



Civic Centre,
Arnot Hill Park,
Arnold,
Nottinghamshire,
NG5 6LU

Agenda

Cabinet

Date: **Thursday 29 September 2016**

Time: **12.30 pm**

Place: **Reception Room**

For any further information please contact:

Lyndsey Parnell

Senior Elections and Members' Services Officer

0115 901 3910

Cabinet

Membership

Chair Councillor John Clarke

Vice-Chair Councillor Michael Payne

Councillor Peter Barnes
Councillor David Ellis
Councillor Kathryn Fox
Councillor Jenny Hollingsworth
Councillor Henry Wheeler

Observers: Councillor Chris Barnfather

AGENDA

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MINUTES CABINET

Thursday 4 August 2016

Councillor Michael Payne (Chair)

Councillor David Ellis

Councillor Jenny Hollingsworth

Observers: Councillor Chris Barnfather

Absent: Councillor John Clarke, Councillor Peter Barnes,
Councillor Kathryn Fox and Councillor Henry Wheeler

Officers in Attendance: A Ball, H Barrington, D Wakelin and A Dubberley

10 APOLOGIES FOR ABSENCE.

Apologies for absence were received from Councillors Barnes, Clarke, Fox and Wheeler.

11 TO APPROVE, AS A CORRECT RECORD, THE MINUTES OF THE MEETING HELD ON 16 JUNE 2016.

RESOLVED:

That the minutes of the above meeting, having been circulated, be approved as a correct record.

12 DECLARATION OF INTERESTS.

None

13 SCRUTINY REPORT - REPORT AND RECOMMENDATIONS OF THE OBESITY WORKING GROUP

Members welcomed Councillor McCrossen, Review Group Chair, to present the findings of the Scrutiny Working Group on Obesity.

Councillor McCrossen thanked everyone involved in the review including partners and officers and summarised the findings of the review. Of most concern to the group were the high levels of obesity in Gedling residents, particularly school aged children and it was felt that an approach of obesity prevention rather than cure would best address this.

RESOLVED:

- 1) To note the report of the working group and thank the working group; and
- 2) To refer the report to the appropriate Cabinet Member in order for a response to be made to the Overview and Scrutiny Committee at the next meeting on 19th September.

14 QUARTER 1 BUDGET MONITORING, PERFORMANCE DIGEST & VIREMENT REPORT

Alison Ball, Chief Financial Officer, introduced a report, which had been circulated prior to the meeting, informing Members of the likely outturn of the Revenue and Capital Budgets for the 2016/17 financial year as at the end of Quarter 1.

RESOLVED to:

- 1) Note the progress against Improvement Actions and Performance Indicators in the 2016/19 Gedling Plan
- 2) Approve the General Fund Revenue Budget virements included within Appendix 1 to the report;
- 3) Note the Capital Programme projected outturn for 2016/17;
- 4) Note the virements and transfers to/from reserves and funds during the last quarter as detailed in appendices 3 and 4 to the report.

15 PRUDENTIAL CODE INDICATOR MONITORING 2016/17 AND QUARTERLY TREASURY ACTIVITY REPORT FOR QUARTER ENDED 30 JUNE 2016

Alison Ball, Chief Financial Officer, introduced a report, which had been circulated prior to the meeting, informing Members of the performance monitoring of the 2016/17 Prudential Code Indicators, and advising Members of the quarterly treasury activity, as required by the Treasury Management Strategy.

RESOLVED:

To note the report, together with the Treasury Activity Report for Quarter 1 at Appendix 1 to the report, and the Prudential and Treasury Indicator Monitoring for Quarter 1 at Appendix 3 to the report.

16 POLICY ON ENFORCEMENT IN RELATION TO WHEELIE BINS LEFT ON THE HIGHWAY AFTER COLLECTION

The Deputy Leader informed members that the item had been withdrawn from the agenda.

**17 REGULATION OF INVESTIGATORY POWERS ACT 2000 (RIPA)
ANNUAL AUDIT AND POLICY UPDATE**

The Director for Organisational Development and Democratic Services introduced a report, which had been circulated prior to the meeting, updating members on a recent audit and consequential amendments to the Regulation of Investigatory Powers Act (RIPA) Policy.

RESOLVED to:

- 1) Approve the amended Regulation of Investigatory Powers Act (RIPA) Policy at Appendix 1 to the report;
- 2) Note the outcome of the 2015-2016 Annual RIPA internal audit; and
- 3) Note the outcome of the Office of Surveillance Commissioner conducted on 18th April 2016.

18 FORWARD PLAN

Consideration was given to a report of the Service Manager, Elections and Members' Services, which had been circulated prior to the meeting, detailing the Executive's draft Forward Plan for the next four month period.

RESOLVED:

To note the report.

19 PROGRESS REPORTS FROM PORTFOLIO HOLDERS.

Councillor Jenny Hollingsworth (Growth and Regeneration)

- A meeting on progress on the Local Planning Document was held recently and attendees found it useful. A further meeting discussing housing allocations would be held soon.

Councillor David Ellis (Public Protection)

- Concerns about the cleanliness of an ice cream parlour were recently been reported to the Council. Thanks to the swift action of officers and cooperation from the business owner improvements were made and the business re-opened within days.
- A new Environmental Health Officer had recently been recruited and it was pleasing to note that several good quality applications had been received.

Councillor Gary Gregory (Community Development)

- Work on the community asset transfer process was continuing and progress particularly with the Arnold Hill Centre had been made.
- Several play days around the Borough had been held with more planned later in the summer – all had been well attended.
- The Gedling Youth Council had met since the recent elections and a full work programme was planned.
- Other recent events included the Killisick fun day the Newstead Garden competition and the Gedling Arts Festival.

Councillor Michael Payne (Resources and Reputation)

- From Councillor Wheeler's portfolio Councillor Payne reported that the Local Clinical Commissioning Group faced a significant challenge to save money over the next year. He also reported that was hoped to submit a budget bid to create a post to bring empty homes back into use within the Hosing Service.
- The Communications department had recently aired a film on social media promoting the unpleasantness of dog fouling when hunting for Pokémon. The clip was praised as a good example of social media use and was viewed widely.
- Congratulations to Craig Allcock from Legal Services who has been doing work experience leading to temporary work. Craig had secured a job with a local law firm whilst continuing his legal training.

20 MEMBER'S QUESTIONS TO PORTFOLIO HOLDERS.

None.

21 ANY OTHER ITEMS THE CHAIR CONSIDERS URGENT.

None.

The meeting finished at 2.00 pm

Signed by Chair:
Date:



Report to Cabinet

Subject: Community Asset Transfer Submission: Arnold Hill Community Centre

Date: 29 September 2016

Author: Community Investment Manager

Wards Affected

All

Purpose

To inform Cabinet of the receipt of a Community Asset Transfer (CAT) request in respect of Arnold Hill Community Centre from the Eagle's Nest Church, a local faith organisation and registered charity.

To request the approval of Cabinet to enter into negotiations with the Eagle's Nest Church, with a view to a 99 year, full repairing lease being implemented on a 'peppercorn rent' basis.

Key Decision

This is not a key decision.

Background

1. Gedling Borough Council Community Asset Transfer Policy

Along with other Local Authorities across the country, the Council is being encouraged by Central Government to explore Community Asset Transfer wherever appropriate and viable, in order to achieve financial savings whilst ensuring best value and innovation in the delivery of services to local communities.

To that end, Gedling Borough Council adopted a Community Asset Transfer Policy in October 2015. The aims of the policy are:

- To identify the process and tools that will enable the successful delivery of a future asset transfer programme.
- To recognise the capacity needs of local groups wishing to take on local authority assets.
- To ensure a thorough risk assessment of asset transfer is undertaken.

- To define the legal form a transfer agreement would take.

A successful funding application to the Community Ownership and Management of Assets (COMA) Programme, provided by the Cabinet Office and administered by 'Locality', a national association of social enterprises, led to the establishment of a Gedling Community Asset Transfer Community Partners Group.

Created to enable community organisations to consider opportunities in respect of the Council's portfolio of community centres, the group also operates to develop the skills, competencies and necessary governance and management infrastructure needed to prepare organisations to enter into a CAT.

2. The Gedling Community Asset Transfer Development programme

COMA funding was used to deliver a programme of high quality training and development workshops, and to commission independent structural surveys on the three community centres emerging as being of primary interest to groups; Pond Hills Lane, Wollaton Avenue and Arnold Hill Community Centres. Survey reports included a five year financial management plan for each centre, with projected costs being clearly prioritised as follows:

1. Statutory
2. Essential
3. Desirable
4. Beneficial

Asbestos and Legionella Surveys were commissioned and carried out on four community centres; Arnold Hill, Pond Hills Lane, Wollaton Avenue and Burton Road community centres. These surveys have informed the development of Asbestos Management and Legionella Management plans, which are a statutory requirement. Through the COMA process these management plans will become the responsibility of organisations taking on a CAT.

3. Community Asset Transfer submission process

In accordance with the Asset Transfer Policy, organisations wishing to take on more responsibility for a community facility must engage in consultation with relevant stakeholders, ensure that the required statutory policies and public liability insurances are in place and demonstrate a robust business plan for ongoing management of the facility.

A CAT submission process has been adopted for that purpose, and a CAT officer hub appointed, comprising of estates, facilities management, legal, finance and community

centres management officers, to consider CAT submissions as they arise.

On receipt of a CAT submission, a six week public notice of consultation is immediately triggered, following which the CAT Officer hub is convened to make an initial assessment of the application. The recommendations of that assessment are then put to Cabinet.

Eagle's Nest Church CAT Submission

The Eagle's Nest Church is a committed member of the CAT Community Partnership Group, and as such has benefited from the Locality consultancy resources, training and guidance provided through our Community Asset Transfer development programme.

A submission was received from the Eagle's Nest Church on Friday 15th July and the public consultation period ended on 19th August. The CAT Officer hub met on 24th August to assess the submission, which consisted of the following documents:

- Completed CAT Application
- Business Plan
- Governing Documents - Eagle's Nest Constitution
- Annual Reports for 2 previous financial years, including accounts.
- Health & Safety Policy and Statement
- Equal Opportunities Policy
- Safeguarding Policy - which includes Child Protection & Vulnerable Adult
- Lettings Policy
- Public Liability Insurance details

Outcomes of the CAT Officer hub

The CAT Officer hub met on the 24th August to review the submission documents and to complete an Equalities Impact Assessment and Building Viability Assessment.

- Equalities Impact Assessment: **Appendix A**
- Building Viability Assessment: **Appendix B**

Public consultation period

The consultation period yielded no comments from members of the public however one existing user group contacted the council to enquire about the implications in respect of their regular booking at Arnold Hill Community Centre. The group was referred on to Rev. Fahy of the Eagle's Nest Church and assured that the booking would be maintained going forward.

Findings

In reviewing the Eagle's Nest submission, the following positive observations were

made by the CAT officer hub:

- The submission included all documents required by the process, including all of the necessary statutory policies.
- The Eagle's Nest Church has undertaken sensitive, appropriate consultation with existing user groups and demonstrated a partnership approach with Gedling Borough Council, the Arnold Hill Academy and other member organisations in the CAT Community partnership group. The intention is that all current users of the Arnold Hill Community Centre will be retained.
- Substantial preparation and development has been undertaken, including local research to evaluate need and inform the direction of services, familiarisation visits to a range of other facilities with a similar vision and approach in and around the East Midlands. The Eagle's Nest is in the process of establishing an arms - length charity with the specific remit to manage the centre. Incorporation is on target to complete in October 2016.
- In terms of site management and caretaking, it was noted that a user group key holder and volunteer led site management approach is proposed in the short term, with the creation of a centre manager and cleaner post envisaged within the first year.
- Additionally, grant funding professionals have been approached to outline planned projects, including building remodelling, and to seek recommendations on whether this community asset transfer project would be likely to successfully access funding in the future.
- The priorities and vision set out in the application reflect those of the Council, specifically the intention to 'provide a multi-use, multi - generational community hub of excellence that is widely used by the people of Arnold, with the aim of building community, acting as a catalyst for volunteer projects and partnership with others to increase social provision'.
- The business plan states that this will be achieved through the phased development of new provision including a seniors café, a girls youth club, lifestyle support and money management advice, summer holiday activities for children, volunteer development and training, to operate alongside the existing health, education, arts and performance activities currently provided at the centre.
- The financial business plan for the centre was compared with the five year building maintenance plan set out in the independent structural survey. It was noted that the plan adequately addressed the projected '**statutory**' and '**essential**' costs, and provision had been made and funding options were being

explored to undertake remodelling of the shower and kitchen area, along with planned installation of ICT/Conferencing facilities. These elements have the potential to substantially increase the viability of the centre by attracting a wider range of users, thereby having the potential to address some of the **'desirable'** and **'beneficial'** maintenance costs.

- Room hire charges reflect market rates and correlate with those of similar community and public facilities in the area. The stated aim to increase occupancy from the current 57% to 65% in the first year is deemed realistic, given the evident partnership and activity development, research and forward planning.

Proposal

It is proposed that Officers now enter into negotiations with the Eagle's Nest Church commencing in October 2016, with a view to effect community asset transfer of the Arnold Hill Community Centre by way of a 99 year, full repairing lease under a 'peppercorn rent' arrangement. Cabinet is to note that any subsequent lease agreement would be subject to further Cabinet approval following the successful completion of necessary facilities, legal and financial investigations and the establishment of an agreed transition plan for the proposed CAT.

Alternative Options

The alternative options would be not to enter into negotiations with the Eagle's Nest Church but to:

1. maintain current Gedling Borough Council management arrangements in respect of the Arnold Hill Community Centre

This option would restrict the Council in achieving best value and projected savings in the Community Centres Management budget, and limit the potential for innovation and growth of services to the community.

2. consider the site for disposal

Arnold Hill Community Centre is one of the newest facilities in the Council's portfolio of community centres. The centre is in a prime location in an area of substantial community need. Retention of the centres' use as a community hub supports wider Council aims to develop the Arnold Town Centre and address the health, wellbeing and community resilience of that area.

Another option would be to effect community asset transfer of the Arnold Hill Community Centre by freehold transfer, under different lease arrangements or by entering into a licence. This option would potentially restrict the ability of the new management organisation to access grant funding and to pursue other opportunities for sustainability

and growth.

Financial Implications

The successful COMA application and subsequent follow on funding has enabled us to meet the additional costs of commissioning surveys and consultancy support to allow organisations going forward with CAT to undertake necessary organisational development, create business plans and to appoint independent legal and technical advice.

Subject to successful completion of the CAT, the proposed budget savings for the Arnold Hill Community Centre cost centre from 2017/18 will be **£25,100.00**.

Detailed financial implications of the proposed CAT will emerge through the lease negotiations and development of the transition plan, and will be the subject of a further report to Cabinet, however the following are areas of potential financial impact:

Ensuring viability of the site for transfer

Whilst the site is deemed to be in reasonable condition and compliant with current Health and Safety and Equal Opportunities legislation, costs to the Council may nevertheless emerge during the negotiation process.

Car park

The car park is owned by Nottinghamshire County Council, with which Gedling Borough Council has a maintenance agreement. This arrangement will need to be reviewed in the light of the proposed CAT, and may result in a cost to the Council.

Asbestos and Legionella management plans

A number of remedial actions have been highlighted by the asbestos and legionella surveys, some of which are the Council's current statutory responsibility, and some of which may be subject to the negotiation process.

Staffing implications

The caretaker currently in post at Arnold Hill Community Centre is employed on a temporary contract therefore no financial implications arise from the proposed CAT, i.e. redundancy.

Appendices

Appendix A: Equalities Impact Assessment

Appendix B: Building Viability Assessment

Background Papers

Eagle's Nest Church full submission documents

Recommendations

It is recommended that Cabinet:

- (a) agrees that Officers should enter into negotiations with the Eagle's Nest Church with a view to effect community asset transfer of the Arnold Hill Community Centre by way of a 99 year, full repairing lease under a 'peppercorn rent' arrangement; and
- (b) notes that any subsequent lease agreement would be subject to further Cabinet approval following the successful completion of necessary facilities, legal and financial investigations and the establishment of an agreed transition plan for the proposed CAT.

Reasons for Recommendations

To enable officers to enter into positive long term lease negotiations with the Eagle's Nest Church in respect of the Arnold Hill Community Centre, the outcome being subject to a further report to Cabinet in due course.

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Equality Impact Assessment

Name of project, policy, function, service or proposal being assessed:	Proposed Asset Transfer of Arnold Hill Community Centre to Eagles Nest Church						
The main objective of the Asset Transfer proposal	In line with the Council's Asset Transfer Policy, transfers of management responsibility for Community Centres is encouraged in order to work in closer partnership with community enterprise organisations, diversify use, maximise income generation and achieve savings to the Council's Community Centres management budget.						
Please use only 'Yes' where applicable				Negative	Positive	Neutral	Comments
Gender	External		y			New activities are planned that target specific genders to address underrepresentation, i.e. Girls Youth Club	
	Internal			y			
Gender Reassignment	External			y			
	Internal			y			
Age	External		y			Both older and young people will benefit from enhanced services as a result of the proposal	
	Internal			y			

<u>Marriage and civil partnership</u>	External		y		Enhanced potential for family events and parties, including wedding receptions
	Internal			y	
<u>Disability</u>	External		y		Eagles Nest Church has a robust EO policy and intends to make positive adaptations to the building to enable a wider range of groups and activities for all abilities.
	Internal			y	
<u>Race & Ethnicity</u>	External		y		Eagles Nest Church has demonstrated an inclusive approach and services appropriate and accessible to a range of ethnicities, religious beliefs, sexual and gender orientation.
	Internal			y	
<u>Sexual Orientation</u>	External		y		As above
	Internal			y	
<u>Religion or Belief (or no Belief)</u>	External		y		As above
	Internal			y	
<u>Pregnancy & Maternity</u>	External		y		As part of the transition plan, the centre will be assessed for kite marking as

					a breast feeding friendly public facility.
	Internal			y	
<p>Other Groups (e.g. any other vulnerable groups, rural isolation, deprived areas, low income staff etc.)</p> <p>Please state the group/s:</p> <p>Existing user groups</p> <p>_____</p> <p>_____</p>	External		y		<p>The Eagles Nest business plan sets out a commitment to retaining all existing user organisations and providing an enhanced, flexible use facility.</p> <p>The increased room hire cost stated in the business plan is in line with current market rates and does not undercut similar existing facilities in the vicinity</p>
	Internal			y	

Is there is any evidence of a high disproportionate adverse or positive impact on any groups?		No	
Is there an opportunity to mitigate or alleviate any such impacts?		No	
Are there any gaps in information available (e.g. evidence) so that a complete assessment of different impacts is not possible?		No	

In response to the information provided above please provide a set of proposed action including any consultation that is going to be carried out:

Planned Actions	Timeframe	Success Measure	Responsible Officer

Authorisation and Review

Completing Officer	Jane Ansell
Authorising Director	
Date	
Review date (if applicable)	

Viability of Assets for Transfer to Community Organisations Summary 2016

Asset: Arnold Hill Community Centre **Date of Survey:** 16/08/16

Core Asset Register					
	Yes	No	Evidence		
Is the site registered as a core asset?		No			
Health and Safety Compliance – Documentation attached					
Asbestos Management Plan	Yes		Asbestos survey undertaken – action plan in place		
Fire Risk Assessment	Yes		Copy available		
Fixed Electrical Certification	Yes		Copy of most recent available		
Legionella Management Scheme	Yes		Legionella survey undertaken – action plan in place		
Gas Safety Certification	Yes		Copy of last certification available		
Asset Condition Acceptability – Visual Assessment					
	Yes	Evidence		No	Evidence
External (Grounds)	Yes	Query NCC ownership of car park			
External (Building)	Yes				
Internal (Building)	Yes				
Other Improvements or Restrictions that may affect Transfer – Documentation attached					
	Yes	Evidence		No	Evidence
Is the venue Disability Discrimination Act compliant? (DDA)	Yes	Subject to any intermediate changes in legislation			Final check against current legislation required before transfer
Is there any Legal or other restriction on the land or building that would prevent transfer?	N/K	Unknown at present			

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Report to Cabinet

Subject: Digital Strategy 2016-2019

Date: 29th September 2016

Author: Digital Services Manager

Wards Affected

All

Purpose

The purpose of this report is to brief Cabinet and seek approval for a Digital Strategy for Gedling 2016-2019.

Key Decision

This is not a Key Decision.

Background

- 1.1 Whilst Council services are supported by existing core I.T. arrangements, as technology continues to transform the way services are delivered and is increasingly integrated into many aspects of our lives; there is the potential to be even more efficient, productive and cost effective by expanding the use of digital technologies.
- 1.2 Building on our solid foundations we can progress towards a fully digitally enabled Council that keeps up with the pace of change, generates long term savings and continually improves services. The continued exploitation of technology can assist in providing services in user friendly and inclusive ways, easier access for the community and support collaborative working.
- 1.3 A Digital Strategy 2016-19 has been developed and appears at Appendix 1. It sets out the overarching strategic direction for the Council to provide focus, quicken the pace and enable a more joined up approach. The Strategy has been developed in consultation with senior managers across the Council whose input has both shaped

Further information on the subject of this report is available from
Mark Lane (Digital Services Manager) on (0115) 9013876

the proposals and will assist with the implementation of the arrangements. An Equality Impact Assessment (Appendix 2) and a summary, reference guide (Appendix 3) accompanies the full Strategy document.

Proposal

- 2.1 For a number of years, the Council has made use of available technologies which have assisted in service improvements, enhanced customer journeys, and reduced operating costs. Building on what has been put in place, it proposed that the scope of the Council's digital thinking is widened and the pace of change accelerated.
- 2.2 The strategy sets out a multi strand approach comprising of four core themes which are Customer, Council, Community and Collaboration.
 - 2.2.1 Many customers expect and want to deal with the Council digitally. The **Customer** component of the strategy will primarily focus on the website and the potential of social media. A radical restructuring of the website is proposed which will change the design, navigation and content to support easier and efficient access to services. Instances where customers need to report, apply or pay will be supported by easy to use facilities which are the norm when using the internet. Social media and keep me posted will be fully exploited to promote what facilities are available from Council's website and will also be used to get important messages into the Community. It's not the intention that the only way of dealing with the Council will be by digital means. Where people expect to, want to and can, we will encourage and support their use of our digital channels but, our traditional channels for example telephone and face to face will always be available contact options.
 - 2.2.2 Access to digital tools and the skills required to deliver services effectively and efficiently sits at the centre of the **Council** component of the strategy which will embed a strong digital culture throughout the organisation. Our investments in technology must be used to their full potential and opportunities to exploit digital capabilities will be embedded in the service planning process. A paperless approach will become the norm.
 - 2.2.3 Supporting residents and business to benefit from digital technologies features within the **Community** strand of the strategy. Whilst externally collated Insight data suggest that the likelihood of overall digital exclusion in the Borough is low, continued support is required to provide access to the Internet and help with using digital facilities. The Council has contributed to the national broadband infrastructure programme and provides both Wi-Fi and self-service workstation access points to the internet. Moving forward, finding additional ways of supporting residents and businesses to benefit from digital technologies is the fundamental element of this theme.
 - 2.2.4 The **Collaboration** strand is about working with partners to engage with the

Further information on the subject of this report is available from
Mark Lane (Digital Services Manager) on (0115) 9013876

community using digital tools to tackle complex issues in a seamless way. That means fully exploiting the potential of social media products to fully involve and stimulate inclusive participation in issues affecting residents and businesses within the Borough. Appropriate sharing of insight data between partners to assist in the determination of problem solving and improvements will be part of this theme.

- 2.3 Whilst being mindful of the risk of cyber-crime and recognising that the protection of both customer and council data is paramount, we must not see this as a barrier to putting in place our digital plans.
- 2.4 At the centre of what the Council does is serving people, improving lives. Embedded within the Council Plan, is a range of activities in support of people, performance and place which are digitally themed and contribute and align with the overall proposed digital agenda.

Alternative Options

- 3 Although the Council is making progress in support of the digital agenda, overarching strategic direction will provide focus, quicken the pace and enable a more joined up approach. The alternative option is not to have a strategy and continue with a piecemeal approach but this option is not recommended for a change programme of this magnitude.

Financial Implications

- 4.1 Implementation of the Strategy will require funding. Opportunities may arise to reutilise existing budgets. Where this is not possible and additional funding is needed, budget bids will be submitted in accordance with the normal processes.

Appendices

- 5 Appendix 1 – Digital Strategy 2016-19.
Appendix 2 - Digital Strategy 2016-2019 Equality Impact Assessment.
Appendix 3 - Summary Reference Guide.

Background Papers

- 6. None.

Recommendations

It is recommended that Cabinet:

- (a) Approve the Digital Strategy 2016-19 set out at Appendix 1 and authorise Officers to progress arrangements to implement the proposals set out.

Further information on the subject of this report is available from
Mark Lane (Digital Services Manager) on (0115) 9013876

Reasons for Recommendations

- 7.1 To ensure that the Council has an overarching strategic direction to its digital agenda which will provide focus, quicken the pace and enable a more joined up approach.
- 7.2 To use the most appropriate technologies to assist in making continual improvements to the services provided by the Council.
- 7.3 Unlocking the full potential of digital technologies will assist in the Councils primary of serving people; improving lives.

Equality Impact Assessment

Name of project, policy, function, service or proposal being assessed:	Digital Strategy 2016-2019				
The main objective of (please insert the name of accessed document stated above):	<p>The main objective of the strategy is to create a digital council which is agile, mobile and using the most appropriate technologies to support service delivery.</p> <p>Our Digital Strategy has a focus on 4 key areas to enable us to be a digital council:</p> <ul style="list-style-type: none"> • Customers (external) • Council (staff and members) • Community • Collaboration (stakeholders) 				
<p>What impact will this (please insert the name) have on the following groups? Please note that you should consider both external and internal impact:</p> <ul style="list-style-type: none"> • External (e.g. stakeholders, residents, local businesses etc.) • Internal (staff) 					
Please use only 'Yes' where applicable		Negative	Positive	Neutral	Comments
Gender	External	Low			<p>Nationally, one of the groups that is most likely never to have ever used the internet are Women (12.9%) Source The digital skills charity 'Go on UK'</p>

	Internal			✓	
Gender Reassignment	External			✓	
	Internal			✓	
Age	External	Low			Nationally, one of the groups that is most likely never to have ever used the internet are Over 65 year olds (24% 65-74 year olds; 59.6% 75+ year olds) Source: The digital skills charity 'Go on UK'
	Internal			✓	

<u>Marriage and civil partnership</u>	External			✓	
	Internal			✓	
<u>Disability</u>	External	Low			Nationally, one of the groups that is most likely never to have ever used the internet are people with disabilities (28.4%). Source: The digital skills charity 'Go on UK'
	Internal			✓	
<u>Race & Ethnicity</u>	External			✓	Potential language barriers; no evidence available
	Internal			✓	
<u>Sexual Orientation</u>	External			✓	
	Internal			✓	
<u>Religion or Belief (or no Belief)</u>	External			✓	
	Internal			✓	
<u>Pregnancy & Maternity</u>	External			✓	
	Internal			✓	

<p>Other Groups (e.g. any other vulnerable groups, rural isolation, deprived areas, low income staff etc.)</p> <p>Please state the group/s:</p> <p>Low Income Group</p> <p>_____</p>	External	Low			Potential lack of access to the internet
	Internal			✓	

Is there is any evidence of a high disproportionate adverse or positive impact on any groups?	No	
Is there an opportunity to mitigate or alleviate any such impacts?	N/A	Although, the impact has not been defined as 'high' in any of the protected characteristics there are measures that will be put in place to mitigate the identified low impacts; for example the provision and promotion of self-service internet access points and training for those who need it. This will be done in collaboration with partners.
Are there any gaps in information available (e.g. evidence) so that a complete assessment of different impacts is not possible?	No	

In response to the information provided above please provide a set of proposed action including any consultation that is going to be carried out:

Planned Actions	Timeframe	Success Measure	Responsible Officer
Internal consultation	July 2016	To identify potential gaps in the strategy and enhance accordingly.	Helen Barrington & Mark Lane
External consultation with mixed age, gender and ability groups	October 2016	To identify potential gaps in the action plan and enhance accordingly.	Mark Lane & Natasha Radovanovic
Engagement with communities through the neighbourhood coordinators to help us to understand the potential gaps in access to digital technologies	January 2017	To identify potential gaps in the action plan and enhance accordingly.	Mark Lane, Lance Juby & Natasha Radovanovic

N.B. Please note that any other actions might follow after the consultations outlined above.

