

Shaping Our Place 2026

Local Development Framework

Core Strategy

Policy Direction Paper  
Health

January 2010



# LDF CORE STRATEGY: POLICY DIRECTION BACKGROUND PAPER

**Policy:** Health

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## **Preferred Policy Direction**

The preferred policies for health will:

1. Support development proposals for new or expanded healthcare facilities through the Hereford and Market Towns and Rural Areas Plans, in partnership with the Herefordshire Primary Care Trust and other healthcare providers, and facilitated by developer contributions;
2. Promote multiple community uses of new and existing facilities through the Hereford Area Plan and Market Towns and Rural Areas Plan.

Additional policy directions which will have an impact on health and wellbeing include:

- Green Infrastructure;
  - Local Distinctiveness;
  - Movement in Herefordshire;
  - Open Space, Sport and Recreation.
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## **1.0 Introduction**

1.1 This report provides background information and evidence to support the policy directions that form part of the Core Strategy Place Shaping Paper. The full policy wording will form part of the pre-submission Core Strategy.

1.2 The Core Strategy will set out the vision and objectives for the Herefordshire Local Development Framework (LDF), together with the 'place shaping policies' at a strategic level, explaining how the county as a whole is expected to develop up to 2026.

1.3 The remainder of this report seeks to address the following questions:

- What is the current situation (issue)?
- What is the national, regional and local policy framework?
- What is the available evidence base indicating?
- What can the Core Strategy do?
- What were the results/indications for the Developing Options Consultation?
- What further consultation will take place?
- What conclusions can be drawn?
- What happens next?

## 2.0 The need for the policy

- 2.1 According to the 2009 State of Herefordshire Report, Herefordshire's residents are generally healthier and have a greater life expectancy than the national average: life expectancy is 78.1 years for males and 83.0 years for females, compared with 77.7 and 81.8 respectively in England. However, there are pockets of poor health: nine areas in Herefordshire (7 in Hereford City, both north and south of the river, and 2 in Leominster) are within the 25% most health deprived areas in England.
- 2.2 Population forecasts suggest that the number of people aged 65 years and over will continue to increase, and the number of senior citizens is expected to be 65% higher in 2026 than in 2007. In particular, the number of people aged 85 years and over is expected to increase by more than double, from 5,000 in 2006 to 10,200 in 2026.
- 2.3 Mortality rates from cardiovascular disease and cancers are on a downward trend whilst diabetes is increasing due in part to increasing levels of obesity and the ageing population.
- 2.4 Health inequalities exist in Herefordshire, as they do elsewhere and these are most clearly measured in terms of the differences in mortality rates. Mortality rates are significantly affected by different patterns of risk-taking behavior and in particular smoking and drinking too much alcohol.
- 2.5 In respect of smoking, the largest concerns relate to 35-44 year olds (29% of 35-44 year olds in Herefordshire smoke, compared to 22% regionally); teenagers, in particular 15 year olds girls (25% reported that they smoked within the 2007 Teenage Lifestyle Survey); and pregnant women (around 17% of pregnant women have smoked during the last two years).
- 2.6 With regard to alcohol, the priority is to reduce hospital admissions, which have risen from 204 in 2002 to 516 in 2006, and where there has been a sharp rise among young people, with admissions of under 16 year olds rising from 9 in 2002 to 30 in 2006. Analysis of admissions by deprivation quartile shows that 46.8% of all alcohol-related admissions in 2002-6 were from patients in the most deprived quartile.
- 2.7 Health and wellbeing is a significant topic area and it covers a variety of issues, not all of which are traditionally considered to be within the remit or influence of the land use planning system. The following definition by the World Health Organisation (WHO) provides a useful starting point for this topic:

*“Health is not only absence of disease but a state of complete physical, mental and social wellbeing. The enjoyment of the highest attainable standard of health is one of the fundamental rights of every human being without the distraction of race, religion, political or economic and social conditions.”*
- 2.8 The main reasons for integrating health into the emerging Core Strategy are as follows:
  - Health outcomes, health status and health inequality are inextricably linked to socio-economic and environment factors;

