

Camden Planning Guidance

# Planning for health and wellbeing

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## Planning for health and wellbeing

### KEY MESSAGES

- Planning can have a significant role in improving health and wellbeing and enabling healthier lifestyles;
- Measures that will help contribute to healthier communities and reduce health inequalities should be incorporated in developments;
- The potential impacts of schemes on health and wellbeing should be identified early in the design of schemes;
- Health Impact Assessments (HIA) and screening should be undertaken for all major applications and developments likely to give rise to significant health impacts. This will allow schemes to be refined to maximise positive effects on health and wellbeing.

### What is Camden Planning Guidance?

- 1.1 The Council has prepared this guidance to support the policies in the Camden Local Plan 2017. This guidance is therefore consistent with the Local Plan and forms a Supplementary Planning Document (SPD) which is an additional “material consideration” in planning decisions.
- 1.2 This document should be read in conjunction with and within the context of the relevant policies in the Camden Local Plan 2017.
- 1.3 This was adopted in March 2018 and replaced the section “Planning for healthy communities” of Camden Planning Guidance 6: Amenity (September 2011).

### Planning for health and wellbeing in Camden

- 1.4 This guidance explains:
  - When Health Impact Assessments (HIA) should be prepared and what they might contain;
  - How the Council will manage the impacts of certain town centre uses on health and wellbeing;
  - Identifies how the planning process can enhance the quality of life for population groups with greater health and wellbeing needs, e.g. older people and residents at potential risk of social isolation.
  - Provides signposting to wider health strategies and data prepared by the Council and partners that can contribute to the production of HIAs and assessment of planning applications.
- 1.5 The guidance should be read in conjunction with the [Camden Local Plan \(2017\)](#) and will help to deliver Policy C1 on health and wellbeing and

many other Plan policies. The Local Plan takes an integrated approach to planning and health, recognising that all aspects of development can shape our health and wellbeing.

- 1.6 The Health and Social Care Act (2012) gave local authorities new duties and responsibilities for health improvement and health protection. The Act requires every local authority to use the levers at its disposal to improve health and wellbeing.
- 1.7 To achieve this, public health teams have moved from the National Health Service into local authorities and are working closely with services, such as planning and licensing, to ensure local health issues are addressed. Public Health officers are also consulted on certain planning applications, will undertake reviews of Health Impact Assessments for developments that potentially give rise to significant health impacts and provide evidence concerning health and wellbeing to inform the making of planning decisions.

### How planning can influence health and wellbeing

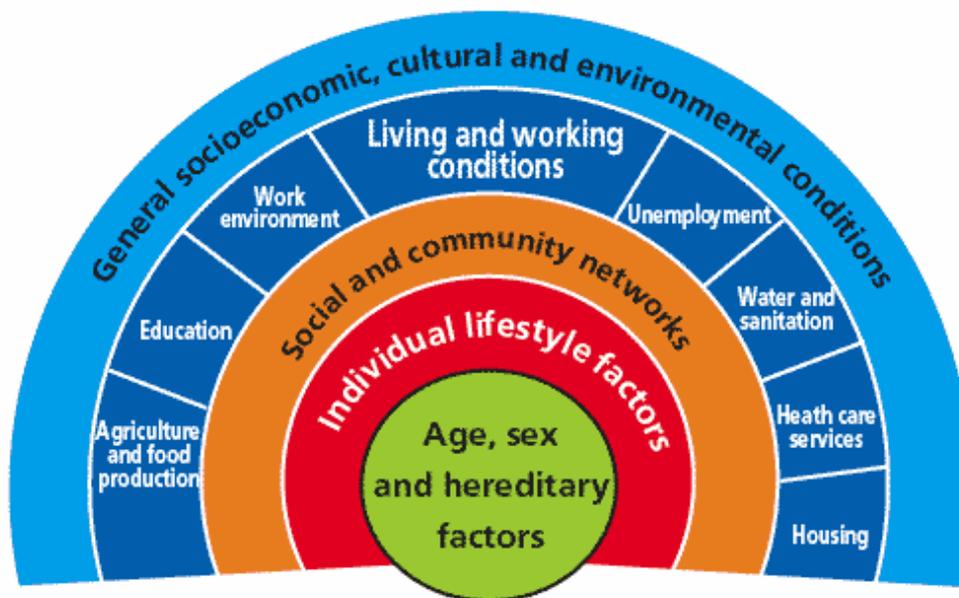
- 1.8 The planning process can help to promote the health and wellbeing of residents, workers, students and visitors in the Borough through its role in shaping the built and natural environment. This can influence people's ability to follow healthy behaviours and can have positive impacts on reducing inequalities.
- 1.9 Public Health England has noted that "Some of the UK's most pressing health challenges - such as obesity, mental health issues, physical activity and the needs of an ageing population – can all be influenced by the quality of our built and natural environment...the considerate design of spaces and places can help to promote good health; access to goods and services; and alleviate, and in some cases even prevent, poor health and thereby have a positive impact on reducing health inequalities"<sup>1</sup>.
- 1.10 Planning for health involves thinking about the interrelated factors that affect health, including social and psychological elements, such as wellbeing and fulfilment. The wider determinants of health are the conditions in which people are born, grow, work, live and age, and the wider set of forces and systems shaping the conditions of daily life. A healthy place is one that can contribute to the prevention of ill health and provide the environmental conditions to support positive health and wellbeing.
- 1.11 When considering the health impact of individual developments, it is important that its surroundings are taken into account as well as its

