Tendring Colchester Borders Garden Community Development Plan Document

Health Topic Paper

Colchester City Council
Tendring District Council
Essex County Council

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Tendring District Council

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Executive Summary

This Health Topic Paper is one of a series that has been prepared to support the consideration of the Tendring Colchester Borders Garden Community Development Plan Document (DPD). The purpose of this topic paper is to provide background information on the subject of health and wellbeing.

This topic paper considers the health and wellbeing context for the area, detailing some of the key challenges that are faced. It also sets out the current position on health infrastructure which includes local GP practices operating above capacity.

The principle of a new Garden Community was established in the shared strategic Section 1 of the Tendring and Colchester Local Plans. The DPD is being prepared to set a more detailed planning policy framework against which future planning applications will be considered.

Achieving healthy communities is a key objective of the planning system as set out in the National Planning Policy Framework. This topic paper considers the adopted Local Plans, policies proposed within the Draft Plan (DPD Regulation 18 consultation) and highlights how health and wellbeing issues have been addressed in the final Submission Version of the Plan.

A range of policies have been included in the Submission Version DPD, most of which will have demonstrable impacts on promoting a healthy and successful place. For example, policies are set out on:

- Land uses to create compact new neighbourhoods with good access to the full range of services and facilities to enable people to live well;
- Economic opportunities across various sectors – creating new job opportunities and capitalising on existing strengths such as those related to the growth of the University of Essex.
- The need to provide a range of housing types and tenures including 30% affordable housing.
- The provision of and good access to wide range of new and accessible open spaces, including a focus on sports and recreation.
- The promotion of sustainable movement with measures to maximise active travel with good walking and cycling connectivity.
- Creating communities and neighbourhoods with a strong sense of belonging, served by a range of supportive social and community services and facilities, and a long term stewardship and governance arrangement led by local people.

The DPD contains a specific policy relating to social and community infrastructure. This requires proposals to come forward in line with good practice healthy placemaking principles and guidance. It also requires that appropriate health and well being services must be provided to new residents and occupiers of the Garden Community from first occupation. A new Health Centre should be provided in the early phases of development, as well as flexible space for health provision within other community buildings.

Proposals must be accompanied by a 'Health Strategy' that sets out what health and wellbeing services will be provided, prepared in collaboration with key health stakeholders. This must include detail on the size of the health centre, the provision of and relationship to other flexible community space and any off-site mitigation to address the needs of the population.

Planning Applications must be supported by a Health Impact Assessment (HIA) prepared in accordance with best practice and using the most up to date guidance. Any mitigation measures identified in the Health Impact Assessment should be incorporated into the proposed development.

This Topic Paper has evaluated the emerging proposals against a framework of key principles from the NHS 'Healthy New Towns' programme, which has considered how best to bring forward large scale proposals to achieve the best possible health and well-being outcomes. This set out that the approach to the design and planning of this type of development should be based on the following 10 key principles:

NHS Health New Towns Key Principles

The evaluation indicates that the 10 principles are being integrated into the planning process and approach to establishing policies for the Garden Community.

The Garden Community will progress through various planning stages and the level of detail, together with the assessment of a range of impacts and their associated mitigation will evolve over time.

The Councils and representatives from the health and wellbeing sector have established a working group so that the collaboration on health matters can continue. This collaborative approach can support the preparation of planning policy, and importantly follow on to input to planning applications and the delivery of new homes and neighbourhoods on the Garden Community itself. The group will oversee the production of a "health strategy" that will set out how services will be delivered for the future residents and users of the site.

1 Introduction

1.1 Colchester Borough Council, Tendring District Council and Essex County Council are working together to produce a Development Plan Document (DPD) for a new Garden Community to be located to the east of Colchester. The Tendering Colchester Borders Garden Community DPD (TCBGC DPD) will inform the way the Garden Community is designed, developed, and delivered.

1.2 This Health Topic Paper is one of a series that has been prepared to support that process for the TCBGC DPD. The purpose of this topic paper is to provide background information on the subject of health and wellbeing in relation to the development.

