

Report to Cabinet

Subject: Health and Wellbeing Strategy and Planning and Health Protocol

Date: 28th June 2018

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Wards Affected All

Purpose

1. This report updates Cabinet on progress made on implementing the Health and Wellbeing Strategy and in the light of emerging local planning policy seeks agreement as to how the Health and Wellbeing Checklist should be applied to development proposals in future. The report also considers the Planning and Health Protocol produced by Nottinghamshire County Council in order to improve the engagement of health partners in the planning process. The report seeks Cabinet's endorsement on applying the Planning and Health Protocol to policy preparation and certain types of planning applications as prescribed in this report.

Key Decision

2. This is not a key decision.

Background

3. Nottinghamshire County Council has prepared a Planning and Health engagement protocol setting out arrangements for how health partners including Nottinghamshire County Council should be consulted on local plans and planning applications. This initiative to improve engagement between the health partners and local planning authorities builds on the Health and Wellbeing Strategy previously produced by Nottinghamshire County Council which recommended the use of the Planning and Health checklist to assess development proposals.
4. At its meeting on 29th September 2016, Cabinet considered a report

on the Health and Wellbeing Strategy and agreed the use of the Health and Well-being Checklist in relation to both local plan policy preparation and planning applications for major development over 10 dwellings and over 500 sq. m of floorspace.

The Health and Wellbeing Checklist

5. The checklist has been used to assess the health impact of both the adopted Aligned Core Strategy (part 1 Local Plan) and the emerging policies in the Local Planning Document which forms part 2 of the Local Plan. The assessment found that all twenty five criteria were addressed, with twenty one of these considered to be fully addressed and four partially addressed by the relevant planning policies. Of the four which were partially addressed, no amendments were recommended to planning policies generally because the level of detail required was considered inappropriate (two cases) or could be more appropriately addressed through a supplementary planning document (one case). In the remaining case the health outcome was considered to be more appropriately dealt with through a mechanism other than the planning system. In summary, the Local Plan Part 1 and emerging LPD Part 2 are considered to conform to the Health and Wellbeing checklist. The checklist and assessment are attached as **Appendix 1** and demonstrates that the health criteria in the checklist are addressed by adopted and emerging planning policy.
6. The Local Planning Document (LPD) is now reaching its final stages of preparation with the weight to be given to policies increasing as the Plan reaches its advanced stages. The National Planning Policy Framework confirms that significant weight can be given to local planning policies following the publication of a satisfactory Inspector's report and then full weight can be given on adoption (for the LPD this is anticipated in the summer 2018). It is therefore opportune to review the use of the checklist in relation to planning applications as the health criteria contained in the checklist are now adequately addressed by local planning policies against which planning applications for development must be determined. Full weight is already given to the ACS policies and, post the Inspector's report on the LPD, significant weight will be attached to these LPD policies. Under these circumstances, it is now unnecessary to apply the checklist to planning applications within Gedling Borough given progress on the Local Planning Document. However, the application of the checklist to inform policy preparation would remain relevant in future.

The Protocol - background

7. Nottinghamshire County Council has prepared an engagement protocol between local planning authorities and health partners in Nottinghamshire. This Protocol commits the partners to engage with one another at an early opportunity in relation to both plan making (including neighbourhood plans) and in planning applications. The Protocol is attached as **Appendix 2**.
8. The County Council consulted partners including the Borough Council on the content of the document in 2017. During this consultation Gedling Borough Council made a number of comments. In essence these welcomed the initiative although raised some concerns about the need to refer some development proposals and the thresholds and criteria set for referrals of planning applications (considered further below). It is worth noting that the Protocol as part of the Health and Wellbeing initiative also incorporates the Health and Wellbeing checklist and the Protocol states that this would be the basis on which health partners consider development proposals. As stated earlier it is considered that the health considerations contained in the checklist are already adequately reflected in local planning policy which will be used to determine planning applications.

The Protocol – plan making

9. The document sets out the protocol for both plan making and for the consideration of planning applications. In terms of plan making, the Protocol is welcomed and reflects the Borough Council's existing approach towards engaging with health partners early on in the process. It is also very useful in emphasising the need for those same partners to respond within the deadlines set. It is also positive in committing health partners to providing supporting evidence including for the examination. Whilst, the checklist has already informed local policy preparation to date it remains a useful yardstick for health partners to consider their comments against when commenting on future planning policy.