- Spatial planning will have a major influence on the socio-economic and environmental situation;
  - Spatial planning policies and interventions can promote healthier lives;
  - Health strategies should see spatial planning as a means of improving health;
  - No spatial plan can be sound without addressing health issues;
  - The primary care trust and the council are required to actively collaborate in order to deliver sustainable and healthier communities.
- 2.10 Planning for health is important not only from a legislative perspective, but also in relation to costs. Promoting healthy lifestyles, avoiding health impacts and tackling health inequalities throughout the planning process could result in major cost savings to society. By focusing on the prevention of public health issues the need for costly treatments can be avoided. This frees up money which Herefordshire's public service trust can re-allocate to other priority areas.
- 2.11 The 2004 Wanless Report: *Securing Good Health for the Whole Population*, examined future trends and identified factors to inform the long-term financial resource needs of the National Health Service (NHS) to 2022. The review considered three scenarios varying in relation to a number of factors including the extent to which people protected, promoted and managed their own health. The 'fully engaged' scenario assumes people are highly engaged in personal health management and focus is on health prevention. The report concluded that there is a health expenditure gap of around £30 billion (by 2022/23) between the best and worst health scenarios. This means that £30 billion could be saved by shifting from a culture of little engagement in personal health to one of individual management and control.
- 2.12 The emerging Core Strategy can help create the right circumstances to enable people to engage more in personal health prevention and management.
- 2.13 Positive planning and management of health can also help reduce the burden of health inequalities and improve economic productivity. The Confederation of British Industry (CBI) estimated workplace absence cost British business nearly £11 billion in 2000 and this figure may have risen since that time.

### **3.0 The policy framework**

- 3.1 As mentioned previously, the WHO defines health as:
- “A state of complete physical, mental and social wellbeing and not merely the absence of disease or infirmity.”
- 3.2 The definition recognises that health comprise a wide range of factors and moves away from the traditional focus on health treatment to one of prevention and cure. This ties in with one of the key principles of the Public Health White Paper which aims to create an environment whereby people are able to make healthier choices.
- 3.3 There are numerous definitions of a 'healthy community' in existing literature and guidance. Furthermore, definitions are provided at a variety of scales, for example, at the level of the city or neighbourhood. It is however, possible to

draw together some useful conclusion from these differing studies and concepts.

3.4 A particularly useful definition is encapsulated in the WHO's 'European Healthy Cities Network', which consists of a network of cities from around Europe committed to the implementation of the Healthy Cities concept.

3.5 The WHO defines a healthy city as:

*"...one that is continually creating and improving the physical and social environments and expanding the community resources that enable people to mutually support each other in performing all the functions of life and in developing to their maximum potential."*

### **National health policy**

3.6 Health policy in England is set by the Department of Health (DH) with an aim to '...improve the health and wellbeing of the people of England.' This includes setting national standards, shaping the direction of the NHS and social care services, and promoting healthier living.

3.7 The NHS was established in 1948 with a founding principle to '...improve health and prevent disease, not just provide treatment for those who are ill.'

3.8 This principle has formed one of the core focuses of the following DH White Papers in addition to tackling inequalities and empowering communities to make better health choices:

- Saving Lives: Our Healthier Nation – Action Plan (July 1999);
- Tackling Health Inequalities: A Programme for Action (2003);
- Securing Good Health for the Whole Population – Report to the Treasury (Wanless, 2004);
- Choosing Health: Making Healthier Choices Easier (November, 2004);
- Our Health, Our Care, Our Say – White Paper (2006).

3.9 The DH is also committed to a number of Public Service Agreements (PSA) to help meet policy proposals. These cover the period 2008 – 2011 and are outlined below:

- PSA12: Improve the Health and Wellbeing of Children and Young People;
- PSA18: Promote better Health and Wellbeing for All.

3.10 The vision set within PSA12, as outlined in the Children's Plan, is to make this country the best place in the world for our children and young people to grow up in. To achieve this, the PSA provides a focus on five key areas:

1. Increasing breastfeeding from 6 – 8 weeks;
2. Increasing uptake of school lunches;
3. Reducing childhood obesity;
4. Improving emotional health and wellbeing, and child and adolescent mental health services;
5. Improving services for children with disabilities.

