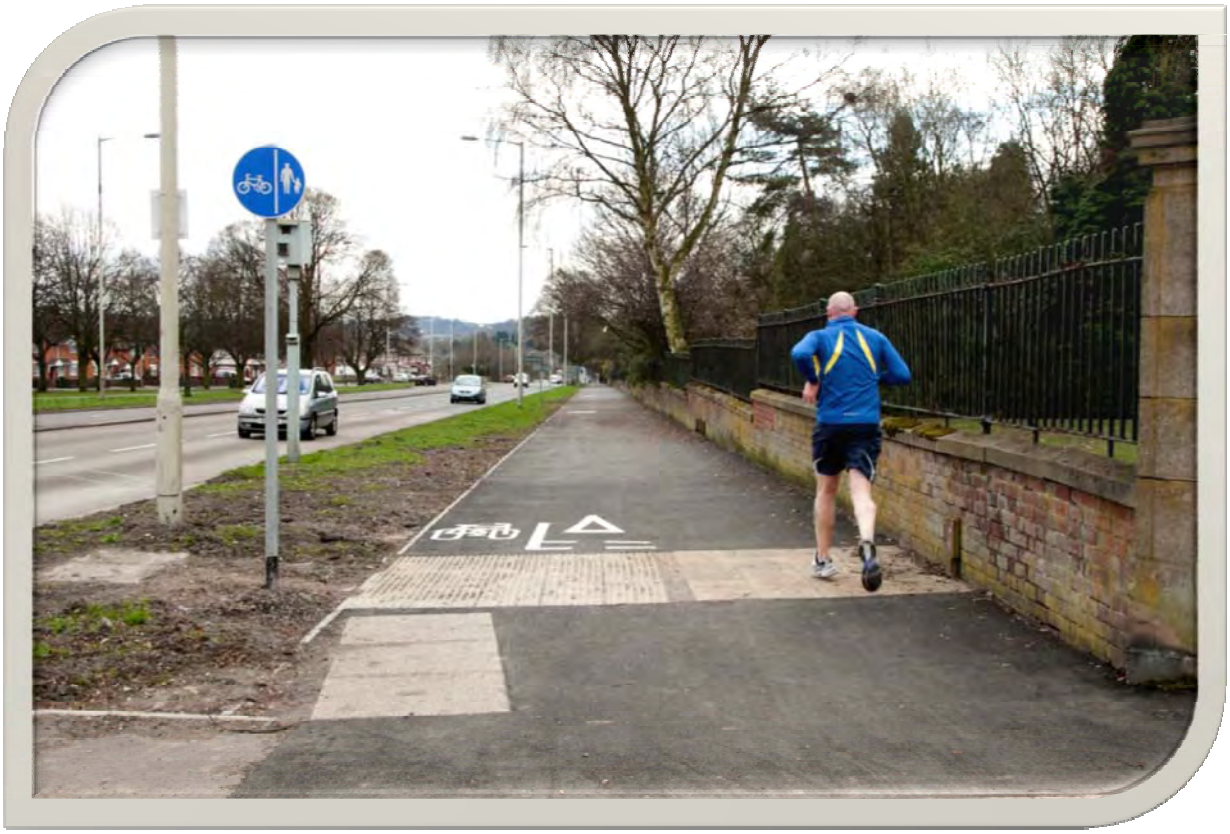
Dudley
Metropolitan Borough Council

Planning for Health

Supplementary Planning Document



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General Information

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Planning Policy Team, Directorate of the Urban Environment, 3 St James's Road, Dudley, DY1 1HZ or tel 01384 816967 or email ldf@dudley.gov.uk

Arabic

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Chinese

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Gujarati

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Planning Policy Team, Directorate of the Urban Environment, Dudley Metropolitan Borough Council, 3 St. James's Road, Dudley DY1 1HZ.
ફોનઃ 01384 816967 ઈમેઈલઃ ldf@dudley.gov.uk

Punjabi

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Urdu

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Contact Information

Rachel Gandolfi
Senior Planning Policy Officer
Directorate of the Urban Environment
Planning Policy Section
3 St. James's Road
Dudley
DY1 1HZ
Tel: 01384 816964
E-mail: Rachel.Gandolfi@dudley.gov.uk

Annette Roberts
Planning Policy Manager
Directorate of the Urban Environment
Planning Services
3 St. James's Road
Dudley
DY1 1HZ
Tel: 01384 814172
E-mail: Annette.Roberts@Dudley.gov.uk

Helen Martin
Head of Planning
Directorate of the Urban Environment
Planning Services
3 St. James's Road
Dudley
DY1 1HZ
Tel: 01384 814172
e-mail: Helen.Martin@Dudley.gov.uk

Dean Hill
Primary Prevention Services Programme Manager
(Physical Activity/Nutrition)
Public Health
St John's House
Union Street, Dudley
DY2 8PP
01384 321928
E-mail: Dean.Hill@Dudley.gov.uk

1 Introduction

Executive Summary

1.1 The purpose of this Supplementary Planning Document (SPD) is to provide supporting information and guidance for planners, developers and investors on how our environment and the planning decisions we make, impact on the health and wellbeing of the population. When adopted, the SPD will be a material consideration in determining planning applications and should be used in preparing future plans, strategies and development briefs and in making policy decisions.

1.2 Local planning policy has a crucial role to play in ensuring that the opportunities exist for people to be able to make healthier lifestyle choices and address health inequalities. There is overwhelming evidence to show that health and environment are inexorably linked and that poor environments contribute significantly to poor health and health inequalities. This SPD helps develop a way to consider health and wellbeing outcomes through the planning process by giving detailed guidance on making planning decisions. The document focuses on the following key 'themes' which highlight all the fundamental links between planning and health and sets out guidance for each:

Healthy sustainable development
Location and accessibility of healthcare and community facilities
Planning for active lifestyles
Designing for safety and wellbeing
Life stages, equality and inclusion
Over proliferation of Hot Food Takeaways

1.3 Checklist diagrams are presented in the document to aid in assessing whether a development proposal has satisfactorily taken on board the health impact and implications of the proposal.

1.4 Together with the Council's other key planning policy documents this SPD seeks to deliver the Council's aspirations set out in its strategic plans and priorities. This SPD proposes a way of considering health and wellbeing through the planning process and provides guidance to ensure that the health of Dudley Borough's population is given the paramount consideration it deserves.

Foreword

"Human needs and a healthy environment are not opposing claims that must be balanced. Instead, they are inexorably linked by chains of cause and effect". (Jared Diamond, American scientist and author)

1.5 Dudley Council has prepared this 'Planning for Health' Supplementary Planning Document (SPD) that forms part of Dudley's planning policy and it will be taken into account in making planning decisions for the Borough. The SPD contains information on how health and health inequalities can be positively impacted upon by good planning, and it will give guidance on ensuring that the health implications of any new development are considered. The document will also be strategically linked to Dudley's Health and Well being Strategy, Joint Strategic Needs Assessment, Obesity Strategy and other public health documents.

1.6 Good planning means linking economic, social and environmental matters with the strategies of public agencies and service providers in the aim of creating attractive, safe and accessible places to live. This in turn improves the quality of life and wellbeing of individuals and communities. Developing strong, healthy and vibrant communities is vital to ensuring the well-being of the Borough's population and planning therefore, has a crucial role to play in ensuring health, and health inequalities, are addressed. The health and well-being of communities must begin with the planning process and it is accepted that if communities and households have access to facilities and services, healthy food outlets, local employment opportunities, alternative transport options and well designed, open pubic space, they will be happier, healthier and more stable. Local planning policies, and the location of new developments and facilities, should enable people to have a choice of high quality and attractive places to live and allow them to reach the services they need and, for the services they need to reach them.

1.7 There has been much research and guidance formulated in recent years regarding ways of improving health and well-being through healthy spatial planning and health professionals and planners are now adopting a much more collaborative approach to facilitate actions to tackle unhealthy lifestyles and health inequalities. Formulating and implementing planning policies or introducing planning for health guidelines can allow health to be built into our environment at the earliest possible stage. This is often referred to as 'designing in health' much in the same way as we can 'design out' crime. This can be as important as investment in healthcare but whereas healthcare treats the symptoms, healthy planning can help address the causes of health inequalities and poor health.

Status of this document

1.8 The Planning for Health Supplementary Planning Document is a spatial planning document which forms part of the Local Plan for Dudley Borough. This SPD was prepared with expertise from key Council Officers, including Public Health Professionals and other Stakeholders and using comments and representations made during two periods of consultation. A period of 'Frontloading Consultation' was undertaken between 20th October – 17th November 2011, followed by a period of statutory consultation between 25th March – 17th May 2013.

1.9 The Planning for Health SPD may be downloaded from the Council's website on the following link;

http://www.dudley.gov.uk/environment-planning/planning/planning-policy/local-development-framework/health-spd/

1.10 You may also view the document via our Consultation Portal which is accessed on the following link;

http://dudley.limehouse.co.uk/portal/planning/planning_for_health_spd

1.11 Hard copies of the draft SPD are available for viewing at all main libraries in the Borough and at reception of the Council offices at the address above and at Dudley Council Plus Reception, 259 Castle Street, Dudley. The document can be made available on request in large copy print, audio cassette, Braille or languages other than English. If you require the document in one of these formats please contact:

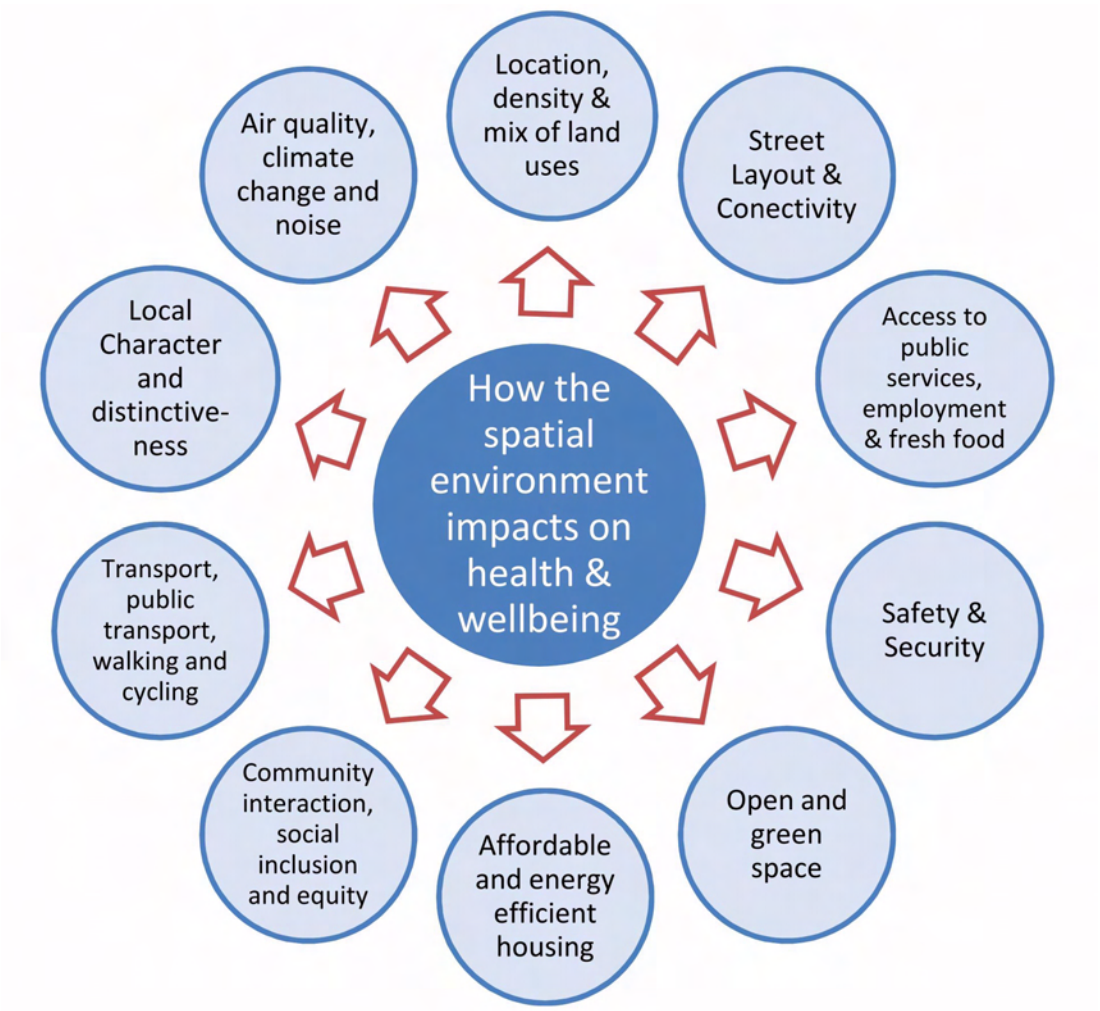
1.12 Planning Policy Team, Directorate of the Urban Environment, 4 Ednam Road, Dudley, DY1 1HL or telephone 01384 816964 or email ldf@dudley.gov.uk

How this guidance should be used

1.13 This SPD should be used in preparing future plans, strategies or development briefs, in making policy decisions and as a material consideration when determining planning applications. The SPD sets out the areas where planning influences health outcomes in the form of themes and presents a list of recommendations for each theme. Checklist diagrams are presented in chapters 4 and 5 which should be used to assess whether a planning application has satisfactorily taken on board the health impact and implications of the proposal.

1.14 This SPD sets the basis for discussions at a pre-application stage to ensure that health is an early consideration in the planning process. Additionally, the guidance should give input into larger regeneration projects and masterplans and is intended to be used by both planners and developers/investors.

1.15 This document is strategic and considers all aspects of how the built and natural environment impacts on our health and wellbeing as set out in the following diagram.



Purpose of this SPD

1.16 The purpose of this SPD is;

- To offer guidance for addressing the affect of the built and natural environment on health as part of a strategic approach to tackling the Borough's health inequalities and promoting healthy lifestyle options.
- To present the social aspects of planning and demonstrate concisely how social, environmental and economic conditions influence health and health inequalities.
- To clarify the importance of accessibility, its role in creating healthy, sustainable communities and how it helps impart better quality of life.

- To provide supporting information and guidance on planning for health for decision-makers and developers in line with that which is set out in the emerging Development Strategy for Dudley Borough.

- To be an important material consideration in the determination of planning applications by providing checklists against which to assess development proposals.

- To impose distance restrictions on the creation of new take-aways in proximity to schools and youth amenities and to reduce the clustering and over proliferation of hot food take-aways across the Borough.

- To explore the possibility of seeking developer contributions via the most appropriate means from any new take-aways towards initiatives to tackle obesity and encouraging hot food takeaway owners to improve the nutritional value of the food they sell.

