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Report Originator	Health & Planning Programme Manager		
Title	Health & Planning Programme Update		

1. PURPOSE OF REPORT

To provide the committee with an update on the Health & Planning Programme and the activity of the jointly created Health & Planning Programme Manager Post.

2. BACKGROUND AND CONTEXT

- 2.1 Health and Wellbeing there is increasing concern nationally and within Northamptonshire about health and wellbeing trends that see concerning levels of ill health and increasing pressure on the NHS, social care and other public services. This has major implications for individuals, families, communities, public services and the wider economy.
- 2.2 Although we are generally living longer lives, we are increasingly spending a significant part of those lives in poor health. Conditions such as Type 2 diabetes, musculoskeletal problems, respiratory problems and mental health issues are of growing concern and are being experienced more widely across the population. These are linked to factors such as poor diet, obesity, alcohol, tobacco, lack of physical activity etc, but are also impacted on by wider factors such as education, employment, housing, social interaction, air quality etc.
- 2.3 Addressing these health and wellbeing challenges goes well beyond the National Health Service and simply investing more in healthcare services to treat ill health when it occurs. It is important that we create the environment for our communities to be able to live healthy and fulfilling lives and to maintain their wellbeing and independence as long as possible. As such, the planning function has an important role to play in creating environments that both support and encourage health and wellbeing, recognising their essential contribution to sustainable communities. In order to do this, health and wellbeing issues need to be appropriately addressed in policy documentation, ranging from the Joint Core Strategy, District level Local Plan Part 2s and relevant planning guidance.

3. HEALTH & PLANNING IN THE COUNTY

- 3.1 Following discussions across planning and health teams within the county, it was recognised that the two functions needed to work together in a more coordinated way. This was to address a number of concerns / problems, including;
 - Input into planning consultations / discussions from the health sector were not always being received in a timely manner.
 - The local health sector was unable to identify specific healthcare infrastructure that it was hoping to create in the future, in order to feed into the Infrastructure Delivery Plan.
 - Requests for section 106 / developer contributions to healthcare were not always supported by robust evidence of need.
 - When section 106 contributions were agreed or land allocated for healthcare facilities, those facilities were not always brought forward as anticipated by planners.
 - Little comment was being received on the design of development proposals in relation to their implications for health and wellbeing.
- 3.2 These concerns led to the creation of a jointly funded post (Health & Planning Programme Manager), with funding contributions secured from the following partners:

-Northamptonshire County Council Public Health -Northamptonshire Clinical Commissioning Groups (Nene and Corby CCGs) -North Northants Joint Planning and Delivery Unit (on behalf of the four planning authorities in the North of the county) -Northampton Borough Council -Daventry District Council -South Northamptonshire Council.

3.3 Joint 'Health & Planning Programme Manager' Post

Stephen Marks, from NCC's Public Health team was seconded into the Health & Planning Programme Manager role on 1st April 2019 for an initial twelvemonth period, hosted by the North Northants Joint Planning Unit but working with planning teams and health partners across the whole of the county.

3.4 Health & Planning Steering Group

The work of the Health & Planning Programme manager is overseen by a steering group made up of senior representatives of the funding partners. This group meets regularly to monitor activity and outcomes of the work undertaken by the Health and Planning Programme manager.

3.5 The group has agreed some desired outcomes (appendix A) for the Health and Planning programme, as well as an initial action plan (appendix B).

4. SUMMARY OF ACTIVITY UNDERTAKEN / PROGRESS MADE.

4.1 In order to achieve the identified outcomes (see appendix A), the following has been undertaken / achieved thus far:

4.2 Health & Planning Workshops

The Health and Planning Programme Manager has delivered Health & Planning Workshops to district council planning teams (and other functions such as housing, environmental health, open spaces, community development etc). The purpose of these has been to:

- explore the linkages between Health & Wellbeing and the planning process and how we can best support the health of our local communities.
- improve understanding of local health and planning systems develop relationships for effective joint working
- 4.3 Workshops have taken place with Kettering, Wellingborough, Corby, Northampton and Daventry councils thus far. Discussions have also taken place with ENC and SNC and dates will be arranged.
- 4.4 These workshops have clearly demonstrated the need for better links between planning and health with planning officers identifying their concerns and supporting the development of more structured links with the health sector.

