Reuniting Health with Planning

'Making the viable business case for planning healthy communities

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www.tcpa.org.uk/developers-wellbeing

@TCPAHealth

'Reuniting Health with Planning'

OBJECTIVES

ACTIVITIES
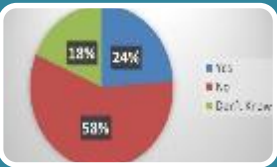
To **support** and **improve** local capacity building in planning for and improving wellbeing through the planning system.

Capacity **Building**

To **identify gaps** in current guidance, then develop and provide accessible information to practitioners.

Guidance

To further planning for health and wellbeing **research** and reviews of statutory instruments to facilitate systems integration.

Research

To **facilitate** national engagement and conversations with key stakeholder organisations.

To continue to **promote, share** and disseminate good practice around the country and to target groups.
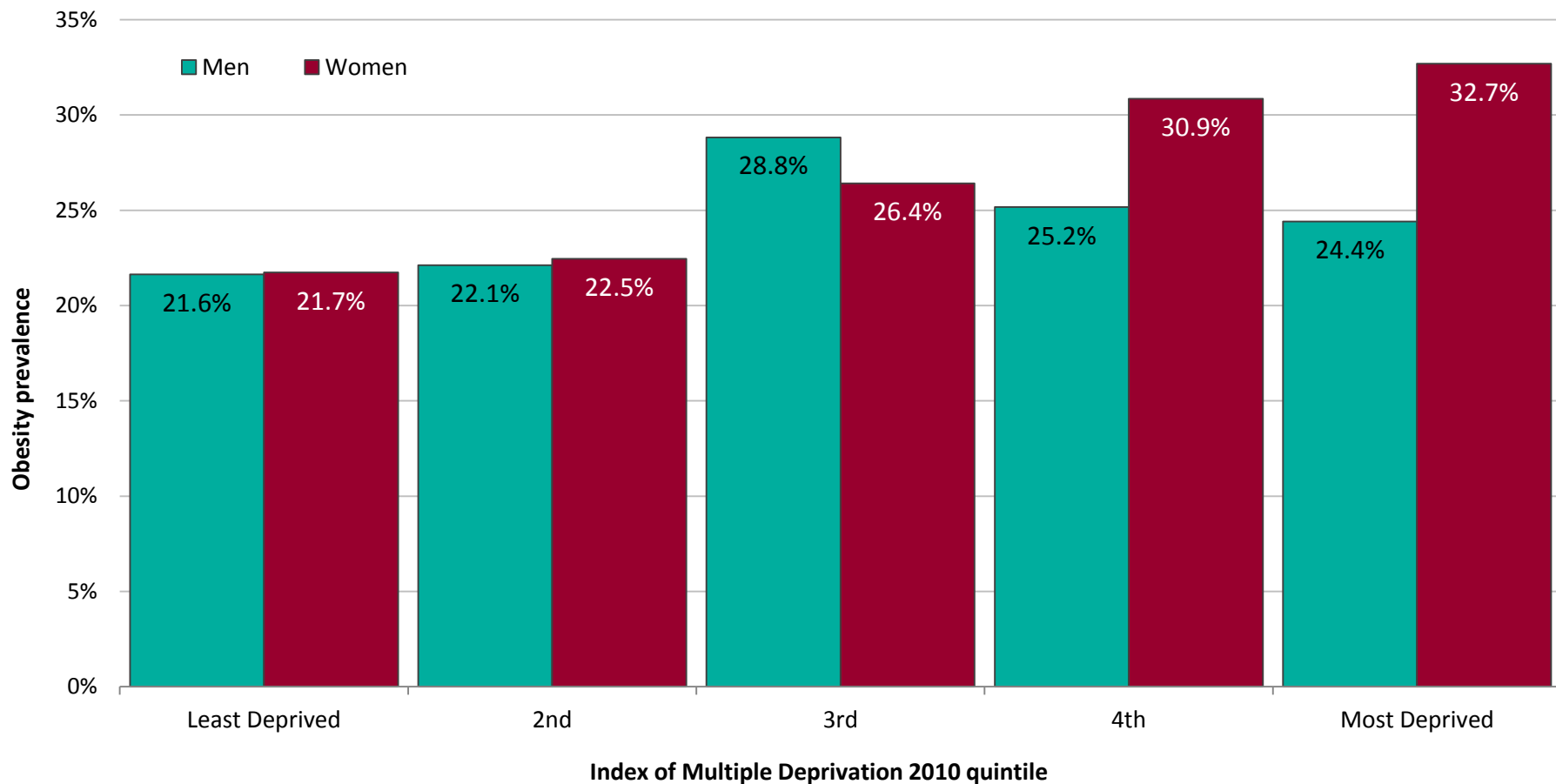
Raising **Awareness**