What this document is *not*

1.17 It is important to understand that this document is not intended to improve NHS service delivery; it will not set out new policies for health, nor will it provide allocations for new health facilities. However, the document will underpin and add value to the work of all health services in Dudley Borough, in particular public health, by presenting the approaches which can be taken to improve the impact that the built development has on health. No document has the power to prevent people from making unhealthy lifestyle choices but this SPD will raise awareness and recommend how opportunities to make healthier choices can be facilitated through spatial planning and planning decisions. It will also encourage a state of mental and physical wellbeing by considerations for enhancements and changes to the built and natural environment and promote the use of Health Impact Assessments (HIAs).

Document Structure

1.18 This SPD begins by setting out the document's position within the planning framework and how it links to the wider health agenda. Chapter 3 documents the strategic links between planning and health and highlights the inequalities in health which currently exist in Dudley Borough. The subsequent brief discussion on the social determinants of health gives more understanding to how health inequalities arise and offers a holistic view on the impact of spatial planning on health. The document then focuses on five main themes which embody the strategic links between planning and health;

- Healthy sustainable development
- Location and accessibility of healthcare and community facilities
- Planning for active lifestyles
- Designing for safety and wellbeing
- Life stages, equality and inclusion

1.19 Each theme is discussed in light of their wider principles and translated into guidance for planners and developers on how each aspiration can be achieved or implemented. Reference should be made to the checklists at the end of this chapter to be used when preparing and assessing planning applications for certain types of land use. Chapter 4 also includes a section referencing allotments and food growing spaces. In the same vein as the main themes, the wider principles of food growing spaces are discussed and then recommendations and considerations for action are given.

1.20 Chapter 5 focuses on hot food takeaways. The UK's obesity epidemic has attracted considerable policy attention in recent years and the Government's recent publications set out wide-ranging plans to improve the nation's health calling for the NHS, local authorities, schools and workplaces to deliver joined up action to make healthier lifestyles easier to attain. This chapter highlights the issues associated with hot food takeaways and the spatial planning considerations for action which need to be adopted to tackle these issues. The chapter discusses the reasoning and justification for introducing an exclusionary zone around the Borough's schools and includes guidance on controlling the numbers and proliferation of takeaways across the Borough. As with the previous chapter, a checklist is included here for use when assessing applications for new hot food takeaways.

Figure 1 Leasowes Park, Halesowen

2 Planning and Public Health Context

National Planning Policy Framework

2.1 In 2012 all national Planning Policy Statements, Guidance and Circulars were consolidated into a succinct National Planning Policy Framework (NPPF). Chapter 8 in the NPPF sets out national planning guidance for Local Authorities on promoting healthy communities. The focus lies in ensuring that local communities are engaged in the planning process and that the mechanisms are put in place to encourage people to choose healthier lifestyle options. The NPPF recognises the importance of accessibility for all and acknowledges how changes to our built and natural environment can significantly affect our health and well-being.

Black Country Core Strategy

2.2 The Core Strategy is a spatial planning document that sets out the vision, objectives and strategy for future development in the Black Country to 2026. It forms the basis of Black Country Authorities' Local Plans, replacing certain policies in Dudley's Unitary Development Plan, 2005 (UDP), setting the planning policy context for the preparation of other local development documents and supplementary planning documents. As well as providing the basis for decisions on planning applications, the Core Strategy will also shape regeneration, investment, and growth within the Borough. The Core Strategy was adopted in February 2011.

2.3 The Council has a formal 'Duty to Co-operate' with neighbouring Authorities which is important when considering planning for health. For instance, community and health facilities, sports centres and open spaces will be all used by people outside the Borough as people don't recognise boundaries when using such services and facilities. Therefore, accessibility across a wider geographical area should be considered for these types of facilities.

2.4 The principle of incorporating health within planning for the future is embedded throughout the Core Strategy, for instance;

Vision

2.5 The vision for the Core Strategy focuses strongly on creating Sustainable Communities with the desire to "create a network of cohesive, healthy and prosperous communities across the Black Country…..regeneration should aim to promote and facilitate healthy living and create environments which offer opportunities for active lifestyles and health choices, including provision for walking, cycling and outdoor recreation within the urban fabric of the Black Country".

Spatial Objectives

2.6 To ensure that the vision becomes a reality and is fully consistent with the sustainability principles, 10 Spatial Objectives have been developed which The Core Strategy aims to have delivered by 2026. Spatial Objective 8 intends to deliver "*A sustainable network of community services, particularly high quality lifelong learning, health care and sport and recreation facilities, which are easily accessible to all residents at a neighbourhood level, resulting in an increase in levels of qualifications, skills, health and well-being, a decrease in deprivation indicators and improved perception of residential neighbourhoods across the Black Country*."

Policy HOU2 Housing Density, Type and Accessibility

2.7 Policy HOU2 sets out how the creation of a network of cohesive, healthy communities across the Black Country can be partly achieved by ensuring a range of housing types, tenures and densities.

Policy HOU5 Education and Health Care Facilities

2.8 Policy HOU5 explains how poor health, low sports participation and low educational attainment are key issues for the Black Country and that it is important that investment, including contributions from development is focused to support centres, address accessibility gaps, generate service improvements and secure community benefits.

Policy TRAN4 Creating Coherent Networks for Cycle and for Walking

2.9 It is essential that the development of walking and cycling facilities are an integral part of the transport system. Policy TRAN4 aims to ensure that improvements are made to the health and well-being of local communities by reducing the incidence of obesity, coronary heart disease, strokes and diabetes by improving and facilitating these alternative forms of transport.

Policy ENV6 Open Space, Sport and Recreation

2.10 Publicly accessible urban open space, play and sports facilities all have a vital role to play in helping to promote more healthy lifestyles. Recent audits and needs assessments have shown that communities greatly value local open spaces, however quantity and accessibility for each type of open space and facility varies considerably from area to area, and increasing population in particular areas over the Plan period may further affect these imbalances. Policy ENV6 aims to improve and enhance the natural and built environment and create better access to areas and facilities for sport and recreation.

2.11 Appendix 2 in the Core Strategy sets out broad, strategic open space, sport and recreation proposals for each Regeneration Corridor and Strategic Centre. These proposals aim to address existing deficiencies against existing local standards and meet the needs of new development.

Development Strategy DPD

2.12 The emerging Development Strategy DPD, will identify potential sites for the provision and/or expansion of healthcare facilities, sports facilities, housing and other development that assists health in the Borough and will include guidance on protection of existing facilities. Accessibility of such facilities will be mapped in the DPD in order to assist the Clinical Commissioning Groups to identify any gaps in provision in the Borough and plan accordingly. The DPD will feature the policies upon which the themes in this document are based, giving certainty on what will be appropriate/ permitted and how the impact of development upon health has to be considered as part of a development proposal. The DPD is set for adoption in 2015.

Dudley Community Strategy

2.13 This SPD has been developed in the context of the Dudley Borough Community Strategy and will make a positive contribution to meeting the 6 key themes;

- Jobs and prosperity
- Health and wellbeing
- Heritage, culture and leisure
- Environment and housing
- Individual and community learning
- Community Safety

2.14 The SPD has been produced in consultation with a wide range of partners, both within the Council and externally. Meetings and discussions have been held to provide the opportunity to tap into knowledge and skills from a variety of areas.

2.15 The SPD also conforms with the Dudley Health and Wellbeing Strategy and adds value to the 'Food for Health' Action Plan, 'Tackling Obesity – A Health Needs Assessment for Dudley' and also builds on and develops the learning from the healthy towns national pilot.

Joint Strategic Needs Assessment

2.16 A JSNA will include information on both the needs and the assets in the area, and support commissioning strategies that actively seek to promote health assets as well as meet needs. This framework makes local government

particularly well placed to think differently about health and wellbeing goals and to engage with individuals, families and communities about what makes them healthy and gives them wellbeing.

2.17 The JSNA's process aims to provide a comprehensive picture of the current and future health and wellbeing needs of the population and inform commissioning of health, wellbeing and social care services to achieve better outcomes for people and reduce health inequalities. Dudley has a continuing programme of developing JSNAs and is looking to the approach of balancing 'needs and deficits' with a community 'assets and strengths' methodology (see paragraph 3.3 Social Capital) which includes valuing the capacity, skills, knowledge, connections and potential in communities. All information relating to the JSNA for Dudley can be found on the following link: http://www.dudleylsp.org/jsna

2.18 The JSNA is an opportunity to strengthen the process of spatial planning through partnership working, community engagement, evidence sharing and co-ordination. If planning professionals can fully appreciate the determinants of health and wellbeing and their links to spatial planning, they will be able to consider how the data presented in the JSNA can help to 'health-proof' policies and development proposals. Similarly, health professionals responsible for the JSNA can consider developing shared local data including tailoring data to meet specific needs and local priorities.

2.19 The production of an annual JSNA has been a statutory duty placed on the Directors of Public Health, Children's Services and Adult Services since 2007. The Health and Social Care Bill 2011 (which came in to force in April 2013) places an equal obligation on Local Authorities and Clinical Commissioning Groups (CCGs) to prepare a JSNA, and to develop a Joint Health & Wellbeing Strategy (JHWS) for meeting the local needs identified in the JSNA.

Dudley Health and Wellbeing Strategy

2.20 The Health and Social Care Bill 2011 proposes powerful local mechanisms that can take the lead in the positive health agenda. Health and wellbeing boards (HWBB) are an important feature of the NHS reforms and are key to promoting greater integration of health and local government services. The HWBB will be able to bring together all parts of the public and voluntary sector who together can act on the social, economic and environmental conditions that make us ill and the key factors determining health inequality.

2.21 Each Local Authority HWBB will produce a Joint Health and Wellbeing Strategy (JHWS) that will articulate how the wider influences on health such as housing, planning, environment, as well as health assets such as social

networks and resilient communities, can be mobilised to improve wellbeing. There are three important considerations that have been recognised in preparing Dudley's JHWS. These are:

1. Health and Wellbeing are not separate concepts – Health is a very important part of wellbeing;
2. The importance of 'family' – which draws attention to the 'life course' approach (See chapter 3). In this context, early intervention will be important in tackling inequalities across the generations.
3. The importance of capturing subjective and practical information from a range of communities and individuals to balance the issues arising from analysing 'objective' data and statistics.

2.22 Information on how the Dudley Health and Well being Board prepared this Strategy and the current documentation can be viewed on the following link:

http://www.dudley.gov.uk/community/initiatives/health-wellbeing/

Health Impact Assessment

2.23 A Health Impact Assessment (HIA) is a tool that enables Health and Wellbeing Boards and Local Planning Authorities to assess what impact a particular change of policy or new development, service or strategy will have on the health of the local population. HIAs are valuable in that they can bring a public health perspective to decision-making areas that are not always viewed as being within the remit of public health.

2.24 Undertaking an HIA produces information on how negative impacts on health can be reduced and positive health gains can be encouraged. The HIA can also contribute to the reduction of health inequalities by identifying the different groups which will experience health gains or losses from proposals or plans. It is rare that any public policy, strategy or significant development proposal will not affect health in some way and to fully understand the consequences on health and how to mitigate for them, an HIA is necessary.

2.25 An HIA can form part of a wider Impact Assessment rather than as a stand-alone process. HIAs are usually undertaken by a team of public health professionals, working with a range of stakeholders, or they may be undertaken by a Consultant working for the applicant in relation to Planning Applications. An HIA would only be considered necessary as part of significant planning applications. It is important to note however, that there are different levels of HIA, for instance, a desktop rapid HIA has much lower resource, time and cost implications and would be suitable for smaller scale policy or developments. A good example of this is the London Healthy Urban Development Unit (HUDU) 'Watch out for Health'.

http://www.healthyurbandevelopment.nhs.uk/documents/integrating_health/HUDU_Watch_Out_For_Health.pdf

2.26 The JSNA is a key resource for undertaking an HIA as it provides the necessary qualitative and quantitative data. The JSNA also provides direction on the local health priorities in the form of current and future health needs. For more information on Heath Impact Assessments, please view the following link:

http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_072882

2.27 Similarly, this document is part of a suite of guidance prepared under the Core Strategy for the Black Country which was subject to a full and detailed Strategic Environmental Assessment (SEA). Significant planning applications will also as a matter of course, be screened under the Environmental Impact Assessment regulations and any impacts for health will usually be highlighted in this procedure.

3 Strategic Links between Planning and Health

3.1 By 'health' we understand that to be to definition given by the World Health Organisation (WHO);

'Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity'.

3.2 Town planning as we know it today, arose as a mechanism for dealing with ill-health and poor sanitary conditions in the nineteenth century. Since then, planning has become less explicitly integrated to health until more recently whereby concerns about obesity, lack of physical activity and environmental inequalities have reignited the inherent link between town planning and health. It is now being recognised that the way in which we develop our built environment and live in our communities has a profound effect on our physical and mental health.

Figure 2. The Waterfront, Brierley Hill

3.3 The principles of ensuring we have improved health outcomes arising from positive planning practises are becoming well documented but are often diverse. Local planning policies and planning decisions have a crucial role to play in ensuring the opportunities exist for people to make healthier lifestyle choices and also so that health inequalities can be addressed. It must be recognised that there is an intricate relationship between social conditions, the lifestyles we lead, our genetic makeup and the services available to treat any illnesses which may arise. Where lifestyles are different and there is disparity in mental well-being, in the uptake of certain preventatives services and access to healthcare, inequalities in health within the local population arise.

The Marmot Review

3.4 In November 2008, Professor Sir Michael Marmot was commissioned by the Secretary of State for Health to undertake an independent review to address the social determinants of health and to propose the most effective evidence based strategies for reducing health inequalities in England. Following the publication of the report Fair Society: Healthy Lives in 2010, which set out six areas for policy interventions, a further review of the links between spatial planning and health was carried out. This report presented to the National

Institute of Clinical Excellence (NICE) demonstrated overwhelmingly that health and environmental inequalities are unavoidably linked and that poor environments contribute significantly to poor health and health inequalities. The evidence presented in the Marmot Review identified action required across three areas: improving daily living conditions; tackling the inequitable distribution of power, money and resources; and measuring and understanding the problem of health and inequality and the impact of actions on it.

3.5 Marmot proposed a number of Objectives and Objective E 'Healthy Communities and Places' includes the importance of evidence based community development and of community involvement in planning / managing their environment, an aspiration which is reiterated within the National Planning Policy Framework.

3.6 The Spatial Planning and Health Group (SPAHG) published 12 Action Points (Appendix 2) taken from the evidence of the report to provide guidance for planning and health professionals. If these actions are followed Marmot predicts that there will be a better and more sustainable environment for the future, more efficient use of resources (including professionals time and expertise), and a real opportunity to make a difference for those with poorest health. It is upon the findings of the Marmot Review and the subsequent action points that we have based our recommendations and considerations for action in Dudley Borough presented within this SPD.

