



# RTPI

mediation of space · making of place

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Richmond House  
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London  
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Email response sent to: [jsnaandjhws@dh.gsi.gov.uk](mailto:jsnaandjhws@dh.gsi.gov.uk)

Dear Sir/Madam,

## **RESPONSE TO DRAFT GUIDANCE: JSNAs and joint health and wellbeing strategies - draft guidance**

Thank you for the opportunity to respond to the above guidance. The Royal Town Planning Institute (RTPI) is the largest professional institute for planners in Europe, representing some 23,000 spatial planners. The Institute seeks to advance the science and art of spatial planning for the benefit of the public. As well as promoting spatial planning, the RTPI develops and shapes policy affecting the built environment, works to raise professional standards and supports members through continuous education, training and development.

The RTPI believes that spatial planning, in its role as a mediator of the use of land, has a key role in helping to ensure that the environmental and social determinants that underpin good public health are addressed. Indeed, we strongly support the recommendations of the Marmot Commission which highlights the need for a multi-agency approach to the reduction in health inequalities.

The RTPI has been engaged in building links across the planning and health disciplines since 1991 when we held our first conference on the role of spatial planning in the delivery of public health objectives. Since then we have actively worked with other professional bodies and delivered contributions to a variety of Government consultations. We have a Healthy Communities Interest Group on whose expertise we have drawn when forming this response.

### **Policy context**

Government policy has increasingly recognised the links between health and planning, transport and the environment. "Healthy Lives, Healthy People", the public health white paper (Nov 2010) aims to "Create healthy places to grow up and grow old in, with new partnerships in important areas, such as housing, planning, schools and transport".

The draft National Planning Policy Framework (NPPF) (July 2011) includes the objective “to create strong, vibrant and healthy communities, by creating a good quality built environment, with accessible local services that reflect community needs and support well-being” and advocates that local planning authorities should “work with public health leads and health organisations to understand and take account of the health status and needs of the local population, including expected future changes, and any information about relevant barriers to improving health and well-being.”

Most recently “Healthy Lives, Healthy People: a call to action on obesity in England” (Oct 2011) states that “Planning is a powerful lever and a major contributor in influencing the wider determinants of health. At community level, the planning system is increasingly recognised as a vital tool for influencing the environment in a way that builds and supports strong, vibrant and healthy communities”. NICE Guidance and the Marmot Review similarly recognise the importance of the links.

We believe that the draft guidance needs to recognise this policy context and these links. In its current form it appears to see the only role for JSNA and the Health and Wellbeing Strategy as to inform the commissioning of health and social care services.

Rather than focusing exclusively upon the commissioning of services, the guidance would be enhanced by recognising the role that can be played in delivering community well-being and public health through other local authority functions where the JSNA can provide an evidence base. For example, local development documents will be accompanied by an Environmental Report prepared in accordance with regulations implementing the Strategic Environmental Assessment Directive. These regulations place a mandatory requirement on the Strategic Environmental Assessment to consider issues of health.

### **The role of spatial planning – an example**

Spatial planning is a statutory function of local authorities: unitary authorities and borough and district councils, with county councils as upper tier authorities having limited planning functions. Planning is required to promote sustainable development. Sustainable development is highly congruent with the wider determinants of health model and is acknowledged to encompass health and healthy communities.

Accordingly, based on the draft document, the forthcoming NPPF will require local planning authorities to address health needs and to ensure that their strategies (the local plan and related documents) are aligned with health strategies. It follows that the health and wellbeing board and clinical commissioning groups should reciprocate this duty to include spatial planning interventions in preparing the health and wellbeing strategy. The guidance does not currently reflect the significance of this inter-relationship and we believe it should be changed to make it explicit. Much the same can be said about other functions, such as transport planning.

### **Public health and planning: joined up working**

We have been considering how the changes in the public health system will impact on planners and how they can play a full role in the new system. Some of the things we suggest planners could do to promote more joined up working, and which we would like to discuss with you, are to:

- Ensure they feed in to health and wellbeing boards.
- Contribute to the JSNA.
- Use the JSNA as the primary evidence base and as the sole source of demographic data and projections.

- Use the health and wellbeing strategy as a key contributing strategy to the local plan, and its key objectives to shape plan priorities.
- Work directly with Director of Public Health (in all local authorities, particularly including districts).
- Work out where the NPPF and JSNA touch, for example on access to services the local plan will need to state service access requirements by time/distance.
- Recognise that planning policy and development management are key components in the delivery of the health and wellbeing strategy and ensure that it is factored into any health and wellbeing action plans.
- Generate and support health and care businesses as part of the local plan.

In return, we see a need for health and wellbeing boards to look at the spatial implications of decisions on changing service delivery, and to the opportunities that exist to support town and district centres through judicious health capital spending patterns.

We would be keen to explore these ideas further and welcome opportunities for further discussion.

If you require further assistance, have any queries relating to our response or require clarification of any points made, please contact Catherine Middleton on 020 7515 1913 or email [epp@rtpi.org.uk](mailto:epp@rtpi.org.uk).

Yours faithfully,

A handwritten signature in black ink, appearing to read 'Trudi Elliott', written in a cursive style.

Trudi Elliott CBE  
**Chief Executive**

Enc. completed questionnaire