4.5 **Health and Wellbeing in planning policy:**

Informal dialogue has taken place and formal representations have been made to planning teams to incorporate health and wellbeing considerations and aims into Part 2 Local Plans and other planning policy, to support the references to health and wellbeing in the North Northants Joint Core Strategy and in accordance with the National Planning Policy Framework. In relation to NN this has included:

- Kettering Borough Council The Health and Wellbeing Programme Manager has provided input into the drafting of policies in the draft Kettering Local Plan Part 2 LPP2. He has also attended meetings and provided input into specific planning policy work related to green spaces / sports facilities etc.
- Corby Borough Council Following previous discussion and consultation, CBC has included a specific Health and Wellbeing related policy in the current (pre-submission) version of its local plan.
- East Northamptonshire Council Comments regarding health and wellbeing have previously (2018) been submitted to ENC from NCC's Public Health team in relation to consultation on its Local Plan Part 2. The Health & Planning Programme Manager will contribute to further consultation and policy development.

- Borough Council of Wellingborough Wellingborough's Local Plan Part 2 was adopted in February 2019. Representations were made to BCW in respect of the inclusion of a Health and Wellbeing Policy but it was decided not to include a specific Health and Wellbeing Policy into the LPP2 but to rely on existing policy in the North Northamptonshire Joint Core Strategy (Policy 8).
- North Northants Place Shaping Supplementary Planning Document The Health & Planning Programme Manager will work with NNJPDU colleagues to embed health and wellbeing considerations into the developing Place Shaping SPD. Being hosted by the NNJDPU is enabling the Health & Planning Programme Manager to contribute to a range of relevant workstreams.

4.6 Health Impact Assessment for Planning tool

The Health & Planning Programme Manager has produced a local Health Impact Assessment for Planning tool. This enables systematic consideration of the health and wellbeing implications of a planning policy or a development proposal, in order to minimise negative impacts of proposed development proposals and maximise any positive impacts / opportunities. It can be used by planning authorities who have a formal policy to require Health Impact Assessment, although for very large development a bespoke approach to Health Impact Assessment may be more appropriate.

4.7 **Design Surgeries**

The Health & Planning programme Manager has attended a number of design surgeries in the north of the county to contribute to discussions about specific development proposals.

This has helped develop relationships with planning officers and ensured health and wellbeing issues are considered in such design discussions.

4.8 Work with Health Sector partners

It should be noted that the models of healthcare provision in the county are changing. The Northamptonshire Health and Care Partnership has identified that it needs to change the way in which services are delivered to communities, both to address changing population healthcare needs / demand and to make better use of limited resources.

https://www.northamptonshirehcp.co.uk/our-work/

4.9 Broadly speaking this includes:

- The two general hospitals (NGH & KGH) working more closely together to improve care through working in partnership, make the best use of resources and remove differences in care across the county.
- Improving urgent and emergency care to reduce the need for people to • have unplanned hospital admissions and to support them when they are ready to leave hospital.

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- Delivering more healthcare services in local community locations rather than in hospitals.
- Working better with local councils, charities and voluntary and community groups.
- Supporting people to access local (non-medical) services and support to help them stay healthy and independent. (prevention)
- 4.10 This shift in approach will inevitably have implications for the type of health (and wider care) facilities / buildings that will be needed in our communities in the future, including to serve major new developments. Current discussions are around multi agency / multi-functional hubs that could include health care, social care and wider local authority and voluntary sector support.
- 4.11 However, while these models are being developed, it is currently unclear exactly what types / size of facilities will be needed within the county, where they will be needed and the ownership / management arrangements. This poses a challenge for the health sector to respond to planning colleagues in relation to health care requirements to serve major new developments. This will hopefully be addressed by ongoing work on estates planning within the Health and Care Partnership, where evolving service delivery models will inform more detailed proposals for health care buildings / facilities.

4.12 NHS Estates Work

The Health & Planning Programme Manager has been a member of the Northamptonshire Health & Care Partnership Strategic Estates Group, which has been working to develop / revise the Northamptonshire Health & Care Partnership's Estates Strategy. This has helped ensure consideration of major planned developments is considered in the estates work.