3.11 With reference to PSA18, the Government is committed to delivering the best possible health and wellbeing outcomes for everyone, helping people to live healthier lives, empowering them to stay independent for longer and tackling inequalities. Accordingly the PSA has set the following objectives:

- Continuing to increase life expectancy in England by tackling the biggest killer diseases, with an emphasis on ill health prevention and promotion of good health, and sustaining the drive to promote equality and to reduce inequalities in health;
- Reducing smoking prevalence;
- Supporting people to meet their aspirations for independence and wellbeing;
- Improving the wellbeing and inclusion of people with depression and/or anxiety disorders through improved access to psychological therapies.

### **National planning policy**

3.12 Sustainable development is the core principle underpinning planning. The Government sets out five guiding principles for sustainable development in *Securing the Future: Delivering UK Sustainable Development Strategy (2005)*. One of the five guiding principles is to ensure a strong, healthy and just society, which aims to meet the diverse needs of all people in existing and future communities, promoting personal wellbeing, social cohesion and inclusion, and creating equal opportunity for all.

3.13 National planning policy sets out a number of requirements for spatial plans to minimise health impacts and to promote healthy outcomes. It indicates that health is a material planning consideration in the determination of proposals for development or change of use.

### Accessibility to health facilities

3.14 Planning Policy Statement 1 (PPS1): Delivering Sustainable Development sets out the overarching planning policies on the delivery of sustainable development through the planning system and so is the key policy that seeks to facilitate and promote sustainable and inclusive patterns of urban development. In preparing development plans, PPS1 requires local planning authorities to provide improved access for all to health and community facilities and to services which promote healthy outcomes.

3.15 PPS12: Local Development Frameworks reinforces this approach, suggesting that adopted proposals maps show where policies will be seeking to deliver community facilities, including health, education and social facilities, to assist regeneration and the achievement of sustainable communities.

### Promoting healthy communities

3.16 PPS1 requires local planning authorities to promote communities which are inclusive, healthy, safe and crime free, whilst respecting the diverse needs of particular sectors of the community.

3.17 Planning Policy Guidance Note 17 (PPG17): Planning for Open Space, Sport and Recreation recognises the role that open space, sports and recreational

facilities have to play in promoting healthy living and preventing illness, and in the social development of children of all ages through play, sporting activities and interaction with others. The guidance note includes principles for planning for new open space and sports and recreation facilities. Integrating open spaces is promoted at the regional, local and individual building level.

#### Influence of design on health

- 3.18 PPS1 states that high quality and inclusive design should be the aim of all those involved in the development process. This design should create well-integrated developments which have well planned public open spaces that bring people together and provide opportunities for physical activity and recreation. In terms of individual buildings, PPS3: Housing sets out a number of factors to consider when assessing design quality. These factors include the extent to which the proposed development provides, or enables good access to, community, green, open amenity and recreational space (including play space) in addition to private outdoor space such as residential gardens, patios and balconies.

#### Avoiding health impacts

- 3.19 PPS23: Planning for Pollution Control clearly states that potential impacts arising from development, which could have impacts on health, is capable of being a material consideration, in so far as it may arise from or may affect any land use. This provides a clear policy steer that seeks to avoid impacts on human health arising from development projects.
- 3.20 Similarly, PPS1 advises that development plans should take account of environment issues such as the management of waste in ways that protect the environment and human health. Whilst PPS10: Planning for Sustainable Waste Management expects modern and well regulated waste management facilities operated in line with current pollution control techniques to pose little threat to human health, para.30 reiterates policy set out in PPS23 acknowledging that planning operates in the public interest and seeks to ensure that the location of proposed development is acceptable and that health can be material to such decisions.

#### Delivering healthy communities

- 3.21 The Royal Town Planning Institute's Good Practice Guidance Note 5: Delivering Healthy Communities, launched in June 2009, offers advice on planning for health. The guidance note makes clear that spatial planning has a key role to play in shaping environments which make it possible for people to make healthier choices about exercise, local services, travel, food, nature and leisure.
- 3.22 The document makes the following recommendations in relation to healthy communities:
- Communities should be planned with a range of employment, services, infrastructure, and tenures to meet the needs of the community;
  - Developments should be designed to ensure areas are permeable and accessible by all parts of society;



- Provision of facilities either on or off-site should be made for communities or groups whose activities are displaced by development;
- Neighbourhoods should include well designed places where all sectors of the community can gather, interact, and be physically active: for example shared places of worship, community centres, sports facilities and community spaces. The community should be involved in their design and management;
- Consider the designation of home zones or similar environments in suitable residential areas which may benefit from enhanced pedestrian priority, providing opportunities for community contact and play;
- Work collaboratively with other organisations and government departments to provide services for children, and support the provision of well-located play areas. Ensure local caregivers and children are involved in the design process.