Adult obesity prevalence by deprivation
Health Survey for England 2014

Public Health England

Obesity prevalence (y-axis)

Legend: ■ Men ■ Women

Index of Multiple Deprivation 2010 quintile	Men	Women
Least Deprived	21.6%	21.7%
2nd	22.1%	22.5%
3rd	28.8%	26.4%
4th	25.2%	30.9%
Most Deprived	24.4%	32.7%

Index of Multiple Deprivation 2010 quintile

Adult (aged 16+) obesity: BMI ≥ 30kg/m^2
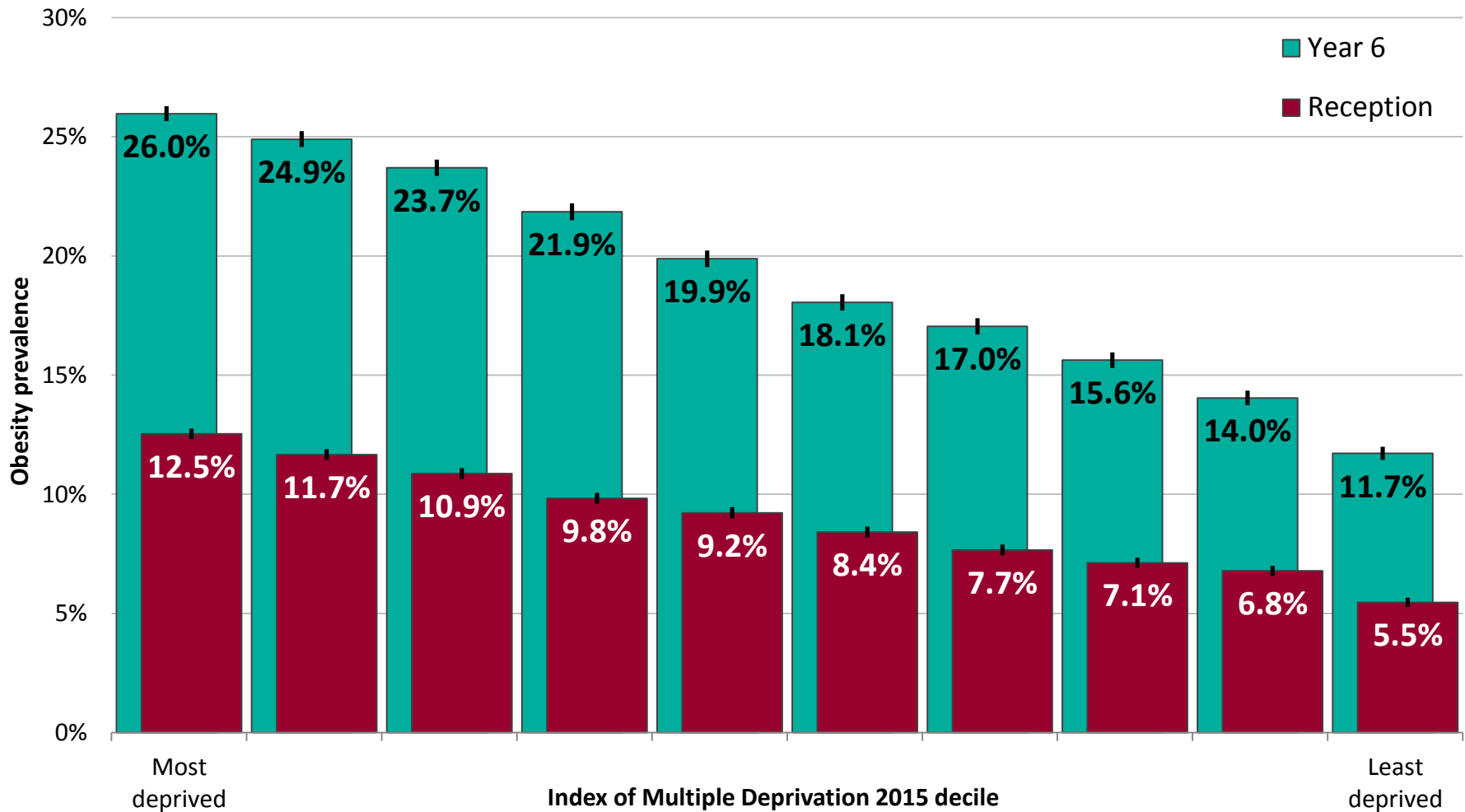
Neighbourhood Design

