

Health Care Provision Supporting Information

QUESTION 1.4.4.1: What consideration have you given to ensuring that the health and care services locally will align with the additional homes to be built?

ENSURING LOCAL HEALTH AND CARE SERVICES ALIGN WITH DEVELOPMENT

It is envisaged that Sites 1A and B will accommodate [REDACTED] homes, with Sites 2A, B and C, accommodating a further [REDACTED] homes. The additional population growth, if calculated using the Cambridge City average household size of 2.3 people (taken from the 2011 Census: Rooms, Bedrooms, and Central Heating), will be [REDACTED] and [REDACTED] respectively – or [REDACTED] people in total for the whole scheme.

The optimal list size for a single General Practitioner's ('GP') practice (of 120m²) is [REDACTED] patients. Irrespective of surplus capacity in existing nearby GP surgeries, Site 1A and B are likely to require [REDACTED] new GPs, with Site 2A, B and C requiring [REDACTED] new GPs – or [REDACTED] new GPs across the whole site, brought together within a single multi-clinic practice (assuming that is the preferred approach in operational terms).

It is envisaged that [REDACTED] new dental surgeons will be required, that there will be a need for the provision of 42 Acute Healthcare beds, and 42 Extra Care beds, arising from the whole development.

The CNFE masterplan is designed to accommodate the amount and type of health facilities described above. In the event that some off-site provision is deemed (by the relevant authority) to be more appropriate, then financial contributions would be made accordingly.

PLANNING POLICY – HEALTH

The National Planning Policy Framework (NPPF) 2018 acknowledges the importance of considering health impacts during the planning process. It covers many issues that are directly related to the determinants of health. The NPPF identifies the three essential components of delivering sustainable development, which gives rise to the need for the planning system to perform a number of roles. The role of particular relevance to health is a 'social role'. The NPPF states the planning system should *"support strong, vibrant and healthy communities, by ensuring that a sufficient number and range of homes can be provided to meet the needs of present and future generations; and by fostering a well-designed and safe built environment, with accessible services and open spaces that reflect current and future needs and support communities' health, social and cultural well-being"* (paragraph 8b).

The NPPF then leads into a dedicated section (8) on 'Promoting healthy and safe communities', stating that (paragraph 91) *'Planning policies and decisions should aim to achieve healthy, inclusive and safe places which:*

- a) *promote social interaction, including opportunities for meetings between people who might not otherwise come into contact with each other – for example through mixed-use developments, strong neighbourhood centres, street layouts that allow for easy pedestrian and cycle connections within and between neighbourhoods, and active street frontages;*
- b) *are safe and accessible, so that crime and disorder, and the fear of crime, do not undermine the quality of life or community cohesion – for example through the use of clear and legible pedestrian*

routes, and high quality public space, which encourage the active and continual use of public areas; and

- c) *enable and support healthy lifestyles, especially where this would address identified local health and well-being needs – for example through the provision of safe and accessible green infrastructure, sports facilities, local shops, access to healthier food, allotments and layouts that encourage walking and cycling.*

The national Planning Policy Practice Guidance 2014 ('PPG') also includes guidance on the importance of addressing health and wellbeing through planning. Undertaking a Health Impact and Needs Assessment ('HINA') is one of the ways that the PPG suggests health can be demonstrated to be a consideration of development.

CONTEXT – HEALTH APPROACH IN CAMBRIDGESHIRE

Spatial planning and development has the potential to impact on human health and wellbeing. This is because a wide range of social and environmental factors affect the health of local communities within Cambridge. Good health is related to good quality housing and developments, well designed street scenes, well laid out neighbourhoods, quality and efficiency in transport systems, opportunities to experience leisure and cultural services activities and green and open space.

A HINA will be prepared to support and inform the forthcoming Area Action Plan and Planning Application processes for CNFE. This will define health needs arising from the development more accurately. A HINA is commonly defined as *“a combination of procedures, methods and tools by which a policy, program 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.”* It is a tool to appraise both positive (e.g. creation of new jobs) and negative (e.g. generation of pollution) impacts on the different affected sub-groups of the population that might result from the development. Public participation is considered a major component of the process.