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Determinants of Health

3.8 Focusing on the social determinants of health the Marmot review presented clear evidence that:

- The conditions in which people are born, grow, live, work and age are responsible for health inequalities
- Early childhood in particular impacts on health and disadvantage throughout life
- The cumulative effects of hazards and disadvantage throughout life produce a finely graded social patterning of disease and ill-health

- Negative health outcomes are linked to the stress people experience and the levels of control people have over their lives and this stress and control is socially graded
- Mental wellbeing has a profound role in shaping physical health and contributing to life chances, as well as being important to individuals and as a societal measure.

3.9 However, the links between health and the circumstances of people's lives can be indirect and making change is not a simple task. 'The Health Map' a concept devised by Whitehead and Dahlgren goes some way to aid in understanding these strategic links (a further model of the Health Map was devised in 2006 by Barton and Grant based on the 1991 version). The Health Map sets out the interactions and influences affecting health and well-being. People are at the heart of the map, reflecting the stationary parts of people's lives and the lifestyle choices people make which can affect their health. Human settlement is reflected in the surrounding social, economic and environmental spheres, which are themselves impacted by cultural, economic and political influences, and it is set within the global system upon which life ultimately depends. The centre is unchangeable but the surrounding layers of influence are factors that can be altered.

3.10 The map has been designed as a dynamic tool that provides a basis for discussions between spatial planners, health professionals, ecologists, urban designers and other service providers to ensure that awareness on what affects health and well-being is acknowledged amongst these professions.

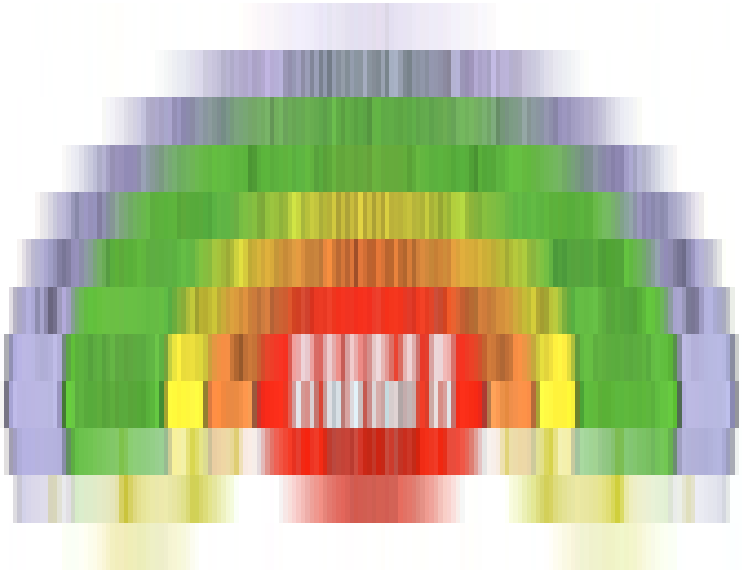


Figure 3. Source: Whitehead M. & Dahlgren G. What can we do about inequalities in health? Lancet, 1991, 338: 1059-1063.

3.11 The importance of the Health Map is that it can be used to analyse the knock-on effects which are indirect but also significant in terms of health. In this way, the model can help distinguish processes and contribute to sustainability and Health Impact Assessments. The diagram helps us to see the factors affecting health but it also adds the dimension of health inequalities. The social determinants of health are the conditions in which people are born, grow, live, work and age, including the health system. These circumstances are shaped by the distribution of money, power and resources at global, national and local levels. As noted by Marmot, it is these social determinants of health which are mostly responsible for health inequalities.

3.12 Health inequalities are most often observed along a social gradient. Put simply, this means that the more favourable your social circumstances, the better your chance of enjoying good health and a longer life. People in lower socio-economic groups are more likely to experience chronic ill-health and die earlier than those who are more advantaged. Health inequalities are not only apparent between people of different socio-economic groups but also they exist between different genders and different ethnic groups. Health inequalities are preventable and unjust differences in health status and because they result from the social, environmental and economic determinants of health, action needs to be taken on these aspects.

Social Capital

3.13 The evidence from numerous reviews of health inequalities including Marmot and the World Health Organisation (WHO) highlights that social inequalities underpin health inequalities. Actions to tackle health inequalities need to be deep-seated and co-ordinated across the whole system if they are to be successful. Broad action by all partners to engage individuals and communities is essential and the solutions may partly rely on the ability of professionals to recognise that individuals, communities and populations have the potential to be a 'health resource' rather than just a consumer of health care services. This health resource is now more commonly referred to as 'social capital'. While definitions of social capital vary, there is a broad understanding that social capital encompasses the role of informal and formal networks, group membership, trust and community engagement. Levels of social capital are shaped by the ability of communities to have a voice and participate in and influence decision-making.

3.14 There is growing evidence of the interconnectedness of health and social capital highlighting that people with stronger social networks are healthier and happier. Participation in activity which improves overall life skills also improves self-confidence and self-esteem. Increased social contact and social support reduces potential isolation which has a very positive effect on mental health. Spatial planning has an imperative role in this by facilitating environments which are conducive to supporting social interaction.

Dudley Borough Context

3.15 In order to present the best recommendations for local healthy planning, it is necessary to understand some of the social, economic and environmental characteristics of the Boroug

3.16 Dudley is a large Metropolitan Borough Council (38 square miles), located to the west of the West Midlands conurbation. Despite its predominantly urban character, an estimated 25% of the Borough consists of open space, including approx 1700 hectares of Green Belt, which contribute to its environmental quality and attractiveness. However, not all this open space is accessible, nor do a large percentage of the population use it for formal or informal recreation.

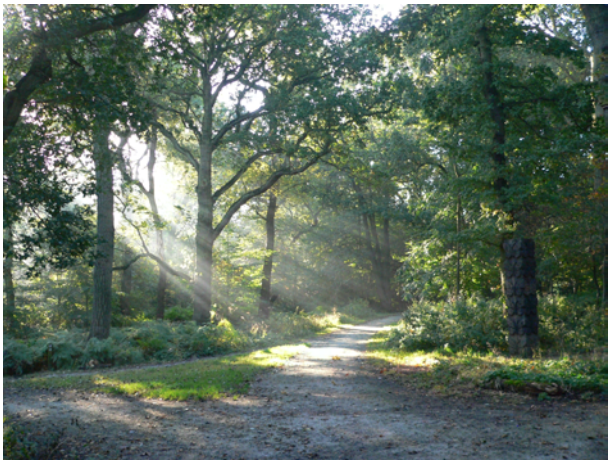


Figure 5. Saltwells Local Nature Reserve, Dudley Borough

3.17 The resident population of Dudley Borough is estimated by the Office of National Statistics 2011 Census to be 312,925. The age profile in the Borough is markedly different between the more affluent wards around the periphery of the Borough where over 25% of the population are over 60 and the more deprived central areas of the Borough where more than 60% are under 45. Dudley Borough, like many areas in the UK, has experienced an increase in ageing population for example, people aged 85+ has increased from 5,200 in 2001 to 6,700 in 2010 (Mid-Year Population Estimates, ONS). This is pertinent when considering accessibility to healthcare services and for addressing health inequalities.

3.18 Analysis of a number of factors such as income, employment, health, education, housing, living environment and crime can provide valuable insights into our communities. This is often referred to as 'The index of multiple deprivation'. When this information is plotted against particular small-scale areas (referred to as Lower Super Output Areas), it becomes apparent that Dudley Borough possesses some areas which are amongst the most deprived in the UK. At the opposite end of the scale, Dudley Borough also possesses a number of areas which are amongst the least deprived nationally. This information shows that there are pockets of deprivation that exist particularly within the more affluent areas thereby augmenting the inequalities in health.

3.19 Regarding employment and earnings, average median gross earnings per year of full time employees in Dudley Borough was £5,211 below the national average in 2010. The percentage of residence-based working age population claiming job seekers allowance in Dudley Borough has increased between July 2010 and July 2011 from 4.9% to 5.1%. This is lower than both the Black Country and the West Midlands which are both 6.3%.

3.20 Where figures relate to the positive perception of health, 65.8% of residents in Dudley Borough perceived their health as 'good'. However, one individual's perception of health varies greatly compared to another individual and however different people describe health, there is a universal understanding that all individuals should have an equal opportunity for good health.

3.21 The percentage of children in reception year who are obese in Dudley Borough is 10.2%, which is higher than the national average. The National Child Measurement Programme provides data on the prevalence of overweight and obesity in pupils and it was noted that there is a social gradient for obesity in both reception and year 6 pupils in Dudley Borough schools. As with children, there is a social gradient for obesity in adults across the Borough with the most deprived areas associated with higher levels of obesity amongst residents.

3.22 Although, it is clear that certain areas in the Borough perform poorly in health terms in relation to other areas within England, in recent years, there has been some improvement albeit, the improvement is unbalanced. Health outcomes in Dudley Borough are socially patterned and the differentials are stark. As Marmot illustrated, this can be explained by the social conditions that people face and the life opportunities that they are afforded. These social conditions although entrenched, are not irrevocable but action needs to be taken now. For more detailed breakdown on the health inequalities in Dudley Borough and the recommendations for action, please view 'Unequal Dudley: A Source Book on Health Inequalities in Dudley' on the following link;

Figure 5. Silver Jubilee Park, Coseley

http://issuu.com/curiousecho/docs/unequal_dudley_web?mode=window&backgroundColor=%23222222

4 Planning for Health Themes and Guidance

4.1 This chapter focuses on the themes which represent the strategic links between spatial planning and health and gives guidance on where planning can facilitate an improvement in health and well being. The checklist diagrams at the end of this chapter should be used in assessing planning applications, specifically for residential and town centre uses (A separate checklist is presented for planning use class A5 (Hot Food Takeaways) proposals in the subsequent chapter and proposals for all other types of development should refer to the generic checklist for all proposals). The purpose of the checklist is that they can be used as a quick reference to ensure that the impact on health of any particular development proposal has been considered.

Healthy Sustainable Development

4.2 Human health and sustainable development are inextricably linked and action at the local level is especially important in achieving healthy, sustainable development. Sustainable development encompasses environmental and economic sustenance and socio-demographic dimensions including health. The common definition of sustainable development is “development that meets the needs of the present without compromising the ability of future generations to meet their own needs”.

4.3 Sustainable development is a much broader concept than environmental protection. From the definition, it implies a concern for future generations and for the long-term health and maintenance of the environment. It embraces concern for the quality of life (not just income growth), for equity between people in the present (including prevention of poverty), for equity and inclusion for all (people in the future deserve an environment which is at least as good as the one we currently enjoy, if not better) and for the social and ethical dimensions of human wellbeing. It also implies that further development should only take place as long as it does not adversely affect these components.

4.4 Health is also an important stimulus to other aspects of development. For instance, healthy people are more productive economically, which increases the economic growth rate of towns and cities; investing in health is thus one means of accelerating development. More importantly, good health is a goal in itself. The enjoyment of the highest attainable level of health is one of the fundamental rights of every human being regardless of whom you are and where you live.

4.5 In the pursuit of healthy sustainable development, the Council will seek to follow the fundamental principles of sustainable development, promoting and protecting the Borough’s green infrastructure provision, and that the benefits of new development are enjoyed by all sections of the community to ensure equality of opportunity for all.

Figure 6. Russells Hall Extra Care Housing, Dudley

Healthy Sustainable Development
Guidance in Strategic Planning Decisions:

- Ensure that large scale residential development is located where residents have access to a range of community facilities and public services and locate community facilities on sites which are well-located for walking, cycling and public transport.
- Design neighbourhoods with a mix of housing types and tenures, and provide accommodation which is adaptable to cater for changing needs of a local community, including the ageing population.
- Ensure that new employment development is located in accessible sites and encourage walking and cycling routes to be incorporated within development to encourage active travel to work
- Encourage opportunities for access to fresh food, for example through the retention and provision of allotments, local markets, and usable private amenity spaces
- Maximise opportunities for sustainable transport modes and aim to reduce carbon emissions through the location, siting and design of new developments.
- Encourage Travel Plans to be adopted in businesses and schools to enable integration between employment and residential land-uses within mixed-use developments and encourage the creation and use of electric vehicle charging points where appropriate.
- Ensure that all development proposals give due consideration to green and open space, links to green networks and the enhancement of biodiversity.
- Encourage clean and green industries and the use of renewable energy sources.

4.6 Reference should be made to the Checklists at the end of this Chapter for assessing planning applications in light of the above recommendations.

Location and Accessibility of Healthcare and Community Facilities

4.7 Health is more than just the absence of disease, it is a positive holistic concept which refers to the quality of life which, in turn, includes social care and community development. Community facilities, including places of worship, play an increasingly important but often undervalued role in providing for the well-being of the community and facilitating social contact.

4.8 The Government is determined to address social exclusion in working towards fairer societies in which everyone regardless of race, creed, disability or economic status have the chance, and the right, to be included. In order to achieve this, equality of opportunity must be integrated into spatial planning to reduce the gap between the enfranchised and disenfranchised, the socially included and the socially excluded segments of our community. People can be excluded, or feel that they are excluded, for a variety of reasons, some of which include disability, age, gender, race, religious belief, sexual orientation or where they live and it is imperative in addressing social inequalities that these people are given adequate opportunities to access services that are important for their physical health, mental health and general well-being.

Figure 7. Sycamore Adventure Centre, Dudley

4.9 Accessibility to health care and community facilities must be addressed in terms of location and also in terms of physical access, that is, the ability and opportunity afforded to people to access these services. As mentioned previously, like much of the UK, Dudley Borough is experiencing an increasingly ageing population. For instance, people aged 85+ has increased from 5,200 2001 to 6,700 in 2010 (Mid Year Population Estimates, ONS). As car ownership levels decease with older age, a large percentage of our aging population rely on living within close proximity to healthcare services or at least to have regular, reliable access to such facilities. Similarly, car ownership levels are found to be low for younger families or young people either in lower income groups and for the unemployed. It is therefore

imperative to locate new residential development in proximity to healthcare and community services or to create new facilities to serve the new development.

Location and Accessibility of Healthcare and Community Facilities Guidance in Planning Decisions:

- Ensure that people are given adequate opportunities to access services that are important for their physical health, mental health and general well-being.
- Accessibility to health care and community facilities must be addressed in terms of location and also in terms of physical access
- Developments which are large generators of demand should be appropriately located to serve the local community. Additionally, developments involving a significant number of residential properties may be required to provide additional facilities and undertake an HIA
- The retention and provision of community facilities, including places of worship, recreational centres, social centres, community halls and cultural facilities should be supported and encouraged
- Proposals involving the loss of a health care or any community facility should only be permitted where adequate alternative provision is available to meet the demands of the community served by the facility.