Quality of Evidence:

∧ Improved

∨ Reduced

▬▶ High Quality

▬▶ Medium Quality

— ▶ Low Quality

— ▶ NR (Not reported):

Methodological quality of the original research is unclear and should be treated with caution.

Greyed Out Text — Association between a health impact & health outcome not obtained as part of the umbrella review.

Best Available Evidence:

* In some instances, more than one piece of review-level evidence reporting on the same health impacts and/or outcomes was identified as part of this umbrella review. In such instances this table highlights findings of the review(s) which reported evidence of the best methodological quality.

Population Groups:

General Population

Older Adults

Children & Adolescents

Planning Principles | Modifiable Features | Impact | Health Outcomes

Enhance Neighbourhood Walkability

Increase walkability
- ∧ Social engagement among older adults · · · · ∧ Mental wellbeing
- ∧ Physical activity among older adults · · · · ∨ Risk of CVD, type 2 diabetes, stroke, mental health problems, musculoskeletal conditions and some cancers; Improved mental wellbeing

Improve infrastructure to support walking and cycling
- ∧ Physical activity · · · · ∨ Risk of CVD, type 2 diabetes, mental health problems, musculoskeletal conditions and some cancers; Improved mental wellbeing
- ∧ Mobility among older adults · · · · ∨ Risk of CVD, cancer, obesity and type 2 diabetes. Keeping the musculoskeletal system healthy. Promoting mental wellbeing
- ∨ Reduced BMI * · · · ·

Build Complete and Compact Neighbourhoods

Compact neighbourhoods
- ∧ Physical activity · · · · ∨ Risk of CVD, type 2 diabetes, stroke, mental health problems, musculoskeletal conditions and some cancers; Improved mental wellbeing

Increased access to facilities and amenities
- ∧ Mobility among older adults · · · · ∨ Risk of CVD, cancer, obesity and type 2 diabetes. Keeping the musculoskeletal system healthy. Promoting mental wellbeing
- ∧ Social participation among older adults · · · · ∧ Mental wellbeing
- ∧ Physical activity · · · · ∨ Risk of CVD, type 2 diabetes, mental health problems, musculoskeletal conditions and some cancers; Improved mental wellbeing

Enhance connectivity with safe and efficient infrastructure

Improved street connectivity
- ∧ Physical activity * · · · · ∨ Risk of CVD, type 2 diabetes, stroke, mental health problems, musculoskeletal conditions and some cancers; Improved mental wellbeing

Public realm improvements (e.g. provision of street lighting)
- ∧ Physical activity among older adults · · · · ∨ Risk of CVD, type 2 diabetes, stroke, mental health problems, musculoskeletal conditions and some cancers; Improved mental wellbeing
- ∧ Pedestrian activity · · · · ∨ Risk of CVD, type 2 diabetes, stroke, mental health problems, musculoskeletal conditions and some cancers; Improved mental wellbeing
- ∨ Road traffic collisons

A Movement and Access
- Clearly signposted and direct walking and cycling networks
- Safe and accessible networks and public realm for all
- Well-designed buildings with passive surveillance
- Walking prioritised over motor vehicles, and vehicle speed managed
- Area-wide walking and cycling infrastructure provided
- Use and monitoring of travel plans for health

B Open spaces, play and recreation
- Planned network of multi-functional green/ blue spaces to achieve multiple benefits
- Easy to get to natural green spaces of different sizes from dwellings
- Safe and easy to get to play spaces for all with passive surveillance
- Sports and leisure facilities designed and maintained for everyone to use
- Sustainable maintenance and management mechanisms

C Food environment
- Development maintains or enhances opportunities for food growing
- Provision of balanced healthy food retail uses or opportunities
- Shops and food markets sell a diverse offer of food choices and are easy to get to

