# Paper 6: Health & Wellbeing

**Gloucester City Plan** 

Background Topic Paper for Policy Development



## Introduction

Health and Wellbeing covers a wide range of issues, all of which impact on the quality of life for the City's residents and visitors.

The City faces a number of health challenges and inequalities in which planning and place making has an important role to play. The level of these health challenges is significant and it is of the utmost importance that the Local Plan includes meaningful policies that can help to influence positive future change.

The health and wellbeing of the City's residents should be a consideration in all policy making and in the determination of planning applications.

## **Nationally**

Across the country there are significant health inequalities which result in people living a poorer quality of life, and often reducing life expectancy.

"Health inequalities are unjust disparities in health outcomes between individuals or groups. They arise from differences in social and economic conditions that influence people's behaviours and lifestyle choices, their risk of illness and actions taken to deal with illness when it occurs. Inequalities in these social determinants of health are not inevitable, and are therefore considered avoidable and unfair."

The Marmot Review and the Public Health White Paper Healthier Lives, Healthier People (2010) recommended that planning, transport, housing, environment and health systems should be fully integrated to address the social determinants of health. The publication of the National Planning Policy Framework (NPPF) brought with it the return of responsibility for health and wellbeing back to the planning system.

Historically the origins of the planning system have always been rooted in improving public health and reducing social inequalities. Planning and health has obviously changed immensely since the times of mass slum clearance and the devastating spread of communicable diseases that once swept through cities. There are now new health and wellbeing challenges facing modern towns and cities, including:

- An ageing population<sup>ii</sup>
- Increasing levels of obesity<sup>iii</sup>
- Increasing levels of non-communicable disease<sup>iv</sup> (cardiovascular, cancer, respiratory, and diabetes)
- Significant issues of mental health and wellbeing<sup>v</sup>

The majority of health issues have a strong preventable component that is significantly influenced by the places and spaces in which people live. For example reducing inactivity could prevent up to 40% of many common long term conditions, such as diabetes.

"If being active was a pill we would be rushing to prescribe it. Physical activity is essential for health and reduces the risk of many preventable diseases and conditions from cancer to depression." Public Health England, Everybody Active, Every Day (PHE, 2014).

#### The Role of Environment in Health and Wellbeing

Gloucester City Plan
Topic Paper – October 2016

The environments in which people live, work and play influence their choices and behaviour. Planning, in being able to shape the urban environment and provide the infrastructure required for a healthy lifestyle, has a significant role to play in the creation of healthier places.

The quality of the urban environment can influence:

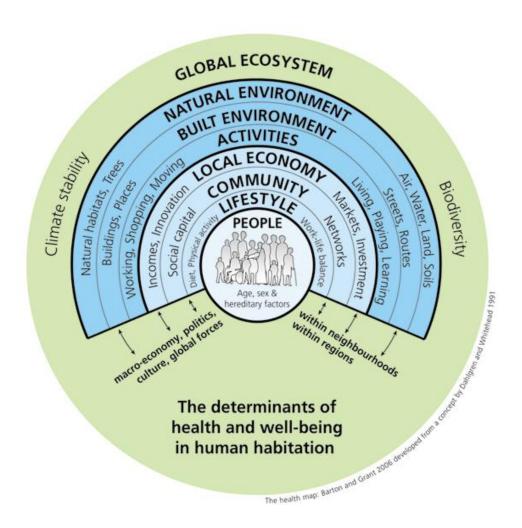
How often people are active – through access to open space, the quality, safety and ease of use of walking and cycling routes, the distance to local services – are they walkable, is walking more convenient than using the car? Are there secure cycle storage facilities? What people eat – through access to shops selling affordable fresh food, the number and proximity of fast food outlets, space to grow food at home, provision of allotments and community gardens.

How people feel – through the quality of urban spaces, how might they affect people's mood?, do they feel safe, the size and outlook of residential properties, access to open green (and blue) spaces, connections to local services and places of support.

How people make social connections – through the provision of community facilities, the availability of places to meet up such as high quality open spaces, ease of access to neighbours and integration with existing communities. Simple things like the busyness of a road can influence how likely people are to engage with their neighbours.

The built environment forms an important part of the schema in which people make choices about their lives.

Figure 1 - The determinants of health and wellbeing



#### Imagine the following scenarios:

Your school or workplace is next to a street that contains many takeaway restaurants. On your lunch break there is limited time to walk to another part of town. The smell of the food is very tempting. The only other shop on this street is a newsagent which only sells confectionary and snacks. What food choices are you likely to be making?

You live in a small flat that is located out of town and you have no car. The bus service is expensive and infrequent and there are no supermarkets within walking distance. There are no allotments and you have no garden of your own. There is a small parade of shops in your area that contains a takeaway, an estate agent and a convenience store that has a very limited range of fresh food. What food choices are you likely to be making for you and your family? How could your living environment influence your wellbeing?

You live in a 1990's housing development in a suburban location. You are heavily reliant on your car to access work, shops and services. How could this affect your physical activity levels and travel choices?

You live in the centre of a densely populated city. You have access to many shops and services and your friends and family live nearby. However, the air quality is poor and noise levels are high. There is a lack of open green spaces. How could this environment affect your health and wellbeing?