Planning for Active Lifestyles

4.10 Providing appropriate quality, quantity and variety of open space, including open green space, allotments, community gyms, leisure and recreation facilities is imperative to achieving better health and well-being for the population. As well as encouraging physical activity, access to open space, sports and other recreation facilities promotes relaxation and reduction in stress for those living nearby, and can also bring about social interaction within communities, including for those people who may feel 'excluded' for particular reasons.

Figure 8. Outdoor Gym, Silver Jubilee Park

4.11 Planning proposals for new gyms, including outdoor gyms such as those found in some parks and the five Healthy Hubs within the Borough, should be considered favourably where appropriate. Development proposals should

also consider the incorporation of walking and cycle routes and the creation of 'walkable environments' where possible. When making decisions, the Council also follows the guidance in Natural England's Accessible Greenspace Standards (ANGst) which provides a set of benchmarks for ensuring adequate access to natural and semi-natural greenspace near to where people live.

Planning for Active Lifestyles
Guidance in Planning Decisions:

In the detailed consideration of plans and proposals, development should:

- Seek new greenspace or improvements and enhancements to existing greenspace through planning applications where appropriate
- Ensure that major new development is linked to Dudley's green corridors where possible.
- Encourage both physical access to public open space and views over open space, in terms of the design of major residential development.
- Explore creative ways to introduce new green areas into communities, for example, rooftop gardens, shared spaces, etc. through planning applications if possible.
- Seek to introduce trees and landscaping along existing and new transport and travel routes, where appropriate.
- Design new residential development to encourage both physical access to existing public open space and views over open space and incorporate children's play areas / open space where required.

Designing for safety and well-being

4.12 Much evidence exists which suggests that the design of the built environment has a significant impact on physical and mental health and how people perceive their environments. The location, density and mix of land uses can have far-reaching effects on how individuals live their lives and access to public services, employment, local fresh food and open green spaces are all imperative for healthy lifestyles. Social exclusion can also be addressed by design solutions which integrate well maintained public spaces, community facilities, shops and parks into the surrounding development. This type of approach is known to increase levels of 'incidental activity' by making it easier for residents to access facilities near their homes, thus reducing reliance on motorised transport.

4.13 Well designed places can also help to reduce the circumstances and opportunity for crime and to increase public confidence and security. The relationship of the physical environment and its influences on the levels of

crime are well documented and it is noted that crime is most likely to occur in places which are less well connected and quieter. The built form, movement and use of these places increase opportunity for crime, for instance:

- Unclear definitions between private and public space
- Exposed backs of properties
- Poor natural surveillance of the street scene
- Poor lighting

4.14 The design of places also needs to take account of transport which has a direct impact on health and safety. Air pollution, noise, traffic and congestion all have a negative impact on people's ability to use their environment and major transport routes can act as barriers between and around communities. As such, more sustainable and 'active' forms of transport need to be considered within strategic plans and planning applications which include giving priority to pedestrians and cyclists.

Designing for Safety and Wellbeing Guidance in Planning Decisions:

When considering the detail of development, proposals should:

- Give priority to pedestrians and cyclists through the design and layout of development including traffic calming measures.
- Connect major new residential development to existing walking and cycling networks, and in particular consider convenient, safe and attractive access to employment, homes, schools and public facilities.
- For planning applications which abut the canals in the Borough, consider the potential for using the canal network as an opportunity for recreational use and attractive design.
- Promote 'active travel' in the design of major new developments, i.e. bike storage, showers, clothes drying facilities, etc – this helps if there are travel plans in operation.
- Seek to reduce transport severance, noise and air pollution (The Council is currently producing a Borough wide Noise Action Plan).
- Ensure design of places and spaces allows direct and safe movement for people and that public spaces are well maintained to encourage their use. Over-looking and street surveillance should be considered in the design of development proposals.

Life stages, equality and inclusion

4.15 Factors that promote good health, particularly good mental health, include community participation, social equity and family and friendship support networks. Positive feelings about one's life, self-esteem, control, and a sense of purpose influence levels of mental wellbeing which in turn impacts on physical and mental ill health. Marmot noted that being in control of your life is related to your socio-economic position but that society can be made more inclusive in order to increase people's overall public health. "Individuals who are socially isolated are between two and five times more likely than those who have strong social ties to die prematurely". (Marmot 2010).In this sense, looking at issues across different life stages is important. The role of spatial planning and public health should be to intervene at appropriate points in a person's life in order to give each individual the independence required for bettering their health and well-being. Of particular importance in this approach would be early intervention to help tackle health inequalities. The Dudley Health and Well-Being Strategy takes on board this methodology illustrated in the Life Course Approach.

Figure 9. Russells Hall Extra Care Housing, Dudley

4.16 Being inclusive means thinking and planning to take account of the circumstances of individuals, groups and communities in relation to the opportunities in which they should expect to participate at all life stages. This applies to widespread services as well as specialised services and resources that may be targeted according to individual need. As a Local Authority, it is our responsibility to ensure that individuals, groups and communities are not excluded and marginalised from opportunities and experiences.

4.17 It is against the law and contrary to the Equality Act 2010 to discriminate against anyone due to age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion and belief, sex, sexual orientation. As individuals, we require different services and opportunities at different stages of life. For instance, parents may require baby-changing and child-friendly facilities when they are out and about with babies and young children. Mothers who are breastfeeding require environments where this is welcomed and they will feel at ease to feed their baby in public places.

4.18 Children and young people need opportunities for sport, recreation and places where they can interact socially with their peers and as they become older, job and training opportunities must be available and accessible. Similarly, every individual in any community, regardless of age, sex, physical or mental ability should have access to community facilities and the services they require throughout all stages of their life. As we progress into later life, our daily requirements will change and it is imperative that communities are developed to incorporate services and opportunities which older people may need and desire.

4.19 Dudley Borough is a multi-cultural society and in order to ensure that it is a fair and equal society, social inclusion should be built into the redevelopment of our buildings and spaces. Our communities need to be adaptable, flexible, welcoming and acceptable to everyone at all ages and from all walks of life. People should be at the heart of the planning system because planning is a service to improve the quality of everyday lives. This also links to ensuring that people have adequate access to warmth and that buildings are energy efficient.

Life Stages, Equality and Inclusion Guidance in Planning Decisions:

In the determination of plans and proposals to develop;

- Ensure that health and planning are integrated at the early stage of all development proposals through effective pre-application negotiations
- Ensure active involvement of communities, especially hard to reach groups who may be affected by development proposals
- Consider whether a particular proposal requires an HIA to be undertaken
- The design of large scale developments and new or redeveloped neighbourhoods should be safe and easily accessible with secure and permeable environments. This will incorporate a high quality public realm, open spaces and shared community buildings and spaces.
- Ensure that every one at every life stage has the facilities and services they require, for example, Breastfeeding facilities, baby changing, public toilets.
- Ensure that new development proposals do not result in severance of communities nor act as barriers to accessibility or natural desire lines. Development should also be complimentary to the surrounding land uses and not adversely impact residential amenity.

Allotments and Food Growing Spaces

4.20 Over recent years there has been a renaissance in 'grow-your-own' gardening as we increasingly appreciate both the health and environmental benefits that come with growing food locally. The escalating popularity of 'grow-your-own' has meant that waiting lists for allotment plots have soared, leaving local authorities struggling to meet demand. The majority of allotment authorities (e.g. parish, town, district or borough councils, not counties) will have one or more allotment sites in their area and will maintain their own waiting lists of people wanting a site. The management of some allotment sites has been devolved to an Allotments Association who, in some cases, may also manage the waiting lists for the site/s for which they have responsibility.

4.21 In March 2011 the Department for Environment, Food and Rural Affairs-commissioned a 'Food Growing in Schools' Taskforce, chaired by Garden Organic and bringing together expertise from the private sector, schools, environmental organisations and the media. The report raised further awareness of the opportunities available for food growing in schools, the benefits that such activities can bring to children's education, health and well-being and the range of support available for schools interested in getting involved in food growing projects. The Royal Horticultural Society also offers comprehensive support for school gardening projects through its Campaign for School Gardening.

4.22 Individuals wishing to grow food but who do not have the space in which to do so might want to consider sharing land with homeowners or other landowners who either do not have the time, capacity or inclination to maintain that land. The 'Landshare' web site was set up specifically to match up such individuals. Community gardens (and farms) are mainly community-managed projects in urban areas ranging from tiny wildlife gardens and fruit and vegetable plots on housing estates to large city farms. Community gardens are usually set up by local volunteers and many rely on dedicated volunteers to continue running, although some are run as partnerships with local

authorities or even employ paid workers. The activities of these community gardens will vary considerably but as well as food-growing activities, can include training courses, school visits, individual allotments and community businesses.

4.23 Through local and neighbourhood plans, local communities are able to identify for special protection green areas of particular importance to them such as allotments. By designating land as Local Green Space, local communities will be able to rule out new development other than in very special circumstances. The one potential drawback to food growing spaces is where there is an issue with potentially contaminated land. The Borough Contaminated Land Inspection Strategy which is currently being reviewed should be given consideration before identification of new plots for food growing.

Allotments and Food Growing Spaces Guidance in Planning Decisions:

- The redevelopment of allotment areas for other uses should not be allowed if a substantial part of the site is in use or there is proven demand for allotments in the area.
- Redevelopment of an allotment site should only be allowed if alternative allotment provision of the same or better quality and quantity is provided in the locality and Planning permission should not be granted simply because an allotment site has been allowed to fall out of use and become derelict.
- Water saving measures, on site composting and solar power will be encouraged at all sites where appropriate.
- Proposals for the provision of new allotment sites should consider:
  - Accessibility by a variety of means;
  - Visual amenity, landscape setting and appearance of the area;
  - Importance and value of the site for informal or formal recreation;
  - Potential multi-use of the site;
  - Whether there are any land contamination issues to be resolved;
  - Safeguarding and enhancing any biodiversity features where possible.

Checklist Approach for Assessing Planning Applications

4.24 The following pages set out the diagrammatic checklists which should be referred to when assessing development proposals. They begin by asking whether a particular issue has been considered and then prompt a recommendation for action to deal with that issue. The checklists also include links to the relevant planning policies for more information.

All residential development proposals (Major and minor)

- Is the proposal site located close to accessible community services and facilities, including fresh food?
- Is the proposal site located near to employment opportunities?
- Are walking and cycling opportunities available, appealing and safe?
- Does the scheme encourage 'active travel' eg. Incorporating bike storage for flatted schemes?
- Is the proposal well served by public transport?

Policies & Links

NPPF – Chapters 4 & 8;
Core Strategy – Policies CSP4, HOU2, HOU5, EMP5, CEN6, TRAN2, TRAN4, TRAN5
Saved UDP – Policy CS3
SPD – Access for All, New Housing Development
Emerging DPD – Healthy Sustainable Development, Location & Accessibility of Healthcare and Community Facilities, Planning for Active Lifestyles, Designing for Safety & Wellbeing, Access & Transport Infrastructure.

Action

Residential development should aim to be well orientated and walkable where possible to reduce the need to travel and provide greater opportunity for social interaction. New residential development should be well served by public transport and where possible amendments to bus routes or stops incorporated for larger scale developments.

Reducing dependence on cars leads to more physical exercise and reduced levels of chronic illnesses and this should be encourage by promotion of active travel solutions and linking into existing cycle /walking routes or creating new ones if feasible.

- Does the proposal promote good air quality through the planting of trees or incorporating green/brown roofs and walls?
- How has biodiversity enhancement been considered?
- Will the construction use local building services, supplies and materials?

Action

Negotiation should be undertaken to encourage the use of green/brown walls and roofs particularly in areas which are built up or deficient in green space. Biodiversity needs to be enhanced where feasible and surveys and mitigation undertaken where appropriate.

The use of local trade and materials should be sought by the developer in the interests of sustainable development.

Policies & Links

NPPF – Chapters 11 & 13
Core Strategy – Policies ENV1, ENV8, WM5
Saved UDP – Policies NC1, NC9, DD10
SPD – Nature Conservation
Emerging DPD – Healthy Sustainable Development; Planning for Active Lifestyles; Nature Conservation Enhancement, Mitigation & Compensation; Dudley's Green Network; Landscape Design.

- Does the proposal encourage social cohesion eg. By the avoidance of community severance by major roads, large commercial schemes etc?

Action

Social cohesion can be facilitated by creating safe and permeable environments with natural social foci where people can meet informally. It can be undermined by insensitive housing redevelopment and dispersal of communities caused by severance or loss of community facilities.

Policies & Links

NPPF – Chapter 8
Core Strategy – Policies CSP1, DEL1
Emerging DPD –Location & Accessibility of Healthcare and Community Facilities; Designing for Safety & Wellbeing; Life Stages, Equality & Inclusion; Access & Transport Infrastructure; Landscape Design; Incompatible Land Uses

- Does the proposal enhance opportunities for play and exercise by way of access to open space, amenity space, parks and play areas and also how attractive the general area and new development is?
- Does the proposal include amenity space which could be used for community allotments or food growing areas?

Action

The availability of amenity space stimulates physical and mental health and green space can act as 'green lungs' within urban areas. This includes the addition of trees and greenery to enhance the attractiveness and public realm of places – this also helps with air quality and people's mental health and general positive perceptions of a place.

Negotiation should be undertaken with the developer to ensure that open space is included in the development where possible and the possibility of using some of this space for food growing should be explored.

Policies & Links

NPPF – Chapters 8
Core Strategy – Policies CSP4, ENV6, DEL1
Saved UDP – Policy LR1, LR3, LR4, LR5, LR6, LR9, SO3, SO6
SPD – Open Space, Sport & Recreation; Access for All
Emerging DPD – Healthy Sustainable Development; Planning for Active Lifestyles; Housing Delivery; Landscape Design; Open Space; Allotments; Playing Fields; Parks.

- Has the scheme considered the following in terms of design & layout:
  - Code for Sustainable homes & BREEAM
  - Creation of 'walkable neighbourhoods' where pedestrians & cyclists are given priority, traffic calming measures are used, safe road crossings are installed
  - Are the homes adaptable to future changes i.e. room for extensions, wheelchair access
  - Is there sufficient landscaping for aesthetic reasons
  - Does the layout maximise opportunities for passive surveillance and introduce security features where appropriate – 'Designing out Crime'
  - Does the layout make the best use of the land

Action

All development proposals are already assessed for their design and reference is made to Manual for Streets and the NPPF chapter 7. However, the health implications of design should also be considered, including how design affects mental health, and how good design facilitates accessibility, social interaction and well-being.