It will be necessary to engage with a number of groups and organisations in the local health and wellbeing system, to help inform the preparation of the HINA:

- Director of Public Health at Cambridgeshire County Council;
- The Health and Wellbeing Board – which can provide a valuable forum through which partners can help ensure that planning proposals, where appropriate, are likely to have a positive impact on the health and wellbeing of local communities. Health and Wellbeing Boards bring together local authorities, the NHS, communities and wider partners to share system leadership across the health and social care system; and have a duty to encourage integrated working between commissioners of services, and between the functions of local government (including planning). Each Health and Wellbeing Board is responsible for producing a Health and Well-being Strategy which is underpinned by a Joint Strategic Needs Assessment. This will be a key strategy for a local planning authority to take into account to improve health and well-being. Other relevant strategies to note would cover issues such as obesity and healthy eating, physical activity, dementia care and health inequalities. Data and information from Public Health England is also useful as part of the evidence base for plan-making;
- NHS Cambridgeshire and Peterborough Clinical Commissioning Group ('CPCCG') 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 in consultation with local healthcare providers will have assisted Cambridge City Council 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. The CPCCG has prepared the 'New Housing Developments and the Built Environment JSNA 2015/16', which identifies specific measures that should be considered in delivering a health development in Cambridgeshire.

- Engagement with the local community is also important. This should also include local Healthwatch organisation (which represents users of health and social care services) and other community groups as appropriate.

The HINA will be structured to consider a range of topics, but for this purpose are indicatively provided below:

- **Health Priorities**

This will need to be explored through the engagement with the local groups and organisations identified above. However, the following health characteristics in Cambridge have been identified at this stage:

- Cambridge is one of the 20% least deprived districts in England;
- 2.6% of Cambridge's population live in areas in the most deprived 20% of areas in England, lower than for Cambridgeshire as a whole. According to the Indices of Deprivation 2015 it has a deprivation score of only 13.8, below the England average although a higher level of deprivation than South Cambridgeshire. However, based on data from the fingertips website data shows that Cambridge has a worse level of children living in low income families (under 20s and under 16s) and more people living in fuel poverty than for the Cambridge benchmark and a higher proportion of income deprived over 60 years old;
- A higher percentage of all hospital admissions in Cambridge present as emergencies compared with the England average. Percentages are higher in Black ethnic groups compared to white ethnic groups. This may be due to higher levels of urgent need or lower use of services in the community;
- The health of people in Cambridge is varied compare to the England average. Statistics from 2013 show that there are statistically significantly fewer children living in low income families in the City (14% compared to 19% in England). Life expectancy for women higher than the national average. Life expectancy is not significantly different for people in the most deprived areas of South Cambridgeshire than in the least deprived areas. However, there are disparities, for instance life expectancy in the more deprived parts of Cambridge, such as in the north of the city, is almost 9 years lower for men and 7.5 years lower for women compared to the least deprived areas;
- For Cambridge there are some indicators that are statistically significantly worse than for the England average. These include the rate of violent crime increased in 2014/15 to a level statistically significantly worse than England, although over 5-years there has been a decrease. Higher rate of hospital admissions due to self-harm compared to the England average. This is in-keeping with the picture of the whole of Cambridgeshire, including South Cambridgeshire. The rate of hospital admission episodes for alcohol-related conditions or causes increased in Cambridge residents in 2014/15 and the rate is statistically higher than the England average;
- Cambridge also has the highest levels of statutory homelessness in Cambridgeshire, both in terms of households in temporary accommodation and homeless but not in priority need (which is getting worse);
- The percentage of children in low income families has statistically significantly decreased over the last 5 years;
- Long-term unemployment rate has statistically significantly decreased over the last 4 years;
- Pupil absence has been decreasing;

- The percentage of adults physically active has statistically significantly increased in the last 4 years;
- The rate of under 18 conceptions has statistically significantly decreased over the last 6 years (although with an increased rate in the last two years);
- The only identified indicator of health that have got worse over time is smoking prevalence, which has increased over the last 4 years;
- Public Health England states that the local priorities include supporting the independence of older people, ensuring access to mental health services and creating a healthy environment through new housing development.

- **Health Needs**

Health infrastructure provision includes:

- Primary care – GP practices, plus community pharmacists, dentists and opticians;
- Community healthcare – this covers a wide range of diagnostic and healthcare services, including non-acute mental health services, which provide a means of delivering care closer to home than from a hospital setting;
- Secondary / acute provision; and
- Tertiary / specialist provision

CPCCG and NHS England Midlands and East have responsibility for commissioning of healthcare services in the area. Discussions with these bodies will be needed to establish the most appropriate mechanism for meeting Health Needs of the new population at the CNFE.

