at:

<http://www.cumbriaobservatory.org.uk/health/home.asp>

This includes a link to the Joint Strategic Needs Assessment.

The Health & Wellbeing Strategy can be found at:

<http://councilportal.cumbria.gov.uk/documents/s1000009397/Master%20Final%20Draft%20HWB%20Strategy%2016th%20Oct%202012.pdf>

Policy SP 9 - Healthy and Thriving Communities

The Council will, through planning decisions and in fulfilling its wider functions, work with partners to proactively improve the health and sense of wellbeing of the district's population, and reduce health inequalities. The Council will support development of new/enhanced healthcare infrastructure and will aim to ensure that all development contributes to enhanced health and wellbeing outcomes through the following measures:

- Creating high-quality and inclusive environments that support people in making healthy choices, and that make these choices easier by encouraging development proposals to maximise the opportunity for walking and cycling , social interaction, sport and physical activity, whilst providing accessible local services, facilities and jobs, a diverse and useable integrated network of green infrastructure assets and convenient public transport facilities;
- Providing high quality design which ensures that developments consider their lifetime quality, create safe and accessible environments and minimise and mitigate against potential harm from risks such as pollution and other environmental hazards;
- Encouraging the development of decent homes that are adaptable for the life course of the occupiers, meeting Lifetime Homes Standards where possible;
- Carrying out Health Impact Assessments for significant strategic proposals and for proposals that are likely to have a significant impact on the health and wellbeing of the local population, or particular groups within it, in order to identify measures to maximise the health benefits of development and avoid any potential adverse impacts;
- Preparing for extreme weather events by creating environments and communities that are resilient to the impacts of extreme weather, ultimately caused by climate change;
- Protecting and promoting the role of community food growing spaces including allotments, community orchards and community gardens in providing social and mental health benefits and access to healthy, affordable locally produced food as part of Carlisle's role as a Food City; and
- Maximising opportunities for renewable and decentralised energy.

Justification

The impact of our environment on the health and wellbeing of the population is being increasingly recognised in health plans, strategies and policy statements and in national planning policies. Almost every decision has the potential to impact upon human health and wellbeing and Carlisle's status as a Healthy City adds additional focus to the health and wellbeing benefits that are attainable from sustainable development, in creating environments that allow people to reach their full health potential at all stages of their lives. The potential impacts of development are wide ranging and so due consideration must be given to how spatial planning, urban design, housing and regeneration can

enhance the quality of the environment and contribute to addressing the causes of ill-health, improving health and reducing health inequalities.

The District currently has some significant pockets of deprivation with over 18,000 people living in areas considered to be the most deprived in England (Carlisle Health and Wellbeing Profile 2013). It is recognised that behavioural factors are not the only influences on health. Social and economic circumstances affect how people behave and their health.

The link between planning and health has been long established. Development can affect health and health inequalities in a variety of ways, including through; the quality of housing and developments, design of neighbourhoods, density of development, mix of land uses, quality and efficient transport systems, opportunities to undertake recreation and experience leisure and cultural activities, opportunities to grow or have access to healthy food, access to green and open space facilities, air quality, noise and exposure to hazardous substances. It is therefore recognised that the Local Plan has a key part to play in addressing the health inequalities of our District in order to create better environments for people to live, work and play, as well as protecting and improving access to health services at a local level such as GP's and at a larger scale, such as the Cumberland Infirmary.

Health starts where people live, learn, work and play and so the Local Plan is important in guiding development of different uses, scale and location and striving to ensure that health and wellbeing will not be compromised as a result of new development. Efforts to improve health outcomes through the Local Plan will be maximised by the application of those policies which seek to ensure that new development takes account of access to services and facilities; enables walking and cycling; provides access to formal and informal community meeting spaces, sports facilities; reduces the fear of crime and supports the development of education and health facilities; as well as seeking to protect health through policies that ensure only appropriate developments are granted within close proximity to populated areas such as policies considering levels of pollution and hazardous substances etc. Health and wellbeing is therefore an underlying theme for consideration when assessing any application for development. It is also recognised that proposals that provide improved social, economic and environmental opportunities can address some of the existing design disadvantage in the District.