Gloucester City Plan
Topic Paper – October 2016

Access to a high quality built and natural environment undoubtedly impacts the health and wellbeing of those people who live or work in that place. Planning has an important role to play in delivering places and spaces that have a positive impact on how people feel and provide the best opportunities for people to make positive lifestyle choices.

## **National Planning Policy Framework (NPPF)**

The NPPF commits Local Planning Authorities (LPAs) to promote healthy communities. It identifies that access to high quality open spaces and opportunities for sport and recreation can make an important contribution to the health and wellbeing of communities. It also identifies the social role of planning and health in creating opportunities for communities to have places and spaces to meet and interact.

The National Planning Practice Guidance (NPPG) states that LPAs should ensure that health and wellbeing, and health infrastructure are considered in local and neighbourhood plans and in planning decision making. It suggests that Public Health organisations, health service organisations, commissioners and providers, and local communities should use the NPPG to help them work effectively with local planning authorities in order to promote healthy communities and support appropriate health infrastructure.

The guidance also states that the range of issues that could be considered through the plan-making and decision-making processes, in respect of health and healthcare infrastructure, include how:

- development proposals can support strong, vibrant and healthy communities and help create healthy living environments which should, where possible, include making physical activity easy to do and create places and spaces to meet to support community engagement and social capital;
- the local plan promotes health, social and cultural wellbeing and supports the reduction of health inequalities;
- the local plan considers the local health and wellbeing strategy and other relevant health improvement strategies in the area;
- the healthcare infrastructure implications of any relevant proposed local development have been considered;
- opportunities for healthy lifestyles have been considered (e.g. planning for an
  environment that supports people of all ages in making healthy choices, helps to
  promote active travel and physical activity, and promotes access to healthier food, high
  quality open spaces and opportunities for play, sport and recreation);
- potential pollution and other environmental hazards, which might lead to an adverse impact on human health, are accounted for in the consideration of new development proposals; and
- access to the whole community by all sections of the community, whether able-bodied or disabled, has been promoted.<sup>vi</sup>

A healthy community is a good place to grow up and grow old in. It is one which supports healthy behaviours and supports reductions in health inequalities. It should enhance the physical and mental health of the community and, where appropriate, encourage:

 Active healthy lifestyles that are made easy through the pattern of development, good urban design, good access to local services and facilities; green open space and safe places for active play and food growing, and is accessible by walking and cycling and public transport.

 The creation of healthy living environments for people of all ages which supports social interaction. It meets the needs of children and young people to grow and develop, as well as being adaptable to the needs of an increasingly elderly population and those with dementia and other sensory or mobility impairments.<sup>vii</sup>

The role of LPA in promoting health and wellbeing has been clearly set out by the Government thorough the NPPF and NPPG, and also through Public Health England (PHE) (the Government's executive agency of the Department of Health).

PHE have published a series of documents alongside other planning agencies to raise the profile of health and wellbeing in plan and decision making. These documents include:

- "Planning Healthier Places report from the reuniting health with planning project", PHE and Town and Country Planning Association, November 2013
- "Planning Healthy Weight Environments", PHE and Town and County Planning Association, December 2014
- "Obesity and the Environment: Increasing Physical Activity and Active Travel", *PHE* and the Local Government Association, November 2013
- "Obesity and the Environment: Regulating the Growth of Fast Food Outlets", PHE, Chartered Institute of Environmental Health, Local Government Association, March 2014
- "Improving Access to Green Space", PHE, UCL Institute of Health Equity, September 2014
- "Everybody Active, Every Day An Evidence-Based Approach to Physical Activity", PHE, September 2014
- "Everybody Active, Every Day What Works The Evidence", PHE, October 2014

Research into the inclusion of health polices in Local Plans shows that despite the requirements for LPAs to promote health and wellbeing in their areas, the mention of health in Local Plan is variable. Where health is mentioned it tends to be 'warm words' rather than an effective policy. Five Gloucester's local health issues it is important that this is translated in to tangible locally-relevant policy.

## The Joint Core Strategy

It is an "Ambition" and "Strategic Objective" of the Joint Core Strategy<sup>ix</sup> to create "a healthy safe and inclusive community" and to "promote healthy communities". Policy SD15 states the following with regard to health:

"Policy SD15 Health and Environmental Quality

4.5.7 Design plays an important role in shaping a healthy and safe environment and can contribute to healthy and active lifestyles. This is not only through the construction of high quality buildings and public realm but also through the provision of open spaces 'soft' or 'green' infrastructure.

- 4.5.8 To promote healthier lifestyles...new development...should be designed to promote the use of alternatives to the car.
- 4.11.12 Ensure that proposals have no detrimental impacts, including any impact... on the health of current or future residents.
- 4.15.7 District plans will provide detailed policies, as required, for the protection and promotion of human and environmental health, for example specific standards or criteria relating to noise pollution and air quality management. Local authorities will also give consideration to whether there are any areas of tranquillity that ought to be identified and protected through district plans."

## **Responses to Previous Consultations**

Below is a selection of responses from residents and key stakeholders to previous City Plan consultations. A full schedule of responses can be found on the City Council's website <a href="http://www.gloucester.gov.uk/cityplan">http://www.gloucester.gov.uk/cityplan</a>.

## **City Plan Scope Consultation Responses**

"Housing developments need social/cultural amenities like Libraries Museums and Art Galleries, to help the construction of some community spirit."