Authorisation and Review

Completing Officer	Mark Lane
Authorising Director	Helen Barrington
Date	August 2016
Review date (if applicable)	September 2017

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Digital strategy 2016 – 2019

Our aim is to improve the lives of residents, support local business and provide high quality and excellent value services. A strong forward thinking digital strategy will be vital in making these aims a reality

Our digital strategy focuses on four priority areas: Customer, Council, Community and collaboration.

Customer

Where we are now: Telephone calls and face to face contact are reducing. Increasingly, people are interacting with the us online.

Some of the content on the website is written in complex language, which is not easily understood by users. The website is not mobile friendly.

It's not possible to conduct every transactional service online.

Our social media presence is growing and substantial numbers are subscribed to our regular keep me posted email service.

We have information about how people make contact with us which will help us develop the right digital services.

Our vision: Customers can access all services from our website. Interacting with us online is so easy, that it is our customers' channel of choice. Contact by traditional channels continues to reduce but remains fully supported.

Important information and promotions reach residents through social media channels, 'Keep me posted' and 'Contacts'.

What we need to do: Re-design of the website to make it easier to use, accessible and mobile friendly. Use a different approach to design for our commercial activity that's appealing to customers.

Continue to expand use of social media as a means of communicating with customers.

Expand the range of transactions that can be conducted on the website.

Council

Where we are now: Existing core IT arrangements underpin and support the delivery of our services.

There are areas where good use of technology has been made in support of back office functions. Revenues Services for example, has been paperless for 10 years.

Our vision: A digitally skilled workforce that has access to technology needed to deliver high quality, value for money services.

Councillors are able work in a mobile and efficient way.

Technology invested in, is used to its full potential and a paperless approach is standard.

What we need to do: Establish a corporate digital team to oversee the delivery of our digital programme.

Ensure people have the right tools and training to maximise the potential that technology has to offer.

Ensure current solutions are being fully and that new digital investments deliver pre-defined outcomes.

Paperless approach will be actively promoted. Guidance will be provided on how this can practically be achieved. Staff will be taught to confidently use electronic document management.

Community

Where we are now: We are supporting a national programme to provide superfast broadband coverage to 95% by December 2017.

Wi-Fi and self-service internet access points are available at the Civic centre and Leisure centres. Information and services are available for businesses on the website but not in easy to use format.

There is limited support for people who don't have the skills to use digital technologies.

Our vision: All of our residents have the skills required to use digital technology and access the internet.

Businesses can access information and services within a dedicated and easy to use section of the website.

What we need to do: Use available insight to target resources for access to the internet and supporting people to increase their digital skills.

Exploit the potential of digital media to raise the awareness of the facilities available on our website

Consider the viability and need for more Wi-Fi coverage across the borough.

Create a dedicated area of the website for business.

Collaboration

Where we are now: Engaging with the Community on important issues takes place using a variety of methods some of which are digital.

Established partnerships are in place and data sharing protocols are agreed.

Our vision: Residents and local business are at the heart of decision making and are consulted with online.

Where there is a crossover of service, tools are in place for a single contact that residents can use.

What we need to do: Use social media to involve residents and businesses in discussions related to issues within the Borough.

Use social media to strengthen links with partners, sharing and supporting initiatives to reach a wider audience.

Engage in appropriate sharing of insight data between partners to assist in the determination of problem solving and improvements.

Context

The Gedling Plan 2016-19 sets out our aims to improve the lives of residents, support local business and provide high quality and excellent value services. A strong forward thinking digital strategy will be vital in making these aims a reality.

Digital technology has the potential to enable us and our partners to deliver services in a more efficient, productive and cost-effective way. All of our services are supported by a core IT infrastructure, however, to be better, digital technology needs to be fully embraced by services across the council and utilised effectively for our residents.

We want to be digital by choice. Residents that contact and interact with us online will do so easily. However, our traditional channels for example telephone and face to face will always be available contact options.

Whilst being mindful of the risk of cyber-crime we must not see this as a barrier to putting in place our digital plans. We will continue to improve and monitor our security measures and processes to protect customer and council data.

Why do we need a digital strategy?

We are already working with digital technology and encourage a digital approach where possible. However, to fully realise the benefits, we need to dramatically increase the scope and pace of our work. The strategy will support our strategic priorities and will have a central role in supporting the provision of high quality services on a tight budget.

The digital strategy sets out our aims. These are to:

- Provide services and information online in a user-friendly and inclusive way.
- Use technology to change the way traditional face-to-face services are delivered, enabling us to deliver effective and efficient services for our residents
- Create a digital council which is agile, mobile and using the most appropriate technologies to support service delivery
- Support the community to use digital technology and enable access to technology for those that do not have it
- Support our businesses to compete in the digital economy
- Use digital technologies to work with our partners to deliver mutually beneficial priority outcomes.

Priority areas

Our digital strategy focuses on four priority areas: Customer, Council, Community and Collaboration.

1. Customer - digital will be the channel of choice:

Where are we now?

Calls made to the contact centre are reducing and were just short of 200,000 for 2015/16. That compares with 240,000 for 2013/14 and 233k for 2014/15. Face to face activity is also steadily reducing and stands at 19,000 for 2015/16, compared to 22,500 for 2013/14 and 21,000 for 2014/15.

More people are paying online than ever before, 62,000 payment transactions were processed during 2015/16 of which 30% were online. Payments by cash and cheque are reducing significantly.

Use of the website continues to increase, with overall visits at 780,000 during 2015/16. Current website usage is evenly split between new and returning visitors. Just over half of the hits to the website originate from the Nottingham area.

Three quarters of hits to the website originate from search engines and referrals from other websites (for example Nottinghamshire County Council) as opposed to direct navigation from the home page. High level analysis of the most popular page views (representing 63% of all page views) shows Leisure pages at 40%, the Home Page at 16% Council Tax at 1%, Planning, Waste and Vacancies at 2%. There were 2.8 million page views during 2015/16.

The current website is a mixture of information and services. The site is ready for a complete change of design, concept and content. Whilst there are a number of really useful and well-used service features they are let down by the navigation of site. Some content is dated and not written in plain English. Not every part of the site is mobile friendly and, the site is designed for accessing content through a search engine like google, making it difficult to navigate.

The Keep Me Posted email subscription service has over 22,200 subscribers. This contributes to the overall channel shift by pro-actively delivering topic information chosen by subscribers, reducing avoidable contact with us.

Text messaging is a channel we are developing, using it to contact Council Tax customers whose payment is due. This has so far seen a reduction in the number of reminders issued by the courts and stopped some people from incurring fines.

Digital Strategy 2016-2019

Social media channels are actively used. Our Facebook and Twitter feed are corporately managed and there are separate feeds to support Leisure Services which are managed by that service area.

Socitm (the Society of Information Technology Management) conduct an annual survey of Local Authority websites. 44% of all council websites - 182 of 416 across the UK - provide a good or very good user experience based on navigation, searches and accessibility.

Our website was awarded an overall 3 star rating out of a maximum of 4. The average council rating of the same type is 2.1 stars. This is an improvement on the previous two years where our overall website rating was 1 star.

Our website was highly rated (3 or 4 Star) for its provision covering Waste and Recycling, Council Tax and for the tools for accessing content (navigation, search, and A-Z) and scored lower (1 or 2 Star) for Planning and Business.

The website was not considered to be totally responsive (mobile friendly) but was adequately accessible for people with disabilities.

What is our vision?

Interacting with us online is so easy, that it is our customers' channel of choice.

Customers are able to access our services at any time, from any location and from any device. Services are designed with a customer first approach and in line with central government's digital principles to ensure that they are easy to use, save time, save money and are continually adapted as things change.

Social media channels are used as customer services channels including webchats and improved online handling of queries.

The full potential of social media and webchat are exploited to interact instantaneously with customers.

Our traditional channels, for example, telephone and face to face are still available contact options.

What we need to do:

- A re-design of our website using data, Government guidelines and best practice to add more features, ensure that it is:
 - Easy to use
 - Accessible
 - Simple
 - Fully responsive (Mobile Friendly)
 - Fully transactional

- All social media channels are capable of dealing with customer services enquiries quickly and effectively.

- Expand the range of interactions that can be conducted online such as webchat.

2. Council – we will have the digital tools and skills required to deliver services effectively and efficiently:

Where are we now?

There is access to desktop office products and a variety of business solutions that are used to deliver functions. There are both front and back office systems that streamline the service processes. Online document management is in place in some areas. Remote and mobile working services are available. In summary, the day-to-day technology used by staff is good but much of the potential remains unrealised.

Revenues Services, which has been paperless for ten years, is a good example of where technology has been used in support of back office functions. Their use of electronic document management and workflow facilities has both improved processes and reduced cost.

What is our vision?

Our staff have skills and awareness to think and work digitally.

Our staff have access to the technology needed to deliver high quality and excellent value for money services.

Our Members work in a mobile and efficient way and have improved digital skills.

Technological solutions we invest in are used to their full potential.

Service areas actively identify opportunities and implement digital technology to improve the service planning process.

A corporate wide paperless approach is the norm.

Our staff engage in digital meetings and use technology to deal with administrative tasks.

While data protection will remain a vital pillar of our work, where possible, the data we store will be used more efficiently to improve our services.

Digital Strategy 2016-2019

What we need to do:

- A corporate digital team will be established to oversee the delivery of our digital programme.
- Create a digital first culture. The workforce must have the right motivation, skills and awareness to think digitally; put the customer at the centre of everything we do and, be able to be collaboratively and commercially responsive.
- Staff and Members must have the technology and the skills to use them. A review of the current hardware allocations is required and, service managers will need to continually review their line of business solutions and contribute to the digital agenda. When considering solutions, make sure that both front and back office requirements have been taken account of.
- All new digitally related purchases must be supported and deliver pre-defined digital outcomes.
- A baseline assessment of opportunities yet to be exploited from existing investments will be conducted.
- Our digital team will work with services to identify and deliver the digital strategy. Staff must have a pivotal role in this process.
- A corporate wide paperless approach will be encouraged with the move to an electronic document management including records management and document disposal.

Digital Strategy 2016-2019

3. Community - residents and businesses will have the digital skills and technology they need to enhance their lives and businesses:

Where are we now?

Without basic digital skills, residents are missing out on the opportunity to improve their lives. Not only are they unable to access our services in the easiest way possible, they risk isolation and exclusion from many things, from socialising to work and training opportunities.

Without basic digital skills businesses are missing out on their share of website sales and risk losing potential business. This might be because they can't be found online or are missing the opportunity to deliver a better, more efficient service to their customers.

The digital skills charity Go on UK has compiled a national picture of the level of digital exclusion. Their most recent assessment of the likelihood of digital exclusion in the Borough is assessed as medium, based on 4 metrics:-

- **Broadband performance** - 9.5% of households did not receive broadband speeds of at least 2 megabits per second
- **Internet access** - 10.8% of adults (over 16 year olds) had never been online, slightly lower than the national average of 11%
 - Nationally the groups that are most likely never to have ever used the internet are
 - Over 65 year olds (24% 65-74 year olds; 59.6% 75+ year olds)
 - Women (12.9%)
 - People with disabilities (28.4%)
- **Basic digital skills** - 77% of adults in the borough had all five basic digital skills compared to 77% nationally. Basic skills are divided into
 - Managing information – find, manage and store digital information and content
 - Communicating – Communicate, interact, collaborate, share and connect with others
 - Transacting – purchase and sell goods and services, organise finances, register for and use digital government services
 - Problem solving – increase independence and confidence by solving problems using digital tools and finding solutions
 - Creating – engage with communities and create basic digital content
- **Basic digital skills used** - 41% of adults had used all five basic skills

Digital Strategy 2016-2019

We are already supporting a programme to provide superfast broadband coverage to 95% of the population by December 2017. This initiative includes options to provide superfast coverage to the hardest to reach parts of the UK, the encouragement of take up of superfast broadband by SMEs and the improvement of mobile coverage in remote areas.

Wi-Fi access is provided at the civic centre and the leisure centres. Self-serve internet access PC's are available for use at the civic centre. If required, staff are on hand to assist people with using the internet and accessing council services digitally.

Our website incorporates facilities for businesses to use but not in a joined up way. That makes it difficult and frustrating for businesses to interact with us. There are facilities provided through gov.uk for certain types of online licence applications. It is possible for businesses to make payments using our website.

What is our vision?

All of our residents and businesses are able to quickly and easily access digital technology and the internet throughout the borough. They are equipped with the digital skills required to improve their lives. We are perceived as a digital authority, gaining a reputation for the council and the borough as being a hub of digital technology.

Businesses have speedy and efficient access to business related activity, for example, economic development, trading licences and permits, food hygiene and safety and business rates.

What we need to do:

- Use social media to raise the awareness of the facilities available on our website for the community generally. Consider how social media and the Keep Me Posted email newsletter can help when interacting with businesses.
- In conjunction with our partners, engage with customers and business to help them to improve their digital skills.
- Consider the viability and need for more Wi-Fi coverage across the borough.
- In partnership if possible, increase the number of self-serve internet access points with appropriate staff support and guidance.
- Create a dedicated area of the website that will give businesses efficient access to services and information.

4. Collaboration - using technology as a means of engagement when dealing with complex issues:

Where are we now?

Consultation and collaboration takes place using traditional methods.

Established partnerships are in place with other public bodies including: the Police, Job Centre Plus and the NHS.

Some data sharing protocols are in place.

What is our vision?

Residents and local business are at the heart of decision making and are consulted with online.

Where there is a crossover of service, tools are in place for a single contact that residents can use.

We facilitate conversations online. This approach was recently demonstrated by comms2.0 (<https://storify.com/NeilKnighton/local-govt-social-media>) which held a twitter talk, to discuss 'good social media'. They provided a platform for users from across the country to share ideas and build relationships.

What we need to do:

- Continue to use social media to inform, consult, involve and collaborate. Partner's respective individual social media presence will complement each other's leading to the potential of an online hub to bring communities together and supporting each other to widen the reach.
- Recognising data protection and IT security requirements, we will review data sharing processes to facilitate simple and secure data sharing with our partners where agreed and appropriate, allowing for a far better picture of multi-disciplinary issues.

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Report to Cabinet

Subject: Review of complaints received by the Council and Annual Review Letter – Local Government Ombudsman 2015/16

Date: 29th September 2016

Author: Director of Organisational Development and Democratic Services

Wards Affected

Not applicable.

Purpose

To inform Members of the receipt of the Annual Review letter from the Office of the Local Government Ombudsman and the complaints dealt with by the Council through the internal Complaints Procedure during the year 2015-16.

Key Decision

This is not a Key Decision

Background

- 1.1 Members will be aware of the Council's arrangements for dealing with formal complaints full details of which are available on the website. The departmental analysis of complaints by Service Manager appears below. Members are to note that some of the columns will not add up because some complaints have not been dealt with entirely within the year and therefore fall outside the monitoring period.
- 1.2 Between 1 April 2015 and 31 March 2016, the Council received 272 complaints which is a reduction from the 323 complaints received the previous year. The complaints are broken down into individual service areas as follows:

Service	Number of complaints received	Upheld/partially upheld at Stage 1	Not Upheld at Stage 1
Community Relations	2	2	0
Customer Services,			

Service	Number of complaints received	Upheld/partially upheld at Stage 1	Not Upheld at Stage 1
Communications and IT	39	11	28
Housing	10	1	9
Legal Services	1	0	1
Leisure and Culture	53	33	20
Parks and Street Care	2	1	1
Planning & Economic	32	4	27
Public Protection	21	5	16
Revenue Services	95	40	54
Waste Services	17	12	5
Totals	272	109	161

*two complaints still in progress

- 1.3 Where a complaint is not upheld in full or in part, the complainant may ask for it to be considered further under Stage 2 of the complaints procedure. 30 complaints were considered under Stage 2 between 1 April 2015 and 31 March 2016 which is a reduction from the 27 complaints considered at Stage 2 the previous year. The complaints are broken down as follows:

Service	Number of complaints considered at Stage 2	Upheld/partially upheld at Stage 2	Not Upheld at Stage 2
Communications	0	0	0
Customer Services and IT	0	0	0
Housing	2	0	2
Legal Services	0	0	0
Leisure and Culture	3	2	1
Parks and Street Care	0	0	0
Planning & Economic	13	2	11
Public Protection	4	1	3
Revenue Services	7	1	5
Waste Services	1	1	0
Totals	30	7	22

*one complaint still in progress

- 1.4 If the complainant is not happy with the response at Stage 2 he or she is entitled to refer the complaint to the Local Government Ombudsman. Between 1 April 2015 and 31 March 2016, 9 complaints were received by the Council via the Ombudsman, which is a reduction from the 14 complaints received the previous year. A summary of the decisions of the LGO appears in the table below.

Service	Decision of LGO
Housing	Closed after initial enquiries - no further action.

Legal	Closed after initial enquiries - no further action.
Planning Services	Closed after initial enquiries – no injustice suffered, no further action
Planning Services	Closed after initial enquiries – no injustice suffered, no further action
Planning Services	Not upheld: no maladministration
Planning Services	Not upheld: no maladministration
Planning Services	Closed after initial enquiries - out of jurisdiction.
Revenues Services	Not upheld : no maladministration.
Revenues Services	Closed after initial enquiries - no further action.

- 1.6 The Annual Review letter for the year ending 31 March 2016 is attached at Appendix 1. The statistics include all the complaints and enquiries received by the Ombudsman in 2015/16. Members are to note that the number of complaints and enquiries received do not match the Council's figures as a number of cases will have been received and decided in different business years. In addition, those categorised as 'referred back for local resolution' by the Ombudsman include those who are signposted back to the Council and therefore are not treated as an Ombudsman complaint.
- 1.7 Since April 2013, the Ombudsman has been publishing all decisions on complaints they receive. Decision statements are published on the Ombudsman website at www.lgo.org.uk no earlier than three months after the date of the final decision. The information published does not name the complainant or any individual involved with the complaint. The Ombudsman also retains discretion not to publish a decision, for example where it would not be in the interests of the person complaining to publish or where there's a reason in law not to.
- 1.8 In addition, the Ombudsman has published its review of local government complaints for 2015/16. The report provides complaint statistics for each English local authority, all in one place. A copy of the review is available on the Ombudsman website.

Proposal

- 2 It is proposed that Cabinet note the report.

Alternative Options

- 3 There are no Alternative Options.

Financial Implications

- 4 None arising from this report.

Appendices

- 5 Appendix 1 – Local Government Ombudsman Annual Review Letter.

Background Papers

- 6 None identified.

Recommendation

THAT Cabinet notes the contents of the report.

Reasons for Recommendations

- 7 To alert the Executive to the contents of the Local Government Ombudsman Annual Review Letter and raise awareness of the complaints received by the Council during 2015-16.

21 July 2016

By email

John Robinson
Chief Executive
Gedling Borough Council

Dear John Robinson,

Annual Review Letter 2016

I write to you with our annual summary of statistics on the complaints made to the Local Government Ombudsman (LGO) about your authority for the year ended 31 March 2016.

The enclosed tables present the number of complaints and enquiries received and the decisions we made about your authority during the period. I hope that this information will prove helpful in assessing your authority's performance in handling complaints.

Last year we provided information on the number of complaints upheld and not upheld for the first time. In response to council feedback, this year we are providing additional information to focus the statistics more on the outcome from complaints rather than just the amounts received.

We provide a breakdown of the upheld investigations to show how they were remedied. This includes the number of cases where our recommendations remedied the fault and the number of cases where we decided your authority had offered a satisfactory remedy during the local complaints process. In these latter cases we provide reassurance that your authority had satisfactorily attempted to resolve the complaint before the person came to us. In addition, we provide a compliance rate for implementing our recommendations to remedy a fault.

I want to emphasise that these statistics comprise the data we hold, and may not necessarily align with the data your authority holds. For example, our numbers include enquiries from people we signpost back to the authority, but who may never contact you.

In line with usual practice, we are publishing our annual data for all authorities on our website, alongside an annual review of local government complaints. The aim of this is to be transparent and provide information that aids the scrutiny of local services.

Effective accountability for devolved authorities

Local government is going through perhaps some of the biggest changes since the LGO was set up more than 40 years ago. The creation of combined authorities and an increase in the number of elected mayors will hugely affect the way local services are held to account. We have already started working with the early combined authorities to help develop principles for effective and accessible complaints systems.

We have also reviewed how we structure our casework teams to provide insight across the emerging combined authority structures. Responding to council feedback, this included reconfirming the Assistant Ombudsman responsible for relationship management with each authority, which we recently communicated to Link Officers through distribution of our manual for working with the LGO.

Supporting local scrutiny

Our corporate strategy is based upon the twin pillars of remedying injustice and improving local public services. The numbers in our annual report demonstrate that we continue to improve the quality of our service in achieving swift redress.

To measure our progress against the objective to improve local services, in March we issued a survey to all councils. I was encouraged to find that 98% of respondents believed that our investigations have had an impact on improving local public services. I am confident that the continued publication of our decisions (alongside an improved facility to browse for them on our website), focus reports on key themes and the data in these annual review letters is helping the sector to learn from its mistakes and support better services for citizens.

The survey also demonstrated a significant proportion of councils are sharing the information we provide with elected members and scrutiny committees. I welcome this approach, and want to take this opportunity to encourage others to do so.

Complaint handling training

We recently refreshed our Effective Complaint Handling courses for local authorities and introduced a new course for independent care providers. We trained over 700 people last year and feedback shows a 96% increase in the number of participants who felt confident in dealing with complaints following the course. To find out more, visit www.lgo.org.uk/training.

Ombudsman reform

You will no doubt be aware that the government has announced the intention to produce draft legislation for the creation of a single ombudsman for public services in England. This is something we support, as it will provide the public with a clearer route to redress in an increasingly complex environment of public service delivery.

We will continue to support government in the realisation of the public service ombudsman, and are advising on the importance of maintaining our 40 years plus experience of working with local government and our understanding its unique accountability structures.

This will also be the last time I write with your annual review. My seven-year term of office as Local Government Ombudsman comes to an end in January 2017. The LGO has gone through extensive change since I took up post in 2010, becoming a much leaner and more focused organisation, and I am confident that it is well prepared for the challenges ahead.

Yours sincerely



Dr Jane Martin
Local Government Ombudsman
Chair, Commission for Local Administration in England

Local Authority Report: Gedling Borough Council
For the Period Ending: 31/03/2016

For further information on how to interpret our statistics, please visit our website:
<http://www.lgo.org.uk/information-centre/reports/annual-review-reports/interpreting-local-authority-statistics>

Complaints and enquiries received

Adult Care Services	Benefits and Tax	Corporate and Other Services	Education and Children's Services	Environment Services	Highways and Transport	Housing	Planning and Development	Other	Total
0	3	1	0	0	0	3	6	0	13

Decisions made

				Detailed Investigations			
Incomplete or Invalid	Advice Given	Referred back for Local Resolution	Closed After Initial Enquiries	Not Upheld	Upheld	Uphold Rate	Total
0	1	4	4	1	0	0%	10

Notes

Our uphold rate is calculated in relation to the total number of detailed investigations.

The number of remedied complaints may not equal the number of upheld complaints. This is because, while we may uphold a complaint because we find fault, we may not always find grounds to say that fault caused injustice that ought to be remedied.

The compliance rate is the proportion of remedied complaints where our recommendations are believed to have been implemented.

Complaints Remedied

by LGO	Satisfactorily by Authority before LGO Involvement	Compliance Rate
0	0	100%

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Report to Cabinet

Subject: Gedling Borough Local Development Scheme September 2016

Date: 29th September 2016

Author: Planning Policy Manager

Wards Affected

All

Purpose

To seek approval from Cabinet to bring the revised Local Development Scheme appended to this report into effect from 30th September 2016.

Key Decision

This is not a key decision.

Background

The Local Development Scheme sets out the Council's project plan for the preparation of the Local Plan and for the preparation of amendments to the Policies Map which must be produced alongside the Local Plan. The Local Development Scheme is a statutory requirement under s.15 of the Planning and Compulsory Purchase Act 2004. The Aligned Core Strategy adopted in September 2014 forms Part 1 of the Local Plan and the Local Planning Document for Gedling Borough will be Part 2 of the Local Plan after it is adopted. The Local Development Scheme lists the timetable for the remaining stages of the emerging Local Planning Document and Policies Map.

There is a requirement for the Council to have an up to date Local Development Scheme in place at the time of submission of the Part 2 Local Plan and slight revisions are required to the current timetable. The Local Planning Document was published for consultation between May and July 2016 according to the current time table. However, due to the number of representations received and the need to comply with regulations such as the Data Protection Act there has been slight slippage in the programme by a few weeks. The target for submission of the Local Planning Document to the Planning Inspectorate has

been put back 1 month to October 2016.

Despite this slight slippage in the timetable when compared to other Councils in the Nottingham Core Housing Market Area, Gedling Borough is on target to be the first one to submit its Part 2 Local Plan for examination followed by Nottingham City Council later in the autumn. Ashfield District, Broxtowe Borough and Rushcliffe Borough are likely to submit their Part 2 Local Plans over the course of 2017.

The examination of the Local Planning Document starts on submission with hearings likely to commence within about 10 weeks although this is subject to agreement with the Planning Inspectorate. Following the hearings the Inspector will produce a report although the timing of this will depend on whether modifications are required to the Local Planning Document which will need to be advertised. It is anticipated that the Local Planning Document will be adopted around July 2017.

Proposal

The Localism Act 2011 amends section 15 of the Planning and Compulsory Purchase Act and provides that the local planning authority must specify the date at which the scheme is to come into effect and that the detail should be made available to the public.

It is proposed to bring the Local Development Scheme (appended to this report) into effect from 30th September 2016 and the revised scheme will be made available on Gedling Borough Council's website.

Alternative Options

Not to specify a date upon which the revised Local Development Scheme will come into effect. The production and bringing into effect of a Local Development Scheme is a statutory requirement and is required to be in place at the time of submission of a development plan document.

Financial Implications

None

Appendices

Gedling Borough Local Development Scheme 2016 – 2019 (September 2016)

Background Papers

None

Recommendation(s)

THAT Cabinet:

- (a) Approves the revised Local Development Scheme appended to this report and agrees that it shall come into effect on 30th September 2016.**

Reasons for Recommendations

An up to date Local Development Scheme is required to be in place at the time of submission of development plan documents.