Policies & Links

NPPF – Chapter 7
Core Strategy – Policies CSP4, ENV3
Saved UDP – Policy DD1, DD4
SPD – Parking Standards; Design in Brierley Hill Town Centre
Emerging DPD –Planning for Active Lifestyles; Landscape Design; Urban Design.
Other – Design for Community Safety SPG

Major Residential Development Proposals

- Is an HIA required?

Action

HIA's are encouraged to be undertaken for large scale major developments (residential - 200 homes or 4 hectares; other uses – 10,000sqm floorspace or 2 hectares). The HIA needs to identify all potential health impacts and mitigate any adverse pacts arising from the proposal.

Links

Chapter 9 in this SPD; Department for Health HIA Guidance

- Is there a need to carry out an assessment of healthcare or education demand?

Action

Where a development would increase the need for education and health care facilities to the extent that new or improved facilities would be required, planning obligations or levies will be secured for this purpose. New and redeveloped education facilities should include maximum provision for community use of sports and other facilities.

Policies & Links

NPPF – Chapter 8
Core Strategy – DEL1
Emerging DPD – Healthy Sustainable Development

- Does the proposal include a range of tenures and house sizes?

Action

A range of housing types, tenures and densities is necessary to create healthy, cohesive and sustainable communities. If a range of tenures and house sizes is not proposed as part of the development, attempt re-negotiation with the developer.

Policies & Links

NPPF – Chapter 6
Core Strategy – HOU2
SPD – New Housing Development
Emerging DPD – Supported Accommodation

- Does the scheme include affordable homes in line with guidance for schemes of 15 dwellings or more?

Action

If affordable homes are not provided as per guidance, the application will not be granted planning permission.

Policies & Links

NPPF – Chapter 6
Core Strategy – HOU3
SPD – Affordable Housing

- Will the scheme provide on-site open space or is there suitable access to nearby open space provision?
- Does the proposal include on-site children's play areas?

Action

Refer to current guidance for open space and children's play area provision and negotiate with developer if required.

Policies & Links

NPPF – Chapter 8 & 11
Core Strategy – Policies CSP4, CSP3, DEL1, ENV6
Saved UDP – Policy LR1, LR3, LR4, LR5, LR6
SPD – Open Space, Sport & Recreation
Emerging DPD –Healthy Sustainable Development; Planning for Active Lifestyles; Open Space; Outdoor Children's Play Areas; Playing Fields; Landscape Design.

- Does the scheme provide accessibility to community facilities and services or is there a requirement to provide on-site services as a result of the scale of the scheme?

Core Strategy Accessibility Standards

Density (dwellings per hectare)	**Very High 60+ Only appropriate in strategic or town centre**	**High 45-60**	**Moderate 35-45**
Indicitive proportion of flats	50%+	25-50%	0-25%
Indicative housing suited to families	Low	Medium	High
Accessibility (by either walking or public transport)			
Employment – Strategic centre or other employment area	20 mins	20 mins	30 mins
Health – Doctor's surgery or walk-in centre	10 mins	10 mins	15 mins
Fresh Food – centre or foodstore	NA	10 mins	15 mins
Education – primary (walking distance only)	NA	15 mins	10 mins
Education - secondary	NA	25 mins	20 mins

Action

Refer to the Core Strategy Accessibility Standards - Housing developments of 15 dwellings or more will be expected to meet the accessibility standards set out in Core Strategy Table 8, which vary according to density and likely house type mix.

Where there is an identified gap in service provision against one or more of these standards, investment will be sought to improve either service provision or access to existing services or service provision sufficient to ensure standards are met.

Policies & Links

NPPF – Chapter 4 & 8
Core Strategy – Policies CSP4, HOU2, HOU5, EMP5, CEN6, TRAN4
Saved UDP – Policy CS3
SPD – Access for All
Emerging DPD –Healthy Sustainable Development; Location & Accessibility of Healthcare & Community Facilities; Designing for Safety & Wellbeing; Life Stages, Equality & Inclusion; Access & Transport Infrastructure

Town Centre Uses Development Proposals

- Does the proposal conform with the 'town centre first approach' and regeneration of centres as set out in the Core Strategy?

Action

Keeping our town centres as the focus for A1 retail and other main town centre uses, helps maintain their vibrancy and vitality thereby creating a pleasant environment in which to shop and providing people with the goods they require. Ensure that applications are assessed via the sequential test and proposals over 200sqm are not approved for out of centre sites unless material considerations outweigh reasoning.

Policies & Links

NPPF – Chapter 2 & 8
Core Strategy – CSP4, CEN1, CEN3, CEN4, CEN5, CEN6, CEN7, TRAN4
Saved UDP – DD3, CR4; EP6, EP7
SPD – Access for All; Design in Brierley Hill Town Centre; Parking Standards Review
AAP – Brierley Hill; emerging Stourbridge & Halesowen AAPs
Emerging DPD – Parking in Town Centres; Protected Frontages; Protection of Public Houses; Shopfront Design & Signage

- Is the proposal well located to serve the local community and accessible by walking, cycling and public transport?
- Will the proposal provide amenities to encourage 'active travel'?

Action

New town centre uses need to be accessible to all members of the population and located in convenient locations that can be accessed by a range of transport modes. Local shops serving a day to day need should be located within walking distance of the homes they are intending to serve.

Larger supermarkets and other town centre uses which attract larger numbers of visitors, should ensure that there are showers, lockers and cycle storage for the employees to encourage active travel and cycle parking for visitors.

- Is the proposal suitable in size and scale for the locality it is intending to serve?

Action

All proposals for town centre uses should be assessed to ensure that new development does not undermine existing facilities and so that certain proposals do not monopolise the local market. Additionally, the proposal should not be incompatible with neighbouring uses or cause problems of neighbourhood / residential amenity.

Policies & Links

NPPF – Chapter 2
Core Strategy – CEN5, CEN6
AAP – Brierley Hill; Emerging Stourbridge & Halesowen AAPs

- Where the proposal is for convenience retailing, is there a possibility of encouraging food delivery service for older people and ensuring that the owner stocks healthy food options.

Action

Although this is not a planning requirement and is not set within any policy, Dudley Borough is trying to promote a change in obesity levels and in people's lifestyle choices. To this end, where there is a possibility of giving people the opportunity to make healthier choices, it should be taken.

- Will the design of the development include open, active frontages?
- Will the design incorporate adequate landscaping?
- Will the proposed development compatibale with surrounding land uses and consider residential amenity?

Action

Landscaping and active frontages add attractiveness and quality to the public realm which makes a place more pleasant to be in. Pleasant environments are known to stimulate mental contentment and optimism. Incompatible land uses can also have a negative impact on health by inducing stress and malaise.

Policies & Links

NPPF – Chapter 7
Core Strategy – CSP4, ENV3, EMP1
Saved UDP – DD1, DD3,
SPD – Access for All; Design in Brierley Hill Town Centre
AAP – Brierley Hill; emerging Stourbridge & Halesowen AAPs
Emerging DPD – Shopfront Design & Signage; Urban Design; Landscape Design; Incompatible Land Uses

- Will the proposal enhance air quality and deal with noise / light / litter pollution?

Action

Reducing exposure to poor air quality will improve the health and quality of life of the Borough's population. Therefore, if any proposed development is likely to adversely impact air quality, an appropriate air quality assessment will be required.

Noise, light and litter pollution can all seriously affect how a place is perceived and detracts from high quality public realm which in turn can affect people's mental and physical health. Any proposal which is deemed as potentially contributing to pollution in anyway, should provide details of mitigation to support it.

Policies and Links

NPPF – Chapter 10
Core Strategy – CSP4, ENV8
AAP – Brierley Hill; Stourbridge & Halesowen AAPs

- Does the proposal relate to a 'pop-up shop' or temporary business in areas with high vacancy rates?

Action

Over recent years, there has been much research and effort spent looking at how to revitalise our centres and high streets. Part of the solution may be to allow temporary or pop-up businesses to locate in vacant units rent free or at significantly reduced rates. Where such applications are received, they should be considered favourably providing there are no adverse effects on the environment or neighbouring uses.

Favourable consideration should also be given to outdoor and indoor markets which tend to sell fresh fruit and vegetables, and to proposals which involve purchasing and selling from local suppliers which helps reduce the carbon footprint.

Local community co-operative food buying schemes are also becoming more popular, possibly due to the recession and increasing discontentment at supermarkets pricing, processes and ethics. These should be encouraged where possible, potentially by allowing flexibility of use and change of use permissions on venues to host the schemes.

Policies & Links

NPPF – Chapters 1 & 2
Core Strategy – CSP4, CEN4, CEN5, CEN6
AAP – Brierley Hill; Stourbridge & Halesowen AAPs

All development proposals

Policies & Links

NPPF – Chapters 1, 6, 7 & 8;
Core Strategy – Policies CSP4, HOU1, HOU2, EMP1, ENV3
Saved UDP – Policy DD1, EP1
SPD – Access for All, New Housing Development
Emerging DPD – Healthy Sustainable Development, Designing for Safety & Wellbeing,

- Is the proposal sustainable?
- Is the proposal and buildings site adaptable and flexible to potential future changes of use?

Action

Construction should be undertaken using local materials and suppliers via sustainable building techniques and built to have a long life span. The proposal should be complimentary to the surrounding land uses and not jeopardise the functioning of any neighbouring use.

Buildings should be able to be altered to suit the needs of a changing community without the need to be completely demolished. They should also incorporate access for all members of the community.

- Does the proposal consider public services, including multiuse facilities and location ?
- Have community facilities been considered as part of the scheme?

Action

Community facilities can be an important addition to employment or leisure development proposals in that they can be provided as multi-functional facilities for use by employees, customers and the wider community. Is an assessment required to consider need and demand for additional community facilities? Any additional facilities and services, or existing services where additional ones are not required, should be easily accessible and in prominent locations for the people they are intended to serve.

Other public services such as toilets and breastfeeding areas are also important considerations in proposals for employment, leisure, education and tourist attractions.

Policies & Links

NPPF – Chapters 8
Core Strategy – Policies CSP4, EMP5, EMP6
Saved UDP – Policies CS3
SPD – Access for All
Emerging DPD – Healthy Sustainable Development; Location and Accessibility of Healthcare and Community Facilities

- Does the proposal encourage good design and complimentary neighbouring uses including the avoidance of community severance by major roads or large commercial schemes etc?

Action

Poorly designed development can effectively cut off communities or create barriers to access which can in turn affect the social cohesion of a community or neighbourhood.

The principles of good design must be adhered to in all planning proposals to help create attractive, permeable and safe places and spaces where people will want to live, work and visit.

Policies & Links

NPPF – Chapter 7
Core Strategy – Policies CSP4, ENV3
Saved UDP – DD1, DD2, EP1
Emerging DPD – Designing for Safety & Wellbeing; Landscape Design; Incompatible Land Uses

- Does the proposal enhance opportunities for exercise and encourage active travel?
- Has the development proposal considered the location in terms of reducing the need to travel? For instance, locating employment uses in proximity to residential areas?

Action

Active travel can be encouraged by ensuring that there are adequate cycle and walking routes to access the development and by including cycle storage, showers and lockers for staff/customers. Larger commercial / office / employment schemes should also consider using a gym or gym equipment for use by staff and visitors.

Novel and interesting ideas should be welcomed, for example, one hotel in Copenhagen has static bicycles in the lobby where guests are invited to pedal for 20-30 minutes to produce electricity to power some parts of the hotel.

Development schemes should be located in close proximity to the community they are intending to serve for example locating offices close to residential areas.

Policies & Links

NPPF – Chapters 4 & 5
Core Strategy – Policies CSP5, DEL2, TRAN2, TRAN4, TRAN5
SPD – Access for All
Emerging DPD – Healthy Sustainable Development; Planning for Active Lifestyles; Access and Transport Infrastructure

- Does the development proposal promote good air quality through the planting of trees and the opportunity to encourage the reduction of vehicle emissions where possible?
- Does the proposal incorporate the principles of the 'designing out crime' approach?
- Does the proposal include adequate landscaping to help create a more pleasant environment?

Action

Air pollution can affect our health in many ways with both *short-term* and *long-term* effects. UK researchers say more trees and other vegetation at street level may help clean air in areas that are normally exposed to higher pollution levels as plants in towns and cities have been shown to remove nitrogen dioxide (NO2) and particulate matter (PM).

However, a much more effective way to improve air quality is to reduce the use of private vehicles and control emissions from HGVs and passenger vehicles.

Dudley Council has declared the whole of the Borough as an Air Quality Management Area (AQMA) and the associated Action Plan adopted in 2010 sets our guidance on how pollution control can be managed and steps that developers and inhabitants can take to curb air pollution. This includes driving less, driving more efficiently and ensuring that development incorporate greenery where possible.

Policies & Links

Dudley Air Quality Management Area & Action Plan
NPPF – Chapters 10
Core Strategy – Policies CSP4, ENV1, ENV3, ENV8
Saved UDP – Policy NC1, NC9, DD1, DD10
SPD – Nature Conservation; Design in Brierley Hill Town Centre
Emerging DPD – Healthy Sustainable Development; Nature Conservation Enhancement; Dudley's Green Network; Landscape Design

- Has the scheme considered access and proximity to green and open spaces, for instance, for employee recreation time?

Action

It is well known that accessibility to green space and open space increases a person's potential to attain better physical and mental health. This can be achieved by locating employment development adjacent to an open area or incorporating a central courtyard for employee informal recreation.

Policies & Links

Dudley Air Quality Management Area & Action Plan
NPPF – Chapters 8 & 11
Core Strategy – Policies CSP4, EMP5, EMP6, ENV6
Saved UDP – Policy DD1, DD10,LR1, LR4, LR5, LR6, SO3
SPD – Open Space, Sport & Recreation; Access for All
Emerging DPD – Healthy Sustainable Development; Planning for Active Lifestyles; Landscape Design; Open Space; Allotments; Playing Fields; Parks.

5 Reducing the Proliferation of Hot Food Takeaways

Current Issues

5.1 National planning policy recognises the role which planning takes in better enabling people to live healthier lifestyles. England's obesity epidemic has attracted considerable policy attention in recent years and central government has called for the NHS, local authorities, schools and workplaces to deliver joined up action to make healthier lifestyles an easier option. Of particular concern is the proliferation of hot food takeaways within many of the country's town and city centres, however, the recent obesity strategy for England "Healthy Weight; Healthy Lives" indicates opportunities for local authorities to control the establishment of fast food outlets through planning powers.

5.2 In recent years, a number of retail units in Dudley Borough have been converted into hot food takeaway establishments. Where high concentrations occur in our town centres, they can pose a serious threat to the local economic vitality and viability. It is not uncommon for hot food takeaway shops to locate outside of town centres either and particularly high concentrations exist along some of the borough key road corridors. The proliferation and proximity of hot food takeaways to schools is also of concern as the food they serve is mostly high in fat, salt and sugar. Healthier options, if available are generally very limited.