1.3 There are a multitude of factors that can impact on health and wellbeing. This Topic Paper focuses on those areas where the planning process can have an influence. It is widely recognised that where and how people live influences their health and wellbeing. The links between the built environment and health and wellbeing are often complex and a wide range of social, economic and environmental factors will have important influences. The areas of Colchester and Tendring face a number of health challenges and inequalities in which the planning system and place making has an important role to play.

1.4 The need to address health inequalities is well known. In 2008, Professor Sir Michael Marmot was asked by the then Secretary of State for Health to chair an independent review to propose the most effective evidence-based strategies for reducing health inequalities in England from 2010. In 2010 the Marmot Review recommended an evidence-based strategy to address the social determinants of health, the conditions in which people are born, grow, live, work and age and which can lead to health inequalities. The report, **Fair Society, Healthy Lives** proposed a new way to reduce health inequalities in England post-2010. It argued that, traditionally, government policies have focused resources on only some segments of society. To improve health for all and to reduce unfair and unjust inequalities in health, action was needed across the social gradient.

1.5 Key to Marmot's approach to addressing health inequalities is to create the conditions for people to take control of their own lives. This requires action across the social determinants of health and beyond the reach of the NHS. This places renewed emphasis on the role of other stakeholders including local government who have a key role to play along with national government departments, the voluntary and private sectors. The report fundamentally proposed a goal of environmental sustainability; that is, promoting sustainable local communities, active transport, sustainable food production, and zero carbon houses, all of which have health and wellbeing benefits. Furthermore, public organisations are well placed to facilitate the creation of an enabling society that maximises individual and community potential; and ensure social justice, health and sustainability are at the heart of all policies. Therefore, in preparing the DPD the Councils have sought to take a holistic view of placemaking and improve health and wellbeing outcomes.

1.6 In early 2021 Colchester Borough Council and Tendring District Council adopted Local Plans covering the period 2013-2033. This included a strategic shared Section 1 which included the allocation of a new Garden Community to the east of Colchester within the administrative areas of Colchester and Tendring.

1.7 The plan set out that the Garden Community will deliver between 7,000 and 9,000 homes and 25 hectares of employment land. The Plan required a further Development Plan Document (DPD) to be prepared for the Garden Community. In Spring 2022 a Draft Plan was published and views sought from the community in line with Regulation 18 of the Town and Country Planning (Local Planning) Regulations 2012. The "Submission Version" (Regulation 19) Plan will be consulted on in the first half of 2023.

1.8 Achieving better health and wellbeing outcomes has been a key part of the decision by the Councils to plan for a new garden community. The adopted Section 1 Plan and the emerging DPD contain policies seeking to achieve better health and wellbeing outcomes. The purpose of this topic paper is to :

- summarise the main health and wellbeing objectives as set by a range of strategies and stakeholders;
- set out the understanding of the local context and any particular local issues/challenges/needs;
- Explain what is being proposed in the DPD that will help to deliver health & wellbeing objectives and address needs/issues
- Set out what will happen going forward.

1.9 As the plan develops this topic paper may be updated to reflect updated information and evidence.

2 Health and Wellbeing Context

2.1 The built environment and the spaces between them have a significant impact on health and wellbeing. The ability to lead healthy lives is influenced by the environmental, social and economic context in which they take place. The houses we live in, the ability to access green space, the distance to jobs and services and facilities, and the opportunities to travel all impact on our health and wellbeing.

2.2 Local councils have a vital role in building the wider determinants of good health and working to support individuals, families and communities. The Local Authorities in Essex have, with colleagues from the health system, recognised that parts of the County and elements of the population suffer from poorer quality health and wellbeing.

2.3 The health system in England is recognised as being under strain in terms of capacity and resources. The issue of health inequalities in England has led to a need to improve health for all and reduce unfair and unjust inequalities, with action needed across the social gradient. Key to the approach to addressing health inequalities is to create the conditions for people to take control of their own lives. This requires action across the social determinants of health and beyond the reach of the NHS. This requires multiple stakeholders to work together and places a renewed emphasis on the role of local government who, along with national government departments, the voluntary and private sector, all have key roles to play.