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GEDLING BOROUGH COUNCIL

GEDLING BOROUGH LOCAL DEVELOPMENT SCHEME 2016 - 2019

September 2016

1. INTRODUCTION

Legislation¹ requires the Council to prepare and maintain a Local Development Scheme (LDS). This document is the revised LDS for Gedling Borough which will replace the existing Gedling Borough LDS approved in February 2016. This revised LDS contains the updated timetable for completing the Local Plan which will replace the existing Gedling Borough Replacement Local Plan (saved policies 2014). Part 1 of the Local Plan - the Aligned Core Strategy for Gedling Borough is already in place. Part 2 of the Local Plan called the Local Planning Document for Gedling Borough is under preparation and this revised Local Development Scheme covers the period 2016 – 2019 coinciding with its adoption.

The Part 2 Local Planning Document prepared within the framework of the ACS includes non-strategic site allocations and detailed development management policies.

The Local Plan is also illustrated by a Policies Map which must be updated to reflect the policies and proposals of the Local Plan and therefore is included in this LDS programme.

What is the Local Plan (formerly Local Development Framework)?

1.1 The Local Plan consists of development plan documents which take account of local demands for development and growth and include planning policies to achieve sustainable development. The Local Plan may comprise a number of development plan documents and in combination this constitutes the Development Plan for the area. Development plan documents may include:

- Core Strategy – sets out the overarching spatial vision and the planning framework for other development plan documents;
- Development Management Policies – sets out policies for the management of development, against which planning applications for the development and use of land will be considered;
- Other site specific development plan documents – allocates specific sites and detailed policy guidance.

1.2 Documents which support the Local Plan include:

- Local Development Scheme – the timetable for the preparation of local development plans;
- Statement of Community Involvement (called the Gedling Borough Statement of Consultation) – sets out the Council's approach to engaging with local communities during plan preparation and when consulting on planning applications; and
- Authority Monitoring Report – sets out the progress in terms of producing development plan documents and implementing policies.

¹ As set out in the Planning and Compulsory Purchase Act 2004 (as amended).

- 1.3 The Local Plan will also include a Policies Map which illustrates the geographic extent of policies and proposals on a map base.
- 1.4 The government has also introduced a system of neighbourhood plans which can be prepared by parish, town councils or by specially designated neighbourhood forums in areas without a parish. Such plans are optional but must take account of national planning policy and be in general conformity with the Local Plan. Neighbourhood Plans are not local development plan documents and therefore cannot be included in this Local Development Scheme. However, if adopted they form part of the Development Plan for the area (further information on neighbourhood plans is on Gedling Borough's website).
- 1.5 The individual documents that will make up the Development Plan are set out in **Figure 1** below.

Figure 1 Local Plan



2. Progress on the Local Plan

- 2.1 Gedling Borough adopted its Statement of Consultation in June 2014. The Borough is committed to engaging with the local community on planning issues and this document sets out how and when the community will be consulted in the preparation of planning policy documents and also on planning applications.
- 2.2 Gedling Borough along with Broxtowe Borough and Nottingham City adopted aligned Core Strategies during 2014 and together with aligned Core Strategies adopted by Erewash and Rushcliffe Boroughs means there is a consistent and aligned strategic planning framework in place across the whole of the Greater Nottingham. The relevant Councils across the area have continued to work in cooperation and have commenced the preparation of separate but consistent Part 2 Local Plans. Gedling Borough's Local Planning Document has been subject to public consultation and was formally published for six weeks consultation between May and July 2016. The detailed project plan for the remaining process is set out in appendix 1 below.

Supplementary Planning Documents

- 2.3 Councils may also produce Supplementary Planning Documents (which supersede Supplementary Planning Guidance) to give further guidance on their adopted policies. Supplementary Planning Documents may cover a range of issues, which may be either thematic (e.g. affordable housing or open space provision) or site specific (e.g. development briefs for allocations). It is not necessary for Supplementary Planning Documents to be covered in the LDS. However, these documents are subject to Member approval and will also be subject to consultation on a similar basis to the Local Plan as set out in the Statement of Consultation.

3. THE TIMETABLE

3.1 The Council has adopted a project management approach to preparing the various parts of its Local Planning Document and the detailed timetable for each stage is set out in the 'profile' attached as **Appendix 1**. Progress will be measured against 'milestones' to see whether there is any need to revise the published timetable.

The Proposals Map

3.2 Certain policies and proposals in the Gedling Borough Replacement Local Plan have been saved in their current form until their replacement under the new Local Plan format. As the Local Plan is adopted, the coverage of new policies and site-specific proposals will be included on a new composite Adopted Proposals Map.

Sustainability Appraisal and Strategic Environmental Assessment

3.3 The Local Planning Document is subject to an ongoing process of Sustainability Appraisal, which will incorporate the requirements for Strategic Environmental Assessment. This will inform the direction and content of each stage of the plan preparation process. The information used and the outcome of the appraisal process will be set out in an 'environmental report', which will accompany each development plan document. The timetable for this work will therefore run in parallel with each of the stages of plan preparation.

Equality Impact Assessment

3.4 Councils are also required by legislation to prepare an Equality Impact Assessment to make sure policies in the Local Plan do not discriminate against certain groups and that opportunities are taken to promote equality.

4. FURTHER INFORMATION

- 4.1 For further information on this Local Development Scheme please contact the Council at the address shown below. Information on the existing Local Plan and the new development plan process is also available on the Council's website.

By post: Gedling Borough Council
Planning Policy
Civic Centre
Arnot Hill Park
Arnold
Nottingham
NG5 6LU

By E-mail: planningpolicy@gedling.gov.uk

Website: www.gedling.gov.uk

APPENDIX 1

Local Planning Document for Gedling Borough

Title	<i>Local Planning Document for Gedling Borough</i>
Role and content	Development Management - A suite of criteria based policies which are required to ensure that all development within the area meets the vision and strategy set out in the Aligned Core strategy Site Specific Allocations - Identification of land for specific uses/policies and criteria based policies for potential unforeseen proposals
Status	Development Plan Document
Conformity with	Consistent with national planning policy, the Aligned Core Strategy and Sustainable Community Strategy.
Geographic coverage	Gedling Borough.

Timetable and milestones (key milestones are in bold italics)

Stage	Dates
Starting Evidence Base	Complete January 2013
<i>Consultation on SA scoping report</i>	Complete December 2013
Consultation on Issues and Options	Complete December 2013
Informal Consultation on Policy Options	Complete July 2015
<i>Publication of Submission Document</i>	Complete May-July 2016
<i>Submission of document and sustainability appraisal to Secretary of State</i>	October 2016
Independent Examination Hearings (if required).	January 2017
Receipt of Inspector's binding report	May 2017
<i>Adoption</i>	July 2017
Post production (monitoring and review mechanisms)	Ongoing

Arrangements for production

Organisational Lead	Planning Policy Manager
Political Management	Executive and Full Council
Internal Resources	Planning Policy Section, with technical, legal and administrative support from other teams as needed (including Development Management)
External Resources	Legal advice, outsource hardcopy printing
Community and Stakeholder involvement	Informal and formal public consultation as set out in the Statement of Community Involvement.

THE PROPOSALS MAP AND INSET PLANS

Title	<i>The Proposals MAP and Inset Plans</i>
Role and content	To map development plan policies, including 'saved' policies.
Status	Development Plan Document
Conformity with	The proposals map will conform to the adopted Local Plan.
Geographic coverage	Whole borough with detailed Inset Plan coverage of those parts of the borough affected by specific policies or proposals.

Timetable

Stage (Revised where necessary as each DPD adopted. Submission proposals map submitted with DPD to identify how the adopted proposals map will be amended or added to)	Dates
Local Planning Document	July 2017

Arrangements for production

Organisational Lead	Planning Policy Manager
Political Management	Executive and Full Council
Internal Resources	Planning Policy Section, with technical, legal and administrative support from other teams as needed.
External Resources	Possibly outsource hardcopy printing.
Community and Stakeholder involvement	Previous involvement in site specific consultations.



Report to Cabinet

Subject: Spatial Planning for the Health & Wellbeing of Nottinghamshire, Nottingham City and Erewash

Date: 29th September 2016

Author: Planning Policy Manager

Wards Affected

All wards

Purpose

To seek support for the use of the Health & Wellbeing Checklist to assess major developments (those of more than 10 dwellings or 500sqm of other floorspace).

Key Decision

Not a key decision.

Background

1. Local planning policies play a vital role in ensuring the health and wellbeing of the population are taken into account in the planning process. There is substantial evidence supporting the fact that health and the environment are inextricably linked and that poor environments contribute significantly to poor health and health inequalities.
2. As part of their responsibility for Public Health, Nottinghamshire County Council has worked with Nottingham City Council and Erewash Borough Council to produce a guide for use in planning (attached as [Appendix 1](#)). This document, whilst not having any formal status, provides guidance on addressing the impact of a proposal or plan on the health and wellbeing of the population. The document aims to raise awareness and provide sustainable solutions to guide people to make better healthy lifestyle choices than can be facilitated through the use of sound spatial planning and joined up planning decisions. The document does not address the issue of NHS service delivery as this lies outside the remit of both County and Local Planning Authorities.

3. National planning policy addresses health and wellbeing in a number of different places. Firstly, one of the core planning principles identified in paragraph 17 of the National Planning Policy Framework is to “take account of and support local strategies to improve health, social and cultural wellbeing for all”. Section 8 (Promoting Healthy Communities) highlights the important role that planning plays in creating healthy, inclusive communities.
4. The National Planning Practice Guidance also identifies that health and wellbeing should be considered in local and neighbourhood plans. This should include consideration of how proposals can:
 - support strong vibrant and healthy communities;
 - make physical activity easier;
 - support community engagement and the creation of social capital;
 - lead to reductions in health inequalities;
 - support people of all ages to make healthy choices;
 - promote access to healthier food and high quality open spaces; and
 - reduce potential pollution and other environmental hazards.
5. There are a number of current local planning policies in the Aligned Core Strategy, the Replacement Local Plan and the emerging Local Planning Document which will help achieve a healthy community. This includes policies on the provision of open space (Policy LPD21), promotion of walking and cycling (Policy LPD 58), restricting the number and location of hot food takeaway units (Policy LPD 54) and promoting health and wellbeing through design solutions (Policy LPD 35).
6. Since 2013, County Councils have had the responsibility of joining up local health policy with other strategies such as planning, transport infrastructure and housing. The Nottinghamshire Health & Wellbeing Board was set up to help achieve this with its main focus on improving the health and wellbeing of the residents of Nottinghamshire. Their strategy sets out four key ambitions:
 - To give everyone a good start;
 - To encourage living well;
 - To enable coping well;
 - To encourage and allow working together.
7. In addition specific aims have been identified for planning:
 - Avoiding adverse health impacts from development;
 - Providing a healthy living environment;
 - Promoting and facilitating healthy lifestyles;
 - Providing access to health facilities and services;
 - Responding to global environmental issues.
8. The Health & Wellbeing Document includes a Health & Wellbeing Checklist which can be used to review development proposals and inform the preparation of Local and Neighbourhood Plans. It asks a series of questions

to assess the relevance of the proposal to health and wellbeing, to assess the impact on health and wellbeing and to consider ways that the proposal could be changed to improve the contribution it makes to health and wellbeing.

9. It is proposed that the use of the Health & Wellbeing Checklist be supported for major developments (those involving more than 10 homes or 500sqm of other floorspace). The checklist will help the developer and decision maker consider whether the proposal accords with the various national and local policies identified above. It is considered that the Checklist is proportionate, easy to complete and covers all the key determinates of health and wellbeing that may be affected by development.
10. The Checklist has already been used to assess the impact of the emerging Local Planning Document. The completed checklist is attached as Appendix 2 as an example.

Proposal

11. It is proposed that the Health & Wellbeing Checklist be used to assess major developments (those of more than 10 dwellings or 500sqm of other floorspace).

Alternative Options

12. A different or bespoke checklist or other form of health impact assessment could be used. However the proposed checklist is considered robust and appropriate for use in Gedling Borough and there will be benefits from aligning its use across Nottinghamshire County.
13. No checklist or Health Impact Assessment could be used and impacts considered in a less consistent and formal way when determining planning applications and preparing local plans. This is not recommended as the checklist is considered a robust and proportionate way of ensuring that the impacts of fully considered.

Financial Implications

14. There are no direct financial implications. Officer time will be required to use the Checklist.

Appendices

Appendix 1 - Spatial Planning for the Health & Wellbeing of Nottinghamshire, Nottingham City and Erewash

Appendix 2 – Health & Wellbeing Checklist for GBC Local Planning Document

Background Papers

None

Recommendation(s)**THAT :**

- a. Cabinet support the use of the Health & Wellbeing Checklist to assess major developments (those of more than 10 dwellings or 500sqm of other floorspace); and
- b. Cabinet support the referral to Planning Committee Members for information purposes.

Reasons for Recommendations

To ensure that the health and wellbeing impacts of development proposals are fully considered when determining planning applications and preparing local plans.

To raise awareness of the proposed approach with Planning Committee Members.

Spatial Planning for the Health & Wellbeing of Nottinghamshire (for adoption by Nottingham City & Erewash) 2016

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1. Introduction

Executive Summary

- 1.1. The purpose of this of this document is to present a holistic overview of health related planning policies across Nottinghamshire, Nottingham City and Erewash in order to provide supporting information for planners, public health, health care commissioners & providers, developers and the public on how decisions made on planning matters impact on the health and wellbeing of the residents of Nottinghamshire and Erewash. In addition the document provides a planning and health checklist to be used when assessing planning applications, this is based upon the London Healthy Urban Development Unit 'Healthy Urban Planning checklist (June 2015).
- 1.2. Local planning policies play a vital role in ensuring the health and wellbeing of the population are taken into account in the planning process; there is substantial evidence supporting the fact that health and environment are inextricably linked and that poor environments contribute significantly to poor health and health inequalities.

Status of this Document

- 1.3. Whilst this document has no statutory status, it provides guidance on addressing the impact of a proposal or plan on the health and wellbeing of the population.

Background

- 1.4. Within Nottinghamshire and Derbyshire (excluding Nottingham City and Derby City which are Unitary Authority), a two-tier system of local government applies. County councils are responsible for the provision of certain services, such as education, libraries, highways and waste disposal. Other services, such as the provision of housing, environmental health, licensing, leisure centres and waste collection, fall to district and borough councils. In a planning context, the county's district and borough councils are the Local Planning Authority (LPA) for the vast majority of planning applications, and are ultimately responsible for granting planning consents and producing Local Plans.
- 1.5. Nottinghamshire and Derbyshire County Council have a statutory duty to prepare Minerals and Waste Local Plans and are responsible for determining planning applications for waste and mineral developments and County Council developments.
- 1.6. Nottinghamshire and Derbyshire County Councils are also responsible for Public Health, which is the science and art of preventing disease, prolonging life and promoting health through the organised efforts and informed choices of society, organisations, public, private, communities and individuals. It is population focused rather than caring for individual patients. It addresses small, medium and whole population issues related to geography, activity and health conditions. The Public Health Team are responsible for:
 - Research and epidemiology - providing and sharing data on population health
 - Health protection - working on threats from environmental hazards, infections or radiation
 - Health improvement - promoting good health and working with others in health and social care to provide effective good quality health care and improve health.

- 1.7. The document intends to make Nottinghamshire, Nottingham City and Erewash a place that improves the mental and physical wellbeing of residents, reduces health inequalities and promotes the use of Health Impact Assessments (HIAs), where appropriate.
- 1.8. The local Clinical Commissioning Group(s) and NHS England are responsible for the commissioning of healthcare services and facilities which are linked to the work of the Health and Wellbeing Boards and the local Director of Public Health. These bodies are consultees for Local Plans. These bodies, in consultation with local healthcare providers, will be able to assist a LPA regarding its strategic policy to deliver health facilities and its assessment of the quality and capacity of health infrastructure as well as its ability to meet forecast demand. They will be able to provide information on their current and future strategies to refurbish, expand, reduce or build new facilities to meet the health needs of the existing population as well as those arising as a result of new and future development.

What this document does not address

- 1.9. It is important to understand that this document does not address the issue of NHS service delivery, this lies outside the remit of both County and Local Planning Authorities. The document aims to raise awareness and provide sustainable solutions to guide people to make healthy lifestyle choices than can be facilitated through the use of sound spatial planning and joined up planning decisions.

2. Planning and Public Health Context

Fair Society, Healthy Lives - The Marmot Review

2.1. In November 2008, Professor Sir Michael Marmot was appointed by the Secretary of State (SoS) for Health to chair an independent review to propose the most effective evidence-based strategies for reducing health inequalities in England from 2010. The strategy includes policies and interventions that address the social determinants for health inequalities and set out six policy interventions. A further review was undertaken into the links between spatial planning and health. This was presented to the National Institute of Clinical Excellence (NICE) and demonstrated that health and environmental inequalities are unavoidably linked in that poor environments contribute significantly to poor health and health inequalities. The Marmot Review identified that action was required in three areas:

- Improving living conditions
- Tackling the inequitable distribution of power, money and resources
- Measuring and understanding the problem of health and inequality and the impacts of actions on it.

2.2. The Marmot Review developed an objective to 'Create and develop healthy and sustainable places and communities' (Policy Objective E) which sought to develop common policies to reduce the scale and impact of climate change and health inequalities and improve community capital and reduce social isolation across the social gradient. The review recommended fully integrating the planning, transport, environmental and health systems to address the social determinants of health.

The Determinants of Health

2.3. The Marmot review focussed on the social determinants of health and presented robust evidence that:

- The conditions in which people are born, grow, live work and age are responsible for health inequalities
- Early childhood in particular impacts on health and disadvantage throughout life
- The cumulative effects of hazards and disadvantage throughout life produce a finely graded social patterning of disease and ill health
- Negative health outcomes are linked to the stress people experience and the levels of control people have over their lives and this stress and control is socially graded
- Mental wellbeing has a profound role in shaping physical health and contributing to life chances, as well as being important to individuals and as a societal measure.

2.4. The Health Map, a concept devised by Whitehead and Dahlgreen (1992) (Figure 1), brings together the strategic links to aid understanding. The Health Map provides a dynamic tool which provides the basis for discussions between spatial planners, health professionals, ecologists, urban designers and other service providers to ensure that awareness on what affects health and wellbeing is recognised within all these professions and that the best outcomes are achieved through the planning process.



The Determinants of Health (1992) Dahlgren and Whitehead

Figure 1: Whitehead & Dahlgren, What can we do about inequalities in health? Lancet, 1991, 338: 1059-1063.

Health and Wellbeing Strategies

2.5. The Health and Social Care Act 2012 changed the way health and social care in England was organised. The Act introduced Health and Wellbeing Boards (HWB), in order to bring together politicians, doctors, councils and a representative of the local people through Healthwatch.

Nottinghamshire Health and Wellbeing Strategy (NHWBS)

2.6. The Nottinghamshire HWB was set up in May 2011 and took on its full responsibilities in April 2013 it focus is on improving the health and wellbeing of the residents of Nottinghamshire. The NHWBS sets out 4 key ambitions:

- 2.7.
- A good start
 - Living well
 - Coping well
 - Working together

2.8. To achieve the delivery of the NHWBS during the strategy period 2014-2017, 20 priority areas, each with their own action plan for delivery, were identified and can be viewed here [2014-2017 Priority Areas](#)

Nottingham City Health and Wellbeing Strategy (NCHWB)

2.9. The ambition of Nottingham City's [Health and Wellbeing Strategy](#) 2016-2020 is to make Nottingham a place where we can all enjoy positive health and wellbeing and to tackle inequalities in health within the City. There are four outcomes within the strategy, each of which is underpinned by a number of priorities which include housing, the built environment, air pollution and access to green space:

- People in Nottingham adopt and maintain Healthy Lifestyles
- People in Nottingham will have positive Mental Wellbeing and those with Serious Mental Illness will have good physical health

- There will be a Healthy Culture in Nottingham in which citizens are supported and empowered to live healthy lives and manage ill health
- Nottingham's Environment will be sustainable; supporting and enabling its citizens to have good health and wellbeing

Derbyshire Health and Wellbeing Strategy (DHWBS)

- 2.10. The Derbyshire HWB main focus is on improving the health and wellbeing of the residents of Derbyshire.
- 2.11. The Strategy covers the period 2012-2015 and sets out five main priorities:
- Improve health and wellbeing in early years – to give children the best start in life to help them achieve their full potential and benefit them throughout their lives
 - Promote healthy lifestyles – to give individuals and communities the right support order for them to make the best choices for their health
 - Improve emotional and mental health – as it is everyone's business and a fundamental building block for individual and community wellbeing
 - Promote the independence of people living with long term conditions and their carers – helping people to manage their condition better can significantly improve quality of life and reduce the need for hospital or emergency care
 - Improve health and wellbeing of older people – giving older people the right support in the right environment to help them enjoy quality, active, healthy and fulfilling lives

Joint Strategic Needs Assessments

- 2.12. The production of an annual Joint Strategic Needs Assessment (JSNA) has been a statutory duty placed on the Directors of Public Health, Children's Services and Adult Services since 2007. The Health and Social Care Act 2013 places an equal obligation on Local Authorities and Clinical Commissioning Groups (CCGs) to prepare a JSNA. The JSNA is produced by the HWB and provides a picture of the current and future health and wellbeing of the local population.

Nottinghamshire Joint Strategic Needs Assessment (2012)

- 2.13. The Nottinghamshire [JSNA](#) consists of three chapters – Adults and Vulnerable Adults, Children and Young People and Older People. Each chapter is made up of several sections supported by a summary outlining the key message from each.
- 2.14. The Nottinghamshire JSNA provides an opportunity for the spatial planning process to be strengthened through partnership working, community engagement, evidence sharing and coordination.

Nottingham City Joint Strategic Needs Assessment (NCJSN)

- 2.15. The Nottingham [NCJSNA](#) model is a systematic review of health, wellbeing and social care issues facing the population leading to agreed priorities and resource allocations that will improve health and wellbeing and reduce inequalities. Where relevant the JSNA highlights areas where planning processes may be used to support the health and wellbeing of the population, for example housing, obesity and air pollution.

Derbyshire Joint Strategic Needs Assessment (2014)

- 2.16. The Derbyshire ([JSNA](#)) reviews the position of Derbyshire County in regard to various Outcome Frameworks (see below) for health and social care, highlighting where performance is significantly poorer than England as a whole. Where possible, significant variation within the County is also highlighted. The report also collates information on what is being done to address the issues identified.

The Public Health Outcomes Framework

- 2.17. The Public Health Outcomes Framework Healthy lives, healthy people: Improving outcomes and supporting transparency sets out a vision for public health, desired outcomes and indicators to help understanding of how well public health is being improved and protected. The [framework](#) concentrates on two high-level outcomes to be achieved across the public health system. These are:

- Increased healthy life expectancy
- Reduced differences in life expectancy and healthy life expectancy between communities

- 2.18. These outcomes reflect a focus not only on how long people live, but on how well they live at all stages of life. The second outcome focuses attention on reducing health inequalities between people, communities and areas in our society. A set of supporting indicators to cover the full spectrum of public health are grouped into four domains:

- Improving the wider determinants of health
- Health improvement
- Health protection
- Healthcare public health and preventing premature mortality

Health Impact Assessment (HIA)

- 2.19. The World Health Organisation defines Health Impact Assessment (HIA) as:
'A combination of procedures, methods and tools by which a policy, programme or project may be judged as to its potential effects on the health of a population, and the distribution of those effects within the population.'
- 2.20. HIA provides a practical and flexible framework by which the effects of proposals on health and inequality can be identified. Such effects are examined in terms of their differential impact, their relative importance and the interaction between impacts. In doing so, HIAs can make recommendations to inform decision making, particularly in terms of minimising negative impacts and maximising opportunity to promote health and wellbeing.
- 2.21. The use of HIA ensures that health impacts are explicitly considered in proposals and can help in the monitoring of such, to help future proposals and ultimately contribute to narrowing the gap between those experiencing the worst and best health.
- 2.22. Assessment of health impacts of a policy or plan can be integrated into a Strategic Environmental Assessment (SEA), Sustainability Appraisal (SA) or Environmental Impact Assessment (EIA), where these are required.

Sustainable Community Strategies

- 2.23. The following section refers to Sustainable Community Strategies that are prepared by Local Authorities. It should be noted that the Deregulation Act 2015, Section 100 amended the Planning and Compulsory Purchase Act 2004, Section 19, removing the requirement that in preparing a Local Plan the LPA must have regard to the Council's SCS or the SCS of any other authority. The Deregulation Act also removes Section 4 in the Local Government Act 2000, which requires local authorities in England to prepare Sustainable Community Strategies.

Nottinghamshire Sustainable Community Strategy (NSCS)

- 2.24. The Nottinghamshire Sustainable Community Strategy sets out six key priorities for the future of Nottinghamshire during the strategy period of 2010-2020:

- A greener Nottinghamshire
- A place where Nottinghamshire's children achieve their full potential
- A safer Nottinghamshire
- Health and well-being for all
- A more prosperous Nottinghamshire
- Making Nottinghamshire's communities stronger.

Derbyshire Sustainable Community Strategy (DSCS)

- 2.25. The Derbyshire Sustainable Community Strategy sets out seven key priorities for the future of Derbyshire during the strategy period of 2009-2014:

- Promote health and wellbeing and reduce health inequalities so that people in Derbyshire enjoy the benefits of following a healthier lifestyle and live longer, healthier lives
- Increase independent living and improve quality of life so that people in Derbyshire enjoy the benefits of living at home and those in care homes have the best support
- Promote choice and control so that people in Derbyshire have access to health and social care which is centred around their unique, personal needs and is within easy reach
- Improve inclusion and contribution so that people in Derbyshire have a say about the health and social care services they use and participate fully in community life
- Enhance dignity and safety so that people in Derbyshire are well looked after by the people who care for them.

Bassetlaw District Council Sustainable Community Strategy (2010-2020)

- 2.26. The Strategy sets out eight ambitions. The following have the most direct links to health and health services.

'Healthier Communities' the priorities for the ambition are:

- Reduce smoking prevalence within the population, reduce impact of second hand smoke
- To reduce prevalence of obesity within the population
- To reduce sexual health infection rates within the Bassetlaw population
- Address the adverse effects of alcohol on the population of Bassetlaw

- To improve emotional health and well-being and social inclusion
- To promote health, well-being and active life in older age in Bassetlaw
- To deliver on cross-cutting themes of importance to health in Bassetlaw

‘Accessible Communities’ Priorities:

- Monitor and influence the transport to health project in Bassetlaw
- Maintain and develop existing transport and accessibility services for Bassetlaw
- Identify and address gaps in service provision

‘Supporting children and young people’ Priorities:

- Improve and support emotional well-being of children and young people and promote positive mental health
- Reduce the number of teenage pregnancies and support young mothers
- Support parents and encourage positive relationships while enabling involvement in children/young people’s development
- Reduce the prevalence of childhood obesity and promote healthy living
- Increase the aspirations of young people and support increased attainment and positive contribution
- Ensure the safety of children and young people and reduce the risks to children and young people
- Support disabled children, young people and their families and those transitioning to adult care/those in respite care.