"Protect green spaces from development."

"Need sufficient additional doctors, dentists, schools to support the amount of people living in and around Quedgeley."

"More play areas, green sites"

## City Plan Part 1 – Context and Key Development Principles Consultation Document Responses

"Also I would like to see Gloucester as a healthy city with low pollution in the air and waterways, with lots of opportunity for exercise, green areas, parks, and an athletics track to be proud of that could double as a stadium for events and concerts."

"Areas of open space and allotment provision will be improved to encourage healthier communities and protect biodiversity."

"If there is no reference then I would suggest that these important community issues, which should include provision of other community facilities, health services etc. should be included. With the level of development envisaged, it will be absolutely vital for such facilities to be supported and enhanced if the City residents are to enjoy a better quality of life."

"Trees offer so many benefits to our citizens. They capture carbon and hold soils together, prevent flooding and help control our climate. They also add immeasurably to our quality of life by making areas more attractive and healthier places to live. In recent years the number of trees being planted annually across the country has declined, and could decrease further, unless action is taken to reverse this trend."

Gloucester City Plan
Topic Paper – October 2016

"Promote the important link between improved health and accessible green space like woodland. The Public Health white paper (Healthy Lives, Healthy People; Nov 2010) states that: "Access to green spaces is associated with better mental and physical health across socioeconomic groups." and that "Defra will lead a national campaign to increase tree planting throughout England, particularly in areas where tree cover would help to improve residents' quality of life and reduce the negative effects of deprivation, including health inequalities."

"The Woodland Trust believes that proximity and access to woodland is a key issue linking the environment with health and other social and economic issues that can be addressed by green infrastructure provision in urban design."

"Gloucester shows below average woodland accessibility compared to the South West as a whole in the smaller wood size category. This presents an excellent opportunity for improving small scale accessible woodland through new tree planting for health and wellbeing benefits in Gloucester."

"We would like to see an increase in accessible urban tree planting supported in the City Plan in order to deliver health & wellbeing benefits for Gloucester."

"The availability of safe, affordable, warm housing is essential for health and wellbeing and we welcome sustainable infrastructure and housing growth to support the needs of a growing population in Gloucestershire."

"Developing strong, health and vibrant communities is vital to ensuring the physical and mental well-being of local people. The City Plan provides the opportunity to ensure that: green spaces, public transport and community facilities are high quality, easily available and well located. Communities should be created which are cohesive and amenable to healthier lives."

#### City Plan Part 2 – Places, Sites, City Centre Strategy Consultation Responses

"There are many examples of good quality urban design principles and practices that make it easy for communities to be more active and healthy. Increasingly this approach is known as Active Design which focuses on improving accessibility; enhancing amenity and increasing awareness."

"Restoration of the Canal will bring significant benefits to the City and in the sustainability of its Plan. These will be in the areas of tourism, recreation, employment, health and wellbeing of residents through walking and cycling along the Canal, the provision of a substantial green corridor for wildlife, and in biodiversity, etc.. Make reference to the Canal under tourism, open spaces, sustainability, etc.."

"New housing development will create new demand for sport and physical activity facilities. Not anticipating or meeting this demand or being able to model supply will have a negative impact on sport and physical activity participation. In order to exert a positive and significant impact on the physical, mental and social health of these new communities we believe that all new housing proposals in Gloucester should provide for new, or enhance existing, sport and physical activity facilities and use planning obligations to secure and maintain such provision."

"All new dwellings in Gloucester in the plan period (up to 2031 and beyond) should provide for new or enhance existing sport and recreation facilities to help create opportunities for physical activity whilst having a major positive impact on health and mental wellbeing."

"Being active should be built in to everyday life. There are many examples of good quality urban design principles and practices that make it easy for communities to be more active and healthy. Increasingly this approach is known as Active Design which focuses on improving accessibility; enhancing amenity and increasing awareness."

"Through an analysis of the current health agenda and urban design principles and good practice, the term ACTIVE DESIGN has been adopted to describe ways in which master planning can promote healthy environments through creating healthy environments through creating conditions for participation in sport and physical activity and the use of active travel modes (walking and cycling). Three overlapping Active Design objectives have been identified that should be promoted by master plans: improving accessibility; enhancing amenity and increasing awareness. Sport England would encourage the developers to design future proposals in Gloucester in line with the Active Design principles."

## **Local Challenges and Issues Facing Gloucester**

While many of Gloucester's residents enjoy good health and long lives, there are a number of local health issues that affect many of the City's residents. Many of these issues can be linked to deprivation.

Gloucester is facing a number of significant health issues that all public sector services, including planning, have a role in addressing.