D Neighbourhood spaces
- Community facilities provided early as part of new development
- Services and facilities co-located within buildings where feasible
- Healthcare premises or spaces designed to a high level of sustainability and quality
- Public spaces are attractive, easy to get to and designed for variety of uses

E Buildings
- Dwellings have adequate internal spaces for bike storage, dining and kitchen facilities
- Development includes adequate private/ semi-private outdoor space per dwelling
- Car parking spaces are minimised and car share schemes considered
- Internal design and layout promotes physical activity

F Local economy
- Development enhances vitality of local centres through providing diverse retail offers
- Centres and places of employment are easy to get to by public transport, and on walking and cycling networks
- Development provides the means for local people to be trained and to secure job opportunities

Simple project proposition

'Given limited public funds, the private sector will be asked to do more to help, by providing services or facilities to meet wider objectives, including those related to health', **so how can we encourage Developers to build 'health and wellbeing' into developments by through a carrot, not stick, approach?**

The Developer/ Housebuilder reality

"Housebuilders are not in business to serve the public interest, except incidentally. Their primary concern is to deliver profits for their investors, now and in the future... Housebuilding executives are answerable to their investors."
The Callcutt Review of housebuilding delivery, 2007

National policy requirements on viability

"To ensure viability, **the costs of any requirements** likely to be applied to development, such as requirements for affordable housing, standards, infrastructure contributions or other requirements should provide **competitive returns** to a willing land owner and willing developer to **enable the development to be deliverable**."

Paragraph 173,
National Planning Policy
Framework

What is a viable development?

Viable

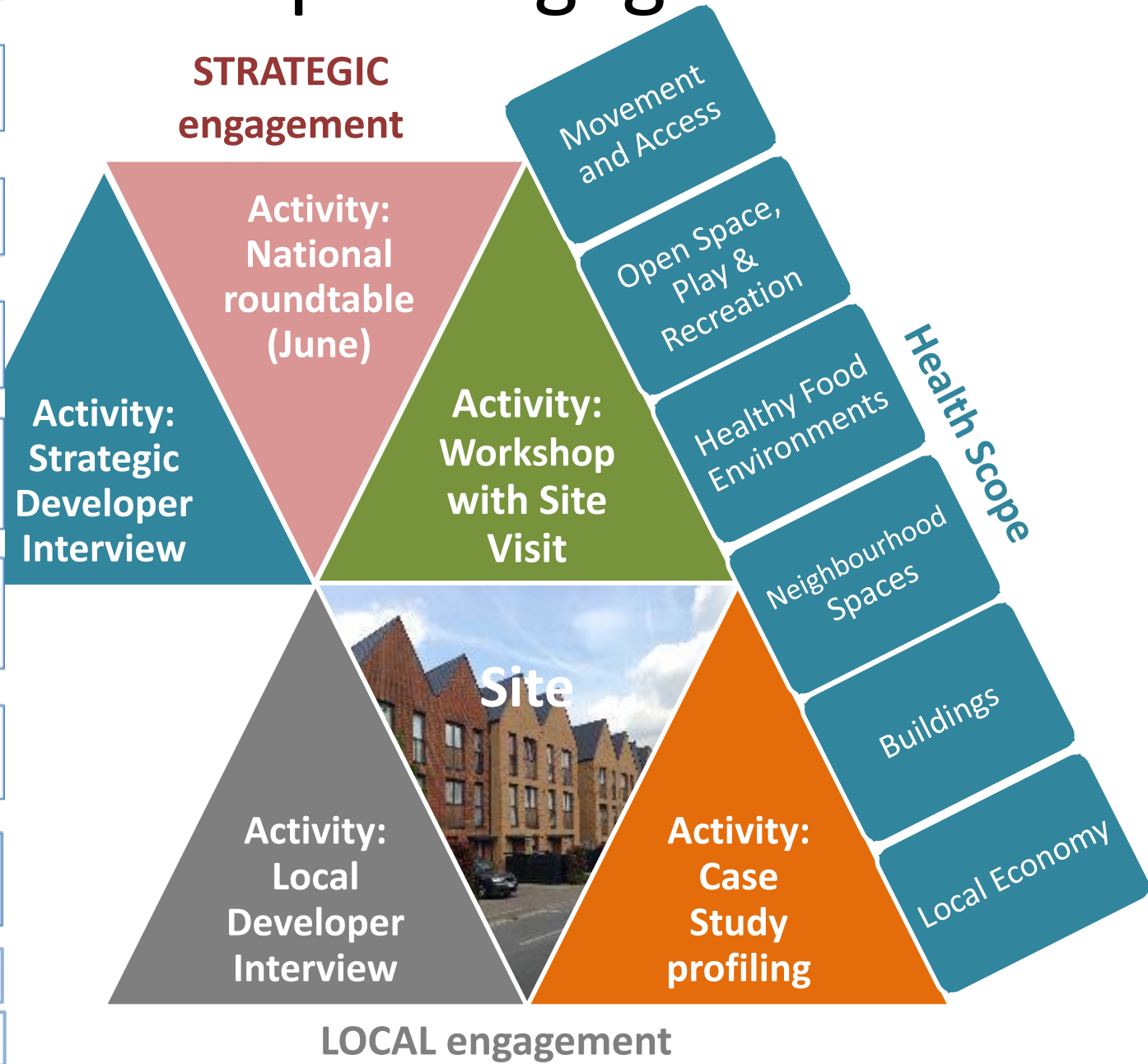| Construction Costs | Fees | Profit *(typically 20% pa)* | Policies, Section 106, CIL | Land Costs |