‘Sustainable Communities’ Priorities:

- Reduce, re-use, recycle
- Promotion/awareness raising of environmental issues
- Conserve and expand area of open green space
- Achieve cleaner and greener public spaces

Broxtowe Borough Council Sustainable Community Strategy (2010-2012)

2.27. The strategy sets out seven priorities areas. Most relevant to health include ‘Healthy Living’ for which the priorities are:

- Reduce health inequalities
- Reduce harm caused by alcohol and tobacco
- Halt the rising trend of obesity
- Improve mental health
- Promote independence of older people and vulnerable groups

‘Children and young people’ Priorities:

- Emotional health of children and young people
- Positive activities for young people
- Supporting the teenage pregnancy strategy
- Supporting the childhood obesity strategy
- Support for young people to achieve through education, employment or training
- Child poverty

Gedling Borough Council Sustainable Community Strategy (2009-2026)

2.28. The strategy includes five priorities for action:

- Safer and stronger communities living together in Gedling Borough
- A fairer, more involved Gedling Borough
- A well looked after environment that meets the present and future needs of Gedling Borough
- Healthy and active lifestyles in Gedling Borough
- Contributing to a vibrant and prosperous Greater Nottingham

Mansfield District Council Sustainable Community Strategy (2010-2020)

2.29. The strategy includes seven 'priority themes'. The priorities with most relevance to health concern Health and Wellbeing' Future. The priorities for this are:

- Obesity – reducing levels of obesity in both children and adults by increasing levels of physical activity and healthy eating
- Smoking – continuing to reduce levels of smoking
- Substance misuse – reducing the number of people harmed by alcohol consumption and the use of other drugs.
- Teenage pregnancy and sexual health – reducing teenage pregnancy levels and continuing to improve sexual health in young people
- Mental health – improving mental health and wellbeing and expanding services to prevent illness, provide better access to treatment and to remove the stigma often associated with it
- Access to services – ensuring people can access health care as easily as possible and developing ways of using the workplace and other non-medical settings to provide some services. The development of a range of clinical and community wellbeing services at the Ashfield Health Village will also be a priority.

Newark and Sherwood District Council Sustainable Community Strategy (2006-2016)

2.30. The strategy aims to ensure residents have the best quality of life in the East Midlands. The strategy states it they need communities that are:

- Clean and Green
- Learning and earning
- Accessible
- Health
- Culturally Connected
- Safe and strong

Nottingham City Council Sustainable Community Strategy (2020)

2.31. The strategy sets out three cross-cutting aims:

- Green – being environmentally sustainable
- Aspiring – raising aspirations
- Fair – achieving fairness and equality of opportunity

It includes six strategic priorities, the most relevant of which to health are:

‘Transform Nottingham’s neighbourhoods’ - Every neighbourhood will have a distinctive identity and provide a great place to live, with:

- An appropriate mix of housing, meeting the needs of young people, families and older people of all incomes
- Good access to employment, public services, shops and leisure within the neighbourhood, the city centre and further afield
- Attractive, clean and safe environments, including high quality, well designed and sustainable buildings, public realm and green spaces
- Residents who are proud of their city, take responsibility for their communities and who respect and value their neighbours and where they live
- Greater balance will be achieved in the city’s housing market with an increased choice of quality housing meeting the needs of a diverse population and enabling the city to retain more of its aspiring residents.
- Public service delivery will be better integrated and appropriately devolved, ensuring more accessible and responsive services for all and giving residents more control over what happens in their neighbourhoods.

‘Family Nottingham –Ensure that all children and young people thrive and achieve’

- Children, young people and families will benefit from early and effective support and protection to empower them to overcome difficulties
- More families will be strong and healthy, providing an enjoyable and safe place for children to grow up
- Children and young people will be healthier, fitter, more emotionally resilient and better able to make mature decisions
- All children and young people will leave school with the best skills and qualifications they can achieve and will be ready for work or further learning
- Child poverty will be significantly reduced

‘Healthy Nottingham – Improve health and wellbeing’

- People will be healthier, happier and live longer, and will feel able to achieve their potential and make a positive contribution to city life
- Health inequalities between areas and social groups will be significantly reduced

Rushcliffe Borough Council Sustainable Community Strategy (2012-2016)

2.32. The strategy sets out four priorities to prepare for the future, the most relevant of which to health are ‘Health issues’:

- Reduce the prevalence of obesity within Rushcliffe
- Raise awareness of substance misuse
- Reduce the number of people who smoke

National Planning Policy Framework (NPPF)

2.33. The National Planning Policy Framework (NPPF) sets out national planning guidance for local authorities and recognises that the planning system can play an important role in facilitating social interaction and creating healthy, inclusive communities. Chapter 8 of the NPPF focusses on promoting healthy communities ensuring that local

communities are engaged in the planning process at all levels and that mechanisms are embedded to encourage people to choose healthy lifestyles. The NPPF places great emphasis on the importance of accessibility for all to high quality open space, safe communities, recreational facilities/services, rights of way and cultural facilities which can all make an important contribution to the health and wellbeing of communities.

County Council Development Plans

- 2.34. This section sets the context for planning policy and links to health and wellbeing across the area covered by the document. As well as providing the basis for decisions on planning applications, the following plans and strategies will help to shape the area into the future. It is clear that many of the documents incorporate the principle of health and wellbeing within their adopted plans and strategies, which will in turn make a positive contributions to achieving health and wellbeing across Nottinghamshire and Erewash.

Nottinghamshire and Nottingham Waste Local Plan (2002)

- 2.35. The Nottinghamshire County Council Waste Local Plan was adopted in 2002 and contains a number of polices that provide links to seeking to minimise the visual, noise, odour, litter and dust impact arising from waste facilities on the local area, this is turn can have a positive effect overall on the health and wellbeing of nearby residents. In addition, the Plan contains a policy that seeks to protect public rights of way ensuring people have access to benefits available from the use of recreational open space.

Nottinghamshire and Nottingham Waste Core Strategy (2013)

- 2.36. The Nottinghamshire and Nottingham Waste Core Strategy does not contain any specific polices on health and wellbeing, however Policy WCS13 covers the protection of quality of life and seeks to protect and enhance our environment seeks to protect the quality of life of those living or working near to waste management facilities from unacceptable impacts. It also states that opportunities should be taken where available to enhance the local environment through the provision of landscape, habitat or community facilities.

Nottinghamshire Minerals Local Plan (2005)

- 2.37. The Minerals Local Plan does not contain any specific policies on health and wellbeing. However, there are limited links contained within the plan in relation to protecting access to rights of way and protecting and improving amenity for the local community.

Nottinghamshire Submission Draft Minerals Local Plan (2016)

- 2.38. There are no policies specifically on health and wellbeing, however Policy DM1 most directly relates to health, covering the protection of amenity. The restoration of minerals sites provides opportunities for public access to open space and so policies in this regard also have links to health.

Derby and Derbyshire Waste Local Plan (2005)

- 2.39. The Plan does not contain any specific health and wellbeing policies, however Policies W6-8 relate to the impact of waste development on the environment and people's health, covering topics of pollution and related nuisances, landscape and other visual impact and the impacts of the transportation of waste.

- Derby and Derbyshire Minerals Local Plan (2002)***
- 2.40. The Plan does not contain any specific health and wellbeing policies, however Policy MP88 relates to ensuring that planning conditions be applied to planning permission for mineral working to cover measure to protect local amenity.

- Nottinghamshire Local Transport Plan (LTP)***
- 2.41. The Nottinghamshire LTP has a plan period of 2011-2026 and sets out three transport goals:

- Provide a reliable, resilient transport system which supports a thriving economy and growth whilst encouraging sustainable and healthy travel
- Improve access to key services, particularly enabling employment and training opportunities
- Minimise the impacts of transport on people's lives, maximise opportunities to improve the environment and help tackle carbon emissions

- Derbyshire Local Transport Plan (2011)***
- 2.42. The Derbyshire LTP has a plan period of 2011-2026 and sets out five key transport goals:

- Supporting a resilient local economy
- Tackling climate change
- Contributing to better safety, security and health
- Promoting equality of opportunity
- Improving quality of life and promoting a healthy natural environment.

Local Development Plans

- Ashfield District Council Local Plan (2002)***
- 2.43. There are no specific policies relating to health and wellbeing in the Plan, but a range of policies could be considered to have an impact on health such as HG6 which relates to the provision of open space in new residential development and TR2 which seeks to provide cycling routes.

- Ashfield District Council Draft Local Plan (2016)***
- 2.44. The emerging Preferred Options Ashfield Draft Local Plan includes the following vision:

'The District will increase the quality of life of its residents, businesses and visitors through planning development to help reduce crime, anti-social behaviour and the fear of crime, promoting well-being and improving health and reducing health inequalities....Public transport, walking and cycling links will be improve to connect residents more easily with local and regional destinations...New developments will be planned to provide the necessary infrastructure including roads, schools and health facilities.'

- 2.45. In addition Policy S2 'Overall strategy for growth, part 7 seeks the protection of existing health facilities, improved links to such facilities and where necessary the provision of new facilities to meet local needs. Part 10 and 11 relate to the delivery of a sustainable transport network and reducing demand for private car-based journeys. Part 14 states 'Development should be designed to promote healthier lifestyles and to encourage people to be active outside their homes and places of work.'

- 2.46. The Local Plan Preferred Approach identifies that a Health Impact Assessment of the Local Plan will be prepared for the Publication Local plan to help ensure the Plan acknowledges the potential health impacts resulting from its implementation and identified any mitigation which may be required. A specific policy on Provision and Protection of Health and Community Facilities (SD12) is included in the Plan. However, healthy lifestyles and improving health is a theme that runs through the policies in the merging Plan.

Bassetlaw District Council Core Strategy (2011)

- 2.47. The plan does not contain any specific policies on health and wellbeing, but a range of policies could be considered to have an impact on health and wellbeing, which include the provision of green infrastructure, open space and developer contributions towards healthcare as a result of new development.

Broxtowe Borough Council Local Plan (2004)

- 2.48. Although none of the policies of the plan specifically relate to health and wellbeing there are references to the need to secure open space, provide convenient and safe environments, enhance recreational facilities and provide for community facilities, all of which help to contribute to the improved health and wellbeing of its residents.

Erewash Borough Council Local Plan (amended 2014)

- 2.49. The plan does not contain any specific policies on health and wellbeing, however a range of policies will have an impact on health such as policy H9 which relates to the provision of health facilities through developer contributions. In addition the plan seeks to ensure new development is well designed, safe, provides for open space and priority if given to access to public transport, walking and cycling.

Erewash Borough Council Core Strategy (2014)

- 2.50. Strategic Objective viii relates to Health and Wellbeing. The policy seeks to create conditions for a healthier population by addressing environmental factors underpinning health and wellbeing, working with healthcare partners to deliver new and improved health and social care facilities. This would be supported where required by new development and through the integration of health and service provision, and by improving access to cultural, leisure and lifelong learning activities.
- 2.51. Policy 12 of the Strategy explicitly covers healthy lifestyles, but a range of other policies could also be considered to have an impact on health, including access to public transport and green spaces.

Gedling Borough Council Replacement Local Plan (2014)

- 2.52. The plan contains a number of policies, although none specifically relate to health and wellbeing there are references to the need to provide access to green space, protect existing green spaces such as allotments and ensure new development is well designed and does not adversely affect the wider environment.

Mansfield District Council Local Plan (1998)

- 2.53. Although none of the policies in the plan specifically relate to health and wellbeing there are references to the need ensure new development is well designed and integrates with the natural environment, that open space is provided and that community facilities are safe, well integrated with their surroundings and offer a clear local benefit.

- Mansfield District Council Draft Local Plan (2016)***
- 2.54. The draft plan contains number of relevant draft policies and objectives. Draft Objective 3 seeks to ensure that residents have good access to a range of facilities which provide high quality health benefits. In addition the plan contains Draft Policy S14 'Hot Food Takeaways' which seeks to limit the number of outlets within 400m of schools, addresses anti-social behaviour and assesses new outlet applications in terms of their potential impact on residential amenity.
- Newark and Sherwood District Council Core Strategy (2011)***
- 2.55. The strategy's vision refers to encouraging personal wellbeing and health, in addition the plan contains a number of policies that have direct links to ensuring the health and wellbeing of its residents, including the provision of open space, access to rural services, protection of ecological assets and greenspaces and ensuring new development is well integrated with its surroundings and does not negatively impact on the amenity of residents.
- Nottingham City Council Local Plan (2005)***
- 2.56. The plan contains a number of relevant policies, though none specifically on health and wellbeing. The Plan overall seeks to deliver sustainable communities that include access to open space, are well designed and do not negatively impact on the amenity of residents.
- Nottingham City Council Land and Planning Policies Local Plan Part 2 Draft Publication (2016)***
- 2.57. The draft part 2 plan contains a chapter on 'Local Services and Healthy Lifestyles', which seeks to limit the number of hot food takeaways, safeguard land for health facilities, provide for community facilities and deliver new and improved facilities. In addition the plan contains other policies with links to health and wellbeing, including good links to public transport and open spaces, providing cycle routes and ensuring new development is well designed to meet the needs of its residents.
- Rushcliffe Borough Council Local Plan Part 1: Core Strategy (2014)***
- 2.58. The plan contains Strategic Objective viii 'Health & Wellbeing' which seeks to create the conditions for a healthier population by addressing environmental factors underpinning health and wellbeing, working with healthcare partners to deliver new and improved health and social care facilities, integrate health and service provision and improving access to cultural, sport leisure and lifelong learning activities.
- 2.59. Other policies within the plan can be well related to achieving health and wellbeing across the Borough.
- The Greater Nottingham Aligned Core Strategy (ACS) Part 1 Local Plan (2014)***
- 2.60. The plan covers part of the Greater Nottingham Housing Market Area and includes Broxtowe Borough Council, Nottingham City Council and Gedling Borough Council, the plans period runs from 2011 to 2028 and covers a number of topics that make reference to the health and wellbeing of its residents. Strategic Objective viii states that:
- 'Health & Wellbeing seeks to create the conditions for a healthier population by addressing environmental factors underpinning health and wellbeing, working with healthcare partners to deliver new and improved health and social care facilities, integrate health and service provision and improving access to cultural, sport leisure and lifelong learning activities'

- 2.61. Further detailed information in relation to specific planning policies from the above documents is set out at Appendix 4.

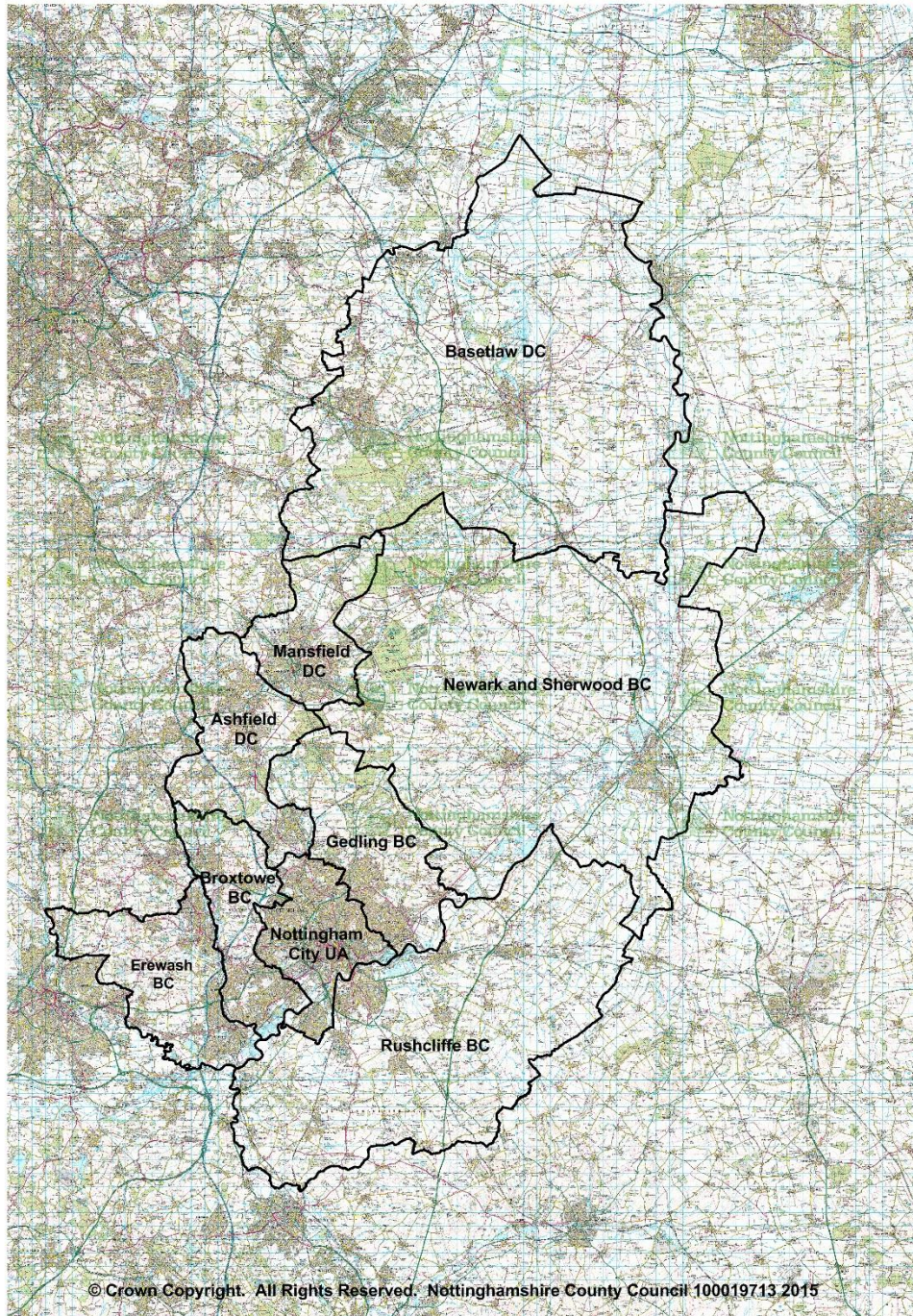
Supplementary Planning Documents, Neighbourhood Plans and Other relevant plans

- 2.62. There are a number of additional document produced by Council's in order to provide additional weight to planning decisions and strengthen policy, these include Neighbourhood Plans and Supplementary Planning Documents, which are set out in detail at Appendix 4.

3. Nottinghamshire and Erewash in Context

- 3.1. The health of people in Nottinghamshire varies against the England average. Deprivation is lower than average, however about 16.9% (23,500) children live in poverty. Life expectancy for both men and women is similar to the England average. Appendix 1 sets out the full Health profile for Nottinghamshire and its District and Borough Councils in further detail. The individual health profiles are provided as the health profiles at the County level can mask inequalities.

Plan 1: Nottinghamshire and Erewash



- 3.2. Erewash Borough Council forms part of the Greater Nottingham Core Housing Market Area (GNCHMA), although Erewash lies within the County of Derbyshire, much work was been completed in conjunction with Nottingham City, Gedling Borough Council, Broxtowe Borough Council and the Hucknall part of Ashfield, who also form part of the GN HMA Nottinghamshire.
- 3.3. It is considered that by building upon this close relationship this document can help to create and strengthen links between health and wellbeing and planning across Derbyshire and Nottinghamshire. Demonstrating GNCHMA links are key, despite spanning organisational boundaries; recognising that Erewash BC Core Strategy Policies is important in creating an environment which leads people to live healthier lifestyles.

4. Guidance and Planning Decisions

- 4.1. The strategic links between spatial planning and health and wellbeing and how planning can facilitate improvements to health and wellbeing are well evidenced. This chapter aims to draw together the key themes between the two and to provide a non-exhaustive checklist which can be used when assessing planning applications to ensure that the overall impact of the proposal on health and wellbeing has been given due consideration.
- 4.2. Since 2013, County Councils have had the responsibility of joining up local health policy with other strategies such as planning, transport infrastructure and housing, by creating specific links between adopted documents. The document 'Planning, Health and Wellbeing' (LGiU 2015) acknowledged that the lack of priority given to collaborative working is slowing down to the detriment of an integrated health and planning agenda. This is exacerbated in two tier areas where public health is the responsibility of County Councils, whilst most planning functions are carried out by District and Borough authorities.
- 4.3. To reduce health inequalities, our healthy planning goals are:
- Avoiding adverse health impacts from development – health protection, air quality, water quality, noise, dereliction and land pollution, waste management, light pollution, community severance
 - Providing a healthy living environment – housing (quality, space standards, affordability, mixed tenure, type and density); good quality safe and stimulating public realm; accessible to all to parks and green open space; water features; play features; community facilities; recreational and sports facilities; employment opportunities; education and learning; walking and safe cycling routes; public transport network; food production and distribution
 - Promoting and facilitating healthy lifestyles – pattern of development (mixed use), movement/connectivity and urban design quality to promote active travel, physical activity and mental well-being; active travel (safe direct routes, secure parking and facilities for walking and cycling); physical activity (access to green space, play, recreation and sports facilities; healthy eating (access to affordable safe and nutritious food, space for local food growing); safe space for social interaction and play; buildings to be designed to maximise physical activity by encouraging walking and use of stairs and providing sufficient cycle storage
 - Providing access to health facilities and services – health centres, GP's, dentists, hospitals, pharmacists to meet current and future population needs
 - Responding to global environmental issues – climate change resource depletions, waste management, minimising carbon emissions by transport and development; sustainable design, construction methods and building material; suitable/renewable energy; flood risk; biodiversity and nature conservation; waste disposal and recycling.
- 4.4. The checklist set out in Appendix 5 is based upon the London Healthy Urban Development Unit 'Healthy Urban Planning Checklist' (June 2015) and aims to ensure that the health and wellbeing of residents is taken into account when decisions on planning applications, plans and strategies are made.

4.5. The Checklist can be used in the following ways:

- Local Plan Review
- Screening for potential health impacts as part of a HIA
- To accompanying a planning application, subject to local validation requirements
- By internal and external consultees when responding to planning consultations
- To assist in the development of neighbourhood plans
- By developers and the public submitting planning applications

Monitoring and Evaluation

4.6. It is important that the checklist is monitored and evaluated in order to reflect changes in planning and health policies, local circumstances and to ensure the checklist is fit for purpose and is achieving its intended purpose.

4.7. The County Council will be developing an Engagement Protocol in conjunction with this document which aims to provide a comprehensive pathway for planning and public health contacts to be fully engage in commenting on planning applications and relevant planning documents.

Appendix 1 – Health Profile for Nottinghamshire 2015



Nottinghamshire

County

This profile was produced on 2 June 2015

Health Profile 2015

Health in summary

The health of people in Nottinghamshire is varied compared with the England average. Deprivation is lower than average, however about 16.9% (23,500) children live in poverty. Life expectancy for both men and women is similar to the England average.

Living longer

Life expectancy is 8.7 years lower for men and 6.7 years lower for women in the most deprived areas of Nottinghamshire than in the least deprived areas.

Child health

In Year 6, 17.5% (1,273) of children are classified as obese, better than the average for England. The rate of alcohol-specific hospital stays among those under 18 was 34.9*. This represents 57 stays per year. Levels of breastfeeding and smoking at time of delivery are worse than the England average.

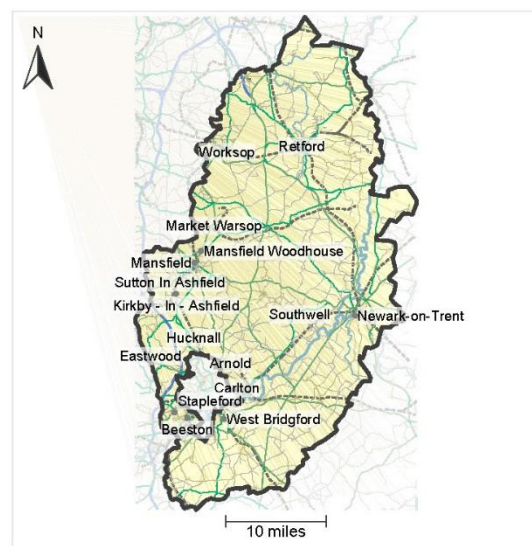
Adult health

In 2012, 24.0% of adults are classified as obese. The rate of alcohol related harm hospital stays was 675*, worse than the average for England. This represents 5,351 stays per year. The rate of self-harm hospital stays was 207.9*. This represents 1,632 stays per year. The rate of smoking related deaths was 279*, better than the average for England. This represents 1,282 deaths per year. Estimated levels of adult excess weight are worse than the England average. Estimated levels of adult physical activity are better than the England average. The rate of people killed and seriously injured on roads is worse than average. Rates of sexually transmitted infections and TB are better than average. The rate of drug misuse is worse than average. Rates of statutory homelessness, violent crime, long term unemployment and early deaths from cardiovascular diseases are better than average.

Local priorities

For more information, including locally agreed priorities for Nottinghamshire, see www.nottinghamshire.gov.uk or <http://www.nottinghamshireinsight.org.uk/>

* rate per 100,000 population



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Population: 796,000

Mid-2013 population estimate. Source: Office for National Statistics.

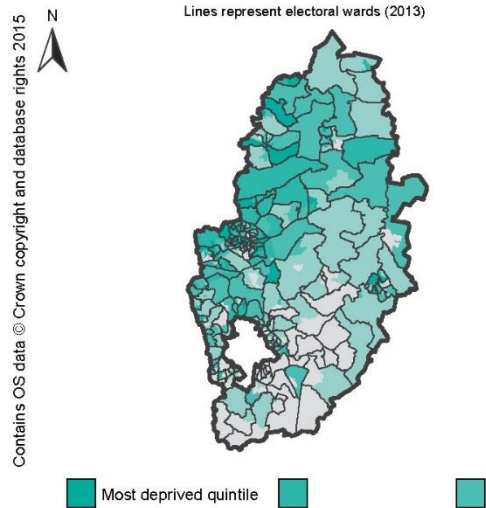
This profile gives a picture of people's health in Nottinghamshire. It is designed to help local government and health services understand their community's needs, so that they can work together to improve people's health and reduce health inequalities.

Visit www.healthprofiles.info for more profiles, more information and interactive maps and tools.

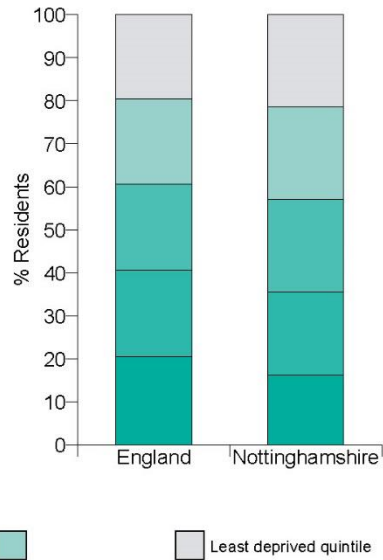
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Deprivation: a national view

The map shows differences in deprivation in this area based on national comparisons, using quintiles (fifths) of the Index of Multiple Deprivation 2010, shown by lower super output area. The darkest coloured areas are some of the most deprived neighbourhoods in England.



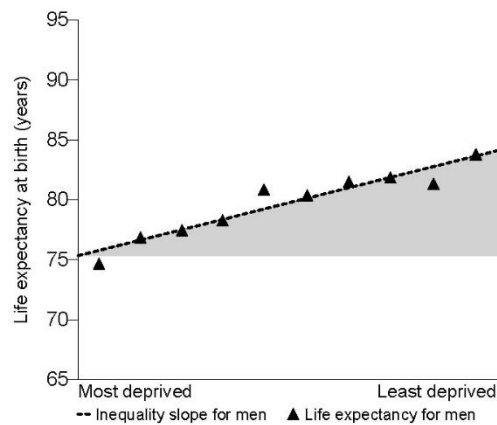
This chart shows the percentage of the population who live in areas at each level of deprivation.