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<sup>1</sup> 'Building Better Places'. Report of Session 2015-16. Written evidence (BEN0186) by Public Health England. House of Lords Select Committee on National Policy for the Built Environment

intended purpose. This includes uses involving vulnerable communities and sensitive uses, such as residential care homes, supported housing, schools, hospitals and health centres.

- 1.12 A model developed by Dahlgren and Whitehead highlights the relationship between individual lifestyle behaviours, social networks, working and living conditions, and the general socioeconomic, cultural and environmental conditions. While the interaction between these different layers and factors can have both positive and protective influences on our lives, they can also undermine health and wellbeing, both for individuals and communities.



Source: Dahlgren and Whitehead 1992

## Inequalities

- 1.13 The wider determinants of health, including employment, housing, education and the ability to afford a healthy standard of living, all underpin the stark inequalities in health in Camden. Chronic illness, lower life expectancy, and unhealthy lifestyles are often linked to high levels of deprivation. There are health inequalities within Camden by location, gender, deprivation and ethnicity. Men and women from the most deprived areas have a life expectancy of approximately 13 and 8 years less respectively than those from the least deprived areas. Reducing these inequalities is a matter of fairness and social justice.
- 1.14 The social and environmental causes of ill-health are numerous and complex, and the people who are most affected by Camden's health inequalities tend also to be affected by other forms of inequality. Creating a healthy Camden with reduced health inequalities will make the Borough fairer for everyone.

## National and regional policy context

- 1.15 The [National Planning Policy Framework](#) (2012) highlights that the planning system can play an important role in facilitating social interaction and creating healthy, inclusive communities. It advises that local planning authorities should work with public health leads and health organisations to understand and take account of the health status and needs of the local population, including expected future changes, and any information about relevant barriers to improving health and wellbeing.
- 1.16 [National Planning Practice Guidance](#)<sup>2</sup> provides further detailed advice on how planning policies and decisions can help to deliver healthier communities. It explains that a healthy community “is a good place to grow up and grow old in. It is one that supports healthy behaviours and supports reductions in health inequalities. It should enhance the physical and mental health of the community...”
- 1.17 The [London Plan](#) (2016) Policy 3.2 states that “new developments should be designed, constructed and managed in ways that improve health and promote healthy lifestyles to help reduce health inequalities.” It also states that “where a development or plan is anticipated to have significant implications for health and wellbeing, an HIA should be considered to identify opportunities for minimising harms (including unequal impacts) and maximising potential health gains (paragraph 3.8). It also sets out policies promoting lifetime neighbourhoods and an inclusive environment (Policies 7.1 and 7.2). that meet the needs of all Londoners.
- 1.18 The Mayor’s [‘Social Infrastructure’ Supplementary Planning Guidance](#) (2015) provides advice on the stages of Health Impact Assessments (HIA) from the initial screening. It states the HIA should focus on the most significant impacts and consider which groups of people, including vulnerable populations, may be affected by the proposal, supported by their participation in the assessment. An extensive range of HIA resources is provided.