4.13 **Primary Care Estates / Facilities**

The Health & Planning Programme Manager has produced a briefing note on the major urban extensions planned across the county for consideration by the consultants appointed by the Health & Care Partnership to develop a Strategic Outline Case for primary care estates. This will ensure that planned major housing growth is considered in this process. Further work is being done by Northamptonshire Clinical Commissioning Groups in relation to primary care estates and there is recognition of the need to increase capacity within the CCGs to work on this issue.

4.14 Clinical Commissioning Group (CCG) / NHS England responses to planning applications.

The Health & Planning Programme Manager has held discussions with colleagues from NHS England and Northamptonshire CCGs in relation to their processes for engaging with the planning process and responding to planning application consultations.

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- 4.15 Currently the CCG are in 'joint arrangements' with NHS England in relation to Primary Care (including GPs) which means they are jointly responsible, which provides some complexity. It is expected that this will change in the future, with the full responsibility for primary care likely to be 'delegated' to the local CCG in the near future. (Note: Nene and Corby CCGs are currently going through a process which is likely to lead to them becoming one single Northamptonshire CCG from April 2020 onwards.)
- 4.16 The Health & Planning Programme Manager has instigated an initial review of the process for NHS partners responding to planning applications to identify any areas for improvement.
- 4.17 Based on these discussions the CCG's Deputy Director of Primary Care has initiated a re-engineering of the process for responding to planning applications to ensure it is effective. This is an important exercise in ensuring that local health partners are well placed to engage with planning teams in relation to specific planning applications. The Health & Planning Programme Manager will support this process to ensure it meets the needs of planning teams across the county.

4.18 Specific sites / developments

The Health and Planning Programme manager has acted as a conduit between planning teams and CCG / NHS England partners in relation to a number of queries relating to specific sites. This has helped identify for example, more detailed responses from health sector partners to inform planning officers discussions with applicants / developers and to inform section 106 agreement negotiations.

4.19 **Communications / web pages**

The Health & Planning Programme Manager is in the process of creating Northamptonshire Health & Planning web pages, as part of a wider approach to communicating health and planning material and information to planning and health teams locally. This will act as a source of information and guidance.

5. OTHER ISSUES

5.1 **Primary Care Networks**

As part of the new NHS contract for General Practice, local GPs have been required to join together to develop Primary Care Networks. These networks of GP practices will jointly be responsible for providing healthcare services to their registered population, which will generally be in the region of 30,000 – 50,000 patients. They will each have a 'Clinical Director' as a named, accountable leader, responsible for delivery. The approach of the networks to service delivery and use of healthcare facilities will be an important element in planning for future healthcare infrastructure / buildings to serve new developments.

5.2 One Public Estate / Local Government Re-organisation

As part of the One Public Estate initiative, a PAN Northamptonshire project has been established to assist Public Sector partners to manage their buildings / estates in a more joined up way, in order to deliver more effective services and use financial resources more efficiently. This too may have a significant impact on how healthcare (and wider public sector) facilities are configured in relation to new development, alongside the re-organisation of local government and subsequent delivery of services.

5.3 **Continuation of the Health & Planning work and post beyond 2019/20.** The Health & Planning Steering Group will need to consider whether it wishes

to continue the Health & Planning Programme Manager role and workstream beyond the end of March 2020. NCC's Public Health team has committed to a further funding contribution for 2020/21, as has the NNJPDU and Daventry District Council. The remaining partners will need to consider whether they wish to do likewise.

6. CONCLUSION

- 6.1 There is widespread consensus that relationships between planning functions and the local health system need to improve to help enable:
 - the delivery of new developments which are designed in ways that support healthier lives and address the health and wellbeing challenges faced by the county
 - the identification and delivery of suitable healthcare facilities to meet the needs of new developments
- 6.2 This is at a time of significant change within the local healthcare system, which will have major implications for service delivery models and the types of healthcare facilities required.
- 6.3 Good initial progress has been made, but there remains much to do, notably revising the local health sector's input into the delivery of major new developments and associated healthcare facilities. The need for this is recognised at a senior level within the Clinical Commissioning Groups.

7. **RECOMMENDATIONS**

- 7.1 That the Joint Delivery Committee note the content of the report and the work being undertaken in relation to health and planning in the county.
- 7.2 That the Joint Delivery Committee make any comments on the issues identified.
- 7.3 That the Joint Delivery Committee notes the situation regarding the continuation of the Health & Planning work and role, as identified in para 5.3.

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