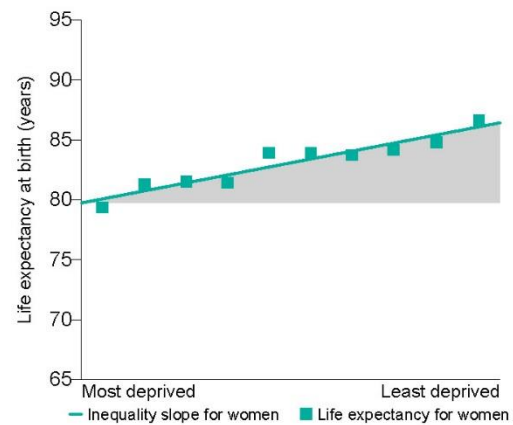
Life expectancy: inequalities in this local authority

The charts below show life expectancy for men and women in this local authority for 2011-2013. Each chart is divided into deciles (tenths) by deprivation, from the most deprived decile on the left of the chart to the least deprived decile on the right. The steepness of the slope represents the inequality in life expectancy that is related to deprivation in this local area. If there were no inequality in life expectancy as a result of deprivation, the line would be horizontal.

Life expectancy gap for men: 8.7 years

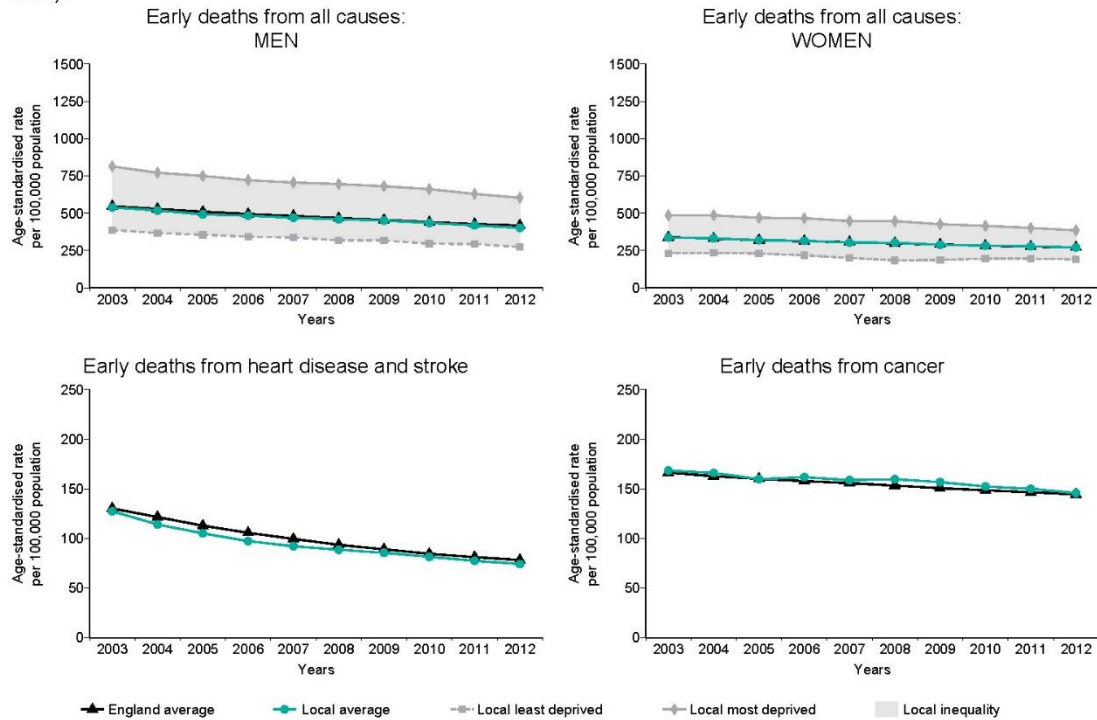


Life expectancy gap for women: 6.7 years



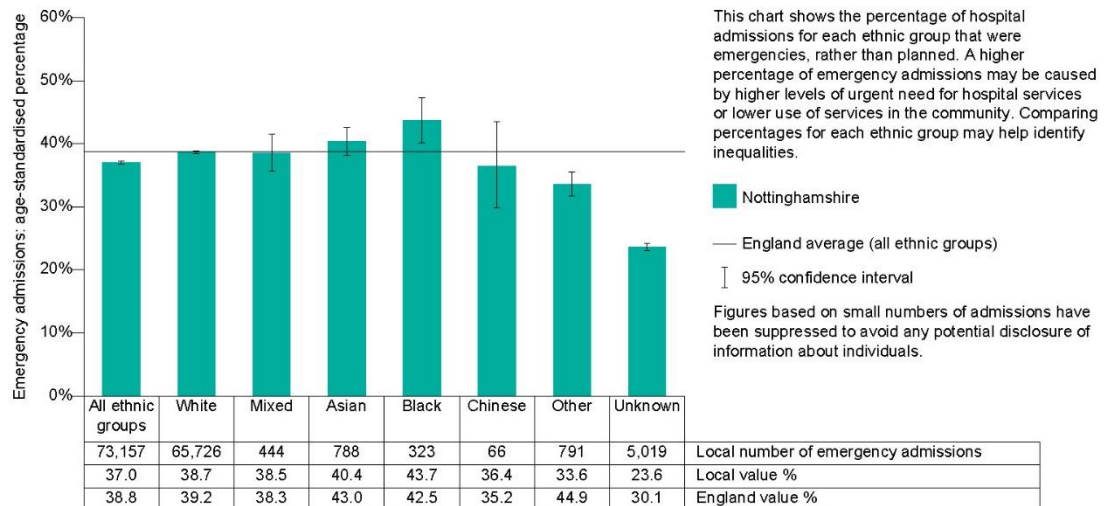
Health inequalities: changes over time

These charts provide a comparison of the changes in early death rates (in people under 75) between this area and all of England. Early deaths from all causes also show the differences between the most and least deprived quintile in this area. (Data points are the midpoints of 3 year averages of annual rates, for example 2005 represents the period 2004 to 2006).



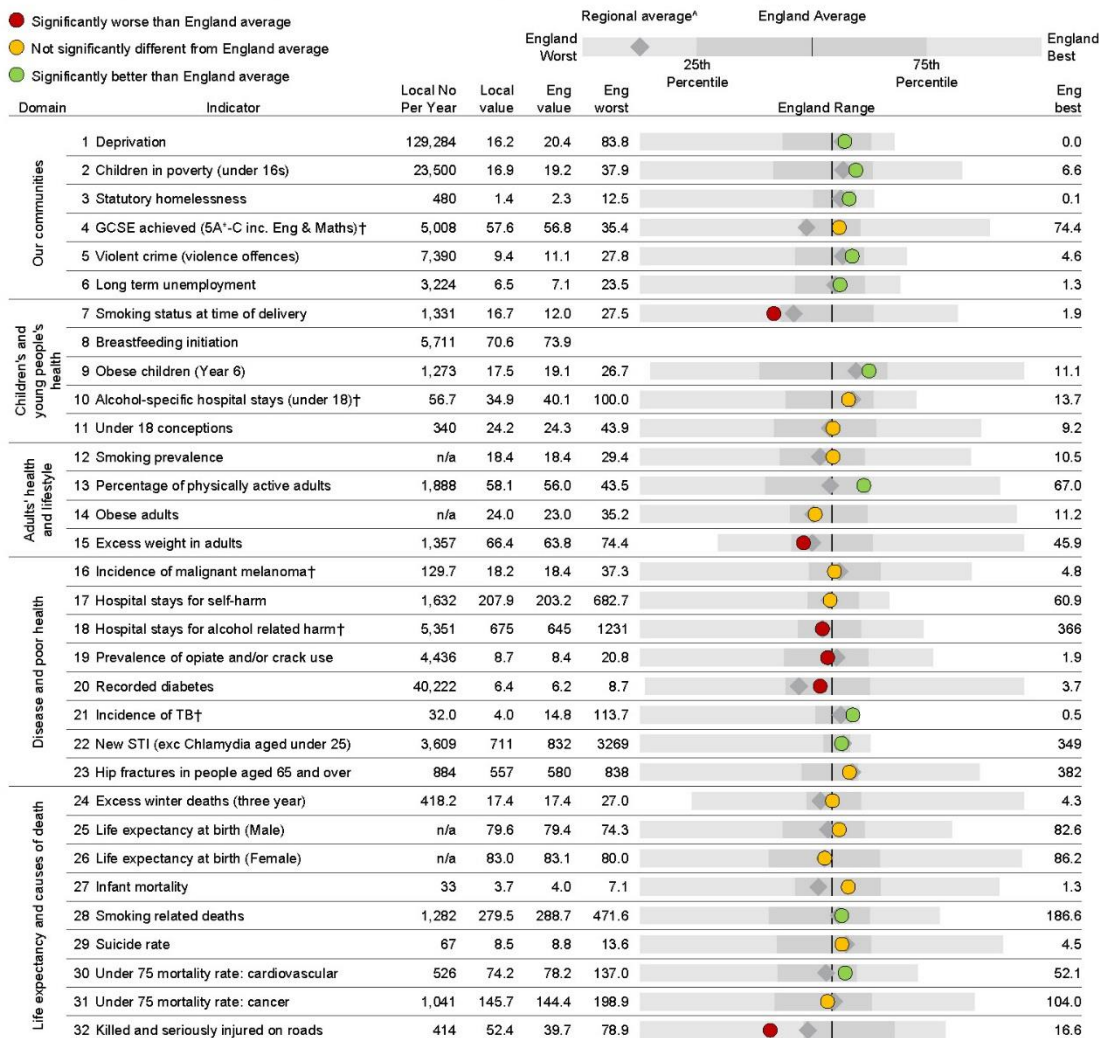
Health inequalities: ethnicity

Percentage of hospital admissions that were emergencies, by ethnic group, 2013



Health summary for Nottinghamshire

The chart below shows how the health of people in this area compares with the rest of England. This area's result for each indicator is shown as a circle. The average rate for England is shown by the black line, which is always at the centre of the chart. The range of results for all local areas in England is shown as a grey bar. A red circle means that this area is significantly worse than England for that indicator; however, a green circle may still indicate an important public health problem.



Indicator notes

1 % people in this area living in 20% most deprived areas in England, 2013 **2** % children (under 16) in families receiving means-tested benefits & low income, 2012 **3** Crude rate per 1,000 households, 2013/14 **4** % key stage 4, 2013/14 **5** Recorded violence against the person crimes, crude rate per 1,000 population, 2013/14 **6** Crude rate per 1,000 population aged 16-64, 2014 **7** % of women who smoke at time of delivery, 2013/14 **8** % of all mothers who breastfed their babies in the first 48hrs after delivery, 2013/14 **9** % school children in Year 6 (age 10-11), 2013/14 **10** Persons under 18 admitted to hospital due to alcohol-specific conditions, crude rate per 100,000 population, 2011/12 to 2013/14 (pooled) **11** Under-18 conception rate per 1,000 females aged 15-17 (crude rate) 2013 **12** % adults aged 18 and over who smoke, 2013 **13** % adults achieving at least 150 mins physical activity per week, 2013 **14** % adults classified as obese, Active People Survey 2012 **15** % adults classified as overweight or obese, Active People Survey 2012 **16** Directly age standardised rate per 100,000 population, aged under 75, 2010-12 **17** Directly age sex standardised rate per 100,000 population, 2013/14 **18** The number of admissions involving an alcohol-related primary diagnosis or an alcohol-related external cause, directly age standardised rate per 100,000 population, 2013/14 **19** Estimated users of opiate and/or crack cocaine aged 15-64, crude rate per 1,000 population, 2011/12 **20** % people on GP registers with a recorded diagnosis of diabetes 2013/14 **21** Crude rate per 100,000 population, 2011-13, local number per year figure is the average count **22** All new STI diagnoses (excluding Chlamydia under age 25), crude rate per 100,000 population, 2013 **23** Directly age and sex standardised rate of emergency admissions, per 100,000 population aged 65 and over, 2013/14 **24** Ratio of excess winter deaths (observed winter deaths minus expected deaths based on non-winter deaths) to average non-winter deaths 01.08.10-31.07.13 **25**, **26** At birth, 2011-13 **27** Rate per 1,000 live births, 2011-13 **28** Directly age standardised rate per 100,000 population aged 35 and over, 2011-13 **29** Directly age standardised mortality rate from suicide and injury of undetermined intent per 100,000 population, 2011-13 **30** Directly age standardised rate per 100,000 population aged under 75, 2011-13 **31** Directly age standardised rate per 100,000 population aged under 75, 2011-13 **32** Rate per 100,000 population, 2011-13

† Indicator has had methodological changes so is not directly comparable with previously released values. ^a "Regional" refers to the former government regions.

More information is available at www.healthprofiles.info and <http://fingertips.phe.org.uk/profile/health-profiles> Please send any enquiries to healthprofiles@phe.gov.uk

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Appendix 2 – Health Profiles for Nottingham City and Erewash



Public Health
England

Protecting and improving the nation's health

Nottingham

Unitary Authority



This profile was produced on 2 June 2015

Health Profile 2015

Health in summary

The health of people in Nottingham is generally worse than the England average. Deprivation is higher than average and about 33.7% (18,600) children live in poverty. Life expectancy for both men and women is lower than the England average.

Living longer

Life expectancy is 8.0 years lower for men and 8.0 years lower for women in the most deprived areas of Nottingham than in the least deprived areas.

Child health

In Year 6, 23.3% (624) of children are classified as obese, worse than the average for England. The rate of alcohol-specific hospital stays among those under 18 was 34.9*. This represents 22 stays per year. Levels of teenage pregnancy, GCSE attainment and smoking at time of delivery are worse than the England average.

Adult health

In 2012, 21.7% of adults are classified as obese. The rate of alcohol related harm hospital stays was 954*, worse than the average for England. This represents 2,457 stays per year. The rate of self-harm hospital stays was 291.7*, worse than the average for England. This represents 965 stays per year. The rate of smoking related deaths was 354*, worse than the average for England. This represents 420 deaths per year. Estimated levels of adult smoking are worse than the England average. Rates of sexually transmitted infections and TB are worse than average. The rate of hip fractures is better than average.

Local priorities

For more information, including locally agreed priorities for Nottingham, see www.nottinghamcity.gov.uk or <http://www.nottinghamshireinsight.org.uk/>

* rate per 100,000 population



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Population: 311,000

Mid-2013 population estimate. Source: Office for National Statistics.

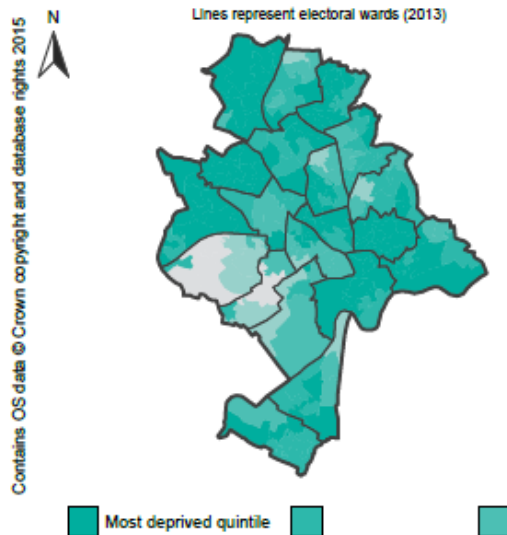
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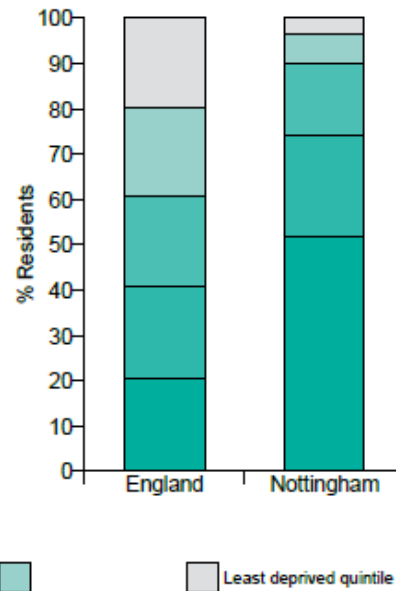
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Deprivation: a national view

The map shows differences in deprivation in this area based on national comparisons, using quintiles (fifths) of the Index of Multiple Deprivation 2010, shown by lower super output area. The darkest coloured areas are some of the most deprived neighbourhoods in England.



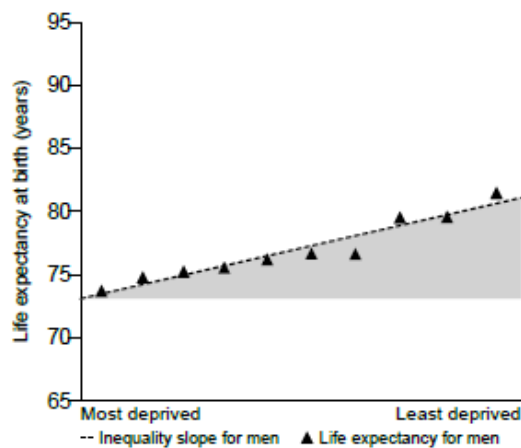
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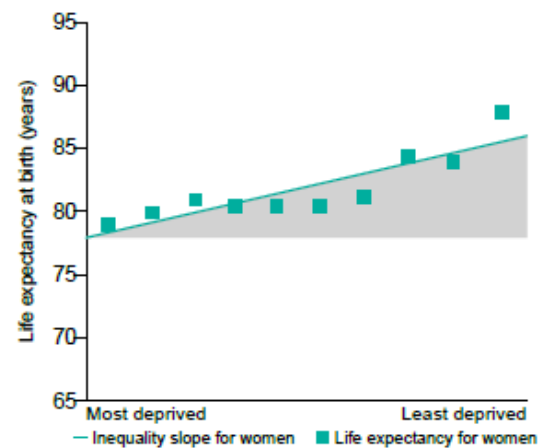
Life expectancy: inequalities in this local authority

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Life expectancy gap for men: 8.0 years

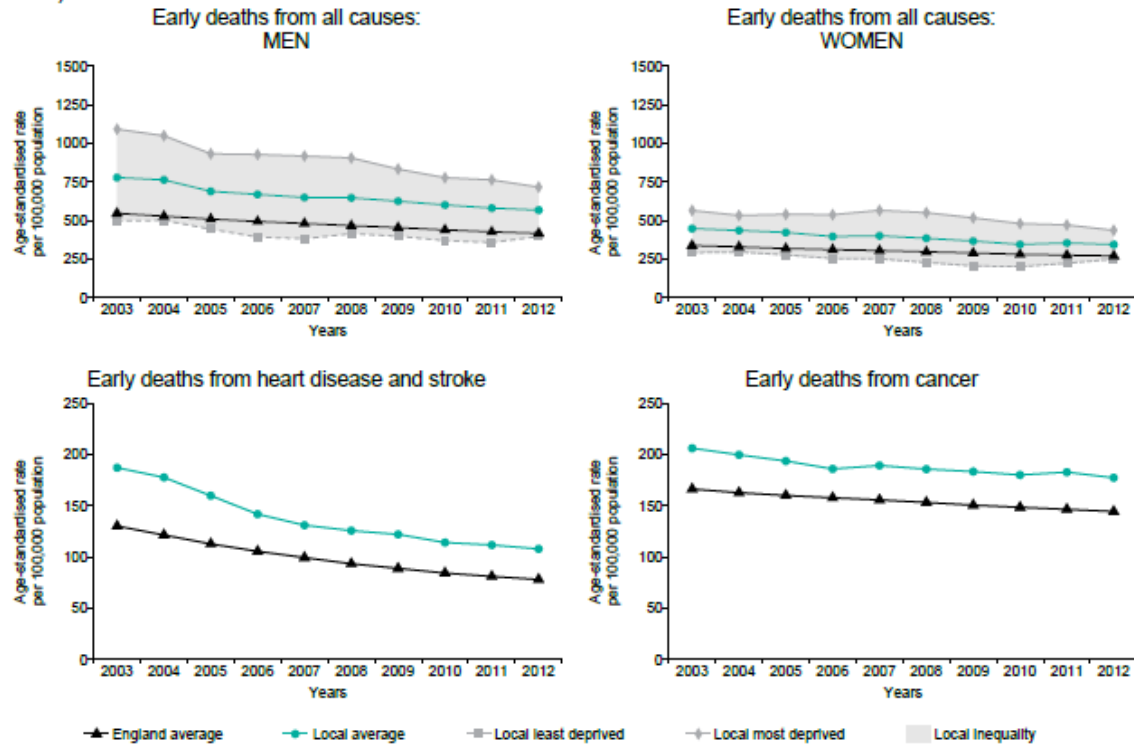


Life expectancy gap for women: 8.0 years



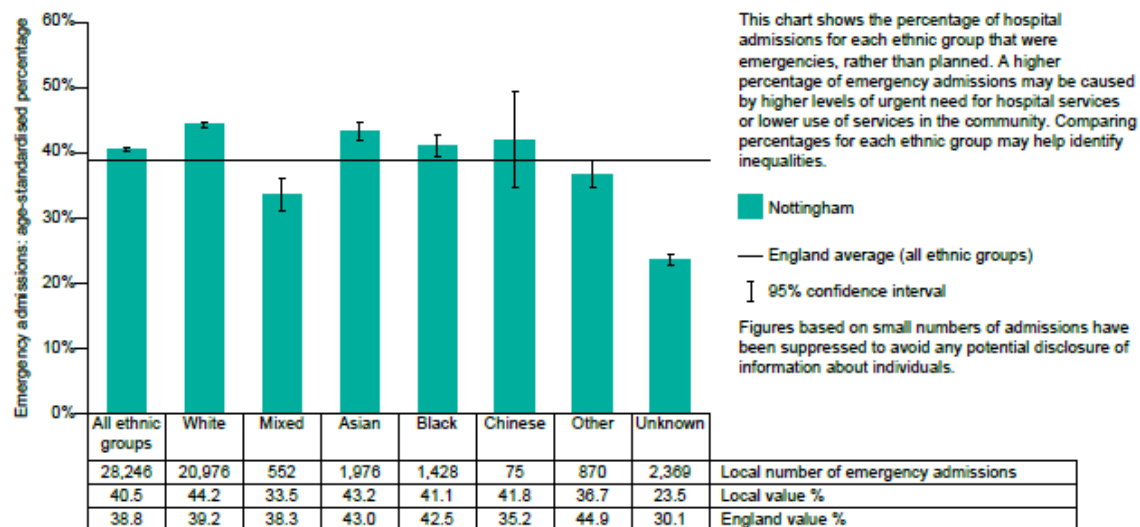
Health inequalities: changes over time

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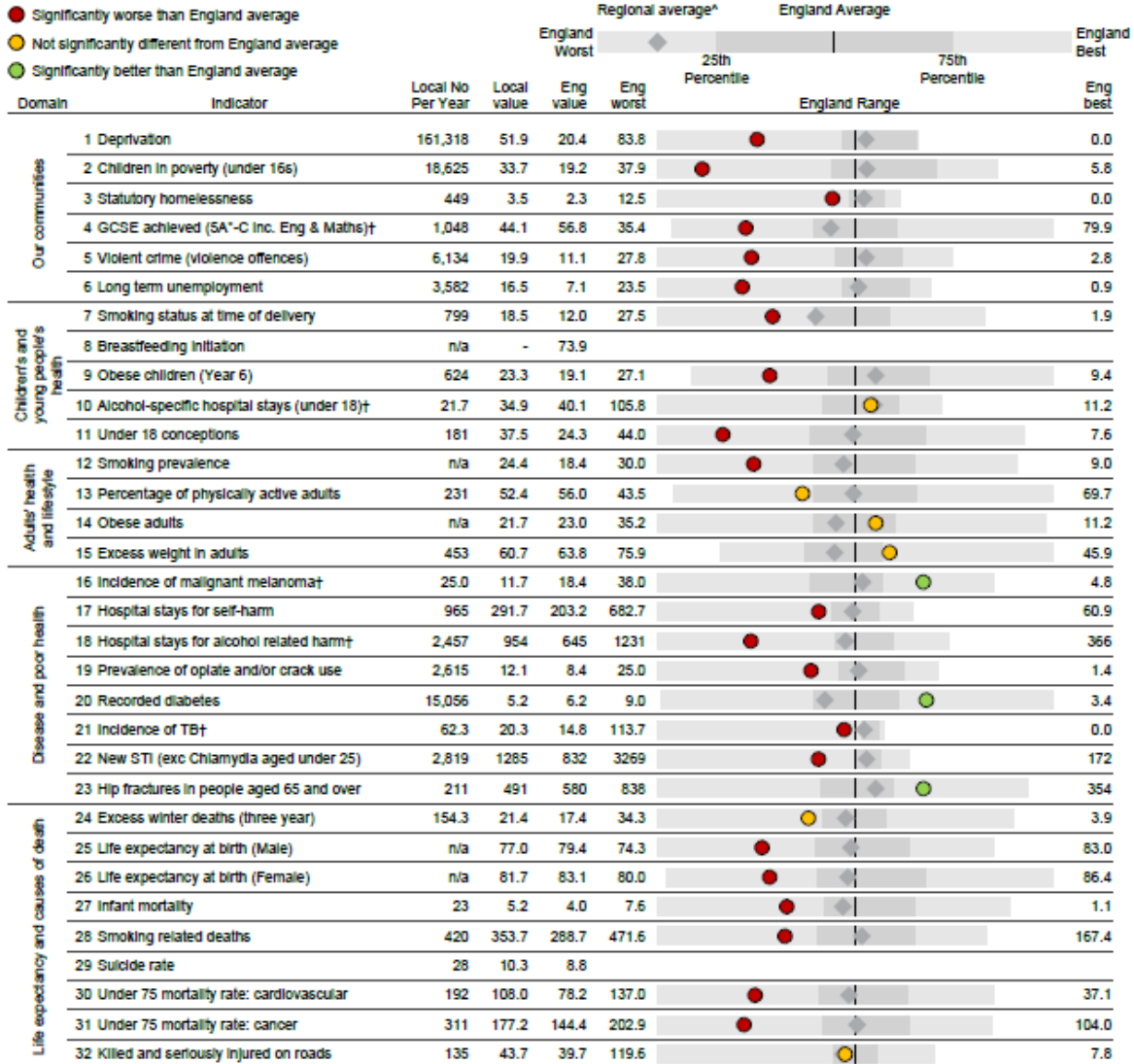
Health inequalities: ethnicity

Percentage of hospital admissions that were emergencies, by ethnic group, 2013



Health summary for Nottingham

The chart below shows how the health of people in this area compares with the rest of England. This area's result for each indicator is shown as a circle. The average rate for England is shown by the black line, which is always at the centre of the chart. The range of results for all local areas in England is shown as a grey bar. A red circle means that this area is significantly worse than England for that indicator; however, a green circle may still indicate an important public health problem.



