

2.0 Links Between Spatial Planning and Health

- 2.1 Health is defined by The World Health Organisation as a 'state of complete physical, mental and social wellbeing and not merely the absence of disease or infirmity'. Building on this, The World Health Organisation has stated that 'the enjoyment of the highest attainable standard of health is one of the fundamental rights of every human being without distinction of race religion, political belief, economic or social condition'. See the glossary of health-related terms in Appendix 1.
- 2.2 Health and wellbeing are not purely determined by individual behaviours or genetic factors. Wider economic, environmental and social factors can also shape peoples' lives. Policy discourse has often referred to these factors as the "wider determinants of health". These wider determinants of health were mapped by Barton and Grant (2006) in their "[A Health Map for the Local Human Habitat](#)"; their commonly cited Health Map has been reproduced in Figure 1.

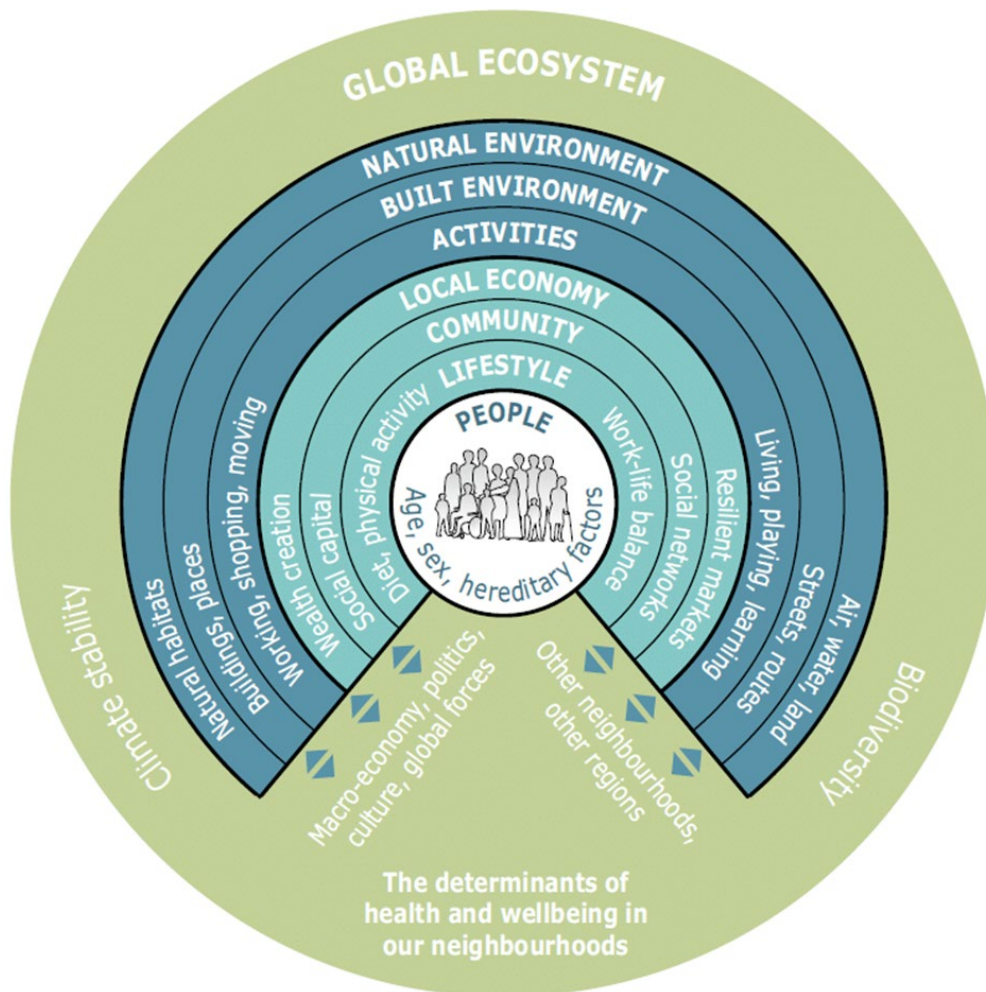


Figure 1: The Health Map – a useful depiction of the wider determinants of health adapted from Whitehead and Dahlgren's social determinants of health model (Source: Barton & Grant, 2006).