The Protocol - planning applications

10. The thresholds for referral to the health partners are set out in appendix 6 of the Protocol. However, in Gedling Borough Council's case, local planning policy now adequately addresses the health criteria in the checklist and it is not felt necessary to refer planning applications which are considered to be in accordance with local planning policy. The relatively low thresholds for referral are also of

concern as they could potentially lead to a large number of applications needing to be referred. On the other hand, for certain development proposals (for example, those not in accordance with local planning policy or for certain types of large development proposals) the early engagement of health partners would be welcome and could add extra value.

Proposal

11. Given the progress on the emerging Local Planning Document it is no longer felt necessary to apply the Health and Wellbeing checklist to planning applications. Cabinet is asked to agree that the checklist is applied to planning policy preparation only.

12. Turning to the Protocol, it is recognised that this can be a positive tool towards achieving better quality and earlier engagement between the Borough Council and the various health partners on certain development proposals. The thresholds used in the Protocol are reproduced below. It is proposed to consult on an amended version as set out in the table below. If a threshold is not felt appropriate it is shown with ~~struck through~~ text with any amendments shown in **bold**. It is therefore proposed to consult on development proposals which meet the criteria in the following table:

Category	Threshold for Consideration	comments
Renewable energy	<ul style="list-style-type: none"> • Single or multiple wind turbines above 15 m high (including blade length) • All solar farms • All biomass plants 	Most planning applications of this nature are likely to be dealt with under delegated authority
Retail development	<ul style="list-style-type: none"> • Applications over 2,500 sq. m floor space • Other retail proposals where the proposal is outside a defined town centre • Other retail applications over 500 sq. m outside a defined town centre • A5 applications 	<p>Such applications are likely to be refused anyway.</p> <p>It would be too onerous to refer all A5 applications and over 500 sq. m. outside town centres is more practical.</p>

Category	Threshold Consideration	for	comments
Residential development	<ul style="list-style-type: none"> • 0-50 dwellings: if strategic planning issues are apparent; • 51-200 dwellings: Applications which are contrary to local or national planning policy; • 201+ dwellings: All applications <p>Major housing development of 50 dwellings or more on unallocated sites.</p>		<p>Housing up to 50 dwellings is unlikely to raise strategic planning issues.</p> <p>Allocated sites have been through the examination process which has established principle of development.</p> <p>Change threshold to 50+ homes on unallocated sites.</p>
Commercial development	<ul style="list-style-type: none"> • Applications over 2,500 sq. m • All applications outside a defined urban boundary 		
Other development	To be decided on a case by case basis at the discretion of the GBC Service Manager, Development Services		
Local and National Strategies/Guidance			
Local Plans/Core Strategies	All plans within the County Neighbouring Borough/District Plans/Strategies		
Other Plans /Strategies/ Publications	To be decided on a case by case basis.		

Alternative Options

13. To continue applying the checklist to all planning applications over the previously agreed thresholds (10 dwellings or 500 sq. m) which is unnecessary as the health impact considerations are covered by existing and emerging local planning policy;

14. Not to endorse the Protocol which would mean less effective engagement with health partners on the development proposals defined in the table below paragraph 12.

15. To endorse the Protocol without changing the thresholds for referral. This would mean additional, and in the Borough Council's view unnecessary, consultation on planning applications.

Financial Implications

None

Appendices

Appendix 1: Health and Wellbeing Checklist and assessment against local planning policy

Appendix 2: Health and Wellbeing Protocol

Background Papers

None

Recommendations

That Cabinet agree to:

- A. Apply the Health and Wellbeing checklist to local planning policy preparation only;
- B. Endorse the health and well-being Protocol subject to referring only those planning applications as defined in the table below paragraph 12 to the relevant health partner; and
- C. Request that the Service Manager Planning Policy communicates this decision to Nottinghamshire County Council.

Reasons for Recommendations

To endorse the Protocol subject to the thresholds for referring planning applications set out in the table below paragraph 12.