3.23 Local planning authorities are being urged to collaborate with health practitioners from the outset in order to achieve these recommendations on the ground. Plans should be developed with the active involvement of all those likely to be affected, both existing residents and potential incomers, as well as 'hard to reach' groups, who may be most vulnerable.

### **Regional guidance**

3.24 The West Midlands Regional Spatial Strategy (WMRSS) sets out the Regional Planning Body's objectives, which development plan policies should take fully into account. Health considerations are integrated within these objectives and the plan recognises that the creation of sustainable communities in which people will choose to work, live and invest can be achieved through the provision of healthy living and working environments.

3.25 The WMRSS acknowledges that improving peoples' health is intrinsic to the regeneration of rural areas of the West Midlands, including Herefordshire, and local planning authorities are advised to identify opportunities for the development of health facilities. In identifying such opportunities, consideration should be given to the most appropriate and sustainable locations that accord with the spatial strategy.

### **Sub-regional guidance**

3.26 At the sub-regional level, there are six documents which directly relate to this topic:

- The Sustainable Community Strategy;
- The Local Area Agreement;
- Strategy for Success;
- Herefordshire Growing Older Strategy;
- Healthy Herefordshire: World Class Commissioning – Strategic Plan 2008-2013;
- Joint Strategic Needs Assessment for Herefordshire.

3.27 The **Herefordshire Sustainable Community Strategy** sets out aspirations for the county by 2020 and how we might achieve them. The strategy also

acts as Herefordshire's Local Agenda 21 Plan and Regeneration Strategy and is closely integrated with the emerging LDF for the county.

3.28 The **Vision** is that Herefordshire will be a place where people, organisations and businesses working together within an outstanding natural environment will bring about sustainable prosperity and wellbeing for all.

3.29 The **Local Area Agreement (LAA)** is closely aligned with the Sustainable Community Strategy and is structured around five themes:

- Economic and Enterprise;
- Children and Young People;
- Healthier Communities and Older People;
- Safer and Stronger Communities;
- Environment.

3.30 Within each theme there are a number of outcomes, underpinned by performance indicators which are regularly monitored to show progress towards the achievement.

3.31 Two important LAA priorities 2008-11 are to:

- Encourage and promote a healthier lifestyle with particular attention to reducing smoking, levels of obesity and excessive consumption of alcohol;
- Help vulnerable people to live safely and independently in their own home.

3.32 The Primary Care Trust's **Strategy for Success** outlines plans to improve the health of all local residents' whilst reducing health inequalities. This reinforces the **Growing Older in Herefordshire Strategy**, which advises that older people will remain independent and active, continuing to live in, and contribute to, strong local communities and be included in decisions regarding the future services and activities that they want and need.

3.33 Another important document relating to health is the public service trust's **Strategic Plan 2008-2013**. The purpose of the strategic plan is to bring about improvements in local health services. It focuses on assessing and prioritising the needs of the population, identifying strategic outcomes, outlining the services required to secure those outcomes, and indicating how providers will be procured and performance managed to deliver the required services.

3.34 The main goals contained in the strategy are to:

- Make access to services much easier;
- Provide an increasing element of services in community settings close to people's homes;
- Tackle inequalities and causes of ill-health, by developing effective prevention strategies and working with the public and partner agencies.

3.35 The vision is:

*“To make Herefordshire the healthiest place to live and work. A place where health and care services reduce inequalities and meet people’s needs; where everyone is encouraged and supported to take personal responsibility for their own health. Where by working together we promote better health, and provide access to excellent services when they are needed”.*