- 2.3 The Health Map helps to explain the various ways that the planning and design of the built environment can significantly influence human health and wellbeing. The Health Map also helps to explain how poor development can result in health and wellbeing differences between different populations, magnifying the level of health inequalities within a community or society.
- 2.4 Global initiatives, including the United Nations' [Sustainable Development Goals](#), have actively identified the linkages between good health and wellbeing and well-conceived built development. Therefore, delivering places that integrate all members of a community and mitigate against negative health impacts wherever possible are critical objectives of sustainable development. Reflecting this objective, the appraisal and management of health impacts are material considerations in planning decision making.
- 2.5 This SPD has been prepared in the context of the [National Planning Policy Framework \(2023\)](#) and of the adopted [Cambridge Local Plan \(2018\)](#) and the [South Cambridgeshire Local Plan \(2018\)](#). The SPD provides supplementary guidance to help clarify the requirements of health assessment requirements in the Greater Cambridge area and should be read in conjunction with the adopted policies in the Local Plans (2018) and other relevant material considerations set out in this chapter.

National Planning Policy Framework (2023)

- 2.6 The [National Planning Policy Framework](#) (NPPF) (2023) sets out a series of national planning policies that form part of the Development Plan for all local planning authorities in England.
- 2.7 Chapter 8 of the NPPF focuses on 'Promoting Healthy and Safe Communities'. Paragraph 96 of the NPPF states, '[planning] policies and decisions should aim to achieve healthy, inclusive and safe places and beautiful buildings which:
- a. promote social interaction, including opportunities for meetings between people who might not otherwise come into contact with each other – for example through mixed-use developments, strong neighbourhood centres, street layouts that allow for easy pedestrian and cycle connections within and between neighbourhoods, and active street frontages;
 - b. are safe and accessible, so that crime and disorder, and the fear of crime, do not undermine the quality of life or community cohesion – for example through the use of beautiful, well-designed, clear and legible pedestrian and cycle routes, and high quality public space, which encourage the active and continual use of public areas; and

- c. enable and support healthy lifestyles, especially where this would address identified local health and well-being needs – for example through the provision of safe and accessible green infrastructure, sports facilities, local shops, access to healthier food, allotments and layouts that encourage walking and cycling.’
- 2.8 Paragraph 97 of the NPPF also identifies how planning policies and decisions should help to provide the recreational spaces, cultural facilities and services that support the social wellbeing of communities. The NPPF lists facilities such as local shops, meeting places, sports venues, open space, cultural buildings, public houses and places of worship.
- 2.9 Paragraph 102 of the NPPF recognises that ‘access to a network of high-quality open spaces and opportunities for sport and physical activity is important for the health and well-being of communities and can deliver wider benefits for nature and support efforts to address climate change’.
- 2.10 This SPD upholds the aims of the NPPF by ensuring that health and wellbeing are considered as an integral part of new development in the Greater Cambridge area.

National Planning Practice Guidance

- 2.11 National Planning Practice Guidance (PPG) includes guidance on ‘[Healthy and safe communities](#)’. It provides guidance on how local planning authorities should ensure that health and wellbeing, and health infrastructure are considered in planning decision-making, as well as recognising the role that new development can have on health.
- 2.12 The PPG provides information on the range of issues in respect of health and healthcare infrastructure that can be considered as part of the planning decision-making process. The PPG acknowledges that HIAs are a useful tool to use where there are expected to be significant health impacts.
- 2.13 As health and wellbeing can be influenced by a range of factors directly relevant to development, applicants are also advised to consult other [national PPG](#) published by the Government that may be relevant to the wider determinants of health and the scope of site-specific HIAs.
- 2.14 This SPD also aligns with national, procedural guidance on HIAs published by Public Health England in 2020, entitled [Health Impact Assessments in Spatial Planning](#).

National Legislation

- 2.15 The [Localism Act](#) (2011) empowers community and voluntary groups to get involved and work innovatively to support new ideas. Stakeholder engagement is a critical part in the HIA process (see Section 5.0) and offers an additional opportunity for community involvement in the planning process.
- 2.16 The [Health and Social Care Act](#) (2012) requires local authorities to use all mechanisms at their disposal to improve health and wellbeing in their local area. Guidance published by Public Health England – entitled [Health Impact Assessment in Spatial Planning](#) – highlights that local authorities should view HIAs as a means to optimising the health outcomes of development and a tool to secure long-term health management when coupled with planning controls.

South Cambridgeshire Local Plan (2018)

- 2.17 Mitigating negative health impacts and using HIAs to assess development proposals are explicitly referenced within The South Cambridgeshire Local Plan (2018). More specifically, Policy SC/2: Health Impact Assessment states that:

‘New development will have a positive impact on the health and wellbeing of new and existing residents. Planning applications for developments of 20 or more dwellings or 1,000m² or more floorspace will be accompanied by a Health Impact Assessment to demonstrate this.