Joint Strategic Needs Assessment (JSNA)

2.4 Every local area must have a Joint Health and Wellbeing Strategy setting out the priorities identified through the Joint Strategic Needs Assessment (JSNA) that local government, the NHS and other partners will deliver together. The most recent JSNA for Essex (2022 High Level Essex JSNA Summary) provides an overview of the health and wellbeing needs across the County. The key findings from the summary which are of relevance are:

- Essex has an aging population with more people with long term conditions. Tendring has the highest proportion of residents aged over 65 in Essex.
- Average incomes are lower than the Essex and national averages.
- Tendring has one of the lowest intake levels for early identification of disease, which correlates with the more deprived areas of the country.
- Only 60-66% of Tendring's population are employed.
- Tendring has a low of 44 (average being 50-55) attainment 8 score (a measure of how well pupils do in key stage 4).
- In Tendring 19% of children live in low-income families. A high percentage of children and adults in Tendring are overweight or obese.
- Tendring has a significantly low percentage of adults cycling and walking for travel three times per week. Colchester has the highest levels with 1 in 5 of adults walking for travel at least 3 times a week.

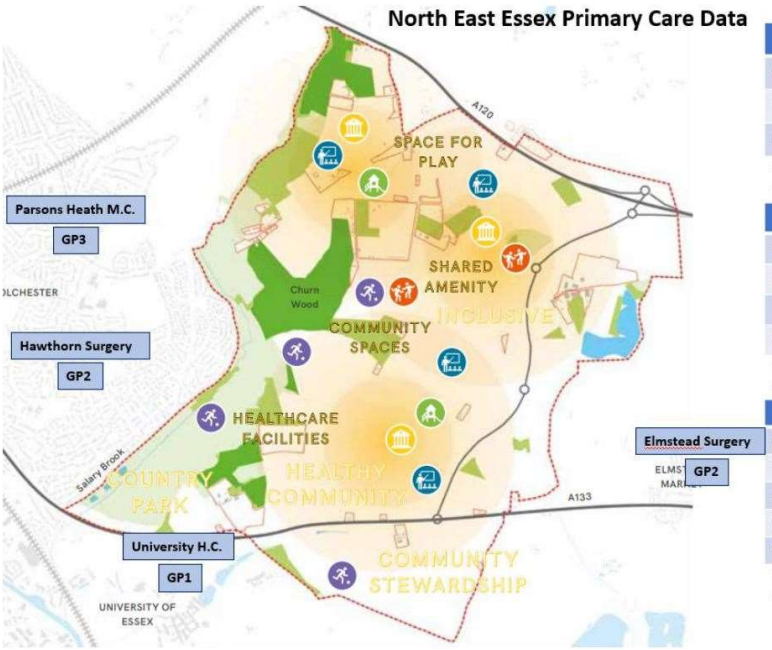
- Colchester has the highest prevalence of long term mental health issues in Essex. People with such problems struggle to get housing and work.

2.5 Prior to the 2022 JSNA, there was a 2017 JSNA for Essex and District profiles. Summaries of these are contained in Appendix A.

Health infrastructure

2.6 The Councils and representatives from the health system have been working closely to understand what physical infrastructure will be needed for services to meet future needs. The Section 1 and Section 2 Plans require new healthcare infrastructure to be provided as part of new developments across the two areas. Specific infrastructure related to the Garden Community will be identified as the proposals come forward through the planning system. In order to reduce the overall impact on the healthcare system and its infrastructure, it is recognised that it is essential that health and wellbeing matters are considered throughout the approach to policy making, design and masterplanning of the site and be confirmed as part of planning applications. In the North East Essex Clinical Commission Group (NEECCG) response to the Regulation 18 Plan a plan was included showing the current capacity constraints in the area around the proposed Garden Community.