- **Mixes of Uses and Healthy Housing**

The development will help to provide a diverse mix of uses to support a sustainable community where people can meet their day-to-day needs without needing to drive. The proposed development will also provide a range of housing types to meet the varied need of future residents. This will include some affordable homes.

The needs of vulnerable groups will need to be considered in the design of new housing. This includes the need for housing adaptability to meet the needs of those who have mobility difficulties, which may include some older people. Furthermore, access to affordable housing should help in reducing health inequalities for those on lower incomes.

A suggested approach for further action on ‘Healthy Housing’ might include ensuring housing standards are progressed through all stages of design and integrate affordable housing through the proposed development in terms of design quality and appearance.

- **Connectivity and Active Transport**

Walking and cycling will be promoted through provision of cycle spaces, connection of the proposed development to walking and cycling networks and provision of public open space in the scheme. The proposals are considered to provide safe and secure pedestrian and cyclist movement.

A suggested approach for further action on ‘Active Travel’ might include ensuring that the design of routes take into account the needs of the whole communities e.g. those with vision impairment and those with mental disabilities (including dementia). Signposting could be provided to the wider neighbourhood, such as shops, nearby parks and playing fields. Road closures should be minimised and wherever possible pedestrian routes should be maintained.

- **Open Space and Physical Activity**

Public open space and multiple areas of play space will be accessible to residents which will contribute to encouraging physical activity. Formal sports pitches associated with on-site education facilities might also be accessible. Opportunities will need to be considered to improve the biodiversity value of the site and residents can easily access existing sites designated for nature conservation along with open spaces and play areas.

The proposed development should help put in place the features of development that will help encourage an active lifestyle in new residents. The improved walking and cycling connectivity could also have benefits for existing residents near the site with new services on-site increasing the range of local opportunity for activity.

A suggested approach for further action on open space and physical activity might include considering how public space can be used for physical activity; incorporating long term maintenance of public open space and food growing beds into the site management plans; and ensuring inclusive play space should be provided that is accessible and welcoming to both disabled and non-disabled children.

- ***Pollution and Environmental Risk***

Objectives for minimising disturbance to local residents during construction from noise, dust and traffic will need to be met through the implementation of a Construction Environmental Management Plan (CEMP). A noise assessment will be undertaken to support a future Environmental Impact Assessment (EIA), which might identify that the site is influenced by noise from a variety of sources, including road traffic from the A14/Milton Road; and rail movements. Mitigation measures will need to be considered where significant impact is identified.

Air quality assessment (A14 AQMA), Geo-Environmental Risk Assessment and Flood Risk Assessment (amongst other potential topics) will also have to be undertaken for the EIA and mitigation measures identified where significant impacts are identified. These assessments will continue as the development progresses and the phases are designed in detail.

- ***Access to Public and Community Services and Jobs***

Opportunities for social engagement and activity will need to be encouraged through the provision of public open space, play areas and a vibrant community centre located at the heart of the proposed development to support community cohesion.

Objectives for residents to access education facilities might be met through on and/or off-site provision.

With regard to access to health care facilities, discussions will need to be progressed with health care providers to agree suitable mitigation for increased demand. This might include whether a health care centre should be provided on site or whether contributions through s106 are more appropriate to fit with the overarching NHS strategy for healthcare provision. It is assumed for this exercise that on-site provision will be sought.

The proposed development will create construction jobs and construction-related apprenticeships. The site will also be accessible to a significant number of skilled and unskilled jobs in the local area, including the Cambridge Science Park, St Johns Innovation Park, Cambridge Business Park, and new employment sites that are created around Cambridge North Station (Sites 2A and B).

A suggested approach for further action on access to public and community services and jobs might include that consideration should be given to how community events can be encouraged in public spaces and the long term management of that open space should be identified.

- ***Supporting Community Wellbeing***

Overall, it is likely that the proposed development will support the objective of helping to reduce social isolation including supporting access to community facilities and community groups, providing opportunities for a local community role in decision making and integrating new and existing communities. However, at this early stage there are still many factors yet unknown that will help create a community, including the characteristics of future populations.