

Case study

London Borough of Newham: developing healthy urban planning

“It’s absolutely right that public health responsibilities are being returned to local authorities, and we’ve managed to achieve a considerable amount as a result of partnership working within less than a year of public health coming back into the council.

A local approach means we can integrate our efforts to tackle the wider determinants of health outcomes, from planning, to employment, to enforcement. We’re giving planners the tools to get the best deal for residents’ health out of new developments. But we’re also improving standards in the existing built environment through the country’s first borough-wide private rented sector licensing scheme.

I hope that what we’ve learned on our journey will be informative and challenging for colleagues across local government, and I welcome the opportunity that Public Health England offers to share new ways of working across the country.”

Sir Robin Wales, Directly Elected Mayor

Key messages

- A history of joint working between public health and planning ensured health issues were built into planning policies even before public health moved into the local authority.
- The links between public health and planning have meant that, following the transfer of public health to the local authority, public health staff were able more easily to engage with the local government agenda and show the relevance of public health to the local authority’s central concerns
- Healthy urban planning is now high on the agenda of councillors and senior management in Newham and a toolkit is being finalised locally to mainstream and embed healthy considerations as part of the planning application process..

Context

The London Borough of Newham is the third most deprived local authority area in England. It has a population of around 308,000 people. The borough has an unusually young age profile compared to the profile for England, with only 6.7 per cent aged over 65, compared to 16.5 per cent nationally. The borough is considerably ethnically diverse, with large populations of Asian and Black African origin, as well as White, and many other people with family origins all over the world.

Whilst life expectancy and death rates from major diseases in Newham are improving (81.1 years for women and 82.6 for men, on average), the gaps between Newham and the London averages remain. Health inequalities are also emerging between different parts of Newham. The gap in life expectancy between the best and worst wards was in 2012, 11.5 years for men and 13.5 years for women. The borough's premature mortality rate is the third worst in London and it has the second worst one year survival rate for cancer in England. Newham has high rates of children living in poverty and of deaths occurring in the first year of life. Newham has the highest tuberculosis rate in England. It also has the highest unemployment rate.

The proportion of homes not meeting the 'decent homes' standard is higher than the London average at 27 per cent. Recent data suggest that Newham has the highest proportion of housing classified as 'overcrowded' in London, at just under 18 per cent.

It is against this context of deprivation, poor housing and overcrowding that Newham's public health team has been working with the council's planning department for some years to promote the idea and the reality of a planning strategy that supports the health of residents.

Relationships with planning

When the borough's local plan was adopted in 2012, there was already a good working relationship between public health and planning policy. A regeneration manager was appointed in 2010, based within the previous Newham PCT, to oversee the health input to a range of projects in the borough, including the regeneration of the Queen Elizabeth II Olympic Park and the redevelopment of Royal Docks. The postholder was part of the Public Health Directorate, working under a jointly appointed Director of Public Health, based for one day a week in the council's planning department.

A number of the priorities in the 2010 JSNA – education and employment, timely access to excellent services/support, crime/fear of crime, and housing – had explicit links with spatial planning policies. Recognition of these links meant that it was possible to incorporate policy SP2 Healthy Neighbourhoods, in the Newham's Core Strategy document, its local spatial development plan. This core policy explicitly refers to how planners will work with health partners to implement it and how it will 'promote healthy lifestyles, reduce health inequalities, and create healthier neighbourhoods'. It puts integration of services up front and builds joined-up working into the planning process. It also makes it a requirement for all major planning applications to submit a Health Impact Assessment or to address its scope as part of their supporting documentation.

On transferring with approximately 16 public health colleagues to the council in April 2013, the regeneration manager has continued to build relationships within the planning department. A smooth transition was possible because of previous well-established joint working practices which continued as before. What is different and more noticeable since the transfer is the importance that senior management and councillors in both public health and the rest of the local authority are giving to the agenda of health and planning, and the new innovative ways that this agenda can be delivered through closer working links with the local authority. The links between the two have meant that the local authority can engage with public health in a key area with which they are familiar and comfortable. At the same time, there is an opportunity for public health to show that it can contribute to a core local authority function.