Headline facts – Statistically **Significantly worse** in Gloucester City than the England average<sup>x</sup>:

- Gloucester City has 10 Lower Super Output Areas (LSOAs) that are among the 10% most deprived areas nationally. These are (most deprived first): Westgate 1; Podsmead 1; Matson and Robinswood 1; Kingsholm and Wotton; Westgate 5; Moreland 4; Barton and Tredworth 4; Matson and Robinswood 5; Barton and Tredworth 2; Westgate 4.
- 19% (4,800) children living in low income families. Children living in poverty are more likely to be obese, and have tooth decay, ear infections and asthma. Children living in poverty are 13 times more likely to die from injury than the least disadvantaged children.xi
- Life expectancy for both men and women is similar to the England average. However, the difference in life expectancy between those living in the most deprived areas of Gloucester and those living in the least deprived areas has increased since 2014. In 2016 Life expectancy is 13.9 years lower for men and 12.5 years lower for women in the most deprived areas of Gloucester than in the least deprived areas (in 2014 the life expectancy gap was 11.7 years for men and 9.2 years for women)

- Statutory homelessness is significantly worse in Gloucester than the England average.
- 21.3% of children (in year 6) are classified as obese, worse than the average for England. The level of excess weight (overweight and obesity) among adults is 65.7%, which is in line with the national average.
- The rates of alcohol-specific hospital stays among those under 18 years and those over 18 are worse than the averages for England.
- Hospital stays per year for self-harm are significantly worse than the England average.
- Prevalence of opiate and/or crack cocaine use is significantly worse than the England average.
- Long term unemployment is significantly worse in Gloucester than the England average.
- The breastfeeding initiation rate is significantly lower than the England average.
- For Gloucester City, the 2012-14 suicide rate is 14.2 per 100,000 population, compared with a Gloucestershire rate of 12.2 per 100,000 population and an England rate of 10.0 per 100,000.
- The rate of people killed and seriously injured on roads in Gloucester is significantly better than the average for England.

#### The Structure of Health in Gloucester

With Gloucestershire being a two-tier authority the responsibility for public health sits with the County Council, under the Director of Public Health. Planning is delivered at the District Level, therefore forming and maintaining a good working relationship between the Public Health and Planning team is considered an essential component of delivering meaningful change.

There are many documents covering the topic of health. The main ones from a local perspective for the purposes of developing planning policies are considered to be:

Understanding Gloucestershire - A Joint Strategic Needs Assessment (JSNA), Gloucestershire County Council and Gloucestershire Clinical Commissioning Group, October 2015

Gloucestershire Health and Wellbeing Strategy 2012 – 2032 Fit for the Future, Gloucestershire Health and Wellbeing Board

The Gloucestershire Sustainability and Transformation Plan (2016-2021) http://www.gloucestershireccg.nhs.uk/the-gloucestershire-sustainability-and-transformation-plan/

A full of evidence base can be found at the end of this paper.

Gloucester City Plan Topic Paper – October 2016

#### Gloucester's Cultural Vision and Strategy 2016 – 2026

The Gloucester Cultural Strategy identifies that culture can be an important tool in community regeneration projects. It can bring communities together, attract investment and help to foster a strong sense of place and identity. Culture can also help to improve health and education. Increasingly the arts and cultural are used to foster social inclusion and promote mental health and wellbeing. The City Plan will refer to the Strategy and support its aims and objectives.

## **Policies for City Plan**

Major planning applications will need to be accompanied by a Health Impact Assessment. The applicant will also be required to submit supporting information to demonstrate how the development positively contributes to health and wellbeing and the 10 principles of Active Design checklist developed Sport England and supported by Public Health England. https://www.sportengland.org/media/3426/spe003-active-design-published-october-2015-email-2.pdf

A Health Impact Assessment promotes sustainable development that supports the creation of strong, vibrant and healthy communities, by:

- Demonstrating that health impacts have been properly considered when preparing, evaluating and determining development proposals.
- Ensuring developments contribute to the creation of a strong, healthy and just society.
- Helping applicants to demonstrate that they have worked closely with those directly affected by their proposals to evolve designs that take account of the views of the community.
- Identifying and highlighting any beneficial impacts on health and wellbeing of a particular development scheme.
- Identifying and taking action to minimise any negative impacts on health and wellbeing of a particular development scheme.

#### **Policy D1 Active Design**

Streets and public areas should be designed to allow ease of movement for pedestrians and cyclists, and designed in such a way that they encourage walking to local amenities and services, and are well connected to surrounding area.

The location, accessibility, layout and design of developments all affect the extent to which people are able to make healthy choices and lead active lives. Active design promotes healthy lifestyles that are made easy through the pattern of development, good urban design, good access to local services and facilities, good levels of connectivity; green open space and safe places for active play and food growing, and is accessible by walking, cycling and public transport.

Accessibility and walking distances shall be measured in accordance with the guidance provided in Manual for Gloucestershire Streets 4<sup>th</sup> Edition and any subsequent amendments.

## Policy D2 Outdoor Space

Outdoor amenity space and garden space should be retained or provided at a level that reflects the character of the area and the scale of the development.

Gardens and amenity space have an important role to play in health and the creation of a sense of wellbeing. Gardens and amenity space should be of a size that reflects the character of the area and be fit for purpose for the scale of the development. This is in addition to the provision of public open space.

## Policy D3 Accessibility

Development proposals should meet the highest standards of accessible and inclusive design by demonstrating that they meet the following principles:

- i. can be used safely, easily and with dignity by all regardless of disability, age, gender, ethnicity or economic circumstances
- ii. are convenient and welcoming with no disabling barriers, so everyone can use them independently without undue effort, separation or special treatment
- iii. are flexible and responsive taking account of what different people say they need and want, so people can use them in different ways
- iv. are realistic, offering more than one solution to help balance everyone's needs, recognising that one solution may not work for all.
- v. are dementia friendly.