Indicator notes

1 % people in this area living in 20% most deprived areas in England, 2013 **2** % children (under 16) in families receiving means-tested benefits & low income, 2012
3 Crude rate per 1,000 households, 2013/14 **4** % key stage 4, 2013/14 **5** Recorded violence against the person crimes, crude rate per 1,000 population, 2013/14
6 Crude rate per 1,000 population aged 16-64, 2014 **7** % of women who smoke at time of delivery, 2013/14 **8** % of all mothers who breastfed their babies in the first 48hrs after delivery, 2013/14 **9** % school children in Year 6 (age 10-11), 2013/14 **10** Persons under 18 admitted to hospital due to alcohol-specific conditions, crude rate per 100,000 population, 2011/12 to 2013/14 (pooled) **11** Under-18 conception rate per 1,000 females aged 15-17 (crude rate) 2013 **12** % adults aged 18 and over who smoke, 2013
13 % adults achieving at least 150 mins physical activity per week, 2013 **14** % adults classified as obese, Active People Survey 2012 **15** % adults classified as overweight or obese, Active People Survey 2012 **16** Directly age standardised rate per 100,000 population, aged under 75, 2010-12 **17** Directly age sex standardised rate per 100,000 population, 2013/14 **18** The number of admissions involving an alcohol-related primary diagnosis or an alcohol-related external cause, directly age standardised rate per 100,000 population, 2013/14 **19** Estimated users of opiate and/or crack cocaine aged 15-64, crude rate per 1,000 population, 2011/12 **20** % people on GP registers with a recorded diagnosis of diabetes 2013/14 **21** Crude rate per 100,000 population, 2011-13, local number per year figure is the average count **22** All new STI diagnoses (excluding Chlamydia under age 25), crude rate per 100,000 population, 2013 **23** Directly age and sex standardised rate of emergency admissions, per 100,000 population aged 65 and over, 2013/14 **24** Ratio of excess winter deaths (observed winter deaths minus expected deaths based on non-winter deaths) to average non-winter deaths 01.08.10-31.07.13 **25**, **26** At birth, 2011-13 **27** Rate per 1,000 live births, 2011-13 **28** Directly age standardised rate per 100,000 population aged 35 and over, 2011-13 **29** Directly age standardised mortality rate from suicide and injury of undetermined intent per 100,000 population, 2011-13 **30** Directly age standardised rate per 100,000 population aged under 75, 2011-13 **31** Directly age standardised rate per 100,000 population aged under 75, 2011-13 **32** Rate per 100,000 population, 2011-13

† Indicator has had methodological changes so is not directly comparable with previously released values. * "Regional" refers to the former government regions.

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Erewash Borough Health Profile 2015

Appendix 3 – District and Borough Health Profiles

[Ashfield District Health Profile 2015](#)

[Bassetlaw District Health Profile 2015](#)

[Broxtowe Borough Health Profile 2015](#)

[Gedling Borough Health Profile 2015](#)

[Mansfield District Health Profile 2015](#)

[Newark & Sherwood District Health Profile 2015](#)

[Pushcliffe Borough Health Profile 2015](#)

Appendix 4 - Summary of Local Plan and supporting documents and other plans/strategy elements relevant to health and wellbeing in Nottinghamshire and Erewash January 2016

Planning Authority	Type of document	Commentary	Elements relevant to health
<p style="writing-mode: vertical-rl; transform: rotate(180deg);">Page 102</p> <p>Ashfield</p>	<p>Adopted Local Plan</p>	<p>Out of date (adopted 2002), but only existing policy in place following withdrawal of replacement Local Plan Submission in 2014. Majority of policies 'saved' past 2007.</p> <p>No policies explicitly on health, but a range of policies could be considered to have an impact on health – examples listed opposite, others may have less direct links.</p>	<p>HG3 Housing Density sets differing density levels depending on walking distance to district centres/transport stations.</p> <p>HG5 New Residential Development sets criteria for new residential to meet. Includes reference to amenity, overlooking, privacy and security, adequate private garden space, safe and convenient access that is integrated with existing provision, parking standards and appearance, scale and siting.</p> <p>HG6 Public Open Spaces in New Residential Development sets out required levels of provision of open space, differing by size of the site/proposal. Allows for provision off site/obligations if needs cannot be met onsite.</p> <p>HG8 Residential Care Facilities, Houses in Multiple Occupation, Bedsits, Flats and Hostels sets criteria for such developments. Includes reference to amenity, for residential care homes adequate outlook from bedrooms and communal areas, privacy, safe and convenient access for all, parking standards and appearance, scale and siting.</p> <p>TR2 Cycling provision in New Developments requires all proposals to which cyclists would reasonably expect to have access to provide safe and convenient cycle access, links with existing or proposed cycle routes where appropriate and cycle parking facilities.</p> <p>TR3 Pedestrians and People with Limited Mobility requires all proposals to which the public would reasonably expect to enjoy access to provide safe and convenient access by all pedestrians and people with limited mobility.</p> <p>RC1-2, 4 Identify new areas of formal/informal open space and list existing spaces to be protected from development (other than associated recreational uses)</p>

		<p>RC3 Formal Open Space restricts development that would result in the loss of such area, applying a range of criteria to ensure continued use/provision of equivalent space or facilities. Includes reference to the use of conditions and obligations to secure provision.</p> <p>RC5 Allotments seeks to protect used allotments from being lost.</p> <p>RC6 Safeguards an area of land for provision of indoor leisure facilities</p> <p>RC8 Recreational Routes protects footpaths, cycleways, bridleways, disused railway lines and other corridors of land with potential for recreational routes from development. Allows for acceptable alternative routes to be provided.</p> <p>RC9 Community Services protects sites required for educational, social, health, community and religious facilities from other development unless adequate replacement provision is made or there is no longer a need for the facility.</p>
Emerging Local Plan	Withdrawn prior to examination in 2014. Included a HIA.	n/a
Evidence base documents Supporting documents	Evidence was prepared for the emerging Local Plan. Following its withdrawal some documents are being updated.	The Nottinghamshire Joint Strategic Needs Assessment and Health and Wellbeing Strategy are listed under 'Health'. See details below, under Nottinghamshire.
Statement of Community Involvement	Revised Draft for Consultation, August 2015 replaced version from 2013.	<p>'Primary Care Trust established under section 18 of the National Health Act 2006 or continued in existence by virtue of that section' is listed in Appendix 2 as both a Statutory Consultee and Duty to Cooperate Body (Page 25). A note states 'Where bodies listed cease to exist, successor bodies will be consulted.'</p> <p>Paragraph 4.4 states that 'The Council has identified the specific consultation bodies that must be included at various stages of the involvement process and these are set out in Appendix 2.'</p> <p>'NHS Nottinghamshire County (Primary Care Trust)' and 'Nottinghamshire Healthcare NHS Trust' are listed in Appendix 3 as Other Consultees – General Consultation Bodies. A note states 'Where bodies listed cease to exist, successor bodies will be consulted.'</p>

			Paragraph 4.3 states that 'The Council has identified bodies that will be consulted as the Council consider appropriate, as set out in Appendix 3. This may take the form of regular notification or general discussions in relation to issues, as may be appropriate.'
	Sustainable Community Strategy	Joint Strategy with Mansfield District Council	Includes seven 'priority themes'. 'Health and Wellbeing' Future priorities: <ol style="list-style-type: none"> 1. Obesity – reducing levels of obesity in both children and adults by increasing levels of physical activity and healthy eating 2. Smoking – continuing to reduce levels of smoking – still the biggest cause of premature death. Targeting reductions in smoking during pregnancy. 3. Substance misuse – reducing the number of people harmed by alcohol consumption and the use of other drugs. This priority is also a feature of community safety, children and young people and stronger communities 4. Teenage pregnancy and sexual health – reducing teenage pregnancy levels and continuing to improve sexual health in young people 5. Mental health – improving mental health and wellbeing and expanding services to prevent illness, provide better access to treatment and to remove the stigma often associated with it 6. Access to services – ensuring people can access health care as easily as possible and developing ways of using the workplace and other non-medical settings to provide some services. The development of a range of clinical and community wellbeing services at the Ashfield Health Village will also be a priority. The document notes that 'These priorities cut across most other themes in this document.'
	Neighbourhood Plans	Area designated - Selston Neighbourhood Plan Area was designated in December 2013 - Teversall, Stanton Hill & Skegby Neighbourhood Plan Area was designated in February 2015	n/a
Bassetlaw	Adopted Core Strategy (2011)	Site Allocations Document element withdrawn December 2014. No Core Strategy policies explicitly on health, but a range of	CS2 – 9 set out the strategy for different settlements in the District. The policies include reference to the need for all new development to make strong connections with the existing town and surrounding communities, as well as providing the facilities necessary to support a new community (including open space and play facilities, community facilities, local retail facilities and transport improvements). DM4: Design and character set assessment criteria for different types of development. It includes reference to creating functional and physical links with existing settlement and surrounding areas,

		<p>policies could be considered to have an impact on health – examples listed opposite, others may have less direct links.</p>	<p>providing improved range of houses, services, facilities, open space and economic development opportunities, support stimulating and safe streets and public spaces, provide useable and functional open space, accessibility for all through and in to the development, prioritise pedestrian movements, amenity, privacy, highway safety and climate change/carbon reduction (including natural light and ventilation).</p> <p>DM5: Housing mix and density includes support for housing for the elderly, including supported and specialist accommodation. Densities are set in relation to, amongst other factors, accessibility and public transport.</p> <p>DM9: Green infrastructure, biodiversity and geodiversity, landscape, open space and sports facilities seeks to protect and enhance these elements. It allows for alternative provision if necessary. In relation to open space and sports facilities it also requires contributions for making improvements and on-going maintenance to meet local deficiencies in provision (where no on-site provision is made).</p> <p>DM11: Developer contributions and infrastructure provision lists that obligations may include <i>'Healthcare (e.g. additional GP places, new facilities)'</i></p> <p>DM13: Sustainable transport promotes the minimisation of private car travel and the provision of linkages to and new footways, cycle paths and bridleways to access local facilities.</p>
	Emerging Local Plan	<p>Currently at the very early stages of preparing a new Local Plan. Latest consultation was a 'call for sites' in 2015. Development of a new evidence base and various stages of consultation to take place until 2018, with submission due April 2018.</p>	n/a
	Evidence base documents Supporting documents	<p>Supplementary Planning Documents:</p> <ul style="list-style-type: none"> - Affordable Housing - Residential Design ('Successful Places') - Residential Parking Standards 	<p>'Successful Places SPD' (2013) prepared jointly with Chesterfield Borough Council, Bolsover District Council and North East Derbyshire District Council. Recognises/promotes:</p> <ul style="list-style-type: none"> - The impact that design of places and of buildings themselves can have an impact on health. - Active journeys (part of sustainable transport) can have health benefits - Proposals that integrate blue and green infrastructure have health benefits - Poor design can generate ongoing costs in terms of the provision of health care

	- Shopfronts and Signage Evidence base for Core Strategy is out of date now and in the process of being replaced (as set out above). Currently nothing relating to health.	
Statement of Community Involvement	Revised August 2009	Bassetlaw Primary Care Trust listed in paragraph 4.6 as a 'consultation body' for consultation on development plan documents.
Sustainable Community Strategy	2010-2020	<p>The Strategy sets out eight ambitions. The following have the most direct links to health and health services.</p> <p>'Healthier Communities' The priorities for the ambition are:</p> <ul style="list-style-type: none"> • Reduce smoking prevalence within the population, reduce impact of second hand smoke • To reduce prevalence of obesity within the population • To reduce sexual health infection rates within the Bassetlaw population • Address the adverse effects of alcohol on the population of Bassetlaw • To improve emotional health and well-being and social inclusion • To promote health, well-being and active life in older age in Bassetlaw • To deliver on cross-cutting themes of importance to health in Bassetlaw <p>'Accessible Communities' Priorities:</p> <ul style="list-style-type: none"> • Monitor and influence the transport to health project in Bassetlaw • Maintain and develop existing transport and accessibility services for Bassetlaw • Identify and address gaps in service provision <p>'Supporting children and young people' Priorities:</p> <ul style="list-style-type: none"> • Improve and support emotional well-being of children and young people and promote positive mental health • Reduce the number of teenage pregnancies and support young mothers • Support parents and encourage positive relationships while enabling involvement in children/young people's development • Reduce the prevalence of childhood obesity and promote healthy living • Increase the aspirations of young people and support increased attainment and positive contribution

			<ul style="list-style-type: none"> • Ensure the safety of children and young people and reduce the risks to children and young people • Support disabled children, young people and their families and those transitioning to adult care/those in respite care. <p>‘Sustainable Communities’ Priorities:</p> <ul style="list-style-type: none"> • Reduce, re-use, recycle • Promotion/awareness raising of environmental issues • Conserve and expand area of open green space • Achieve cleaner and greener public spaces
	Neighbourhood Plans	<p>Adopted</p> <ul style="list-style-type: none"> - Harworth & Bircotes December 2015 - Elkesley November 2015 <p>Referendum</p> <ul style="list-style-type: none"> - Sturton Ward 11th February 2016 <p>Consultation stages</p> <ul style="list-style-type: none"> - Clarborough Welham Draft 2015 - Cuckney Draft July 2015 - Shireoaks Draft January/February 2016 - Tuxford Draft February 2016 <p>Area designated</p> <ul style="list-style-type: none"> - Carlton-in-Lindrick June 2015 - East Markham March 2014 - Everton November 2015 - Hayton October 2013 	<p>Harworth & Bircotes Neighbourhood Plan includes discussion of the higher levels of health deprivation in the area compared to the national average. It talks of the links between good health from incidental exercise and being able to access green space. The provision of green space is covered in various parts of the plan. One of the objectives of the plan is to develop a new footpath and cycle network linking the new and old housing developments to services and facilities in the town. Another seeks to safeguard and provide new communities facilities, open spaces and public transport. These objectives are reflected throughout the policies of the plan.</p> <p>A key driver of the Elkesley Neighbourhood Plan is ensuring the maintenance and where possible improvement of community facilities which are considered to be under threat because of the aging population. The objectives of the plan are therefore to promote enough make community facilities viable, to provide a mix of housing, to provide local employment and to protect and enhance open space and non-vehicular routes.</p>

		<ul style="list-style-type: none"> - Hodsock November 2015 - Misson March 2015 - Mattersey November 2015 - Rhodesia July 2015 - Sutton June 2015 - Treswell November 2015 - Ranskill application to designate submitted January 2016 	
Page 108	Adopted Local Plan	Broxtowe 2004 Local Plan (Saved Policies)	<p>Policy K4 relates to town and seeks to ensure, amongst other criteria, for new development to enable accessibility particularly by public transport, foot and bicycle.</p> <p>Policy E1 'Good Design' – seeks to ensure new development is of high standards, well designed, is safe and secure, minimises waste and provide open space.</p> <p>Policy T9 'Pedestrian Routes and Facilities' seeks to ensure the needs of pedestrians in new developments are met in terms of linkages to the wider environment.</p> <p>Policy T12 'Facilities for People with limited mobility' – seeks to ensure new development is well designed, convenient and safe.</p> <p>Policy RC1 'Leisure Facilities' – proposals should be located in relation to the community it serves link to public transport and make provision for walking and safe parking.</p> <p>Policy RC2 'Community & Education Facilities' - proposals should be located in relation to the community it serves and link to public transport and make provision for walking and safe parking.</p>
	Adopted Core Strategy	Greater Nottingham: Broxtowe BC, Gedling BC and Nottingham City Aligned Core Strategy (ACS) Part 1 Local Plan (Sept 2014) (2011-2028)	<p>Strategic Objective viii – Health & Wellbeing seeks to create the conditions for a healthier population by addressing environmental factors underpinning health and wellbeing, working with healthcare partners to deliver new and improved health and social care facilities, integrate health and service provision and improving access to cultural, sport leisure and lifelong learning activities.</p> <p>Policy 8: Housing Size, Mix and Choice – provides a general approach to housing to ensure new development provides for a good mix of size and tenures and are located within sustainable, inclusive and mixed communities and giving emphasis to the needs of the aging population and affordable dwellings.</p> <p>Policy 10: Design and Enhancing Local Identity – seeks to ensure new development makes a positive contribution to the public realm and sense of place, creates an attractive, safe, inclusive and</p>

		<p>healthy environment, meets population needs and is adaptable for future residents and has regard to local context.</p> <p>Policy 12: Local Services and Healthy Lifestyles – seeks to provide, where there is evidence to do so, new community facilities within existing centres, in accessible locations and, where possible alongside existing community facilities.</p> <p>Policy 13: Culture, Tourism and Sport – seeks to support existing facilities.</p> <p>Policy 14: Managing Travel Demand – relates to the provision of sustainable transport, particularly providing for public transport, walking and cycling, having regard to the needs of people with mobility difficulties.</p> <p>Policy 16: Green Infrastructure, Parks and Open Space – seeks to enhance/protect existing facilities, provide links to enhance recreational opportunities and provide wellbeing opportunities for all.</p>
Emerging Local Plan	Site Allocations and Development Management Policies Plans	n/a
Evidence base documents Supporting documents		n/a
Statement of Community Involvement	2009 Revision	'Broxtowe and District Primary Care Trust' is listed as a Specific Consultation Body (as Health Authority) in the List of Consultation Bodies in Appendix 3. Specific consultation bodies are mentioned throughout the document in relation to consultation on plan production. In terms of consultation on planning applications the document refers to statutory consultees and refers the reader to Appendix 3. Appendix 3 contains no reference to statutory consultees. It is assumed therefore that statutory and specific mean one in the same in this instance and that the PCT are listed as a consultation body for planning applications as a result.
Sustainable Community Strategy	2010-2012	<p>Sets out seven areas with priorities. Most relevant to health include:</p> <p>'Healthy Living' for which the priorities are:</p> <ul style="list-style-type: none"> - Reduce health inequalities - Reduce harm caused by alcohol and tobacco - Halt the rising trend of obesity - Improve mental health - Promote independence of older people and vulnerable groups

			<p>'Children and young people' Priorities:</p> <ul style="list-style-type: none"> - Emotional health of children and young people - Positive activities for young people - Supporting the teenage pregnancy strategy - Supporting the childhood obesity strategy - Support for young people to achieve through education, employment or training - Child poverty
	Neighbourhood Plans	<p>Area designated</p> <ul style="list-style-type: none"> - Awsworth November 2015 - Brinsley November 2015 - Eastwood August 2015 - Greasley August 2015 - Kimberley October 2015 - Nuthall August 2015 - Stapleford November 2015 	n/a
Gedling	Adopted Local Plan	Gedling BC Replacement Local Plan (July 2005)	<p>Policy ENV1' Development Criteria' – seeks to ensure new development is well designed, does not adversely affect amenity, is safe, provides convenient access for pedestrians, meets the needs of disabled people and young children and is comprehensive.</p> <p>Policy H7 Residential Development on Unidentified Sites within the Urban Area and the Defined Village Envelopes' – seeks to ensure new development is well designed and provides for open space.</p> <p>Policy H16 'Design of Residential Development' – new development should be well designed, provide access to roads, footpaths and open scale safely, be energy efficient and not adversely affect the wider environment.</p> <p>Policy C1 'Community Services General principles' – seeks to ensure new development is located within local/district centres and is easily accessible to local residents.</p> <p>Policy R1 'Protection of Open Space' – seeks to ensure OS is protected where not required.</p> <p>Policy R3 'Provision of Open Space with New Residential Development' – seeks to provide adequate OS in new development to meet the needs of the proposal through S106.</p>

		Policy R5 'Allotments' – seeks to protect such assets where possible.
Adopted Core Strategy	Greater Nottingham: Broxtowe BC, Gedling BC and Nottingham City Aligned Core Strategy (ACS) Part 1 Local Plan (Sept 2014) (2011-2028)	<p>Strategic Objective viii – Health & Wellbeing seeks to create the conditions for a healthier population by addressing environmental factors underpinning health and wellbeing, working with healthcare partners to deliver new and improved health and social care facilities, integrate health and service provision and improving access to cultural, sport leisure and lifelong learning activities.</p> <p>Policy 8: Housing Size, Mix and Choice – provides a general approach to housing to ensure new development provides for a good mix of size and tenures and are located within sustainable, inclusive and mixed communities and giving emphasis to the needs of the aging population and affordable dwellings.</p> <p>Policy 10: Design and Enhancing Local Identity – seeks to ensure new development makes a positive contribution to the public realm and sense of place, creates an attractive, safe, inclusive and healthy environment, meets population needs and is adaptable for future residents and has regard to local context.</p> <p>Policy 12: Local Services and Healthy Lifestyles – seeks to provide, where there is evidence to do so, new community facilities within existing centres, in accessible locations and, where possible alongside existing community facilities.</p> <p>Policy 13: Culture, Tourism and Sport – seeks to support existing facilities.</p> <p>Policy 14: Managing Travel Demand – relates to the provision of sustainable transport, particularly providing for public transport, walking and cycling, having regard to the needs of people with mobility difficulties.</p> <p>Policy 16: Green Infrastructure, Parks and Open Space – seeks to enhance/protect existing facilities, provide links to enhance recreational opportunities and provide wellbeing opportunities for all.</p>
Emerging Local Plan		
Evidence base documents Supporting documents		
Statement of Community Involvement	Statement of Consultation 2013	States that statutory consultees, as defined in Schedule 5 of the Town and Country Planning (Development Management Procedure) (England) Order 2010 will be consulted on planning applications. This order was replaced by the 2015 order of the same name and the bodies are now

		(Draft; final version not on website)	<p>listed in Schedule 4. The Health and Safety Executive is listed as a consultee in certain circumstances.</p> <p>States that statutory consultees, as defined in the Town and Country Planning (Local Development) (England) Regulations 2012 will be consulted on development plan production. This defines the specific consultation bodies, which includes the PCT.</p>
	Sustainable Community Strategy	2009-2026	<p>Includes five priorities to 'inspire action':</p> <ul style="list-style-type: none"> - Safer and stronger communities living together in Gedling Borough - A fairer, more involved Gedling Borough - A well looked after environment that meets the present and future needs of Gedling Borough - Healthy and active lifestyles in Gedling Borough - Contributing to a vibrant and prosperous Greater Nottingham
	Neighbourhood Plans	Area designated - Calverton January 2013	n/a
Page 112	Mansfield Adopted Local Plan	Mansfield DC Local Plan 1998	<p>Policy BE1 'New Development' – seeks to ensure that new development is well designed and integrates with the natural environment.</p> <p>Policy H2 'Locations for Housing Development' – new development should be well designed, fit well within their surroundings, provides easy access to public transport and is safe and convenient.</p> <p>LT2 'Public Open Space' – seeks to prevent the loss of POS.</p> <p>LT3 'Amenity Open Space' – seeks to prevent the loss of AOS.</p> <p>LT6 'Allotment Gardens' – seeks to prevent loss of such assets.</p> <p>LT10 - seeks to prevent the loss of POS and sports pitches where necessary.</p> <p>ECH1 'Community Facilities' – seeks to permit such development provided is easily accessible, has regard for safety, is well integrated with its surroundings and is within an urban boundary.</p>
	Emerging Local Plan	Draft MDC Local Plan (2016) – consultation January – February 2016	<p>Draft Objective 3 – seeks to ensure residents have good access to a range of facilities which provide high quality health benefits.</p> <p>Draft Objective 5 – seeks to ensure MDS is safe, clean, green and of a high quality in order to deliver improvements to health and economic wellbeing.</p>

Draft Policy S1 'Sustainable Development' – proposals will be supported where, amongst other criteria, they make a positive contribution to the health and wellbeing of the community and environment.

Draft Policy S9 'Development in the Countryside' – new community and leisure facilities should provide a clear local community benefit.

Draft Policy S14 'Hot food takeaways'

Planning permission will be granted for hot food takeaways (use class A5) provided that:

- a. they are not within 400m* of an access point to any school or college
- b. they would not harm residential amenity in terms of: noise, vibration, odour, traffic disturbance, litter or hours of operation
- c. they address any concerns in relation to crime and anti-social behaviour
- d. if in the primary shopping frontage (as defined by Policy MCA5), it can be demonstrated that the proposal will have a positive impact upon both the town centre's daytime and evening economies.

*400m radius around the proposal - based on an approximate ten minute walking time.

Draft Policy MAC3 'Accessing the Town Centre' – pedestrian and cyclist access should be improved, GI networks should be opened up, where appropriate.

Draft Policy MCA5 'Primary Shopping Areas' –
The primary shopping area, as defined on the policies map, is made up of primary and secondary frontages as detailed in Part A and Part B of this policy.

- a. Primary frontages

Planning permission will be granted for Class A uses at ground floor level within primary frontages. To ensure the vitality and viability of the primary frontages and wider town centre, development proposals within primary frontages should:

- i. not result in more than 25 per cent of ground floor units in any defined primary frontage of the centre being in non-A1 use
- ii. not result in the loss of prominent units from A1 use, unless clear advantages can be demonstrated
- iii. maintain an active frontage(s) to the unit, such as a display of visual interest, or views into the unit
- iv. not create a continuous frontage of three or more units in non-A1 uses
- v. not include drinking establishments or hot-food takeaways (Classes A4 or A5), unless it can be demonstrated that proposals will have a positive impact upon both the town centre's daytime and evening economies.

			<p>b. Secondary frontages</p> <p>Planning permission will be granted for Class A uses at ground floor level within secondary frontages. To ensure the vitality and viability of the town centre, development proposals within secondary frontages should:</p> <ul style="list-style-type: none"> i. not result in more than 50 per cent of ground floor units in any defined secondary frontage of the centre being in non-A1 use ii. not result in the loss of prominent units from A1 use, unless clear advantages can be demonstrated iii. maintain an active frontage(s) to the unit, such as a display of visual interest, or views into the unit iv. not create a continuous frontage of four or more units in non-A1 uses. <p>Development proposals within secondary frontages for other town centre uses that positively contribute to the broadening of the town centre’s daytime and evening economies, particularly uses which are family orientated, will be supported as valuable additions to the vitality and viability of the town centre.</p> <p>Draft Policy ST1 ‘Protecting and Improving our Sustainable Transport Network’- seeks to enhance the existing network including new pedestrian and cycle networks.</p> <p>Draft Policy NE2 ‘Green Infrastructure’ – development will be permitted where they provide GI benefits, these include health and wellbeing, transport and accessibility, social cohesion and climate change adaptation.</p> <p>Draft Policy NE3 ‘Protection of community open space’ – seeks to prevent the loss of such assets, unless it can be demonstrated that they are no longer required.</p> <p>Draft Policy NE4 ‘Allotments’ – seeks to prevent the loss of such assets, unless it can be demonstrated that they are no longer required.</p> <p>Draft Policy NE9 ‘Air Quality’ – seeks to prevent development that would have negative health impacts.</p> <p>Draft Policy ID1 – Infrastructure Delivery’ – seeks to ensure new development provides for adequate and appropriate infrastructure as a result of development which meets the need of the community.</p>
	<p>Evidence base documents Supporting documents</p>	<p>A number of documents have been produced, to support the emerging Local Plan. However,</p>	<p>n/a</p>

		none are specific to health, although the topics covered will have an influence on health in the district.	
	Statement of Community Involvement	2015	<p>The Health and Safety Executive is listed as a statutory and non-statutory consultee for planning applications (dependent on the nature of the application).</p> <p>Section 17 of the document details the stages of Plan production and the relevant regulations relating to each stage (from the Town and Country Planning (Local Planning) (England) Regulations 2012. Within this there is reference to the specific bodies, which includes the PCT.</p>
	Sustainable Community Strategy	Joint Strategy with Mansfield District Council	<p>Includes seven 'priority themes'. 'Health and Wellbeing' Future priorities:</p> <ol style="list-style-type: none"> 1. Obesity – reducing levels of obesity in both children and adults by increasing levels of physical activity and healthy eating 2. Smoking – continuing to reduce levels of smoking – still the biggest cause of premature death. Targeting reductions in smoking during pregnancy. 3. Substance misuse – reducing the number of people harmed by alcohol consumption and the use of other drugs. This priority is also a feature of community safety, children and young people and stronger communities 4. Teenage pregnancy and sexual health – reducing teenage pregnancy levels and continuing to improve sexual health in young people 5. Mental health – improving mental health and wellbeing and expanding services to prevent illness, provide better access to treatment and to remove the stigma often associated with it 6. Access to services – ensuring people can access health care as easily as possible and developing ways of using the workplace and other non-medical settings to provide some services. The development of a range of clinical and community wellbeing services at the Ashfield Health Village will also be a priority. <p>The document notes that 'These priorities cut across most other themes in this document.'</p>
	Neighbourhood Plans	Area designated - Warsop December 2013	n/a
Newark and Sherwood	Adopted Core Strategy	Newark and Sherwood LDF Core Strategy DPD (March 2011) to 2026	<p>Vision states that, "...encouraging personal wellbeing and health"</p> <p>Spatial Policy 7 – seeks to encourage and support development which promotes improved and integrated network, with the emphasis on non-car modes. This includes providing safe and convenient access for all and the provision of high quality, safe cycle, footpath and bridleways.</p>

		Allocations and Development Management DPD (July 2013)	<p>Spatial Policy 8 – seeks to protect and promote leisure and community facilities.</p> <p>Core Policy 11 - seeks to promote rural accessibility to services, facilities and employment.</p> <p>Core Policy 12 – seeks to ensure access to Green Infrastructure.</p> <p>There are a number of site specific policies which seek to ensure that new development provides sustainable access, public open space, access to services and facilities, education and retail.</p> <p>DM5 relates to design and seeks to ensure new development is safe and inclusive in terms of access, provide sufficient amenity space, relates to local distinctiveness and character, incorporates or provide access to trees, woodland and Green Infrastructure, does not exacerbate crime, and protects and enhances ecology.</p>
Emerging Local Plan	Local Plan Review is taking place 2015 -216, incorporating a Gypsy and Travellers Development Plan Documents. A consultation on an Issues Paper was completed October – November 2015.	n/a	
Evidence base documents Supporting documents	<p>The Local Plan Review is supported by an Integrated Impact Assessment, which includes a Health Impact Assessment.</p> <p>Other supporting documents have been produced, but none are specifically on health, although the topics that they cover will have impact on health.</p>	The Integrated Impact Assessment Scoping Report discusses the processes that will contribute to the assessment. It identifies all relevant plans, programmes and policies, establishes baseline information, defines the sustainability, equality and health issues of the area and objectives in these regards, creates the framework for the assessment and sets out how to progress to the full assessment.	