The Head of Planning and Regeneration, planning policy officers and development control colleagues are supportive of the healthy urban planning agenda. The councillors who lead on health and social care and the councillors with responsibility for planning have also taken a keen interest,

as has the council's executive director. The elected Mayor of the borough whose priorities include planning and regeneration spoke at a conference to launch a Plugging Health into Planning guide in which Newham is featured, at which he emphasised the interconnections between the two.

A number of workshops have been run by the public health team for councillors and officers from planning, social care and health to promote the ideas on how to take the agenda forward locally and how to build further on existing work and partnerships.

Influencing the planning process

The Core Strategy sets out a requirement for developers to undertake a health impact assessment of all major development proposals. This idea is increasingly being taken on board by developers, especially as planners are able to point to health policies in the strategy and to the need for developers to show that their proposals will fulfil health-related criteria. The core policy, SP2 Healthy Neighbourhoods, states that development proposals which respond to the following contributors to health and well-being will be supported:

- the need to promote healthy eating through taking into consideration the cumulative impact of A5 uses (hot food takeaways)
- the need to improve Newham's air quality, reduce exposure to airborne pollutants and secure the implementation of the Air Quality Action Plan, having regard to national and international obligations
- the need to improve employment levels and reduce poverty, whilst attending to the environmental impacts of economic development including community/public safety, noise, vibrations and odour and the legacy of contaminated land
- the need to improve housing quality and reduce crime, insecurity and stress and

improve inclusion through better urban design

- the need for new or improved health facilities, and importance of protection and promotion of local access to health and other community facilities and employment, including sources of fresh,
- healthy food in line with Policies SP6 (Successful Town and Local Centres) and INF5 (Town Centre Hierarchy and Network)
- the importance of facilitating and promoting walking and cycling to increase people's activity rates
- the need for new or improved inclusive open space and sports facilities to encourage greater participation in physical activity and provide relief from urban intensity
- the role of Newham University Hospital as a key provider of clinical care and expertise, employment and training provision.

The principles outlined above were informed by an in-depth local evidence base. For example, in preparing the strategy, a food outlet mapping study was carried out. This included identifying areas with poor access to healthy fresh food and areas with an over concentration of unhealthy hot food takeaways, in order to provide an evidence base for commissioning "appropriately targeted interventions to support improved access to healthier eating options for residents". The core strategy incorporates this by encouraging allotments and community food growing projects, by using planning to "protect isolated shops" to ensure that most people are within a five-minute walk of a shop and by promoting diversity of uses within the high street and main commercial areas.

The influence of public health is also evident in masterplanning in the borough. For example, the Stratford Metropolitan Masterplan aims to achieve healthy urban development in the neighbourhoods that are being developed around the Queen Elizabeth II Olympic Park. This includes

creating good access routes into the Park for walking and cycling, maximising use for the whole community of the Olympic sport and leisure infrastructure, maximising access to jobs and employment, providing local people with sustainable, well designed, homes, and promoting the delivery of sustainable communities and neighbourhoods that facilitate the adoption of a healthier lifestyle.

Working with five other London 'growth' boroughs, Newham contributed to developing the London Healthy Urban Planning Checklist. This provides planners with a guide to the main likely implications for health of the proposed development and also provides them with an easy guide to the local policies and standards that apply to each one of the criteria mentioned in the guide. The checklist also provide planners with prompts for questions or for requests for further information to support an application and allows planners to understand and identify where the health-related impacts from development may be, and the extent to which adverse impacts can be mitigated through planning conditions or obligations on development granted planning permission.

Future plans

Newham aims to use the London Health Urban Planning Checklist as a basis for further work and to tailor it to the borough's particular needs, for example in relation to the diversity of the population, employment, sustainable development, lifetime homes and air quality. It aims to align the Checklist to local targets and objectives, which may differ from other areas within London and the UK, in other areas of the Council's planning and regeneration strategies.

Further workshops are planned by the public health team to promote and take forward the approach of the checklist. The overall objective is to embed the healthy planning agenda deeply into the culture of the local authority, so that the issues can be raised and

prioritised by the whole local authority and embedded within every department,

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