Green Infrastructure can play a key role in contributing towards the health of the district. This can include a range of usable, high quality green infrastructure assets which can be wide ranging in their role and function for the local community. This can include, for example, green spaces for play, areas for food growing, networks of semi-natural habitats which provide opportunities to interact with nature as well as peaceful and tranquil green spaces in which people can relax.

Lifetime Homes is one aspect where health and wellbeing can be improved by ensuring that homes are accessible, inclusive and incorporate design features which add to the comfort and convenience of the home and support the changing needs of individuals and families at different stages of life, their life-course. Bringing Lifetime Homes standards into the general housing stock should, over time, allow older people to stay in their own homes for longer, reduce the need for home adaptations and give greater choice to disabled people who cannot achieve independent living due to lack of suitable housing. Lifetime Homes are all about flexibility and adaptability; they are not 'special', but are thoughtfully designed to create and encourage better living environments for

everyone. The Local Plan encourages the development of Lifetime Homes, given the numbers of residents in the three oldest age bands (60-74, 75-84 and 85+) are projected to increase (Cumbria Observatory, Spring 2014) across the plan period.

The links between health, education, community and planning are also highlighted by national planning policy which acknowledges the role that the planning system can play in facilitating social interaction and creating healthy, inclusive communities. It emphasises the importance of working with health partners to understand and take account of the health status and needs of the local population, including expected future changes, and barriers to improving health and wellbeing. This policy seeks to ensure that development enhances health and wellbeing and does not have a negative effect on it by ensuring that public health partners are consulted on development proposals.

Where proposals for development are likely to have a significant impact on health and wellbeing of the local population or particular groups within it, a Health Impact Assessment will be required. The Health Impact Assessment should measure the potential health impacts of a development proposal on the wider population. It is a tool to appraise both positive (e.g. physical, social and mental wellbeing benefits from the creation of accessible open space) and negative (e.g. generation of pollution) impacts on different subgroups of the population that might result from the proposal being implemented. Health Impact Assessments (HIAs) will add value and assist decision making in the planning process by maximising the benefits and opportunities from a development to contribute towards creating healthy communities. It allows any necessary mitigation measures to be identified and can help to identify the potentially cumulatively significant effect a proposal could have on health infrastructure and/or the demand for healthcare services. The Local Plan has itself been the subject of a Health Impact Assessment. The potential need for an HIA in relation to a planning application will be raised with applicants through the pre-application process.

Good public transport, in combination with cycling and walking, can reduce air pollution, noise and greenhouse gas emissions, energy consumption and congestion, improve road safety and better protect landscapes and urban cohesion, while providing more opportunities to be physically active and socially connected with improved access to educational, recreational and job opportunities. Where there are public green spaces and forests, people can use these to walk, play, and cycle, turning physical activity into an integral part of their daily lives, improving health by reducing stress levels and noise pollution.

Demonstrating the relationship between sustainable development and health is a powerful argument to support climate change mitigation and adaptation in particular and sustainable development in general. A healthier environment can contribute to better outcomes for all. This involves valuing and enhancing our natural resources, whilst reducing harmful pollution and significantly reducing carbon emissions. By valuing our physical and social environment, we can restore our natural environment and strengthen our social assets, whilst enhancing our independence and wellbeing at both a personal and community level. By doing so, we improve the quality of care, build strong communities and generate conditions where life is valued. One example of developments reducing the impacts of climate change is through tree planting as trees absorb atmospheric pollutants and produce oxygen whilst absorbing carbon dioxide and sequestering carbon, and can also provide urban cooling through natural shading.

Carlisle District is a founding member of the Sustainable Food Cities Network which strives to create a city where good food flourishes and where we work in partnership to empower change towards a vibrant and inclusive food culture. As part of the commitment to sustainable development, sustainable food production will be promoted in consideration of its contribution to health and wellbeing, environmental sustainability, local commercial enterprise prosperity and strengthening communities. Acknowledging and acting to protect the roles of community growing spaces such as allotments, community orchards, community gardens and farmers' markets in providing access to healthy, affordable locally produced food will assist this aim.