5.3 In addition to health issues and obesity levels, although it is recognised that hot food takeaway shops can provide an important complementary service compared to other retail uses, they are more likely to have a detrimental impact on amenity and on retail character and function of shopping centres. Such harmful impacts relate to increased incidence of litter, smells, crime and anti-social behaviour, noise and general disturbance, parking and traffic problems.

5.4 A 2008 report from the Nutrition Policy Unit of London Metropolitan University found that food outlets in close proximity to, and surrounding schools, were an obstacle to secondary school children eating healthily, with many shops offering child-sized portions at child-sized prices. These provide added incentive and temptation to children increasing the likelihood of over consumption of food that is often a disproportionate amount of their daily nutritional requirements. Takeaways within walking distance of schools are therefore a contributing factor to the rising levels of obesity in the Borough and this gives justification for introducing an exclusionary zone around the Borough's schools.

Exclusion Zones

5.5 Dudley's emerging Development Strategy DPD proposes the introduction of a policy to control the numbers of hot food takeaways in the Borough that will assist not only to reduce the levels of obesity, but it may also reduce school children being exposed to unhealthy food choices. It will also help to counteract the over concentration of hot food takeaways in certain localities. This will be partly achieved by introducing 400m exclusion zones around all the schools in the Borough where no new hot food takeaway proposals will be granted planning permission. (This is an approach which is being adopted relatively successfully by a number of other Local Authorities in the UK).

5.6 Appendix 2 within this SPD contains a number of A4 maps covering the whole Borough. The maps show the 400m exclusion zones marked around each of the Borough's schools and youth centres, the locations of every hot food takeaway currently in operation at the time of adoption in the Borough and the town and local centre boundaries. Every proposal received for a new A5 Hot Food Takeaway use must be assessed against the maps and the Checklist. Any proposals falling inside the 400m exclusion zones will not be granted planning permission. Where the 400m boundary overlaps with a town or local centre boundary the guidance for centres set out below will take precedence over the 400m exclusion zone.

5.7 **It must be noted that the 400m boundaries are indicative only and precise measurements must be taken. The 400m applies to 400m 'as the crow flies' from any entrance or exit to the school grounds. (This could not be accurately recorded on maps at this scale, hence the indicative circles were used).**

5.8 Developer contributions will be required in appropriate circumstances for A5 Hot Food Takeaway planning applications through the most suitable mechanisms.

Guidance in Planning Decisions for Hot Food Takeaways:

Within the Borough's protected frontages;

- Planning permission for hot food takeaways will only be granted where no more than 5% of the units will consist of A5 uses.

In all the Borough's centres, retail parades and all other areas;

- No more than 2 A5 uses will be permitted adjacent to one another.

Outside designated centres (Defined by the Core Strategy);

- Hot food takeaway shops will be resisted where the proposal will fall within 400m of the boundary of an existing school, or other youth centred facility (e.g. after school clubs, youth centres).

In all locations;

- Planning permission for hot food takeaways will only be grantedwhere, in addition to the above considerations, there would not be an adverse impact on public or highway safety. Regard will be given to;
    - Existing traffic conditions including availability of parking spaces
    - Availability of safe and legal loading areas
    - Proximity to junctions, pelican crossings, bus bays and bus stops
    - Accessibility of the site by public transport and cycling

Applications for hot food takeaways within close proximity to residential properties must:

- Give consideration to impacts on residential amenity in terms of disturbance, vibrations, odours, traffic impacts, litter or hours of operation as a result of the proposal.
- Consider the cumulative impact of proposed hot food takeaways with regard to their risks around community safety, crime and disorder.
- Accommodate extract equipment internally within the building and rooted within existing chimneys. Where external equipment is proposed, it should not be detrimental to the area or host property.

Change of Use to A5, Hot Food Takeaway

- Is the proposal within a protected frontage?
- Is the proposal within a centre or shopping parade?
- Does the proposal lie within one of the 400m Exclusion Zones designated around the Borough's schools?

Action

Within the Borough's protected frontages, planning permission for hot food takeaways will only be granted where no more than 5% of the units will consist of A5 uses.

No more than 2 A5 uses will be permitted adjacent to one another in all the Borough's centres and retail parades.

A5 uses will be resisted where the proposal will fall within 400m of the boundary of an existing secondary school, or other youth centred facility (e.g. after school clubs, YMCA). Refer to the maps in Appendix 1

- Is there a possibility that the proposal will adversely affect public or highway safety?
- Is there a possibility that the proposal will adversely affect nearby residential properties?
- Is the extract equipment positioned internally if possible?

Action

Regard will be given to;

- Existing traffic conditions including availability of parking spaces
- Availability of safe and legal loading areas
- Proximity to junctions, pelican crossings, bus bays and bus stops
- Accessibility of the site by public transport and cycling

Consideration will be given in terms of disturbance, vibrations, odours, traffic impacts, litter or hours of operation as a result of the proposal. Additionally, the cumulative impact of proposed hot food takeaways will be assessed with regard to their risks around community safety, crime and disorder.

Wherever practicable, extract equipment should be accommodated internally within the building and rooted within existing chimneys. Where external equipment is proposed, it should not be detrimental to the area or host property.

Policies & Links

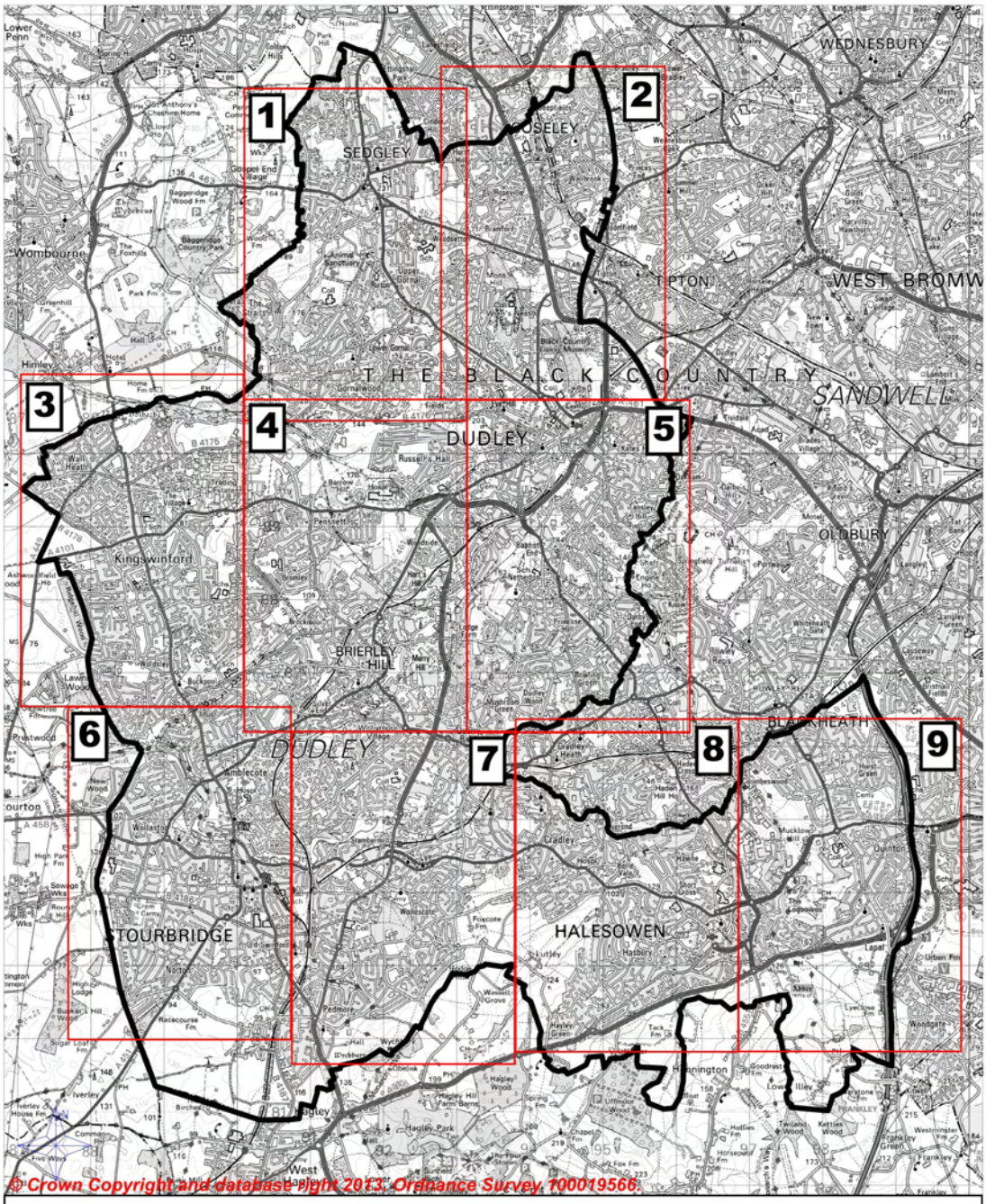
NPPF – Chapters 8 & 2
Core Strategy – CSP4, CEN6, CEN7
Saved UDP – CR4, DD4, EP1, EP7
Emerging DPD – Hot Food Takeaways; Incompatible Land Uses
Other – Chapter ? of this SPD and maps in Appendix

- If the proposal meets all the criteria above, is there possibility of the owner stocking healthy food options?

Action

Negotiate with developer.