## An integrated approach to health and wellbeing in the Camden Local Plan

- 1.19 Camden Council has taken an integrated approach to health and wellbeing in the Local Plan and the expectation is for development to respond positively. Policy C1 highlights the health inequalities that exist in Camden and the need for measures to help achieve the health and wellbeing aims of the Camden Plan (a document setting out the

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<sup>2</sup> National Planning Practice Guidance on “The role of health and wellbeing in planning” is set out in Paragraphs 001 to 006; Reference IDs 53-003-20140306 & 53-006-20170728

Council’s overall strategy and priorities) and the strategies and plans prepared by the Joint Health and Wellbeing Board<sup>3</sup>.

1.20 Camden [Local Plan Policy C1](#) requires:

- a) development to positively contribute to creating high quality, active, safe and accessible places; and
- b) proposals for major development schemes include a Health Impact Assessment (HIA)

1.21 Given the range of interrelated factors influencing health and wellbeing, applicants should have regard to other [Camden Planning Guidance](#) (supplementary planning) documents prepared by the Council. This includes advice on housing standards, improving opportunities for ‘active travel’, enhancing access to public open space and nature and how a development should respond to noise, air pollution, overheating and flooding. The role of these documents is summarised below:

<i>Health and wellbeing issue</i>	<i>Related Camden Planning Guidance (CPG)</i>
Housing quality and design	Housing, Amenity and Design
Access to healthcare services and other social infrastructure	Community uses, leisure facilities and pubs
Access to open space and nature	Public Open Space
Air quality, noise and neighbourhood amenity	Amenity
Accessibility and active travel	Transport
Crime reduction and community safety	Design
Access to healthy foods	Public Open Space (allotments), Town Centres (food retail and markets)

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<sup>3</sup> The Health and Wellbeing Board examines the health and wellbeing needs of Camden’s population, agrees priorities and encourages organisations who buy health and care services to work collaboratively.

Access to work and training	Employment sites and business premises, Town Centres
Social cohesion and lifetime neighbourhoods	Planning for Health and Wellbeing
Minimising the use of resources	Energy efficiency and adaptation
Climate change	Energy efficiency and adaptation

- 1.22 Health and wellbeing are, to a large extent, determined by the environment in which we live. Transport, housing, education, income, working conditions, unemployment, air quality, green space, climate change and social and community networks can have a greater influence on our healthcare provision or genetics. Many of these determinants of health can be shaped by the planning system.
- 1.23 A lack of physical activity has clearly been shown to be a risk factor for a range of poor health conditions, including high blood pressure, cardiovascular diseases, some cancers, and feelings of anxiety and depression. Around a third of Camden adults do not achieve Government recommended physical activity levels of at least 150 minutes of moderate intensity activity in bouts of 10 minutes or more. Just 12% of Camden's 15 year olds meet Government recommendations for at least 60 minutes of physical activity per day.
- 1.24 Active travel – walking and cycling – is an easy way for most adults to meet these levels, and walking or cycling to and from public transport also contributes. Access to open spaces and leisure is another important facilitator of physical activity, as well as play, leisure and sports space for children and young people. Transport for London's 'Healthy Streets' initiative provides a framework to ensure streets deliver greater health and social benefits through giving priority to walkers, cyclists and users of public transport services. It includes 10 indicators by which a street can be judged to be 'healthy' ranging from noise, safety, shelter and places to stop and rest. The temporary, or permanent closure of streets, e.g. in housing estates, can also create safer areas in which children can play and make streets more inviting and friendly environments for all.
- 1.25 There is also a clear association between access to good quality open space and the number of social interactions. Physical improvement of greenspace, and the public realm in general, can influence use, for example by giving older people the confidence to venture out. Policy A2 of the Camden [Local Plan](#) protects, enhances and improves access to Camden's parks, open spaces and green infrastructure. Policy TC2 of the Local Plan promotes successful and vibrant town centres throughout the Borough with a range of shops and services, including convenience stores, which allow people to meet and interact. Qualitative improvements to greenspaces, walking and cycling links and centres will increase usage, e.g. the availability of benches, appropriate lighting, traffic calming and access to public toilets and baby change facilities.