Good design should reflect the diversity of people who use it and not impose barriers of any kind. People with both physical and learning disabilities in our community should be able to access the places everyone else takes for granted. Development proposals should ensure that the needs of people with all types of mobility difficulties, both physical and sensory, are taken into account when considering the design of development proposals. This includes extensions to all buildings particularly those used by the general public such as shops and community facilities.

With an increasing ageing population and a steady rise in the number of people with dementia it is important to ensure that new development is dementia friendly. The design of the environment can make a difference to levels of independence and a person's ability to access and negotiate the built environment. Applicants are advised to refer to the key design features set out in "At a Glance: a Checklist for Developing Dementia Friendly Communities" Housing LIN, 2012

http://www.housinglin.org.uk/\_library/Resources/Housing/Support\_materials/Viewpoints/Viewpoint25\_AtAGlance.pdf

The City Council will actively encourage developers to provide enhanced accessible toilets within schemes. Especially in developments that are accessed by the public. Standard accessible toilets do not meet the needs of all people with a disability. This reduces the accessibility of the City and its enjoyment for some of our residents and visitors. The Council endorsed the use of "Changing Places: the practical guide" which can be found at <a href="http://www.changing-places.org/install\_a\_toilet.aspx">http://www.changing-places.org/install\_a\_toilet.aspx</a>

#### **Policy D4 Allotments**

In housing developments of 30 or more dwellings, the Council will require the provision of a fully serviced allotment site to a standard of 0.2 hectares (1/2 acre) per 1,000 population. Off site financial contribution will be acceptable where on-site provision is not feasible.

Development involving the loss of part or all of an existing allotment site will only be permitted where:

- 1. The loss of the site would not result in unmet demand for allotments within a reasonable walking distance (1.2km); and
- 2. Replacement provision is made of at least equivalent size and quality, in a convenient and accessible location to serve the existing plot holders; or
- 3. Existing allotment sites within the City and their management will be enhanced by compensatory measures secured by a planning obligation.

Allotments have a number of benefits. They offer an economic, healthy and sustainable way of growing produce and provide vital habitats for wildlife and plants. Furthermore, they promote healthier lifestyles through regular exercise and promote mental health and wellbeing through stress reduction and purposeful activity.

Allotments are particularly important where residents do not have a suitably sized garden to offer a cultivable plot. Therefore the Council will seek in new residential development of 30 or more dwellings, a minimum of 0.2 hectares per 1,000 population, or equivalent financial contribution towards off-site provision or enhancement, where on site provision is not feasible.

This requirement is in addition to the Public Open Space requirement

## **Policy D5 Open Space**

The Council will expect all residential development and major employment development to provide an appropriate amount of Public Open Space in accordance with the City Council's current Public Open Space Standards.

For larger residential schemes of 30 or more dwellings, public open space will be required on-site.

For smaller residential schemes where the provision of public open space on-site is not feasible, a financial payment will be sought to improve existing public open space or to create new public open space within the locality.

Open space should be useable, accessible, well located, appropriately equipped and designed, overlooked by adjoining properties and take account of community safety issues.

An appropriate commuted sum will be sought from developers to cover future maintenance costs of public open space in new developments. This will be a matter for negotiation.

Gloucester City Council defines public open space as the following:

'Open Space is that which is available for sport, active recreation, or children's play, which is of a suitable size and nature for its intended purpose, and safely and freely available to the general public'.

The Council's 2014 'Open Space Strategy' identifies that Gloucester is suffering from a deficiency in public open space. Gloucester's deficiency in public open space is not evenly distributed, both in terms of quality and quantity. There is for example a notable lack of open space in some areas, such as Inner Barton and Quedgeley, whilst some other areas have relatively high quantities of public open space, but quality and access to this space are not at an acceptable standard.

The strategy identifies and sets a quantity standard for open space provision across the city of 2.8ha per 1000 population. However, because open space is not distributed evenly, there are six city wards where there is a significant shortfall in terms of the adopted standard:

Barton & Tredworth (0.24ha/1000) Moreland (1.04ha/1000) Quedgeley Severn Vale (1.08ha/1000) Tuffley (1.19ha/1000) Hucclecote (1.54ha/1000) Kingsholm & Wotton (1.74ha/1000)

Consideration should also to be given to Policy F5: Green Infrastructure to ensure connectivity between open spaces and the wider Green Infrastructure network.

## Policy D6 Provision of Playing Pitches in New Development

All new developments will be expected to provide for the sporting needs arising from the residents of that development, in accordance with the adopted Gloucester Playing Pitch Strategy (2015). Where possible, this should be provided for onsite. Alternatively, a financial contribution will be required for the improvements of facilities elsewhere in the City.

The Council has an up-to-date Playing Pitch Strategy (PPS), prepared in accordance of Sport England guidance and which satisfies paragraphs 73 and 74 of the NPPF. The PPS shows that there is a shortage of playing pitches to provide for demand both now and in the future. Therefore all pitches are subject to protection unless one of the five Sport England exception tests can be satisfied.

The PPS also shows that new provision is needed in the city and it is necessary for provision / contributions to be made through development sites.

## Policy D7 Protection of Open Space and Playing Fields

There is a general presumption against the loss of existing and proposed open space including playing fields unless it can be demonstrated that:

1. There is no longer a demand or prospect of demand for the recreational use of the site and a deficiency would not be created in the short term or long term through its loss for recreational use; or 2. The proposed development is ancillary to the principal use of the site as a playing field or playing fields, and does not affect the quantity or quality of pitches or adversely affect their use; or

Typical types of development that may meet with this exception include pavilions, changing rooms and sports lighting which improve the sporting usage of the site.