Figure 1: Local Health Facilities around the Garden Community



North East Essex Primary Care Data

GP1	NIA (M^2)	List Size
Rowhedge	213.7	
University H.C.	238.1	
Combined	451.8	***16,410***

These Practices are currently 315M^2 over capacity based on NIA and patient list size

GP2	NIA (M^2)	List Size
Abbey Field M.C.	900.8	
Elmstead Surgery	111.4	
Hawthorn Surgery	186.8	
Combined	1,198	***19,005***

These Practices are currently 42M^2 over capacity based on NIA and patient list size

GP3	NIA (M^2)	List Size
Castle Gardens M.C.	331.1	
Wimpole Road	367	
Shrub End Surgery	298.8	
Parsons Heath M.C.	495	
Combined	1,492	***38,367***

These Practices are currently 1,015M^2 over capacity based on NIA and patient list size

2.7 The information highlighted that current practices operating around the Garden Community were under pressure. There is potential for the practice at the University, the wellbeing hub, to be expanded to accommodate existing and future student populations. If this happens it may be possible that it could also address the needs of residents in the early years of the Garden Community. The Health Sector are currently working through a business plan for that proposal. Notwithstanding the outcome of that business planning, the health sector is coming together to agree what physical infrastructure might be needed in the future on the Garden Community.

3 Policy Context (health & planning)

National Planning Policy Framework (NPPF) and National Planning Policy Guidance (NPPG)

3.1 The NPPF sets out the Government's planning policies for England and makes it clear that sustainable development is at the heart of the planning system. Achieving this means the system has 3 overarching objectives. One of these, a social objective, is to support strong, vibrant and healthy communities (para 8). The NPPF contains the following policies relating to health:

- With regards to plan making, the NPPF says that plans should contain strategic policies that should set out an overall strategy for the pattern, scale and design quality of places, and make sufficient provision for, amongst other things, community facilities such as health infrastructure (para 20).
- Section 8 'Promoting healthy and safe communities'
- Section 9'Promoting sustainable transport'
- Section 11 'Making effective use of land'
- Section 12 on achieving well designed places

3.2 The NPPG provides more detailed guidance on interpreting Government Policy and includes a section on Healthy and Safe communities.

National Design Guide (NDG) /National Model Design Code (NMDC)

3.3 The National Planning Policy Framework makes clear that creating high quality buildings and places is fundamental to what the planning and development process should achieve. The National Design Guide, and the National Model Design Code and Guidance Notes for Design Codes illustrate how well-designed places that are beautiful, healthy, greener, enduring and successful can be achieved in practice. It forms part of the Government's collection of planning practice guidance and should be read alongside the separate planning practice guidance on design process and tools.

3.4 The NDG addresses the question of how we recognise well designed places, by outlining and illustrating the Government's priorities for well-designed places in the form of ten characteristics. Health is identified in a number of these.

3.5 The purpose of the NMDC is to provide detailed guidance on the production of design codes, guides and policies to promote good design. It expands on the ten characteristics of good design set out in the NDG.

Wider Policy Context

3.6 Essex has a long-standing commitment to using the built and natural environment to improve health and wellbeing as demonstrated through the work of the Essex Planning Officer's Association, support of the use of health impact assessments, inclusion of health and wellbeing policies in Local Plans, the inclusion of the health and wellbeing theme in the award-winning Essex

Design Guide and the appointment of a Public Health Healthy Places lead officer at Essex County Council.

Colchester Borough and Tendring District Local Plans

3.7 Tendring and Colchester Councils agreed to work together to address strategic planning matters across their areas and prepared a **shared Section 1** of respective Local Plans in 2021. Section 1 identified shared strategic priorities and how they would be addressed. It included a framework for accommodating future planned growth, provided a strategic vision for how planned growth would be realised and set key strategic objectives and policies. Section 1 identified a number of health inequalities and challenges across the area and directly referenced health considerations in the Vison for the area:

> *…new and expanded education and health care facilities enabling healthy and active lifestyles will be planned and provided along with other facilities to support the development of substantial new growth.*

3.8 Section 1 has five strategic objectives, one of them is addressing healthcare needs:

> To work with partners in the NHS, Public Health and local health partnerships to ensure adequate provision of healthcare facilities to support new and growing communities.