- 1.26 The provision of green gyms and establishment of communal growing projects within parks and amenity areas helps residents to maintain their general fitness and build social relationships, boosting general health and self-esteem. Further detail on how accessibility, quality and capacity of open space can be improved in Camden is set out in Camden Planning Guidance on Public Open Space.
- 1.27 One issue of particular importance in the Borough, as it is elsewhere, is childhood overweight and obesity. Like adult overweight and obesity, the causes are complex and inter-related, although at its simplest form it is the result of an energy imbalance, with a greater number of calories compared to the number expended. Increasing physical activity among children is part of balancing this equation, however improving diets away from energy dense food high in fats, sugars, and salt is equally important. Improving diets has a range of other health benefits. The Council seeks to tackle this issue and encourage healthy eating habits, and is undertaking a range of programmes aimed at improving the food environment in the Borough.
- 1.28 Social and economic inequality in the Borough is clearly related to having a good job, which brings benefits in addition to material wealth: people who are in good employment have better physical and mental wellbeing than people who are not. Poor pay or insufficient hours: temporary work, insecurity and the risk of redundancy or job loss are related to poorer health. Development opportunities play a part in the local economy, providing the spaces and infrastructure for employment, and helping deliver the skills and training needed to develop the workforce.
- 1.29 Amenity is important for good health and wellbeing. Poor air quality and noise impact adversely on health, conversely good air quality and a quieter environment can create conditions for people to be physically and socially active.

## Health and an ageing population

- 1.30 An ageing population has been identified as a key social change and policy challenge of the 21<sup>st</sup> century<sup>4</sup>, especially since the majority of healthcare needs arise amongst the older population. Planning can have an important role in influencing later-life health and wellbeing by shaping proposals for new housing and the public realm.
- 1.31 Well-designed homes and environments, can enable people to continue to live independently, with the associated benefits provided by established support networks and the comfort and security of familiar surroundings; the latter being particularly important for people living with dementia. Further, this often reflects the personal preferences of older

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<sup>4</sup> "Future of an Ageing Population: Foresight Report" (2016), Government Office for Science

people and means that costly care home admissions can be delayed or avoided.

- 1.32 Other key planning considerations include the location of housing, in particular the accessibility of services such as local shops, the provision of high quality green and natural space and the design of public and amenity spaces to ensure they are easy to navigate (or 'legible') and free of clutter and disorientating visual or auditory stimuli.
- 1.33 Older people should also be directly engaged in the design of schemes as well as their carers' and relevant professional and user groups. The Council will require a proportion of homes to be adaptable across the life course (more information is provided in Camden Planning Guidance on Housing).
- 1.34 Although not within the direct ability of planning to control, applicants are encouraged to give careful consideration to the internal layout and fit out of individual rooms through the provision of handrails, wide doorways, level access, circulation space, good lighting, clear signage and sightlines and safe and secure amenity space. In one year, 33% of people over 65 years and 50% of those over 85 years will experience an accidental fall, estimated to cost the National Health Service over £2 billion a year and this can be reduced through the inclusion of these kind of measures. Removing potential hazards in the home and tackling loneliness and isolation will also help to limit the severity and number of incidents.

### Planning and social isolation

- 1.35 Social isolation is defined as lacking in relationships of sufficient quantity and quality and is associated with increasing the risk of premature death, dementia, high blood pressure, coronary heart disease and strokes and may exacerbate existing conditions leading to poorer health overall. This disproportionately affects some groups more than others, which often reflects social and environmental inequalities.
- 1.36 70% of Camden residents are single, separated, divorced or widowed, which are population groups likely to be more vulnerable to isolation. A higher proportion of residents in Camden have lower levels of life satisfaction and higher levels of anxiety compared with London and England according to The Personal Wellbeing Survey. This highlights the need to use available opportunities and mechanisms to prevent and reduce social isolation, including the planning process.
- 1.37 The Camden [Local Plan](#) and our [Camden Planning Guidance](#) documents (see paragraph 1.21) incorporate a wide range of environmental interventions that can contribute to the promotion of social and community networks both explicitly and implicitly. For example, Policy D1 influences opportunities for developing social ties and maintaining relationships as well as casual interactions through design including the provision of safe/secure environments and easily accessible routes, and incorporation of high quality spaces where people

can interact socially. The layout of neighbourhoods and mix of land uses can also affect people's willingness to come out and spend time locally.

- 1.38 Local Plan Policies C2, C3 and C4 seek the retention of valued community facilities and meeting spaces; and Policy H6 seeks the creation of mixed, inclusive and sustainable communities through the provision of housing for people across the life course, including accessible and adaptable dwellings, wheelchair user dwellings and specialist accommodation for older people. Worklessness is also a contributor to social isolation and is tackled by our planning policies (E1 and E2) supporting employment growth and training and apprenticeship opportunities for Camden's residents.