6 Appendices



Dudley Metropolitan Borough Council

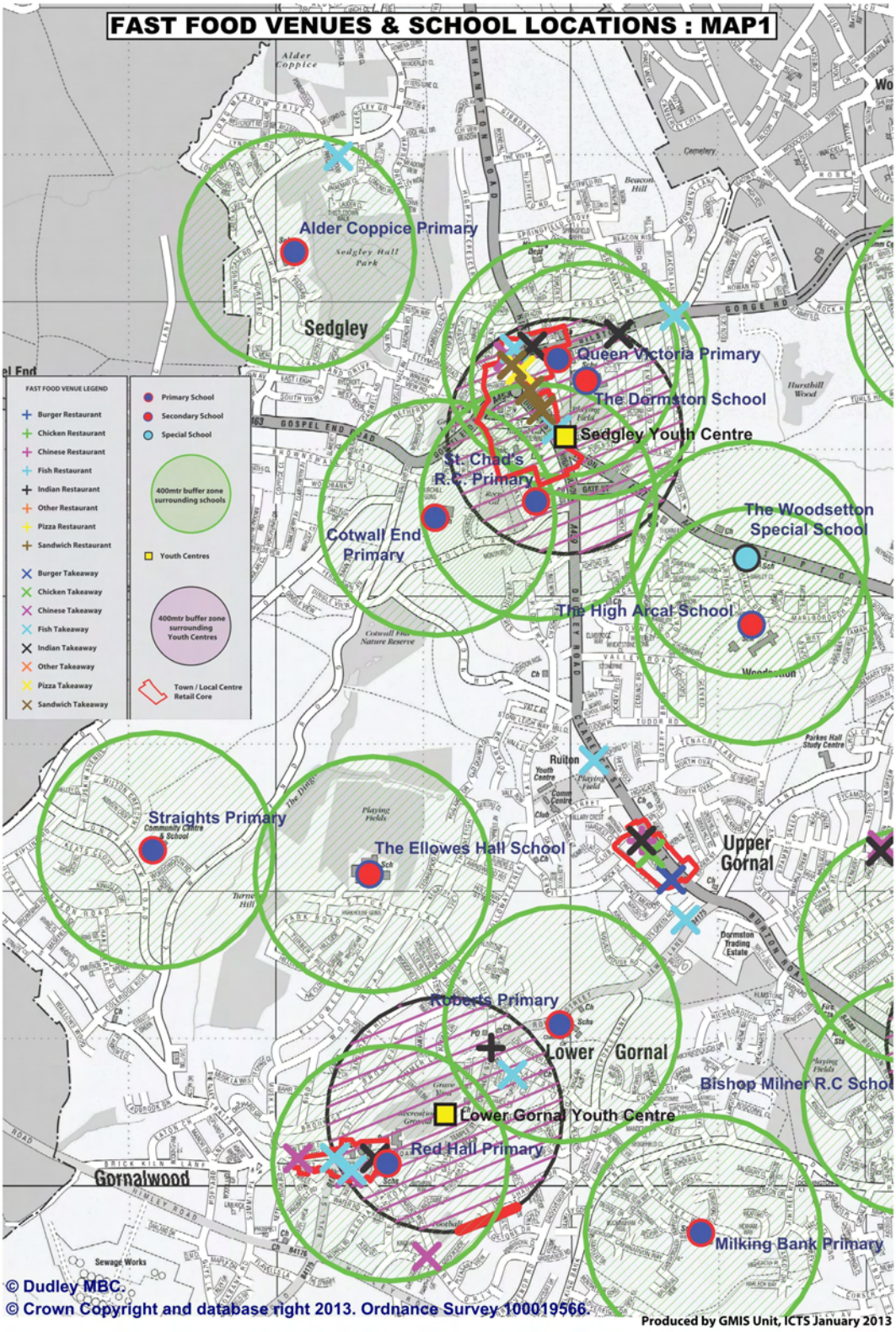
Produced by GMIS Unit, ICTS

Scale 1 : 67500

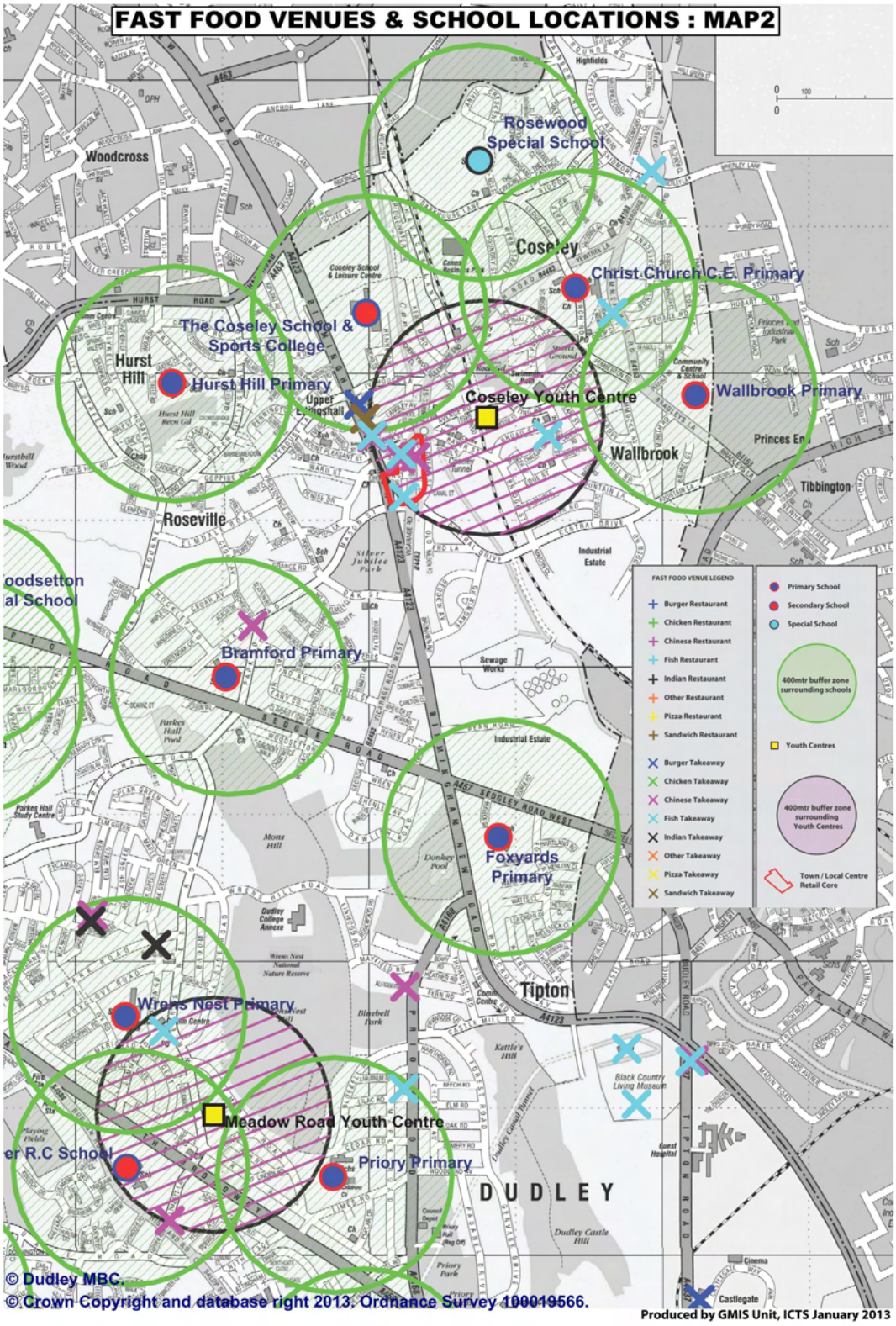
15-JAN-2013

MAP INDEX :
FAST FOOD VENUES & SCHOOL LOCATIONS

Index Map for use with 400m Exclusion Zones



Indicative 400m Exclusion Zones around Schools and Youth Facilities



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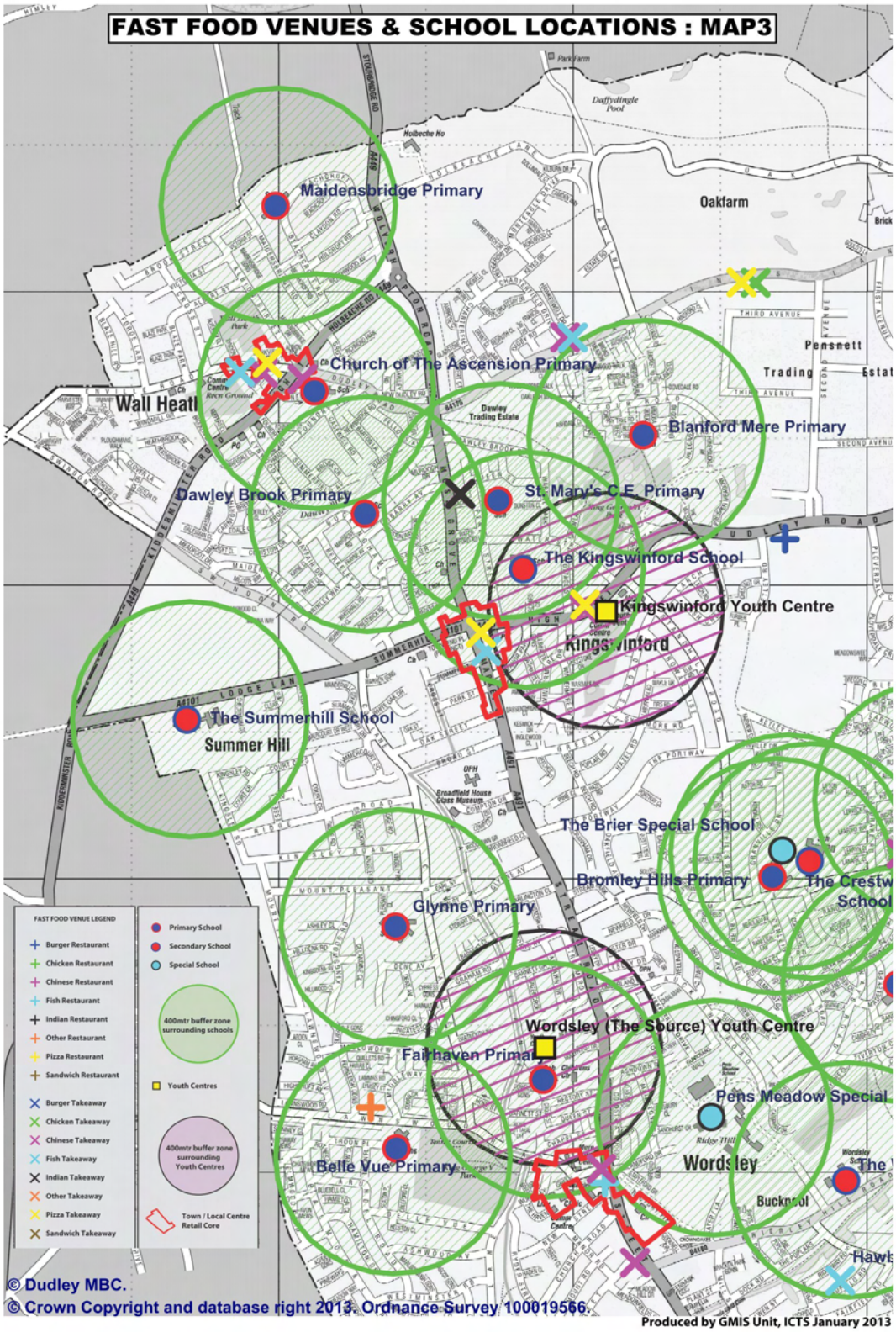

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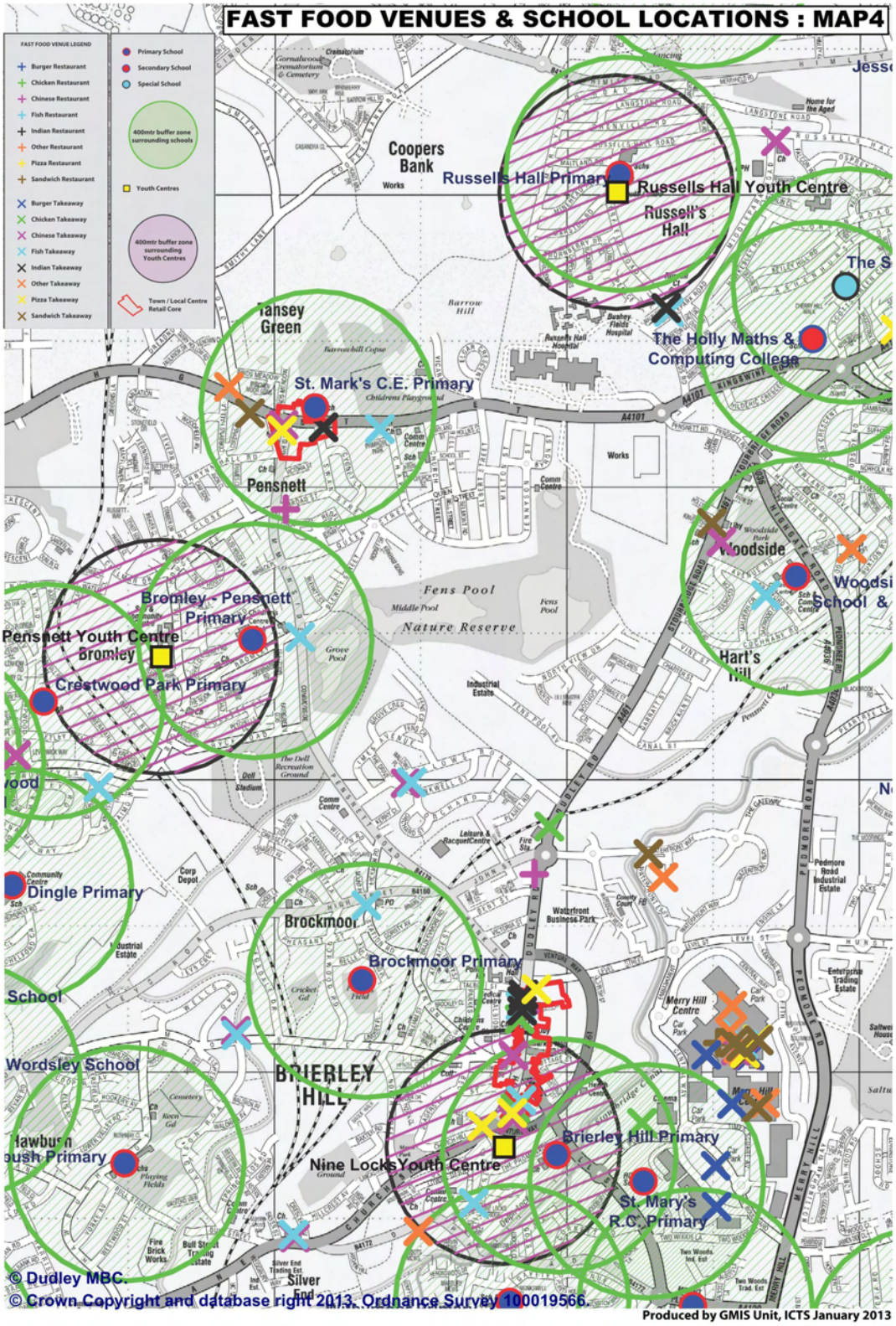

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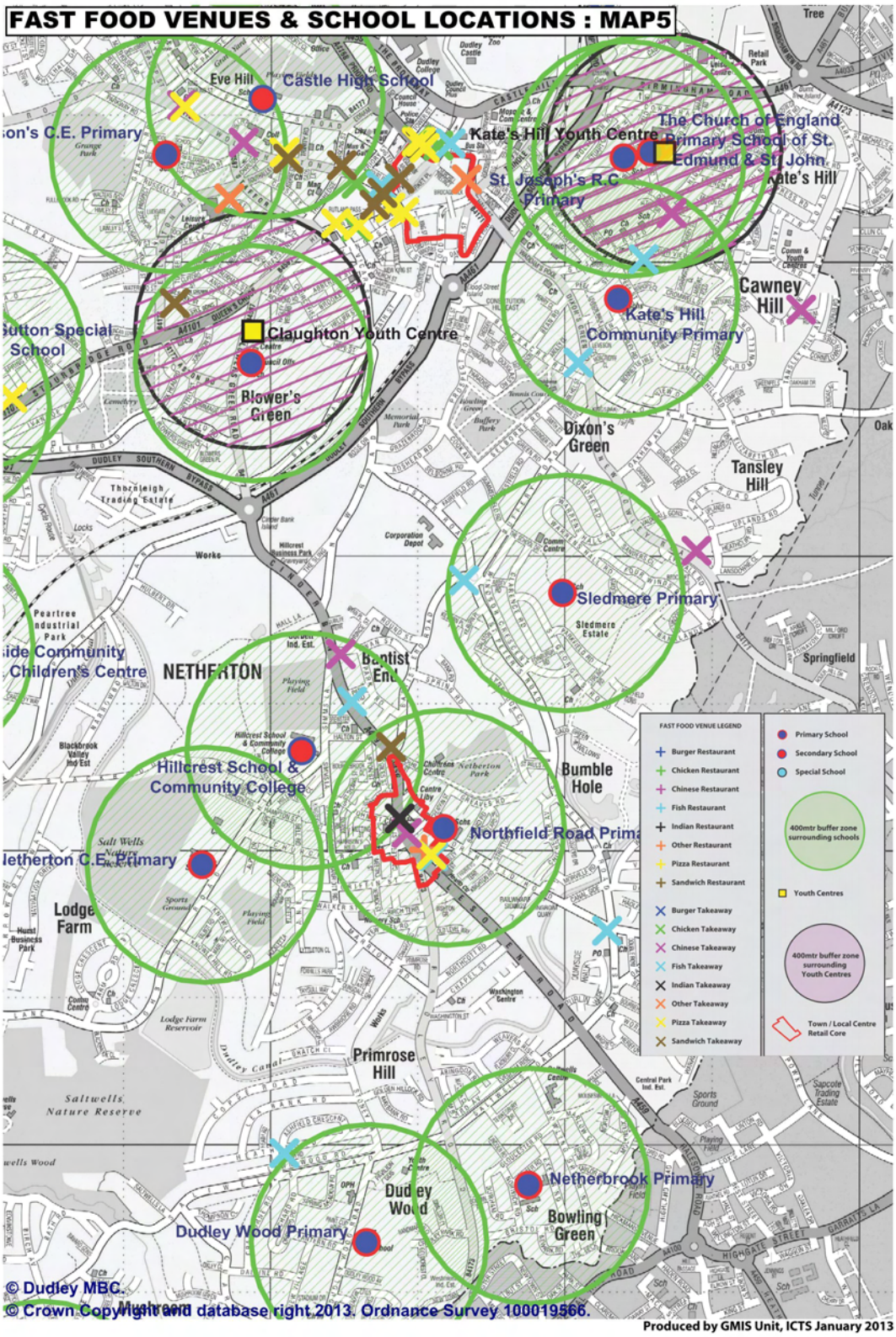