- 3. Suitable alternative provision of equivalent or greater recreational or community benefit is made in an easily accessible location well served by a range of sustainable transport modes; or
- 4. It can be demonstrated that it is an area or part area of poor quality which is unsuitable for recreation and compensatory enhancements to existing public open space in the locality are implemented; or
- 5. The playing field or playing fields, which would be lost as a result of the proposed development, would be replaced by a playing field or playing fields of an equivalent or better quality and of equivalent or greater quantity, in a suitable location and subject to equivalent or better management arrangements, prior to the commencement of development.
- 6. The redevelopment of a small part of the site will secure the retention and improvement of the remainder (to be secured through a Section 106 legal agreement); or
- 7. The proposed development is for an indoor or outdoor sports facility, the provision of which would be of sufficient benefit to the development of sport as to outweigh the detriment caused by the loss of the playing field or playing fields'.

Green open spaces in Cities are increasingly being recognised as important land uses in promoting the quality of life of urban living. Open space, both public and privately owned, contributes to the health of residents, adds aesthetic and visual amenity to the vitality of the built environment, provides opportunities for passive and formal recreational pursuits whilst also providing valuable habitats for wildlife in the City.

The Council is therefore to committed to protecting existing provision, bringing back into public use playing pitches that have been taken out of the supply and encouraging greater community access to playing fields currently either privately owned or operated or in education of ownership.

#### **Policy D8 Community Facilities**

Planning permission for the redevelopment or change of use of community facilities will be permitted only when the following can be clearly demonstrated:

- I. It is no longer viable to run the property as a community facility, and;
- II. The facility has been appropriately and positively marketed for a reasonable period and no reasonable offers have been received, and;
- III. An alternative replacement community facility will be provided on part or all of the site, or within reasonable walking distance of the site. The size and nature of this facility will be determined through evidence of extensive engagement with the community and the Council's Partnership and Engagement team to ensure that the replacement facility meets the needs of the community that it will serve and is fit for purpose; or

IV. The facility is not in use due to lack of demand and it can be established that there is a surplus of community facilities providing the same offer in the locality, and no other organisation is willing to acquire the site and continue its use as a community facility.

Community facilities are considered to be a necessary component in supporting strong, vibrant and healthy communities. It is important that the community facilities which reflects the community's needs and supports its health, social and cultural wellbeing are protected or provided as appropriate. As such the Council will seek to protect against the loss of community facilities.

Community facilities can include public houses, community centres, sports venues, meeting places, cultural buildings and places of worship.

Where applications for a change of use or redevelopment of a community facility are received, the Council will require evidence that:

- **A.** a comprehensive sustained marketing campaign (agreed in advance by the Council) has been undertaken using an agreed realistic valuation of the premises;
- **B.** the marketing campaign has run for a period of at least twelve months before the planning application is submitted;
- **C.** if marketing has been based wholly or partly on an alternative community or employment use, there has been prior discussion with the Council on the principle of the proposal;
- **D.** the community facility has been offered for sale locally, and in the region, in appropriate publications and through specialised agents;
- **E.** it can be demonstrated that the community facility is not financially viable; in order to determine if this is the case, the Council will require submission of accounts for the last three full years in which the facility was operating as a full-time business;

### **Policy D9 Mobile Catering Units**

Proposals for mobile catering units will be supported where the following criteria are met:

- 1. The design of the mobile catering unit would not have a significant adverse impact on the visual amenity of the area;
- 2. The proposal would not have a significantly adverse impact on neighbouring properties and uses within a reasonable distance of the proposed location in terms of noise, traffic disturbance, odour, litter, light or hours of operation;
- 3. The proposal would not have a severe impact on the surrounding highway network, traffic safety or create unacceptable parking issues;
- 4. The proposal incorporates adequate waste storage and disposal facilities; and
- 5. Consideration will be given to any positive health impacts provided by the range of food and drink available to customers, and the proposed location of the facility.
- 6. Note: The council will expect mobile catering units to be removed from the site following each day of trading, when located on public land.

The council consider that there is a need to maintain a balance in the number of mobile catering units available for the public against permanent hot food establishments. Issues such as visual and residential amenity, transport impacts, possible pollution issues and health issues generally also need to be considered.

The permanent and regular stationing of a mobile catering normally requires planning permission because of the change of use of the land on which the unit is situated. Although applicants for mobile catering units tend to apply for 7 days a week they do not always use this allowance. This note to the proposed interim policy will help prevent the units being parked in position 24 hours a day, 7 days a week, which sometimes occurs. This would benefit the visual amenities of the area and availability of on street parking at non trading times.

## Policy D10 Air Quality

Where there is a localised source of air pollution, buildings should be designed and sited to reduce exposure to air pollutants.

Development proposals will ensure that development is not contributing to poor air quality and provide air quality assessments where appropriate.