### **Why planning for health and wellbeing can enhance development viability**

- 1.39 A well-designed, healthy development can add economic value by increasing sales and lettings and producing higher returns on investment. The relative value of properties in 'healthy communities' has been examined in a number of studies. For example, the Royal Institution of Chartered Surveyors (RICS) found that new large-scale developments with high quality urban design have a greater commercial value (between 5% and 56%) than comparable new properties in the local area<sup>5</sup>. This increased value was generated by the design, layout, density, housing mix, environmental sustainability, community engagement and access to social facilities and public open space of schemes, all of which influence health and wellbeing.
- 1.40 Evidence has also shown that house buyers are prepared to pay more for a home that does not compromise health and wellbeing<sup>6</sup>. Further, passive design measures such as building orientation can deliver health benefits at little or no additional cost, for example, access to daylight and stimulating views.

### **Using Health Impact Assessments (HIA)**

- 1.41 Health Impact Assessments (HIAs) provide a systematic approach for assessing the potential impacts of development on the social, psychological and physical health of communities. Policy C1 of the Camden Local Plan expects Health Impacts Assessments to be undertaken for all major developments.
- 1.42 HIAs are designed to consider whether a development proposal might reinforce health inequalities and inadvertently damage people's health, or have positive health outcomes for the local community. Ensuring issues are considered at an early stage in developing planning

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<sup>5</sup> "Placemaking and value" (2016), Royal Institution of Chartered Surveyors

<sup>6</sup> "Health and Wellbeing in Homes" (2016), UK Green Building Council

proposals can help improve both the physical and mental health of the population. Health Impact Assessment promotes sustainable developments that support the creation of strong, vibrant and healthy communities by:

- considering both the positive and negative health impacts when preparing development proposals;
- identifying and taking action to minimise any negative impacts on health and wellbeing of a particular development scheme;
- demonstrating that developers have worked closely with communities directly affected by their proposals to evolve designs that take account of the views of the community;
- taking into account the cumulative impact of development, i.e. where several developments are in progress within the local area, especially where this relates to construction, as well as the potential overconcentration of uses in a local area. The combination of several large residential schemes may also have a material impact on access to services and amenities.

### **When will the Council require a Health Impact Assessment?**

- 1.43 An HIA should be undertaken for all developments that give rise to significant health impacts. Policy C1 of the Camden Local Plan requires, as a minimum, a screening assessment on major development sites (10 or more residential units or 1,000sqm additional non residential floorspace). A HIA may, however, be relevant for other proposed schemes. An example is where a town centre use gives rise to significant health impacts (an issue identified by Policy TC4 of the Local Plan). A HIA is also likely to be necessary where there are sensitive or vulnerable populations that may be affected by a proposed scheme.

### **What should be the scope of the Health Impact Assessment?**

- 1.44 It is recognised that, as well as the size of a development, its intended use(s) will determine the focus of the health impact assessment. In general, the more significant the scheme is in its local context, the more extensive the HIA should be.
- 1.45 For schemes of between 10 and 99 dwellings and with 1,000 - 9,999sqm of additional commercial or visitor floorspace, developers should use the NHS London Healthy Urban Development's Rapid Health Impact Assessment Tool for preparing their HIA. This allows for a focussed investigation of health impacts and can be found at: <http://www.healthyurbandevlopment.nhs.uk/>. The rapid HIA should address the most significant impacts and/or those most likely to occur.

- 1.46 It is likely that enhancements and mitigations can be described using this tool without the need for a separate report, although clarifications may be requested by the Council. A completed rapid assessment should be submitted with the planning application.
- 1.47 For larger developments of 100 net dwellings or more, or 10,000sqm + of additional commercial or visitor floorspace, the Council will expect a more comprehensive Health Impact Assessment that analyses all potential health and wellbeing impacts.
- 1.48 To avoid duplication, where a separate assessment contains information relevant to the HIA and has also been submitted to the Council as part of the planning application (for example, an air quality assessment), the HIA should reference this and not repeat it.
- 1.49 For both the rapid and comprehensive HIA, the views of residents and affected groups, should be sought in order to understand how a proposed scheme may impact on their health and wellbeing. This must include engagement with vulnerable and sensitive groups when they are likely to be affected by a development, including construction impacts.