- 3.36 In general, the strategic plan sets out an ambitious programme of change aimed at improving health for the population of Herefordshire, reducing health inequalities and delivering the best possible care within the resources available. Increasingly this will be an agenda which is owned and delivered through forward planning.
- 3.37 Forward planning will also play a key role in the delivery of the **Joint Strategic Needs Assessment (JSNA)**. Indeed, the JSNA focuses on how the population of Herefordshire is likely to change over the next two decades, the local socio-economic context, social care needs and the lifestyle choices and risks which work together as the wider determinants of health and wellbeing. It is intended to help decision makers identify priorities and reflect those in future plans, commissioning programmes and budget allocations.
- 3.38 The JSNA makes reference to the 2008 Quality of Life Survey which showed, among other things, that nearly nine out of ten people were satisfied with their local area as a place to live and that over three out of four said their health in general was good or very good. However, the survey revealed also that there had been significant drops in satisfaction amongst users of sports, leisure and cultural facilities, and parks and open spaces.
- 3.39 One of the main challenges requiring action, as set out in the JSNA, is the need to prevent the underlying conditions that cause health problems such as lack of exercise, smoking and ineffectual screening of patients.

## **4.0 Evidence base**

- 4.1 Over the last few years and as part of its LDF the council has been preparing a wide range of background studies as evidence to support its Core Strategy. There are two documents which directly concern this topic; the Open Space Study (2006) and the emerging Green Infrastructure Strategy (2008).

### **Open Space (PPG17) Study**

- 4.2 In January 2005, Strategic Leisure Limited was commissioned by Herefordshire Council to carry out an audit and assessment of publicly accessible open space, sport and recreation facilities in the county, in accordance with PPG17.
- 4.3 The key objectives of the study include:
- An assessment of existing open spaces across Herefordshire;
  - The identification of local needs and aspirations through public consultation;
  - A review of existing open space policies and provision standards;
  - Recommendation standards for future provision of open spaces.

- 4.4 The completed study, published in November 2006, will enable the council to adopt a clear vision and priorities for the future, including the preparation of well informed and robust planning policies within the LDF. This is particularly important because the provision of good quality, accessible open spaces, sport and recreation facilities can make a positive contribution to the health and wellbeing of the county.
- 4.5 A detailed audit of provision of open space was undertaken across the county and a total of 713 sites were identified through a variety of methods including a postal and telephone survey to all Parish Councils, site visits for quality assessment, consultation and information provided by council officers.
- 4.6 Following the completion of this detailed audit, the consultants' were able to identify where the county needs to protect, provide new provision or potentially change use to fill the gaps in the provision across Hereford and the market towns. The council has been advised that the disposal of sites should be seen very much as a last resort and that identified provision deficiencies should be addressed as key priority in the production of the LDF. Work is currently ongoing to produce a comprehensive Open Space Strategy for Herefordshire based on the 2006 audit.

#### **Green Infrastructure Strategy**

- 4.7 The Green Infrastructure Strategy is being developed in two stages, with the first phase comprising evidence gathering and analysis forming the core of the Green Infrastructure Study. The second stage will involve the development of a strategic approach to infrastructure provision and the development of planning guidance. It is intended that the Green Infrastructure Strategy will be applicable at all levels; developing a set of principles applicable at a county scale but equally relevant at a local, site-specific level.
- 4.8 Work to date has concentrated upon developing the Green Infrastructure Study, which was commissioned by Herefordshire Council in January 2007 as part of its ongoing commitment to creating conditions for better health and supporting healthier lifestyles through general environmental protection and enhancement.
- 4.9 The completed Green Infrastructure Study, published in April 2008, aims to ensure that the natural and cultural landscape features and functions are placed at the heart of planning for sustainable development within Herefordshire. However, although the Green Infrastructure Study identifies opportunities and deficiencies for environmental enhancement and connection, the original document is currently being reworked and supplemented to fit within the structure of the wider Green Infrastructure Strategy.

### **5.0 What can the Core Strategy do?**

- 5.1 The emerging Core Strategy can bring about positive improvements in Herefordshire's health and wellbeing by delivering the aspirations of the

Sustainable Community Strategy. To achieve this, the following long-term headline spatial vision is proposed:

*“By 2026, Herefordshire will be a place of distinctive environmental, historical and cultural assets and local communities, with sustainable development fostering a high quality of life for those who live, work and visit here. A sustainable future for the county will be based on the interdependence of the themes of social progress, economic prosperity and environmental quality with the aim of increasing the county’s self-reliance and resilience.”*

5.2 There are twelve objectives which underpin this vision, two of which directly concern health and wellbeing:

**Objective 2:** *To improve the health, wellbeing and quality of life for all residents by ensuring new developments positively contribute towards better access to, provision and use of, improved public open spaces, sport and recreation, education, cultural and health facilities.*

Key issues addressed:

- Providing for the needs of all generations;
- Protection and enhancement of environmental assets;
- Provision of, and access to, important services and facilities;
- Improving transport infrastructure, choices and movement;
- Reducing the opportunity for crime and anti-social behaviour;
- Ensuring high quality, locally distinctive, sustainable design and construction.