Air pollution is the result of emissions, such as carbon monoxide, nitrogen oxides and sulphur dioxide, being released into the atmosphere. The impact of dust, fumes and odour on air quality also need to be considered. The main sources of emissions are transport, combustion and industrial processes. Air pollution has been linked to health problems such as asthma and other respiratory diseases, and damage to the surrounding environment. There are three Air Quality Management Areas (AQMAs) in the city: Barton Street AQMA, Priory Road AQMA, Painswick Road AQMA. Opportunities shall be taken to improve the AQMAs wherever possible.

### Policy D11 Noise

Proposals to locate development that is likely to generate unacceptable noise levels close to noise sensitive uses will not normally be permitted.

Proposals to locate noise sensitive development in areas with existing high levels of noise will not normally be permitted. Mitigation of noise impacts through design, layout, and insulation will be expected where appropriate.

Noise can impact on mental health, undermine quality of life and affect natural habitats. This includes persistent and intermittent noises, from service plant on buildings, road traffic, sound systems, construction and domestic noise. The separation of noise sensitive development such as residential, health and educational uses from noise generating sources can reduce the effects of noise on those uses. Noise generating sources within the city include transport routes, commerce, sport, recreation and other leisure time activities. Proposals for noise sensitive development where it is affected by noise generating sources will not be permitted unless satisfactory mitigation measures can be demonstrated.

### Policy D12 Pollution

Development that may be liable to cause pollution of water, air or soil, or pollution through noise, dust, vibration, light, heat or radiation will only be permitted if the quality and enjoyment of the environment would not be unduly damaged or put at risk.

Particular attention will be given to development of potentially polluting uses in close proximity to sensitive uses such as schools, hospitals, housing or offices. Development of sensitive uses such as schools, hospitals, houses and offices will not be permitted where they would be adversely affected by existing polluting uses.

Pollution includes all manner of emissions that can cause harm to people and the environment generally. The role of the planning system is to ensure that potentially polluting new development is acceptable in its location. It is for other relevant bodies including our Environmental Health Section to actually control emissions. Nevertheless, new development should be designed to ensure that it does not lead to unacceptable emissions of pollutants, which may cause health or environmental problems and then has to be controlled by our Environmental Health Section or other agencies. This is particularly relevant where a potentially polluting use is proposed next to a sensitive site (schools, hospitals etc.) It is also incumbent upon the authority to ensure that these potentially sensitive uses are not located near to existing sources of pollution.

#### **Policy D13 Contamination**

Proposals on land which may be contaminated should be accompanied by an investigation to establish the level of contamination in the soil and/or groundwater/surface waters and identify appropriate mitigation. Development which could adversely affect the quality of groundwater will not be permitted.

A full assessment of potential hazards and the measures necessary to counter these will be required before applications are determined. Developers should consult the Environment Agency and the City Council's Environmental Health Section prior to submitting a planning application to establish the need for studies to be undertaken into potential effects on water resources and other receptors. Any subsequent planning application will be referred to the Environment Agency for their comments.

#### Policy D14 Cordon Sanitaire

Development likely to be adversely affected by smell from Netheridge Sewage Works, within the constraint areas defined on the proposals map, will not be permitted.

Severn Trent Water Limited is responsible for sewerage and sewage disposal. They operate Netheridge sewage disposal works south of Hempsted. The fields adjoining Netheridge are used for sludge disposal that, in addition to the works itself, create unavoidable smell problems. In order to reasonably prevent development that would be adversely affected by smell, a cordon sanitaire area is shown on the proposals map within which development will not generally be permitted.

The cordon does not represent the absolute limit of the area where smells can be detected, but are drawn so as not unreasonably to constrain development in the existing built-up area.

### **Policy D15 Suicide Prevention**

On buildings of 4 or more storeys management and/or mitigation measures should be taken to help prevent suicide. Mitigation measures are well designed and incorporated into the design of the building.

Suicide is a national and local health priority. In Gloucestershire suicide kills approximately 60-67 people a year. When compared to deaths from road traffic accidents, which were 29 in 2014 is responsible for twice as many deaths. Whilst not all suicide can be prevented through mitigation measures in the urban environment, it is the Council's responsibility to do all that in can to keep people safe. In planning, a simple thing that can be done is to make sure that where there is public access to tall buildings, that these buildings are designed in a way that restricts the access or the possibility of jumping or falling from the upper floors. This accords with the government's objective to reduce access to the means of suicide. Retrofitting schemes can be expensive, cumbersome and poorly designed, as such it is considered appropriate to deal with this issue from the outset to ensure well-designed buildings.

## **Objectives Met**

## **Joint Core Strategy**

Strategic Objective 4

Require that all new developments, wherever possible, support green infrastructure and improve existing green infrastructure within urban and rural areas to provide movement corridors for people and wildlife.

Strategic Objective 5 – Delivering excellent design in new developments
Ensure that all new developments are valued by residents by: Integrating them well with existing communities and provide well-located infrastructure which meets the needs of residents.

Strategic Objective 7 – Promoting sustainable transport Reduce the need to travel and the reliance on the car by:

- Improving opportunities for public transport, walking and cycling by making routes more convenient, safe and attractive.
- Improving existing and providing new frequent public transport links and safe
- walking and cycling routes in all new developments.

Strategic Objective 9 – Promoting healthy communities
Promote development that contributes to a healthy population by:

- Providing for good access to the countryside and all open spaces through the retention and development of a comprehensive green infrastructure network
- In partnership with others, creating stronger communities by reducing inequality and social exclusion and thereby increasing social well-being
- In partnership with others, encouraging healthy lifestyles and a well society through access to key community facilities and services, open spaces and sustainable transport, including public transport.
- Ensuring that environmental quality and air quality is protected.