### **Vulnerable and sensitive groups**

- 1.50 Health Impact Assessments should have regard to vulnerable groups and sensitive groups both as intended users of the development, and those living or accessing services in the vicinity. Vulnerable groups include children and young people (e.g. schools, youth clubs etc.), older people (supported housing, residential care etc.) and people with mental or physical disabilities (day centres, supported housing etc.).
- 1.51 Health Impact Assessments should also have regard to sensitive uses, including medical facilities, and also uses that may cause public concern (e.g. storage of hazardous materials).

### **The HIA report**

- 1.52 This should contain a series of evidence based-recommendations setting out how a scheme can be enhanced and any mitigation measures that may be required. To have maximum impact, the HIA should be undertaken as early as possible in the planning application process.

### **The role of Camden and Islington Public Health**

- 1.53 Camden and Islington Public Health can offer advice on potential health impacts, evidence-based mitigation, and a range of resources that are useful in conducting a health impact assessment.
- 1.54 Request for advice on health impact assessment will form part of the pre-application advice offered by the Council, and should be requested through the Planning Service.

[Link to Camden Council webpage on obtaining pre-application advice](#)

## How will the Council assess the health impacts of town centre uses?

### Hot food takeaways

- 1.55 There is a significant public health problem stemming from the high amounts of calorie rich, energy dense food which is consumed across the population. Being overweight and obese increases the risk of developing life threatening diseases and there is considerable concern about the escalating health care costs. Research gathered by Public Health England indicates that increased access to unhealthier food outlets is associated with increased weight status and increased obesity and unhealthy eating behaviours among children living in low income areas<sup>7</sup>.
- 1.56 As stated in the Local Plan Policy TC4, the Council will consider the health impacts of the development of new hot food takeaways in the Borough. This provides for town centre uses, such as use class A5 Hot Takeaways, being asked to assess health impact through the undertaking of a Health Impact Assessment. Other uses, such as Class A3 Restaurants, may also be requested to provide an assessment of health impact where hot food takeaways form a significant part of the offer.
- 1.57 The Council will normally expect a HIA to be provided where an additional takeaway is proposed within a 5 minute walk of an existing secondary school. The Council also manages the mix and balance of town uses within designated shopping frontages in line with Policy TC2 of the Camden Local Plan and Appendix 4 which sets out the maximum proportion of food, drink and entertainment uses we expect in individual centres.
- 1.58 The Council will take into account evidence concerning the existing supply of hot food takeaways (and planned takeaways with planning permission), the nature of the food the takeaway intends to sell, as well as data and information relating to the health and wellbeing of children and young people living, playing or studying in proximity to these premises. This will principally include information and data gathered by the Camden and Islington Public Health team but other sources may be relevant, e.g. Census information on the health status of residents.

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<sup>7</sup> Cobb, L.K et al (2015) 'The relationship of the local food environment with obesity: A systematic review of methods, study quality and results', *Obesity*, 23 (7); Giskes, K. et al (2010) 'A systematic review of environmental factors and obesogenic dietary intakes among adults: are we getting close to understanding obesogenic environments?', *Obesity Reviews*, 12; Kent, J.L. & Thompson, S. (2014) 'The three domains of urban planning for health and wellbeing', *Journal of Planning Literature*, 1-18

1.59 This approach is in line with [National Planning Practice Guidance](#)<sup>8</sup> which states local planning authorities and planning applicants could have regard to the following issues:

- proximity to locations where children and young people congregate such as schools, community centres and playgrounds;
- evidence indicating high levels of obesity, deprivation and poor health in specific locations
- over-concentration and clustering of certain use classes within a specified area.

### **Betting shops, payday loan stores pawnbrokers**

1.60 There is concern that the proliferation of these uses in centres could lead to harmful health impacts. The Council will continue to monitor the number and impact of these uses, and consider whether evidence shows there is a need to introduce limits on such uses in the future. The Council currently undertakes annual monitoring of the mix of uses in all of the Borough's designated town and neighbourhood centres.

### **Where you can find out more information about planning for health and wellbeing in Camden**

1.61 This section of the Guidance signposts various resources and data sources that applicants may wish to use when considering the health implications of their schemes and can be used to inform the preparation of Health Impact Assessments. The first part sets out local resources giving statistical information about health and wellbeing in Camden. The second part lists various guidance documents which have been prepared to help guide thinking about health and wellbeing considerations during the planning process.