Can we create value from healthy developments?

Developer Engagement

Doncaster Council

London Borough of Barnet

Lincolnshire County Council

North Tyneside Council

Nottinghamshire County Council with Mansfield Council

London Borough of Southwark

Thurrock Council

Barton Park Healthy New Town

Haringey Council

Merton Council

STRATEGIC engagement

Activity: National roundtable (June)

Activity: Strategic Developer Interview

Activity: Workshop with Site Visit

Site

Activity: Local Developer Interview

Activity: Case Study profiling

LOCAL engagement

Health Scope

Movement and Access

Open Space, Play & Recreation

Healthy Food Environments

Neighbourhood Spaces

Buildings

Local Economy

(Some) business case for quality and good design

Issues	Value
The improvement in average prices realised on the well-designed scheme over the period	Increased 20–25% over 3-year build programme
In the final phase, when value of good design and place-making is very evident to prospective purchasers, shows a premium in market dwellings.	Premium of about £30,000 per market dwelling.
Resales on well-designed scheme versus other standard schemes over two to three-year period and in same postal district.	Achieved price growth of 18% compared with 3% on other standard schemes
Improved pedestrianisation, new civic square, clearer signage, better placement of street furniture.	Increased town centre footfall of 25%
Proximity to playgrounds in residential areas.	Increased land values up to 16%
A high number of street trees.	Increased land values up to 17%
Properties with a water frontage compared with those at some distance from the canal or river.	Increased average premium of 19%

BARRATT HOMES
CREATING GREAT PLACES
New design initiative to provide guidance on how to create designs which will achieve Built for Life accreditation. It includes principles such as streets for all, Public and private spaces, and facilities and services.

BERKELEY HOMES
CREATING SUCCESSFUL PLACES TOOLKIT
A toolkit to help developers apply sustainability ideas to developments with a structured approach to demonstrate the success of the places created. It is based on a set of 13 criteria including wellbeing.

REDROW HOMES
CREATING BRITAIN'S NEW COMMUNITIES
After engaging their design and planning teams in a series of placemaking workshops, Redrow established a placemaking framework aligned around 6 principles including on nature and streets.

ST MODWEN PROPERTIES
CREATING BETTER ENVIRONMENTS
As part of its corporate social responsibility approach that includes promoting biodiversity, creation of green spaces, supporting communities, and ensuring sustainable businesses

Creating Britain's new communities
2017

redrow.co.uk

REDROW

GREAT PLACES

BARRATT
DEVELOPMENTS PLC

Strategic issues to recognise (see *T&CP* article)

- Are we clear about the who pays and who benefits?

- Is there a disconnect between evidence we have and evidence we need?

- Are we designing for a healthy community or designing for healthy buyers?

- Are we preaching to already converted developers?

Emerging themes and insight

- "*Too often we intervene too late in the pathway to ill health*". Where are we in the planning and development process so that we can usefully influence design?

- "*We don't want to be tied to an inflexible approach to delivering homes*". Delivery issues (phasing, external grants, design evolution)

- "*How will we know the 'healthy development' will be effective to the population?*" Evaluation and impact

- Site and contextual constraints, opportunities and localise health issues.

- Finally what specific support would you be seeking/ expecting from the public health sector?

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