## City Plan

#### **Key Development Principles:**

To ensure that delivery of growth is supported by necessary infrastructure provision including transport, schools, medical and health centres, community facilities and youth provision.

To improve the health of Gloucester's residents by improving access to informal and formal green spaces thereby providing opportunities for people to pursue healthy activities and lifestyles.

#### The Evidence Base

- National Planning Policy Framework
- National Planning Practice Guidance
- Joint Core Strategy
- Gloucester City Plan Scope
- Gloucester City Plan Part 1
- Gloucester City Plan Part 2 Places, Sites and City Centre Strategy
- Gloucestershire Manual for Streets
- Local Transport Plan
- Active by Design
- Active Planning Toolkit 2 Promoting and creating built or natural environments that encourage and support physical activity, Gloucestershire NHS, February 2014
- London Health Observatory (now part of Public Health England)
   <a href="http://www.lho.org.uk/LHO\_Topics/National\_Lead\_Areas/HealthInequalitiesOverview.aspx">http://www.lho.org.uk/LHO\_Topics/National\_Lead\_Areas/HealthInequalitiesOverview.aspx</a>
- Future of Ageing, Government Office for Science Published 4<sup>th</sup> November 2013, updated 28<sup>th</sup> September 2015
- Public Health England Adult Weight Data Factsheet, October 2015
- World Health Organisation Non-communicable disease Fact sheet, January 2015
- Public Health England Gloucester District Health Profile, June 2015
- Gloucestershire Health and Wellbeing Strategy 2012 2032 Fit for the Future,
   Gloucestershire Health and Wellbeing Board
- Gloucestershire Suicide Prevention Strategy, Gloucestershire County Council and Partners, July 2015
- Understanding Gloucestershire A Joint Strategic Needs Assessment (JSNA), Gloucestershire County Council and Gloucestershire Clinical Commissioning Group, October 2015
- Planning Healthier Places report from the reuniting health with planning project, PHE and Town and Country Planning Association, November 2013
- Planning Healthy Weight Environments, PHE and Town and County Planning Association, December 2014
- Obesity and the Environment: Increasing Physical Activity and Active Travel, PHE and the Local Government Association, November 2013
- Obesity and the Environment: Regulating the Growth of Fast Food Outlets, PHE, Chartered Institute of Environmental Health, Local Government Association, March 2014

- Improving Access to Green Space, PHE, UCL Institute of Health Equity, September 2014
- Everybody Active, Every Day An Evidence-Based Approach to Physical Activity, PHE, September 2014
- Everybody Active, Every Day What Works The Evidence, PHE, October 2014
- Preventing Suicide in England, A cross-government outcomes strategy to save lives, HM Government Best Practice Guide, September 2012
- Gloucester's Cultural Vision and Strategy 2016 2026, Gloucester City Council, 2016
- Gloucestershire's Prevention and Self-Care Plan: Scaling up prevention through empowering individuals and enabling active communities, Gloucestershire County Council, Gloucestershire Clinical Commissioning Group, NHS Trust, 2016

#### **Future work**

Loneliness and social isolation are recognised both factors in worse outcomes and a possible consequence of poorer health. Work is underway by the Health and Wellbeing board to capture the extent of this issue in the County. XiV It will then be possible to access what implications this might have for planning.

More evidence gathering is required to assess the need for policies relating to access to fresh food and to develop further cross departmental policies with regard to tackling obesity.

A planning checklist will be produced to help assess schemes against health and wellbeing issues.

<sup>&</sup>lt;sup>1</sup> London Health Observatory (now part of Public Health England) http://www.lho.org.uk/LHO Topics/National Lead Areas/HealthInequalitiesOverview.aspx

<sup>&</sup>lt;sup>ii</sup> Future of Ageing Government Office for Science Published 4<sup>th</sup> November 2013, updated 28<sup>th</sup> September 2015

<sup>&</sup>quot;Public Health England Adult Weight Data Factsheet October 2015

World Health Organisation – Non-communicable disease Fact sheet January 2015

<sup>&</sup>lt;sup>v</sup> No Health Without Mental Health: A Cross-Government Mental Health Outcomes Strategy for People of All Ages, Department of Health, 2011

vi Planning Practice Guidance Paragraph 002 Reference ID: 53-002-20140306

vii Planning Practice Guidance Paragraph 005 Reference ID: 53-005-20140306

viii Research by Janice Morphet, Bartlett School of Planning, UCL

ix Joint Core Strategy Pre-submission Draft November 2014 Gloucester City Council, Cheltenham Borough Council, Tewkesbury Borough Council.

<sup>&</sup>lt;sup>x</sup> Gloucester District Health Profile 2016, Public Health England, September 2016

xi Gloucester District Health Profile 2016, Public Health England, September 2016

xii Gloucestershire Suicide Prevention Strategy, July 2015, Gloucestershire County Council and Partners

xiii Road Safety Gloucestershire, 2014, Gloucestershire County Council

viv Understanding Gloucestershire - A Joint Strategic Needs Assessment (JSNA), Gloucestershire County Council and Gloucestershire Clinical Commissioning Group, October 2015