### **Information sources about health and wellbeing in Camden**

1.62 The [Joint Strategic Needs Assessment](#) (JSNA) is a process by which the current and future health and wellbeing needs of the local population are described. The production of a JSNA is a statutory requirement for Health and Wellbeing Boards and is used to guide public health planning. Camden's JSNA is produced through a continuous process of strategic needs assessment. The Camden factsheets form the basis of this needs assessment, by providing new information, evidence and intelligence as it becomes available and as new issues and gaps are identified.

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<sup>8</sup> extract from 'How can planning help create a healthier food environment?' Paragraph: 006 Reference ID: 53-006-20170728, last revised 28.07.17

- 1.63 [North London Partners Sustainability and Transformation Plan \(STP\) ‘Working together for better health and care’](#)
- Sustainability and Transformation Plans are ‘place based plans’ that consider how health and care services in an area will be managed in the medium and long term. Camden is part of the North Central London area (with Islington, Haringey, Barnet and Enfield). The North London STP was developed by the NHS in conjunction with local healthcare providers to ensure greater co-ordination of service planning across GPs, hospitals, social care, district nursing etc. It indicates what changes in infrastructure may be needed in the context of system-wide trends such as the increasing number of elderly people with more complex conditions, advances in technology, the pooling of resources and strengthening the prevention of ill health and early intervention.
- 1.64 The [Camden and Islington Annual Public Health Report](#) : the 2016/17 report identifies the interventions and programmes that can help to prevent, ill health, disease and injury.
- 1.65 Public Health England has a range of **health indicator** data at borough level at its Fingertips website: <https://fingertips.phe.org.uk/>
- 1.66 The **Greater London Authority datastore** has recent data on jobs and economy; transport; environment; community safety; housing; community (population and demographics); and health: <https://data.london.gov.uk/>
- 1.67 For the number of **general practitioners** and patient list size at each practice, please refer to NHS Digital’s General Practice Data Hub. This provides information on patient list sizes and workforce data: [https://digital.nhs.uk/GP-data-hub.](https://digital.nhs.uk/GP-data-hub)
- 1.68 For **other health services** (dentists, pharmacies, opticians, hospitals, etc.), use NHS Choices: <http://www.nhs.uk/pages/home.aspx>

### **General guidance documents**

- 1.69 Public Health England commissioned a review of evidence that examines the links between health and the built and natural environment. The findings are set out in a report called ‘Spatial Planning for Health’: An evidence resource for planning and designing healthy places’.
- [Link to Public Health England report](#)
- 1.70 The **University of New South Wales** has collated the international evidence base and produced five factsheets in one document:
- Fact Sheet 1: A guide to “Healthy Built Environments: A Review of the Literature”;
  - Fact Sheet 2: The Built Environment and Physical Activity;
  - Fact Sheet 3: The Built Environment and Connecting and Strengthening Communities;

- Fact Sheet 4: The Built Environment and Providing Healthy Food Options;
- Fact Sheet 5: The Importance of Green Open Space

<https://cityfutures.be.unsw.edu.au/documents/162/HBEPFactSheetKit.pdf>

- 1.71 **Sport England** has prepared a guidance document called 'Active Design' – it provides advice on how to deliver environments that encourage and enable higher levels of physical activity and sets out ten principles to consider when designing places that would contribute to creating healthy communities.
- [Link to Sport England: 'Active Places'](#)
- 1.72 The **Landscape Institute** has a number of useful publications, including:
- Profitable Places. Why housebuilders invest in landscape  
[Link to Landscape Institute: Profitable Places](#)
- Public Health and landscape. Creating healthy places  
[Link to Landscape Institute: Creating healthy places](#)
- 1.73 **Transport for London** (TfL) has developed a 'Healthy Streets' approach for prioritising walking, cycling and public transport to create a healthy city. The approach is also likely to be useful for public and private realm, particularly in larger developments:
- <http://content.tfl.gov.uk/healthy-streets-for-london.pdf>
- 1.74 The **Royal Town Planning Institute** (RTPI) has published an advice note which explains how better environments can be provided for people living with dementia.
- <http://www.rtpi.org.uk/knowledge/practice/dementia-and-town-planning>