- a. For developments of 100 or more dwellings or 5,000m² or more floorspace, a full Health Impact Assessment will be required;
 - b. For developments between 20 to 100 dwellings or 1,000 to 5,000m² or more floorspace the Health Impact Assessment will take the form of an extended screening or rapid Health Impact Assessment.’
- 2.18 The supporting text for Policy SC/2 highlights that additional guidance and clarification will be provided within an SPD; this SPD has been produced to clarify the requirements of Policy SC/2 and how this policy may be applied during the planning decision-making process.

Cambridge Local Plan (2018)

- 2.19 Delivering inclusive places and managing the health impacts that a development could have on existing and future communities are key aspects of planning policies contained within the Cambridge Local Plan (2018). Through Strategic Objective 15, the Cambridge Local Plan (2018) strives to ‘promote a

safe and healthy environment, minimising the impacts of development and ensuring quality of life and place.’

2.20 Policy 28 of the Cambridge Local Plan sets out the requirement to produce a Sustainability Statement as part of planning applications for major development. The supporting text for Policy 28 states that Sustainability Statements should include an assessment of ‘health and well-being, including provision of open space’ within their scope.

2.21 Other policy requirements that are directly relevant to the wider determinants of health include:

- The protection of new and existing communities from flood risks (Policy 32).
- The prevention of adverse health impacts arising from ground and ground-water contamination (Policy 33).
- The control of light pollution to prevent creating poor sleep environments (Policy 34).
- The protection of human health and quality of life from noise pollution and vibration (Policy 35).
- The prevention of adverse health impacts stemming from poor air quality, odour and dust (Policy 36).
- The adaptation of developments containing hazardous installations to ensure that health risks to site users and surrounding communities are minimised (Policy 38).
- The provision of adaptable or specialist housing that meets the needs of population groups with special care needs (Policy 47).
- The creation of well-designed places that promote public safety and reduce the threat or perceived threat of crime (Policy 56).
- The protection and delivery of open spaces that facilitate active lifestyles and inclusive forms of recreation (Policy 67 and 68).
- The provision and protection of adequate services and facilities (e.g. healthcare facilities, community centres, and sports and leisure facilities)

that can sustain high standards of mental and physical health (Policy 73 and 75).

- The advocacy for development that prioritises development access via active transport modes to promote active lifestyles and limit the magnitude of congestion, poor air quality and road traffic accidents (Policy 80).

2.22 HIAs are an effective means of ensuring that these planning requirements can be achieved and concisely demonstrated to the LPA and the general public.

2.23 Considering the requirements of the NPPF and the Cambridge Local Plan's objective of protecting human health from various development factors, it is appropriate to apply this SPD to development in Cambridge.

Other Relevant Planning Documents

2.24 The [Greater Cambridge Sustainable Design and Construction SPD](#) (2020) provides further guidance on how to implement policies in the Cambridge and South Cambridgeshire Local Plans. The SPD sets out how to integrate the principles of sustainable development into the design and construction of new development and provides applicants with guidance on how to produce Sustainability Statements. The health and wellbeing section of the SPD outlines that many policies in the Cambridge and South Cambridgeshire Local Plans seek to ensure that new developments enhance the health and wellbeing of those who live and work in the Greater Cambridge Area. It provides further guidance on how the external environment and internal spaces of homes should be designed and constructed to improve health and wellbeing.

2.25 There is an existing [Health Impact Assessment SPD \(2011\)](#) for South Cambridgeshire that relates to policies in a previous version of the Local Plan. The HIA SPD (2011) still represents a material consideration in the decision-making process for planning applications; South Cambridgeshire District Council's HIA SPD (2011) will be replaced by the Greater Cambridge Health Impact Assessment SPD, once adopted.

2.26 Other [Supplementary Planning Documents](#) have been produced individually or collaboratively by the Councils, and these should be read alongside the Greater Cambridge Health Impact Assessment SPD to ensure cross compliance and integration.

Other Relevant Documents

- 2.27 The [Healthy Places Joint Strategic Needs Assessment](#) (2024) provides a local evidence base from which to support and create health and wellbeing in our communities. It should be used to aid decision making in the design of new communities as it draws evidence from a wide range of published studies, local, regional and national policy guidance, and case studies of good practice and lessons learned.
- 2.28 The [Cambridgeshire and Peterborough Health & Wellbeing Integrated Care Strategy](#) (2022) outlines the shared ambitions of the NHS, local authorities and health and care organisations across Cambridgeshire to improve the health and wellbeing of our local communities and should be a key document for consideration when planning new communities.
- 2.29 South Cambridgeshire District Council and Cambridge City Council have published documents which are directly related to health and wellbeing. A list of these documents can be found in Appendix 2, and these can be used to help develop and inform site-specific HIAs.