Sustainable Community Strategy priorities:

- Children and young people are healthy and have healthy lifestyles;
- Reduce traffic congestion and improve health through integrated transport provision, including opportunity for maximising walking, cycling and public transport provision;
- Protect and enhance biodiversity within the county;
- Encourage investment in high quality streets, public spaces and the built environment;
- Support smokers to quit, particularly young, pregnant and long-term smokers;
- Support people to maintain a healthy weight;
- Reduce the level of harmful alcohol use, particularly among young people;
- Work with local people to enhance emotional wellbeing and intervene to reduce suicide, accidents and injuries;
- Support people with assessed social care needs to live independently in their own homes wherever possible, with the services and information they need;
- Ensure vulnerable adults are kept safe by a fast and reliable response;
- Provide accessible, high quality sporting, cultural and recreational facilities and activities;

- Ensure fair access to the services which Herefordshire residents need.

**Objective 4:** *To reduce the need to travel and lessen the harmful impacts from traffic growth, promote active travel and improve quality of life by locating significant new development where access to employment, shopping, education, health, recreation, leisure and other services are, or could be made available by walking, cycling or public transport.*

Key issues addressed:

- Addressing the impacts of climate change, including flooding;
- Improving air quality;
- Improving transport infrastructure, choices and movement;
- Provision of, and access to, important services and facilities.

Sustainable Community Strategy priorities:

- Support businesses and home working through better Broadband services;
- Reduce traffic congestion and improve health through integrated transport provision, including opportunity for maximising walking, cycling and public transport;
- Act to mitigate Climate Change and its consequences including promoting adaptation where this is necessary and appropriate;
- Encourage investment in high quality streets, public places and the built environment;
- Increase road safety.

## **6.0 Developing Options Consultation Results**

6.1 Public engagement is an important element of developing the Core Strategy and a Developing Options Consultation took place through the summer of 2008 in order to determine the options which the council should address in more detail.

6.2 The consultation period ran from 16 June to 8 August 2008 and residents, statutory consultees and other interested bodies were encouraged to examine and comment upon, among other things, the council's draft spatial vision and objectives.

6.3 The Developing Options Paper asked the following question in respect of health and wellbeing:

1. How can new developments help to make provisions for new and improved healthcare facilities?
  - a. Provide new facilities in areas which are a focus for growth or urban extensions, in partnership with Herefordshire Primary Care Trust and other health care providers;
  - b. Increase the capacity of existing facilities, in partnership with Herefordshire Primary Care Trust and other health care providers.

- 6.4 The results of the Developing Options Consultation show that both options of providing new facilities (86%) and increasing the capacity of existing facilities (92%) gained strong support amongst respondents. Some respondents made additional comments in respect of health and wellbeing, but none of these are considered to represent alternative options.

### **Sustainability Appraisal and Habitat Regulation Assessment**

- 6.5 As part of the Sustainability Appraisal (SA) process of the whole Core Strategy, the objectives were appraised in April 2008 at the Developing Options stage. The results of that exercise were published in June 2008 and the objectives relating to health and wellbeing were considered to be in conflict with SA Objective 11, which broadly relates to reducing waste and minimising the use of non-reusable materials.
- 6.6 The likely effects of options A and B (para 6.3) were considered to be neutral and the Habitat Regulation Assessment (HRA) reveals that neither option would place additional pressure on water resources or air quality.

## **7.0 Further consultation and Sustainability Appraisal**

- 7.1 Over the next few months, the council will be undertaking further consultation with relevant internal departments and external organisations in order to finalise a preferred policy. The list of consultees can be found at Appendices 1 and 2 of this report.
- 7.2 In August 2009, the council undertook four SA workshops in order to assess the sustainability of the emerging set of preferred directions for health policies. The emerging policy directions were considered to be moving towards sustainability and a full copy of the SA and HRA of the Place Shaping Paper can be found on the council's website.