	Statement of Community Involvement	Draft SCI review 2015 (final version not yet available)	NHS England and local NHS are listed as a specific consultees in Appendix 4, in relation to local plan production. There is no reference to specific consultation bodies for planning applications.
	Sustainable Community Strategy		
	Neighbourhood Plans	<p>Consultation stages</p> <ul style="list-style-type: none"> - Southwell Draft January 2016 <p>Area designated</p> <ul style="list-style-type: none"> - Farnsfield June 2014 - Kings Clipstone June 2014 - Thurgaton March 2015 - Kneesall, Kersall and Ompton March 2015 - Epperstone April 2015 - Fernwood May 2015 	n/a
Rushcliffe Page 117	Adopted Local Plan	Rushcliffe Borough Council Local Plan Part 1: Core Strategy (Dec 2014)	<p>Strategic Objective viii – Health & Wellbeing seeks to create the conditions for a healthier population by addressing environmental factors underpinning health and wellbeing, working with healthcare partners to deliver new and improved health and social care facilities, integrate health and service provision and improving access to cultural, sport leisure and lifelong learning activities.</p> <p>Policy 8: Housing Size, Mix and Choice - provides a general approach to housing to ensure new development provides for a good mix of size and tenures and are located within sustainable, inclusive and mixed communities and giving emphasis to the needs of the aging population and affordable dwellings.</p> <p>Policy 10: Design and Enhancing Local Identity - seeks to ensure new development makes a positive contribution to the public realm and sense of place, creates an attractive, safe, inclusive and healthy environment, meets population needs and is adaptable for future residents and has regard to local context.</p> <p>Policy 12: Local Services and Healthy Lifestyles – seeks to provide, where there is evidence to do so, new community facilities within existing centres, in accessible locations and, where possible alongside existing community facilities.</p> <p>Policy 13: Culture, Tourism and Sport – seeks to support existing facilities.</p>

			<p>Policy 14: Managing Travel Demand – relates to the provision of sustainable transport, particularly providing for public transport, walking and cycling, having regard to the needs of people with mobility difficulties.</p> <p>Policy 16: Green Infrastructure, Parks and Open Space – seeks to enhance/protect existing facilities, provide links to enhance recreational opportunities and provide wellbeing opportunities for all.</p> <p>Policies 20-25 relate to strategic development allocations and set out a number of requirements for future development on such sites, these include access to health facilities and education, sustainable transport, open space, good design, access to a mix of housing types, employment, local service centres and other environmental improvements.</p>
	Emerging Local Plan	<p>The Land and Planning Policies (LAPP) development plan document will be the second part of the Rushcliffe Local Plan.</p> <p>The first stage of consultation for the LAPP is expected to take place during winter 2015/16, with the aim that a final draft will be published around 12 months later. The draft LAPP will then undergo public examination prior to adoption, with adoption expected during 2017.</p>	n/a
	Evidence base documents Supporting documents		<p>SPD 'Development Requirements' (2003) sets out details of the contributions that maybe required as part of any new development and seeks to ensure that the full impact of development on local amenities, infrastructure and services it known.</p> <p>SPD 'Residential Design Guide' (2009) The documents provides guidance on good design principles to achieve the highest quality of development, which respect local distinctiveness.</p>

	Statement of Community Involvement	2007	<p>The Strategic Health Authority and the Department of Health (through relevant Regional Public Health Groups) are listed as a statutory consultee for plan making in Appendix C. It is noted that successor bodies will be consulted when reorganisations occur. Rushcliffe Primary Care Trust is listed in Appendix D as a non-statutory consultee.</p> <p>In terms of planning applications, no bodies are listed, but a reference is made to the statutory consultees in line with legislation. This will include the Health and Safety Executive.</p>
	Sustainable Community Strategy	2012-2016	<p>Sets out priorities to prepare for the future, the most relevant of which to health are:</p> <p>'Health issues:</p> <ul style="list-style-type: none"> - Reduce the prevalence of obesity within Rushcliffe - Raise awareness of substance misuse - Reduce the number of people who smoke
	Neighbourhood Plans	<p>Adopted</p> <ul style="list-style-type: none"> - East Leake November 2015 <p>Consultation stages</p> <ul style="list-style-type: none"> - Keyworth Draft January 2015 - Radcliffe on Trent Draft November 2015 	<p>East Leake Neighbourhood Plan seeks that services, including health facilities, be increased in line with the level of development in the area. It identifies that the current Health Centre is not sufficient and is at the end of its useable life. The desire for a new health centre is reflected in policy in the plan, including through the seeking of developer contributions. It also includes policies on topics related to health, such as open space and non-vehicular routes.</p>
Nottingham City	Adopted Local Plan	The Nottingham Local Plan 2005 (saved policies, not replaced by the ACS)	<p>ST1 Sustainable Communities seeks the development of sustainable communities, including through the provision of enhanced public spaces/open spaces network and community facility.</p> <p>H2 Density ensures that appropriate housing density is used in new development to, amongst other things, safeguarding living conditions and ensure accessibility.</p> <p>H7 Inappropriate Uses in Residential Areas prevents unacceptable impacts of living conditions of residents.</p> <p>R1 Development of Open Space seeks to prevent the loss of open space network to other development.</p> <p>R2 Open space in New Development concerns the seeking of developer contributions to deliver open space where a need is created by the development.</p> <p>R3 Access to Open Space ensures the quality and accessibility of open spaces provided in new development.</p>

			<p>R5 Playing Fields and Sports Grounds protects existing facilities of this type subject to a number of criteria.</p> <p>R6 Allotments seeks the protecting of existing facilities of this type subject to a number of criteria.</p> <p>R9 Leisure Development in Major Parks and District Parks supports development of this nature subject to a number of criteria.</p> <p>Policies CE1-3 and 6-8 Community Facilities supports the development and protection of community facilities subject to a number of criteria.</p> <p>BE6 Creation of New Pedestrian Routes in the City Centre encourages the use of conditions or obligations to ensure thoroughfares for pedestrians in developments, refurbishments or change of use in the city centre.</p> <p>BE7 Creation and improvement of Public Open Spaces in the City Centre protects existing and proposed open spaces and their connections.</p> <p>NE9 Pollution seeks to prevent developments that would generate pollutants that would cause a significant detriment to the users of the development or adjoining land or the environment.</p> <p>T2 Planning Obligations and Conditions concerns the seeking of conditions or obligations to reduce car use and secure alternative transport methods and improved facilities.</p> <p>T3 Car, Cycle and Servicing Parking sets out criteria for considering on-site parking provision. This includes consideration of accessibility to public transport.</p> <p>T11 Cycling prevents development which would prejudice the implementation of the proposed cycle routes or continuity of existing cycle routes.</p> <p>T12 Public Rights of Way protects existing rights of way.</p>
	Adopted Core Strategy	Greater Nottingham: Broxtowe BC, Gedling BC and Nottingham City Aligned Core Strategy (ACS) Local Plan Part 1 (Sept 2014) (2011-2028)	<p>Strategic Objective viii – Health & Wellbeing seeks to create the conditions for a healthier population by addressing environmental factors underpinning health and wellbeing, working with healthcare partners to deliver new and improved health and social care facilities, integrate health and service provision and improving access to cultural, sport leisure and lifelong learning activities.</p> <p>Policy 5: Nottingham City Centre seeks to maintain a prosperous, compact and accessible retail centre, that is safe and inclusive for all, sustainable for pedestrians and other modes of transport and provide suitable living conditions.</p>

			<p>Policy 8: Housing Size, Mix and Choice – provides a general approach to housing to ensure new development provides for a good mix of size and tenures and are located within sustainable, inclusive and mixed communities and giving emphasis to the needs of the aging population and affordable dwellings.</p> <p>Policy 10: Design and Enhancing Local Identity – seeks to ensure new development makes a positive contribution to the public realm and sense of place, creates an attractive, safe, inclusive and healthy environment, meets population needs and is adaptable for future residents and has regard to local context.</p> <p>Policy 12: Local Services and Healthy Lifestyles – seeks to provide, where there is evidence to do so, new community facilities within existing centres, in accessible locations and, where possible alongside existing community facilities.</p> <p>Policy 13: Culture, Tourism and Sport – seeks to support existing facilities.</p> <p>Policy 14: Managing Travel Demand – relates to the provision of sustainable transport, particularly providing for public transport, walking and cycling, having regard to the needs of people with mobility difficulties.</p> <p>Policy 16: Green Infrastructure, Parks and Open Space – seeks to enhance/protect existing facilities, provide links to enhance recreational opportunities and provide wellbeing opportunities for all.</p>
	Emerging Local Plan	Land and Planning Policies Document Local Plan Part 2. Draft Publication Version consultation January – March 2016.	<p>Contains a section on Local Services and Healthy Lifestyles:</p> <p>LS1: Food and Drink Uses and Licensed Entertainment Venues Outside the City Centre sets out a number of criteria for new food and drink premises, including a restriction on A5 (hot foot takeaway uses) from within 400m of a school.</p> <p>LS3: Safeguarding Land for Health Facilities identifies two areas of land for provision of health facilities.</p> <p>LS5: Community Facilities seeks the provision of existing facilities and the delivery on new and improved community facilities.</p> <p>Design and Enhancing Local Identity DE1: Building Design and Use sets out a range of criteria for all development, which includes a number of considerations which could impact on health (such as amenity, accessibility and adaptability).</p>

		<p>Managing Travel Demand TR2: The Transport Network seeks to prevent development that would prejudice the existing and proposed transport network (including public transport and cycleways)</p> <p>TR3: Cycling protects cycle routes</p> <p>Green Infrastructure, Parks and Open Spaces EN1: Development of Open Spaces resists development in the Open Space Network unless certain criteria are met.</p> <p>EN2: Open Space in New Development seeks the delivery of new or enhanced open space (through contributions or Community Infrastructure Levy).</p> <p>EN3: Playing fields and Sports Grounds protects existing facilities of this nature from new development.</p> <p>EN4: Allotments protects existing facilities of this nature from new development and seeks the encouragement of food growing opportunities in new developments.</p> <p>IN4: Developer Contributions includes provisions for the seeking of developer contributions to support, amongst other things, the delivery of open space and the securing of community facilities.</p>
Evidence base documents Supporting documents	A number of documents have been produced to support the emerging Land and Planning Policies document. None directly cover health, although the topics covered will impact on health.	n/a
Statement of Community Involvement	2007	<p>Chapter 3: Community involvement in the planning system – paragraph 3.8.1 gives details of the City Development Department and the quarterly meetings that are held with representatives from the PCT, Queens Medical Centre, Nottinghamshire Health Care Trust and others.</p> <p>Appendix 2: Organisations involved, lists Strategic Health Authority as a ‘Specific Consultee’ (to be consulted in local plans in line with the 2004 regulations and Department for Health as a ‘Government Department’ who will be consulted ‘where appropriate’. Under ‘General Consultees’ who will be consulted is the local planning authority consider it appropriate, the following are listed as examples: Health care providers, health support groups, Nottingham City Primary Care Trust and self-help groups.</p>

	Sustainable Community Strategy	City of Nottingham Sustainable Community Strategy 2020 'Family, Neighbourhood, City: Raising Aspirations'	<p>The document sets out three cross-cutting aims: Green – being environmentally sustainable Aspiring – raising aspirations Fair – achieving fairness and equality of opportunity It includes six strategic priorities, the most relevant of which to health are: 'Transform Nottingham's neighbourhoods'</p> <ul style="list-style-type: none"> - Every neighbourhood will have a distinctive identity and provide a great place to live, with: <ul style="list-style-type: none"> o An appropriate mix of housing, meeting the needs of young people, families and older people of all incomes o Good access to employment, public services, shops and leisure within the neighbourhood, the city centre and further afield o Attractive, clean and safe environments, including high quality, well designed and sustainable buildings, public realm and green spaces o Residents who are proud of their city, take responsibility for their communities and who respect and value their neighbours and where they live - Greater balance will be achieved in the city's housing market with an increased choice of quality housing meeting the needs of a diverse population and enabling the city to retain more of its aspiring residents. - Public service delivery will be better integrated and appropriately devolved, ensuring more accessible and responsive services for all and giving residents more control over what happens in their neighbourhoods. <p>'Family Nottingham – Ensure that all children and young people thrive and achieve'</p> <ul style="list-style-type: none"> - Children, young people and families will benefit from early and effective support and protection to empower them to overcome difficulties - More families will be strong and healthy, providing an enjoyable and safe place for children to grow up - Children and young people will be healthier, fitter, more emotionally resilient and better able to make mature decisions - All children and young people will leave school with the best skills and qualifications they can achieve and will be ready for work or further learning - Child poverty will be significantly reduced <p>'Healthy Nottingham – Improve health and wellbeing'</p> <ul style="list-style-type: none"> - People will be healthier, happier and live longer, and will feel able to achieve their potential and make a positive contribution to city life - Health inequalities between areas and social groups will be significantly reduced
	Neighbourhood Plans	Area designated - Sneinton February 2015	n/a

Erewash (Derbyshire)	Adopted Local Plan	<p>Erewash Borough Local Plan Saved policies (Amended 2014)</p> <p>A range of policies will have an impact on health, those with the most direct links are listed opposite.</p>	<p>H7 – Special Needs Housing provides for a proportion of housing developments to be designed to special needs standards (including being well served by shops, community facilities and public transport).</p> <p>H9 – Section 106 Planning Obligations – Housing Sites sets out how contributions will be sought to ensure that facilities (including specific reference to health care) can be provided to meet the demand arising from new residential development.</p> <p>H12 – Quality and Design includes a number of criteria for housing development, some elements of which will impact on health.</p> <p>T5 – Disused transport routes sets out criteria regarding development in such locations, one of which is the need to protect and maintain a continuous route for walking, cycling or horse riding.</p> <p>T6 – Cycling seeks to provide cycling facility (through planning obligations) where possible.</p> <p>R1 – Recreational Trails promotes the development of trails for walking, riding or cycling along disused railway lines or canals.</p> <p>R2 – Rights of Way protects the existing right of way network and promotes its improvements where possible.</p> <p>R3 – Cyclepaths/Cycle Parking promotes developments of this nature where possible.</p> <p>R5 – Public Open Space, Sports Facilities and Allotments protects these existing land uses from development using a range of criteria.</p> <p>R10 – Recreation/Tourism promotes development of such facilities, subject to a number of criteria</p>
	Adopted Core Strategy	<p>Erewash Core Strategy March 2014</p> <p>Policy 12 explicitly covers healthy lifestyles, but a range of other policies could also be considered to have an impact on health – examples listed</p>	<p>One of 12 Strategic Objectives is:</p> <p>viii. Health and well being: to create the conditions for a healthier population by addressing environmental factors underpinning health and wellbeing, and working with healthcare partners to deliver new and improved health and social care facilities especially where required by new development and through the integration of health and service provision, and by improving access to cultural, leisure and lifelong learning activities.</p> <p>Policy 8: Housing Size, Mix and Choice seeks to deliver housing that creates mixed and balanced communities. It draws attention to the needs of the elderly population and accessibility issues for all (including walking, cycling and public transport).</p>

	opposite, others may have less direct links.	<p>Policy 10: Design and Enhancing Local Identity includes various criteria that influence health. Most directly, it states that all development should be designed to create an attractive, safe, inclusion and healthy environment.</p> <p>Policy 12: Local Services and Healthy Lifestyles supports new, extended or improved communities facilities and provides for the seeking of contributions where new development is of such a scale that means on site provision is not practical. It sets criteria for the location of community facilities (be central, accessible by sustainable transport modes and where possible be alongside or shared with other community facilities). The policy also encourages inter-agency working to ensure service integration and efficient use of resources.</p> <p>Policy 13: Culture, Sport and Tourism supports the provision and protection of facilities of this nature subject to certain criteria and where they are to be lost to new development, it seeks provision of suitable alternative provision.</p> <p>Policy 14: Managing Travel Demand seeks to reduce reliance on the private car and to deliver development that is readily accessible by walking, cycling and public transport.</p> <p>Policy 16: Green Infrastructure, Parks and Open Space seeks the protection and enhancement of green infrastructure and promotes that they be inclusive and multifunctional assets to address, amongst other criteria, access to leisure facilities, physical activity and well-being opportunities for local residents such as formal sports provision, educational resources and opportunities for sustainable leisure and tourism.</p> <p>Policy 18: Infrastructure sets out how the Borough Council will work in partnership with infrastructure providers, grant funders and the development industry in ensuring the necessary infrastructure is in place to support new development. It provides for the seeking of contributions from developments that give rise to the need for new infrastructure.</p> <p>Policy 19: Developer Contributions further builds on the need for development to provide contributions for the delivery and maintenance of infrastructure and facilities necessary as a result of the development. This policy also covers the Community Infrastructure Levy.</p>
	Emerging Local Plan	n/a
	Evidence base documents Supporting documents	<p>Adopted Supplementary Planning Documents:</p> <ul style="list-style-type: none"> - Design Guide - Development, Flood Risk and Aquifer Protection <p>SPD Design Guide (2006) is associated with the 2005 Local Plan. It recognises the role of the planning system in delivering good urban design that delivers safe and secure communities where people want to live, work and relax. Such communities can achieve higher quality of life, greater economic vitality and more efficient use of resources.</p>

		<ul style="list-style-type: none"> - Extending your Home - Biodiversity - Landscape - Parking Standards - Shopfront - Hazardous Substances and Installations - Developer Contributions - Ilkeston Gateway <p>Evidence for Core Strategy covers range of topics that could affect health, but nothing on health specifically.</p>	
	Statement of Community Involvement	2012 update	Appendix 2 lists the consultation bodies for local plan production. It includes reference to the 'Duty to Cooperate Bodies', which under up-to-date guidance includes the local NHS Commissioning Board. No other health bodies are listed in the Appendix.
	Sustainable Community Strategy	2014-2024	<p>Sets out four priorities, one of which is 'Health and Wellbeing', with the aim to help people to live healthy and active lifestyles from an early age, make healthy choices and reduce health inequalities. To achieve this:</p> <ul style="list-style-type: none"> - Support people to live healthy and active lifestyles - Reduce health inequalities targeting priority locations - Support ageing well and independent living of the most vulnerable <p>Support increased participation and raise the aspirations of our communities</p>
	Neighbourhood Plans	None	n/a
Nottinghamshire (County wide documents)	Adopted Waste Local Plan	<p>Adopted Nottinghamshire and Nottingham Waste Local Plan (Saved policies) 2002</p> <p>No policies specifically on health, however the policies with the most direct links are listed opposite. Given the</p>	<p>Policies W3.3, 3.4, 3.7, 3.8, 3.9 and 3.10 seek to minimise the visual, noise, odour, litter and dust impact of waste facilities on the local area.</p> <p>Policy W3.26 protects public rights of way.</p>

		nature of the plan there are less links to health than a Local Plan.	
	Adopted Waste Core Strategy	<p>Adopted Nottinghamshire and Nottingham Waste Local Plan Part 1: Waste Core Strategy (Dec 2013)</p> <p>No policies are specifically on health, however, WCS13 covers the protection of quality of life. Other policies are strategic in nature or are specific to waste management, with limited links to health.</p>	WCS13 Protecting and enhancing our environment seeks to protect the quality of life of those living or working near to waste management facilities from unacceptable impacts. It also states that opportunities should be taken where available to enhance the local environment through the provision of landscape, habitat or community facilities.
	Emerging Waste Local Plan	Emerging Nottinghamshire and Nottingham Waste Local Plan Part 2: Sites and Policies. Consultation on site selection methodology completed 2015, Preferred Approach due 2016.	
	Adopted Minerals Local Plan	<p>Adopted Minerals Local Plan (2005)</p> <p>No policies specifically on health, the most direct links are listed opposite. Limited links to health given the nature of the plan.</p>	<p>Policies M3.3, 3.4, 3.5, 3.6 and 3.7 seek to minimise the visual, noise, odour, and dust impact of mineral workings on the local area.</p> <p>Policy M3.26 protects public rights of way or seeks temporary alternatives where necessary.</p> <p>Policy M4.10 After-use – Details Required and Objectives sets out that after-use of mineral workings should be designed to maximise opportunities to enhance the environment, biodiversity and amenity of the local community.</p>
	Emerging Minerals Local Plan	Emerging Minerals Local Plan. Submission Draft consultation document (Feb-March 2016)	Policy DM1: Protecting Local Amenity protects local amenity from unacceptable impacts from minerals development in relation to, for example, air emissions, dust, noise and visual intrusion.

		<p>No policies specifically on health, however DM1 most directly relates to health, covering the protection of amenity. The restoration of minerals sites provides opportunities for public access to open space and so policies in this regard also have links to health.</p>	<p>DM7: Public Access protects existing rights of way from minerals development (seeking temporary diversions if necessary) and promotes the improvement to rights of way and provision of additional access as part of restoration schemes.</p> <p>DM12: Restoration, After-use and Aftercare promotes after-use of mineral workings to provide benefits to the local and wider community through such things as contributing to green infrastructure, improved public access and tourism.</p>
	<p>Nottinghamshire Health and Wellbeing Strategy (HWS)</p>	<p>2014-2017</p>	<p>The Strategy sets out the priorities for the Health & Wellbeing Board for Nottinghamshire to improve the health and wellbeing of its residents. The document sets out 4 key ambitions:</p> <ul style="list-style-type: none"> - A Good Start - Living Well - Coping Well - Working Together <p>To achieve the delivery of the HWS 20 priority areas, each with their own action plan for delivery, have been identified:</p> <ul style="list-style-type: none"> - Closing the gap in education attainment - Deliver integrated services for children and young people with complex needs or disabilities - Improve children and young people's health outcome through integrated commissioning of services - Provide children and young people with the early support that they need - Work together to keep children and young people safe - Improve the services to reduce drug and alcohol misuse - Increase the number of eligible people who have a Health check - Reduce sexually transmitted disease and unplanned pregnancies - Reduce the number of people who are overweight and obese - Reduce the number of people who smoke - Ensuring we have sufficient and suitable housing, particularly for vulnerable people - Improve the quality of life for carers by providing appropriate support for carers and the cared for - Improving services to support victims of domestic abuse - Provide coordinated services for people with mental ill health - Providing services which work together to support individuals with dementia and their carers - Support people with long term conditions

			<ul style="list-style-type: none"> - Supporting older people to be independent, safe and well - Supporting people with learning disabilities and Autistic Spectrum Conditions - Improving access to primary care doctors and nurses - Improving workplace health and wellbeing
	Nottinghamshire Joint Strategic Needs Assessment	Various dates, 2012 - 2015	The Joint Strategic Needs Assessment (JSNA) provides a picture of the current and future health and wellbeing needs of the local population. The form of the JSNA is currently being changed, with a move towards a shorter, topic-based interactive document. It is in a transitional phase and so comprising of both old and new styles of presenting the information. The transfer to the topic-based summaries is being made as they are completed.
	Nottinghamshire Sustainable Community Strategy	2010 – 2020	Includes six priorities for the future: <ul style="list-style-type: none"> - A greener Nottinghamshire - A place where Nottinghamshire’s children achieve their full potential - A safer Nottinghamshire - Health and well-being for all - A more prosperous Nottinghamshire - Making Nottinghamshire’s communities stronger
	Nottinghamshire Local Transport Plan	2011 – 2026 The Local Transport Plan Strategy The Implementation Plan	The plan sets out three transport goals: <ul style="list-style-type: none"> - Provide a reliable, resilient transport system which supports a thriving economy and growth whilst encouraging sustainable and healthy travel - Improve access to key services, particularly enabling employment and training opportunities - Minimise the impacts of transport on people’s lives, maximise opportunities to improve the environment and help tackle carbon emissions
Derbyshire (County wide documents)	Derbyshire Health and Wellbeing Strategy	2012-2015	The Strategy sets out five main priorities: <ul style="list-style-type: none"> - Improve health and wellbeing in early years – to give children the best start in life to help them achieve their full potential and benefit them throughout their lives - Promote healthy lifestyles – to give individuals and communities the right support order for them to make the best choices for their health - Improve emotional and mental health – as it is everyone’s business and a fundamental building block for individual and community wellbeing - Promote the independence of people living with long term conditions and their carers – helping people to manage their condition better can significantly improve quality of life and reduce the need for hospital or emergency care - Improve health and wellbeing of older people – giving older people the right support in the right environment to help them enjoy quality, active, healthy and fulfilling lives

	Derbyshire Joint Strategic Needs Assessment	'The State of Derbyshire' 2014	<p>The Assessment reviews the position of Derbyshire County in regard to various Outcome Frameworks (see below) for health and social care, highlighting where performance is significantly poorer than England as a whole. Where possible, significant variation within the county is also highlighted. The report also collates information on what is being done to address the issues identified.</p> <p>The Public Health Outcomes Framework Healthy lives, healthy people: Improving outcomes and supporting transparency sets out a vision for public health, desired outcomes and indicators to help understanding of how well public health is being improved and protected.</p> <p>Outcomes:</p> <ul style="list-style-type: none"> - Derbyshire performed significantly better than England in 42 indicators - Derbyshire's performance in 57 indicators was similar to England - Derbyshire performed significantly worse than England in 18 indicators
	Derbyshire Sustainable Community Strategy	2009-2014	<p>Sets out seven areas of priority, one of which is 'Health and wellbeing' for which the specific priorities are:</p> <ul style="list-style-type: none"> - Promote health and wellbeing and reduce health inequalities so that people in Derbyshire enjoy the benefits of following a healthier lifestyle and live longer, healthier lives. - Increase independent living and improve quality of life so that people in Derbyshire enjoy the benefits of living at home and those in care homes have the best support. - Promote choice and control so that people in Derbyshire have access to health and social care which is centred around their unique, personal needs and is within easy reach. - Improve inclusion and contribution so that people in Derbyshire have a say about the health and social care services they use and participate fully in community life. - Enhance dignity and safety so that people in Derbyshire are well looked after by the people who care for them.
	Derbyshire Local Transport Plan	2011-2026 The Local Transport Plan Investment Protocol	<p>The plan sets out five transport goals:</p> <ul style="list-style-type: none"> - Supporting a resilient local economy - Tackling climate change - Contributing to better safety, security and health - Promoting equality of opportunity - Improving quality of life and promoting a healthy natural environment.