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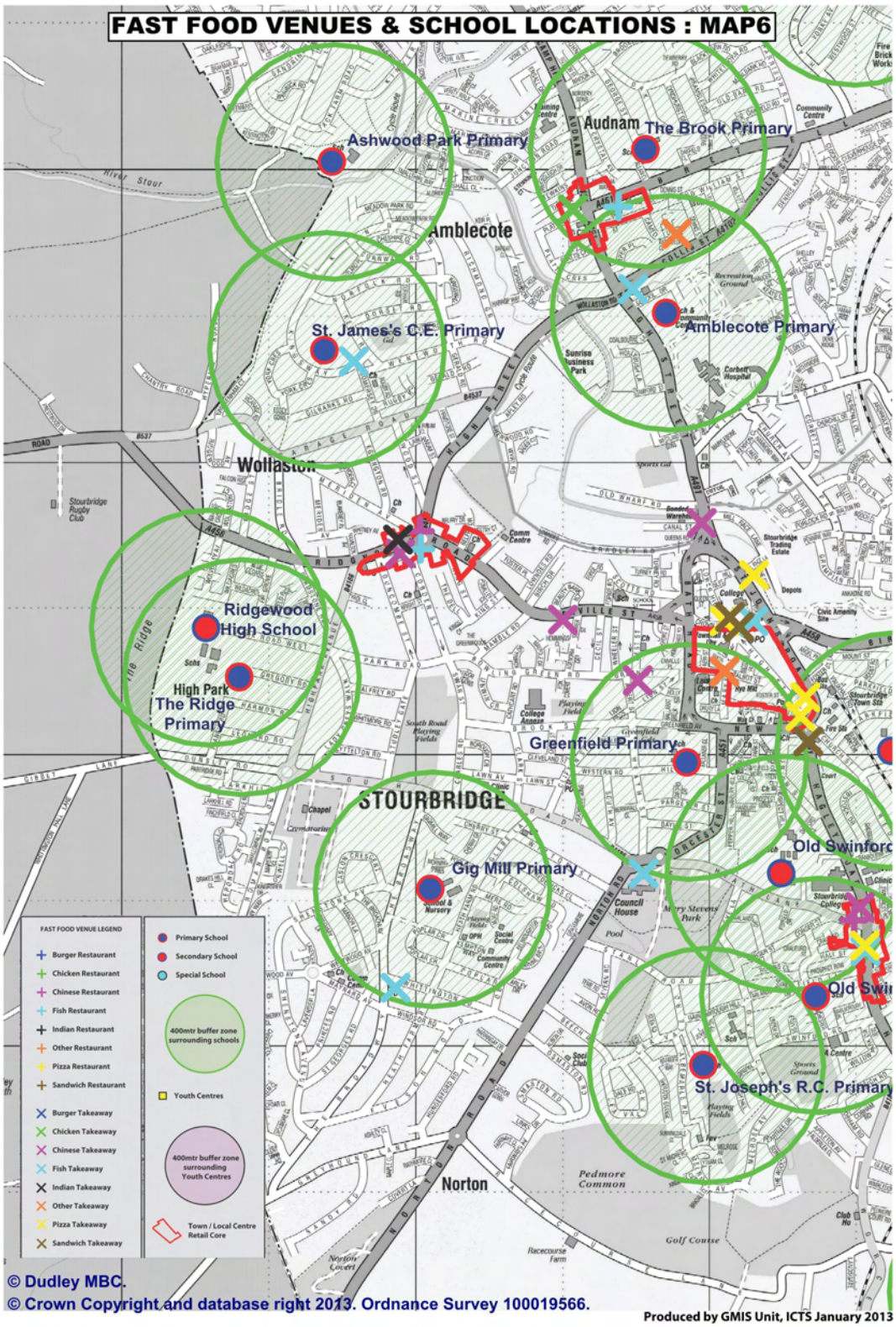

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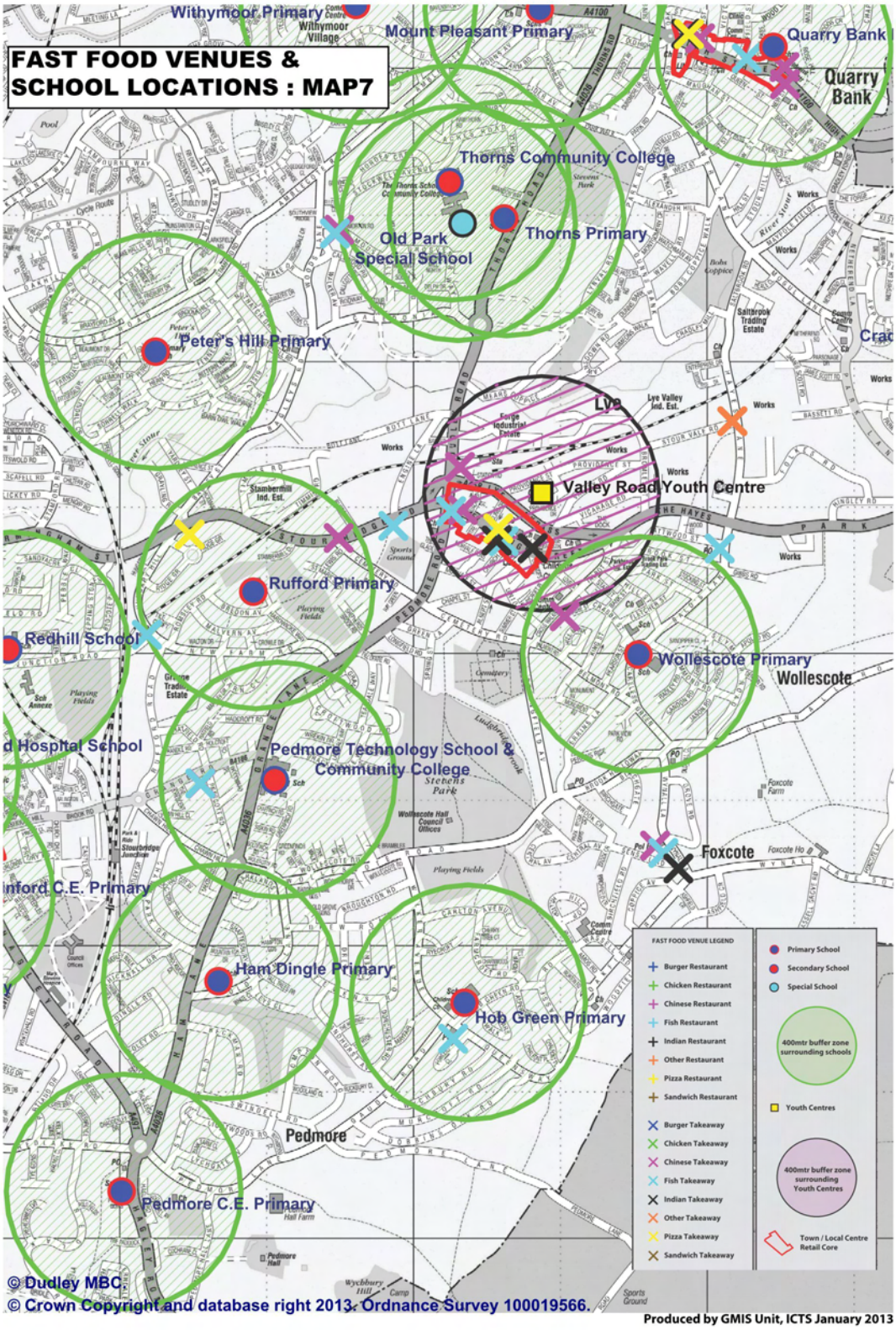

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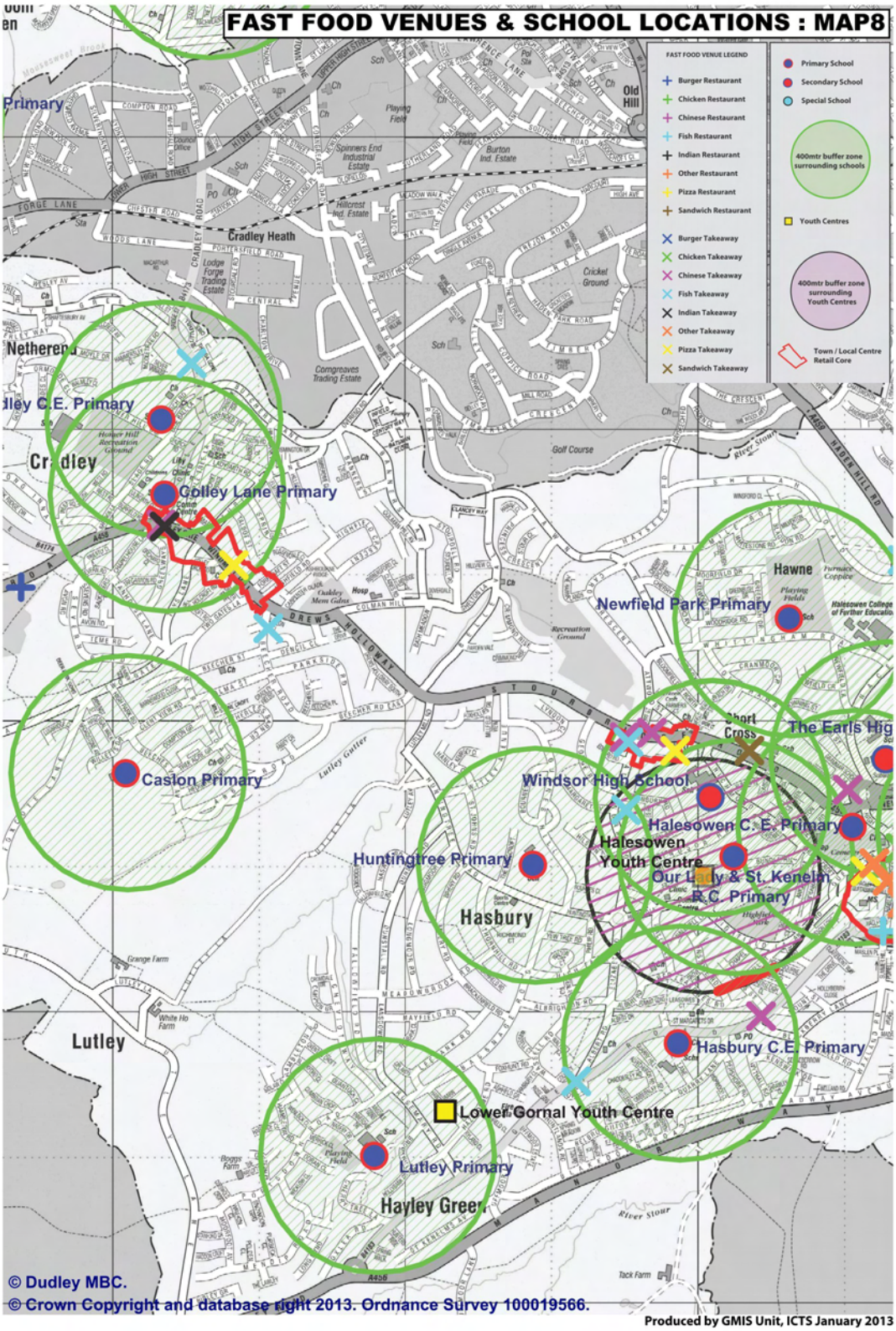

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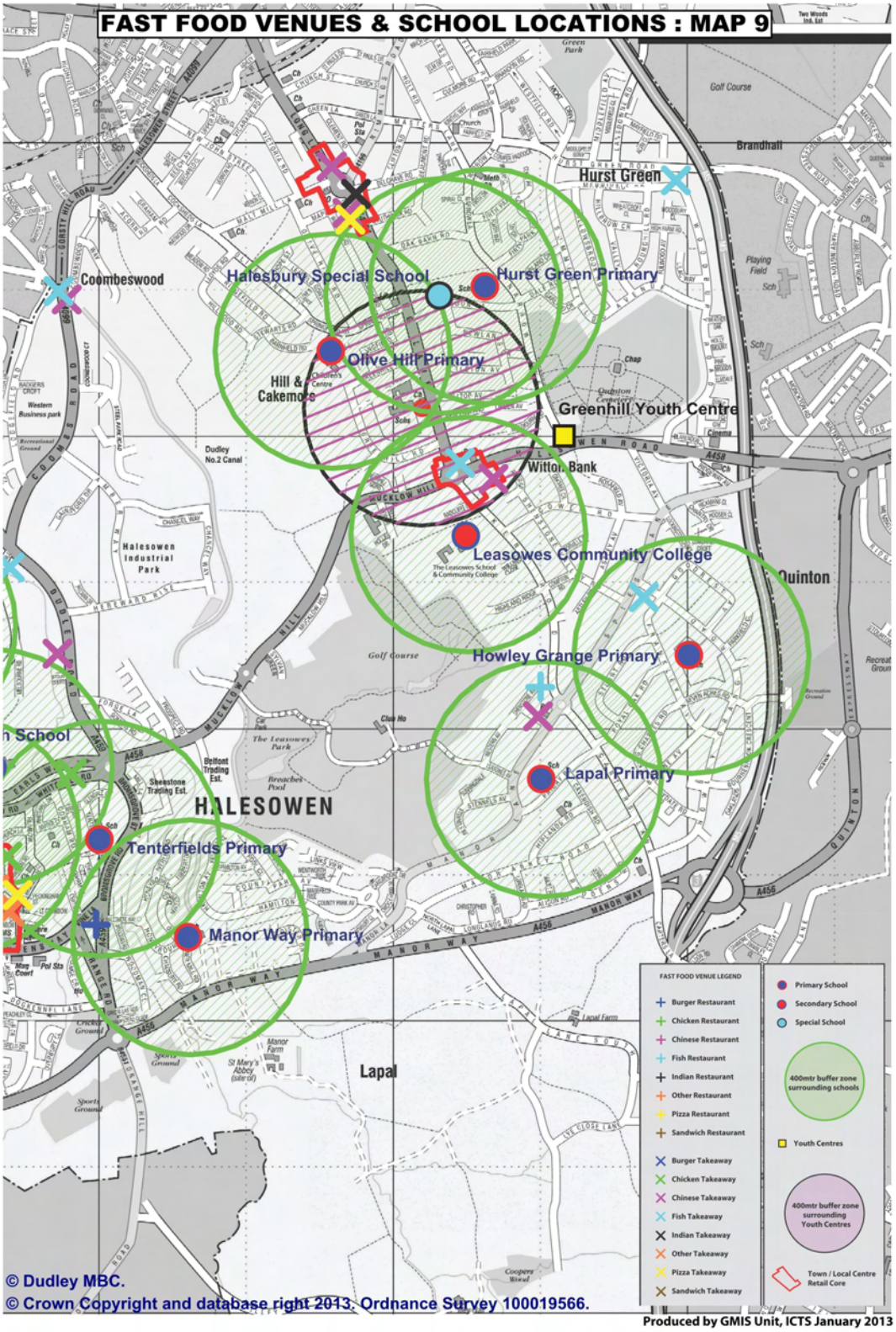

Indicative 400m Exclusion Zones around Schools and Youth Facilities

SPAHG, Steps to Healthy Planning: Proposals for Action (June 2011)

Action 1: Designing in health

Action 2: Sustainable Communities Strategies and Health

Action 3: Local development frameworks and core strategies

Action 4: Evidence used as the basis for local development frameworks and core strategies

Action 5: Scoping plan and project appraisals

Action 6: Integrating health assessment

Action 7: Health promoting design principles

Action 8: Development design, management and control

Action 9: Monitoring and review

Action 10: Health and planning capacity and collaboration

Action 11: Training and professional development

Action 12: Research and evaluation