## **8.0 Conclusion**

- 8.1 In conclusion, the national and regional health policy agendas advise that the delivery of safe, healthy and attractive places to live should be key objectives of spatial planning. As a consequence, local planning authorities will have to work harder at promoting public health and wellbeing whilst tackling health inequalities.
- 8.2 Herefordshire's aspirations in relation to health are set out in numerous documents and the aim of the Core Strategy is to ensure that new housing growth is accompanied by the provision for health facilities where appropriate.
- 8.3 Key components of the evidence base have yet to be finalised, but on the basis of the Developing Options consultation alone; policies in the Core Strategy should facilitate the provision and development of appropriate healthcare facilities.

## **9.0 Way forward**

- 9.1 Whilst Herefordshire Council needs to demonstrate that there are clear mechanisms for monitoring the outcomes of policies (including health policies) within its Core Strategy, it is not the purpose of this report to propose indicators to measure all health outcomes.
  - 9.2 The range of possible indicators which could be used to monitor policies will be developed through further consultation with health practitioners and other interested bodies as appropriate to local circumstances.
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## **Appendix 1: List of internal consultees**

*Akeem Ali - Director of Public Health*

*Tam Bailey - HALO Health and Fitness Manager*

*Tess Boyes - PSHE/Healthy Schools Co-ordinator*

*Bruce Chartres - Principle Environmental Health Officer*

*Penny Harding - Healthy Living Community Co-ordinator*

*Ruth Jackson – Principal Leisure & Countryside Recreation Officer*

## **Appendix 2: List of external consultees**

Herefordshire Partnership

Herefordshire Health Authority/Primary Care Trust

Hereford Hospitals NHS Trust

The Gypsy Council for Health, Education and Welfare

Sport England

Open Spaces Society

## **Appendix 3: Bibliography and Further Reading**

### **National documents**

RTPI (2009): *Good Practice Guidance Note 5: Delivering Healthy Communities*, London

Defra (2005): *Securing the Future: Delivering UK Sustainable Development Strategy*, London: HMSO

DH (2004): *Choosing Health: Making Healthy Choices Easier*, London: HMSO

### **Planning policy statements/guidance notes**

DCLG (2008): *PPS12 – Local Spatial Planning*, London: HMSO

DCLG (2006): *PPS1 – Delivering Sustainable Development*, London: HMSO

DCLG (2004): *PPS23 – Planning for Pollution Control*, London: HMSO

ODPM (2002): *PPG17 – Open Space, Sport and Recreation*, London: HMSO

### **Regional documents**

GOWM (2008) *Regional Spatial Strategy for the West Midlands (Incorporating Phase 1)*, London: TSO

### **Sub-regional documents**

The Herefordshire Partnership (2009): *The State of Herefordshire Report*, Hereford

Herefordshire Council (2009): *Core Strategy - Developing Options Analysis Schedules*, Hereford

Herefordshire Council (2009): *Core Strategy - Developing Options Paper Sustainability Appraisal*, Hereford

Herefordshire Council (2009): *Core Strategy – Developing Options Paper Habitat Regulation Assessment*, Hereford

Herefordshire PCT (2008): *Healthy Herefordshire: World Class Commissioning – Strategic Plan 2008-2013*, Hereford

Herefordshire PCT (2008): *Joint Strategic Needs Assessment – Highlighting Priority Health and Wellbeing in Herefordshire*, Hereford

Herefordshire Council (2008): *Shaping our Place 2026 - Core Strategy Developing Options Paper*, Hereford

The Herefordshire Partnership (2008): *Herefordshire Story of Place Local Area Agreement 2008-2011*, Hereford

The Herefordshire Partnership (2007): *Growing Older in Herefordshire – A Strategy for Older People in Herefordshire*, Hereford

The Herefordshire Partnership (2006): *The Community Strategy for Herefordshire “A Sustainable Future for the County”*, Hereford

**External technical studies (consultants)**

AMEY (2008): *Herefordshire Green Infrastructure Study*, Hereford

Strategic Leisure Limited (2006): *PPG17 Open Spaces Assessment*, Hereford

**Background papers**

Herefordshire Council (2009): *Core Strategy - Developing the Vision and Objectives Background Paper*, Hereford