Appendix 5 – Checklist for Planning and Health

Nottinghamshire Rapid Health Impact Assessment Matrix

Assessment criteria	Relevant?	Details/evidence	Potential health impact?	Recommended amendments or enhancement actions to the proposal under consideration
1. Housing quality and design				
1. Does the proposal seek to address the housing needs of the wider community by requiring provision of variation of house type that will meet the needs of older or disabled people? [For example does it meet all Lifetime Homes Standards, Building for Life etc?]	<input type="checkbox"/> Yes <input type="checkbox"/> Partial <input type="checkbox"/> No		<input type="checkbox"/> Positive <input type="checkbox"/> Negative <input type="checkbox"/> Neutral <input type="checkbox"/> Uncertain	
2. Does the proposal promote development that will reduce energy requirements and living costs and ensure that homes are warm and dry in winter and cool in summer	<input type="checkbox"/> Yes <input type="checkbox"/> Partial <input type="checkbox"/> No		<input type="checkbox"/> Positive <input type="checkbox"/> Negative <input type="checkbox"/> Neutral <input type="checkbox"/> Uncertain	
2. Access to healthcare services and other social infrastructure				
3. Does the proposal seek to retain, replace or provide health and social care related infrastructure?	<input type="checkbox"/> Yes <input type="checkbox"/> Partial <input type="checkbox"/> No		<input type="checkbox"/> Positive <input type="checkbox"/> Negative <input type="checkbox"/> Neutral <input type="checkbox"/> Uncertain	
4. Does the proposal address the proposed growth/ assess the impact on healthcare services?	<input type="checkbox"/> Yes <input type="checkbox"/> Partial <input type="checkbox"/> No		<input type="checkbox"/> Positive <input type="checkbox"/> Negative <input type="checkbox"/> Neutral	

Assessment criteria	Relevant?	Details/evidence	Potential health impact?	Recommended amendments or enhancement actions to the proposal under consideration
			<input type="checkbox"/> Uncertain	
5. Does the proposal explore/allow for opportunities for shared community use and co-location of services?	<input type="checkbox"/> Yes <input type="checkbox"/> Partial <input type="checkbox"/> No		<input type="checkbox"/> Positive <input type="checkbox"/> Negative <input type="checkbox"/> Neutral <input type="checkbox"/> Uncertain	
3. Access to open space and nature				
6. Does the proposal seek to retain and enhance existing and provide new open and natural spaces to support healthy living and physical activity?	<input type="checkbox"/> Yes <input type="checkbox"/> Partial <input type="checkbox"/> No		<input type="checkbox"/> Positive <input type="checkbox"/> Negative <input type="checkbox"/> Neutral <input type="checkbox"/> Uncertain	
7. Does the proposal promote links between open and natural spaces and areas of residence, employment and commerce?	<input type="checkbox"/> Yes <input type="checkbox"/> Partial <input type="checkbox"/> No <input type="checkbox"/>		<input type="checkbox"/> Positive <input type="checkbox"/> Negative <input type="checkbox"/> Neutral <input type="checkbox"/> Uncertain	
8. Does the proposal seek to ensure that open and natural spaces are welcoming, safe and accessible to all?	<input type="checkbox"/> Yes <input type="checkbox"/> Partial <input type="checkbox"/> No		<input type="checkbox"/> Positive <input type="checkbox"/> Negative <input type="checkbox"/> Neutral <input type="checkbox"/> Uncertain	
9. Does the proposal seek to provide a range of play spaces for children and young people (e.g. play pitches, play areas etc.) including provision for those that are disabled?	<input type="checkbox"/> Yes <input type="checkbox"/> Partial <input type="checkbox"/> No		<input type="checkbox"/> Positive <input type="checkbox"/> Negative <input type="checkbox"/> Neutral <input type="checkbox"/> Uncertain	

Assessment criteria	Relevant?	Details/evidence	Potential health impact?	Recommended amendments or enhancement actions to the proposal under consideration
4. Air quality, noise and neighbourhood amenity				
10. Does the proposal seek to minimise construction impacts such as dust, noise, vibration and odours?	<input type="checkbox"/> Yes <input type="checkbox"/> Partial <input type="checkbox"/> No		<input type="checkbox"/> Positive <input type="checkbox"/> Negative <input type="checkbox"/> Neutral <input type="checkbox"/> Uncertain	
11. Does the proposal seek to minimise air pollution caused by traffic and employment/commercial facilities?	<input type="checkbox"/> Yes <input type="checkbox"/> Partial <input type="checkbox"/> No		<input type="checkbox"/> Positive <input type="checkbox"/> Negative <input type="checkbox"/> Neutral <input type="checkbox"/> Uncertain	
12. Does the proposal seek to minimise noise pollution caused by traffic and employment/commercial facilities?	<input type="checkbox"/> Yes <input type="checkbox"/> Partial <input type="checkbox"/> No		<input type="checkbox"/> Positive <input type="checkbox"/> Negative <input type="checkbox"/> Neutral <input type="checkbox"/> Uncertain	
5. Accessibility and active transport				
13. Does the proposal prioritise and encourage walking (such as through shared spaces) connecting to local walking networks?	<input type="checkbox"/> Yes <input type="checkbox"/> Partial <input type="checkbox"/> No		<input type="checkbox"/> Positive <input type="checkbox"/> Negative <input type="checkbox"/> Neutral <input type="checkbox"/> Uncertain	
14. Does the proposal prioritise and encourage cycling (for example by providing secure cycle parking, showers and cycle lanes) connecting to local and strategic cycle networks?	<input type="checkbox"/> Yes <input type="checkbox"/> Partial <input type="checkbox"/> No		<input type="checkbox"/> Positive <input type="checkbox"/> Negative <input type="checkbox"/> Neutral <input type="checkbox"/> Uncertain	
15. Does the proposal support traffic management and calming measures to help reduce and minimise road injuries?	<input type="checkbox"/> Yes <input type="checkbox"/> Partial <input type="checkbox"/> No		<input type="checkbox"/> Positive <input type="checkbox"/> Negative <input type="checkbox"/> Neutral <input type="checkbox"/> Uncertain	

Assessment criteria	Relevant?	Details/evidence	Potential health impact?	Recommended amendments or enhancement actions to the proposal under consideration
16. Does the proposal promote accessible buildings and places to enable access to people with mobility problems or a disability?	<input type="checkbox"/> Yes <input type="checkbox"/> Partial <input type="checkbox"/> No		<input type="checkbox"/> Positive <input type="checkbox"/> Negative <input type="checkbox"/> Neutral <input type="checkbox"/> Uncertain	
6. Crime reduction and community safety				
17. Does the proposal create environments & buildings that make people feel safe, secure and free from crime?	<input type="checkbox"/> Yes <input type="checkbox"/> Partial <input type="checkbox"/> No		<input type="checkbox"/> Positive <input type="checkbox"/> Negative <input type="checkbox"/> Neutral <input type="checkbox"/> Uncertain	
7. Access to healthy food				
18. Does the proposal support the retention and creation of food growing areas, allotments and community gardens in order to support a healthy diet and physical activity?	<input type="checkbox"/> Yes <input type="checkbox"/> Partial <input type="checkbox"/> No		<input type="checkbox"/> Positive <input type="checkbox"/> Negative <input type="checkbox"/> Neutral <input type="checkbox"/> Uncertain	
19. Does the proposal seek to restrict the development of hot food takeaways (A5) in specific areas?	<input type="checkbox"/> Yes <input type="checkbox"/> Partial <input type="checkbox"/> No		<input type="checkbox"/> Positive <input type="checkbox"/> Negative <input type="checkbox"/> Neutral <input type="checkbox"/> Uncertain	
8. Access to work and training				

Assessment criteria	Relevant?	Details/evidence	Potential health impact?	Recommended amendments or enhancement actions to the proposal under consideration
20. Does the proposal seek to provide new employment opportunities and encourage local employment and training?	<input type="checkbox"/> Yes <input type="checkbox"/> Partial <input type="checkbox"/> No		<input type="checkbox"/> Positive <input type="checkbox"/> Negative <input type="checkbox"/> Neutral <input type="checkbox"/> Uncertain	
9. Social cohesion and lifetime neighbourhoods				
21. Does the proposal connect with existing communities where the layout and movement avoids physical barriers and severance and encourages social interaction? [For example does it address the components of Lifetime Neighbourhoods?]	<input type="checkbox"/> Yes <input type="checkbox"/> Partial <input type="checkbox"/> No		<input type="checkbox"/> Positive <input type="checkbox"/> Negative <input type="checkbox"/> Neutral <input type="checkbox"/> Uncertain	
10. Minimising the use of resources				
22. Does the proposal seek to incorporate sustainable design and construction techniques?	<input type="checkbox"/> Yes <input type="checkbox"/> Partial <input type="checkbox"/> No		<input type="checkbox"/> Positive <input type="checkbox"/> Negative <input type="checkbox"/> Neutral <input type="checkbox"/> Uncertain	

Assessment criteria	Relevant?	Details/evidence	Potential health impact?	Recommended amendments or enhancement actions to the proposal under consideration
11. Climate change				
23. Does the proposal incorporate renewable energy and ensure that buildings and public spaces are designed to respond to winter and summer temperatures, i.e. ventilation, shading and landscaping?	<input type="checkbox"/> Yes <input type="checkbox"/> Partial <input type="checkbox"/> No		<input type="checkbox"/> Positive <input type="checkbox"/> Negative <input type="checkbox"/> Neutral <input type="checkbox"/> Uncertain	
24. Does the proposal maintain or enhance biodiversity?	<input type="checkbox"/> Yes <input type="checkbox"/> Partial <input type="checkbox"/> No		<input type="checkbox"/> Positive <input type="checkbox"/> Negative <input type="checkbox"/> Neutral <input type="checkbox"/> Uncertain	
12. Health inequalities				
25. Does the proposal consider health inequalities and encourage engagement by underserved communities?	<input type="checkbox"/> Yes <input type="checkbox"/> Partial <input type="checkbox"/> No		<input type="checkbox"/> Positive <input type="checkbox"/> Negative <input type="checkbox"/> Neutral <input type="checkbox"/> Uncertain	
Any other comments				
Name of assessor and organisation				
Date of assessment				

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Nottinghamshire Rapid Health Impact Assessment Matrix

Assessment criteria	Relevant?	Details/evidence	Potential health impact?	Recommended amendments or enhancement actions to the proposal under consideration
1. Housing quality and design				
<p>1. Does the proposal seek to address the housing needs of the wider community by requiring provision of variation of house type that will meet the needs of older or disabled people?</p> <p>For example does it meet [e.g. Lifetime Homes Standards, Building for Life etc?]</p>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> Partial <input type="checkbox"/> No	<p>ACS Policy 8 (Housing Size, Mix and Choice) and LPD Policy 37 (Housing Size, Type and Tenure) encourage an appropriate mix of housing reflecting needs and demographics in the local area. They do not set specific requirements.</p>	<input checked="" type="checkbox"/> Positive <input type="checkbox"/> Negative <input type="checkbox"/> Neutral <input type="checkbox"/> Uncertain	<p>Including specific requirements is not considered appropriate. It would be difficult to establish these and changes over time will affect the mix required in different areas. Consideration is being given to the preparation of a Supplementary Planning Document on Space Standards.</p>
<p>2. Does the proposal promote development that will reduce energy requirements and living costs and ensure that homes are warm and dry in winter and cool in summer</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> Partial <input type="checkbox"/> No	<p>This is set out in ACS Policy 1 (Climate Change). LPD 35 (Safe Accessible and Inclusive Development) also includes policy on adaptability and energy efficiency to promote health and wellbeing.</p>	<input checked="" type="checkbox"/> Positive <input type="checkbox"/> Negative <input type="checkbox"/> Neutral <input type="checkbox"/> Uncertain	<p>No amendments required.</p>

Assessment criteria	Relevant?	Details/evidence	Potential health impact?	Recommended amendments or enhancement actions to the proposal under consideration
2. Access to healthcare services and other social infrastructure				
3. Does the proposal seek to retain, replace or provide health and social care related infrastructure?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> Partial <input type="checkbox"/> No	ACS Policy 12 (Local Services and Healthy Lifestyles) and LPD Policy 56 (Protection of Community Facilities) address this issue.	<input checked="" type="checkbox"/> Positive <input type="checkbox"/> Negative <input type="checkbox"/> Neutral <input type="checkbox"/> Uncertain	No amendments required.
4. Does the proposal address the proposed growth/ assess the impact on healthcare services?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> Partial <input type="checkbox"/> No	ACS Policy 18 (Infrastructure) and 19 (Developer Contributions) address this issue. Preparation of the Infrastructure Delivery Plan included consultation with relevant bodies. Contributions will be sought, where required, towards health facilities.	<input checked="" type="checkbox"/> Positive <input type="checkbox"/> Negative <input type="checkbox"/> Neutral <input type="checkbox"/> Uncertain	No amendments required.
5. Does the proposal explore/allow for opportunities for shared community use and co-location of services?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> Partial <input type="checkbox"/> No	Addressed in ACS Policy 12 (Local Services and Healthy Lifestyles).	<input checked="" type="checkbox"/> Positive <input type="checkbox"/> Negative <input type="checkbox"/> Neutral <input type="checkbox"/> Uncertain	No amendments required.
3. Access to open space and nature				

Assessment criteria	Relevant?	Details/evidence	Potential health impact?	Recommended amendments or enhancement actions to the proposal under consideration
6. Does the proposal seek to retain and enhance existing and provide new open and natural spaces to support healthy living and physical activity?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> Partial <input type="checkbox"/> No	ACS Policy 16 (Green Infrastructure, Parks and Open Space) and LPD Policies 20 (Protection of Open Space) and 21 (Provision of new open space) address the retention and provision of open space.	<input checked="" type="checkbox"/> Positive <input type="checkbox"/> Negative <input type="checkbox"/> Neutral <input type="checkbox"/> Uncertain	No amendments required.
7. Does the proposal promote links between open and natural spaces and areas of residence, employment and commerce?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> Partial <input type="checkbox"/> No <input type="checkbox"/>	ACS Policy 16 (Green Infrastructure, Parks and Open Space) adopts a 'green infrastructure' approach and promotes the establishment of a network of corridors and assets to link people with open space of different types and sizes.	<input checked="" type="checkbox"/> Positive <input type="checkbox"/> Negative <input type="checkbox"/> Neutral <input type="checkbox"/> Uncertain	No amendments required.
8. Does the proposal seek to ensure that open and natural spaces are welcoming, safe and accessible to all?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> Partial <input type="checkbox"/> No	ACS Policy 16 (Green Infrastructure, Parks and Open Space) includes a requirement for green infrastructure to be as inclusive as possible.	<input checked="" type="checkbox"/> Positive <input type="checkbox"/> Negative <input type="checkbox"/> Neutral <input type="checkbox"/> Uncertain	No amendments required.

Assessment criteria	Relevant?	Details/evidence	Potential health impact?	Recommended amendments or enhancement actions to the proposal under consideration
9. Does the proposal seek to provide a range of play spaces for children and young people (e.g. play pitches, play areas etc.) including provision for those that are disabled?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> Partial <input type="checkbox"/> No	LPD Policy 21 (Provision of new open space) makes provision for the form of open space to set on a case by case basis. This will likely include the provision of spaces for children and young people.	<input checked="" type="checkbox"/> Positive <input type="checkbox"/> Negative <input type="checkbox"/> Neutral <input type="checkbox"/> Uncertain	It is not considered appropriate to set a blanket requirement as different places will have different existing open space provision.
4. Air quality, noise and neighbourhood amenity				
10. Does the proposal seek to minimise construction impacts such as dust, noise, vibration and odours?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> Partial <input type="checkbox"/> No	There is no specific policy on this although paragraph 10.1.4 of the LPD does provide guidance on the use of conditions and establishment of working groups to consider these matters.	<input checked="" type="checkbox"/> Positive <input type="checkbox"/> Negative <input type="checkbox"/> Neutral <input type="checkbox"/> Uncertain	It is not considered necessary to include a specific policy on this issue.
11. Does the proposal seek to minimise air pollution caused by traffic and employment/commercial facilities?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> Partial <input type="checkbox"/> No	LPD Policy 10 (Pollution) relates to pollution (including air pollution) while LPD Policy 11 (Air Quality) refers specifically to air quality and to the guidance	<input checked="" type="checkbox"/> Positive <input type="checkbox"/> Negative <input type="checkbox"/> Neutral <input type="checkbox"/> Uncertain	No amendments required.

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Assessment criteria	Relevant?	Details/evidence	Potential health impact?	Recommended amendments or enhancement actions to the proposal under consideration
		that is in place for the Borough.		
12. Does the proposal seek to minimise noise pollution caused by traffic and employment/commercial facilities?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> Partial <input type="checkbox"/> No	LPD Policy 11(Air Quality) relates to pollution while LPD Policy 32 (Amenity) relates to the impacts of development on amenity.	<input checked="" type="checkbox"/> Positive <input type="checkbox"/> Negative <input type="checkbox"/> Neutral <input type="checkbox"/> Uncertain	No amendments required.
5. Accessibility and active transport				
13. Does the proposal prioritise and encourage walking (such as through shared spaces) connecting to local walking networks?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> Partial <input type="checkbox"/> No	LPD Policy 35 (Safe, Accessible and Inclusive Development) includes requirements on these issues.	<input checked="" type="checkbox"/> Positive <input type="checkbox"/> Negative <input type="checkbox"/> Neutral <input type="checkbox"/> Uncertain	No amendments required.
14. Does the proposal prioritise and encourage cycling (for example by providing secure cycle parking, showers and cycle lanes) connecting to local and strategic cycle networks?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> Partial <input type="checkbox"/> No	There is no specific prioritisation for cycling but it is covered by entries on the list of infrastructure identified in the supporting text to ACS Policy 19 (Developer Contributions).	<input checked="" type="checkbox"/> Positive <input type="checkbox"/> Negative <input type="checkbox"/> Neutral <input type="checkbox"/> Uncertain	It is not considered appropriate to identify specific blanket requirements.

Assessment criteria	Relevant?	Details/evidence	Potential health impact?	Recommended amendments or enhancement actions to the proposal under consideration
15. Does the proposal support traffic management and calming measures to help reduce and minimise road injuries?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> Partial <input type="checkbox"/> No	This is addressed by ACS Policy 14 (Managing Travel Demand) and LPD Policy 61 (Highway Safety).	<input checked="" type="checkbox"/> Positive <input type="checkbox"/> Negative <input type="checkbox"/> Neutral <input type="checkbox"/> Uncertain	No amendments required.
16. Does the proposal promote accessible buildings and places to enable access to people with mobility problems or a disability?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> Partial <input type="checkbox"/> No	LPD Policy 35 (Safe Accessible and Inclusive Development) requires development to take account of the needs of all users.	<input checked="" type="checkbox"/> Positive <input type="checkbox"/> Negative <input type="checkbox"/> Neutral <input type="checkbox"/> Uncertain	No amendments required.
6. Crime reduction and community safety				
17. Does the proposal create environments & buildings that make people feel safe, secure and free from crime?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> Partial <input type="checkbox"/> No	LPD Policy 35 (Safe Accessible and Inclusive Development) requires development to create natural surveillance and a secure private realm.	<input checked="" type="checkbox"/> Positive <input type="checkbox"/> Negative <input type="checkbox"/> Neutral <input type="checkbox"/> Uncertain	No amendments required.

Assessment criteria	Relevant?	Details/evidence	Potential health impact?	Recommended amendments or enhancement actions to the proposal under consideration
7. Access to healthy food				
18. Does the proposal support the retention and creation of food growing areas, allotments and community gardens in order to support a healthy diet and physical activity?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> Partial <input type="checkbox"/> No	Allotments are included in the definition of open space and are required to be retained/provided as necessary by LPD Policies 20 (Protection of Open Space) and 21 (Provision of Open Space).	<input checked="" type="checkbox"/> Positive <input type="checkbox"/> Negative <input type="checkbox"/> Neutral <input type="checkbox"/> Uncertain	No amendments required.
19. Does the proposal seek to restrict the development of hot food takeaways (A5) in specific areas?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> Partial <input type="checkbox"/> No	LPD Policy 54 (Fast Food Takeaways) restricts A5 uses within 400m of a secondary school.	<input checked="" type="checkbox"/> Positive <input type="checkbox"/> Negative <input type="checkbox"/> Neutral <input type="checkbox"/> Uncertain	Consideration to be given to areas for further restriction – leisure centres, parks/open spaces etc.
8. Access to work and training				
20. Does the proposal seek to provide new employment opportunities and encourage local	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> Partial <input type="checkbox"/> No	ACS Policy 4 (Employment Provision and Economic Development) and LPD Policy 43 (Retention of Employment and Employment Uses), LPD	<input checked="" type="checkbox"/> Positive <input type="checkbox"/> Negative <input type="checkbox"/> Neutral <input type="checkbox"/> Uncertain	No amendments required.

Assessment criteria	Relevant?	Details/evidence	Potential health impact?	Recommended amendments or enhancement actions to the proposal under consideration
employment and training?		Policy 44 (Employment Development on Unallocated Sites), LPD Policy 45 (Expansion of Existing Employment Uses not in the Green Belt) and LPD Policy 46 (Agricultural and Rural Diversification) address the retention of existing employment designations and allow for appropriate expansion of business including those in rural areas. LPD Policy 47 (Local Labour Agreements) identifies that local labour agreements will be negotiated for developments of 10 or more dwellings, on 0.5 hectares of land or development that will create more than 15 jobs		
9. Social cohesion and lifetime neighbourhoods				
21. Does the proposal connect with existing communities where the	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> Partial <input type="checkbox"/> No	LPD Policy 35 (Safe, Accessible and Inclusive Developments) requires that new development	<input checked="" type="checkbox"/> Positive <input type="checkbox"/> Negative <input type="checkbox"/> Neutral	No amendments required.

Assessment criteria	Relevant?	Details/evidence	Potential health impact?	Recommended amendments or enhancement actions to the proposal under consideration
<p>layout and movement avoids physical barriers and severance and encourages social interaction?</p> <p>[For example does it address the components of Lifetime Neighbourhoods?]</p>		<p>contributes to simple, well-defined and inter-connected network of streets and spaces and should be appropriate to the immediate context.</p>	<input type="checkbox"/> Uncertain	
10. Minimising the use of resources				
<p>22. Does the proposal seek to incorporate sustainable design and construction techniques?</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> Partial <input type="checkbox"/> No	<p>This is set out in ACS Policy 1 (Climate Change). LPD 35 (Safe, Accessible and Inclusive Developments) also includes policy on adaptability and energy efficiency to promote health and wellbeing.</p>	<input checked="" type="checkbox"/> Positive <input type="checkbox"/> Negative <input type="checkbox"/> Neutral <input type="checkbox"/> Uncertain	<p>No amendments required.</p>
11. Climate change				
<p>23. Does the proposal incorporate renewable energy and ensure that</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> Partial <input type="checkbox"/> No	<p>Renewable Energy is covered by ACS Policy 1 (Climate Change) and LPD Policies 1</p>	<input checked="" type="checkbox"/> Positive <input type="checkbox"/> Negative <input type="checkbox"/> Neutral	<p>No amendments required.</p>

Assessment criteria	Relevant?	Details/evidence	Potential health impact?	Recommended amendments or enhancement actions to the proposal under consideration
buildings and public spaces are designed to respond to winter and summer temperatures, i.e. ventilation, shading and landscaping?		(Wind Turbines) and 2 (Other Renewable Energy Schemes). LPD 35 (Safe, Accessible and Inclusive Developments) also includes policy on adaptability and energy efficiency to promote health and wellbeing.	<input type="checkbox"/> Uncertain	
24. Does the proposal maintain or enhance biodiversity?	<input type="checkbox"/> Yes <input type="checkbox"/> Partial <input type="checkbox"/> No	This is addressed by ACS Policy 17 (Biodiversity) and LPD Policy 18 (Protecting and Enhancing Biodiversity).	<input checked="" type="checkbox"/> Positive <input type="checkbox"/> Negative <input type="checkbox"/> Neutral <input type="checkbox"/> Uncertain	No amendments required.
12 Health inequalities				
25. Does the proposal consider health inequalities and encourage engagement by underserved communities?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> Partial <input type="checkbox"/> No	ACS Policy 12 (Local Services and Healthy Lifestyles) supports the provision of new facilities where there is evidence of need. Contributions will be sought, where required, towards health facilities.	<input checked="" type="checkbox"/> Positive <input type="checkbox"/> Negative <input type="checkbox"/> Neutral <input type="checkbox"/> Uncertain	No amendments required.
Any other comments				

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Assessment criteria	Relevant?	Details/evidence	Potential health impact?	Recommended amendments or enhancement actions to the proposal under consideration
Name of assessor and organisation				
Date of assessment				

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Report to Cabinet

Subject: Forward Plan

Date: 29 September 2016

Author: Service Manager, Elections and Members' Services

Wards Affected

Borough-wide.

Purpose

To present the Executive's draft Forward Plan for the next four month period.

Key Decision

This is not a Key Decision.

Background

- 1 The Council is required by law to give to give notice of key decisions that are scheduled to be taken by the Executive.

A key decision is one which is financially significant, in terms of spending or savings, for the service or function concerned (more than £500,000), or which will have a significant impact on communities, in two or more wards in the Borough.

In the interests of effective coordination and public transparency, the plan includes any item that is likely to require an Executive decision of the Council, Cabinet or Cabinet Member (whether a key decision or not). The Forward Plan covers the following 4 months and must be updated on a rolling monthly basis. All items have been discussed and approved by the Senior Leadership Team.

Proposal

- 2 The Forward Plan is ultimately the responsibility of the Leader and Cabinet as it contains Executive business due for decision. The Plan is therefore presented at this meeting to give Cabinet the opportunity to discuss, amend or delete any item that is listed.

Alternative Options

- 3.1 Cabinet could decide not agree with any of the items are suggested for inclusion in the plan. This would then be referred back to the Senior Leadership Team.
- 3.2 Cabinet could decide to move the date for consideration of any item.

Financial Implications

- 4 There are no financial implications directly arising from this report.

Appendices

- 5 Appendix 1 – Forward Plan

Background Papers

- 6 None identified.

Recommendation(s)

It is recommended THAT Cabinet note the contents of the draft Forward Plan making comments where appropriate.

Reasons for Recommendations

- 7 To promote the items that are due for decision by Gedling Borough Council's Executive over the following four month period.

Issue	Key Decision or Council Decision?	Who will decide and date of decision	Documents to be considered (only applicable to executive Key decisions)	Who will be consulted?	From whom can further information be obtained and representations made?
Quarter 2 Budget Monitoring, Performance Digest & Virement Report	Key	Cabinet 3 November 2016			Alison Ball, Service Manager Finance alison.ball@gedling.gov.uk
<p>Page 151</p> Top Wighay Farm Development Brief	Not Key	Cabinet 8 December 2016	Top Wighay Farm Development Brief		Jo Gray, Planning Policy Manager joanna.gray@gedling.gov.uk
Quarter 3 Budget Monitoring, Performance Digest & Virement Report	Key	Cabinet 2 February 2017			Alison Ball, Service Manager Finance alison.ball@gedling.gov.uk