3.9 Section 1 confirmed the broad location of the Tendring Colchester Borders Garden Community (TCBGC) which would contain between 7,000-9,000 new homes, new employment and a range of supporting social and community facilities. It also set out (Strategic Policy 8) a requirement for a site specific 'Development Plan Document' to be produced to establish more detailed planning policies for the site and allocate specific areas of land for development. Strategic Policy 8 requires all future development in the allocation to comply with 14 principles. Specific references to health are made, as well as more implicit references around sustainable travel.

3.10 There is a comprehensive evidence base supporting the Section 1 Plan. The **Baseline Compendium** identified the existing health infrastructure. There are a series of topics relating to health, such as open spaces, playing pitches and green infrastructure.

3.11 **Colchester's Section 2 Local Plan** was adopted on the 4th July 2022. It sets out policies and allocations across the wider administrative area and provides the policy framework and development management policies until 2033.The vision says that by 2033 Colchester will be acclaimed for, amongst other things, its healthy communities. It contains specific development management policies on health and wellbeing.

3.12 **Tendring's Section 2 Local Plan** was adopted on the 25th January 2022. It is a District wide plan and sets out strategic objectives for healthcare as follows:

- To work with partners in the National Health Service, local health organisations, Essex County Council and local community groups to ensure adequate provision of healthcare facilities to support growing communities.
- To work with Public Health to promote and encourage healthy lifestyles through developments and planning to ensure that the people of Tendring have opportunities to be as healthy as possible.
- To provide a network of interconnected multi-functional natural green and blue spaces which secures a net gain in biodiversity and geodiversity; promotes healthy lifestyles; and enhances the quality of the natural and built environment.

3.13 The Plan contains a chapter on healthy places and Policy 'Healthy Places 1' sets out what the Council will do to improve the health and wellbeing of residents.

NHS: Putting Health into Place : Healthy new towns programme

3.14 The Healthy New Towns programme was a collaboration led by the NHS and a number of other organisations. It is significant as it aimed to link planning and health, ensuring collaboration at the point of planning strategic new housing developments and to work with communities to design healthier places.

3.15 The "***Putting Health into Place***" report set out the learning from the NHS Healthy New Towns Programme. This was launched in 2015 to explore how the development of new places could provide an opportunity to create healthier and connected communities with integrated and high-quality health services. The NHS, with a number of organisations, worked with 10 demonstrator sites and drew out key lessons which are shared in the publication. As well as the 10 demonstrator sites other local authorities, developers and the health sector engaged in the programme. Tendring, Colchester and Essex Councils were not a demonstrator site, but did get involved in the programme to consider how the learning from the demonstrators could be applied to the approach coming forward in North Essex.

3.16 There are 10 principles in the publication which capture the learning from the programme and advised that these should be integrated into the planning process for new large scale developments. It also includes case studies, lessons learned and clear actions for councils, developers and the NHS.

Figure 2: NHS Healthy new Towns: Key principles

Homes England, Building for a Healthy Life (BHL)

3.17 Homes England curated '***Building for a Healthy Life,*** a newer variation of Building for Life, as a design tool to help improve the design of new and growing neighbourhoods. It has been produced by Homes England in partnership with NHS England and integrates the findings from the Healthy New Towns Programme. It has been created as a design tool to allow a broad range of people to apply and use it for a range of different development types.

Essex Design Guide

3.18 The ***Essex Design Guide*** is a longstanding collection of guidance to inform the design of development in the County. The latest version dates from 2018 and covers a range of topics from air quality, layouts to parking design. As well as specific guidance on garden communities, it includes guidance on health and wellbeing which is an overarching theme.

North East Essex Health and Wellbeing Alliance – Live Well

3.19 The ***North East Essex Health and Wellbeing Alliance*** is a collaboration of commissioners, providers and other system partners working together as an integrated system to transform the health and wellbeing of the population of North East Essex. The Alliance includes Colchester Borough Council, Tendring District Council and Essex County Council. The Alliance have adopted the "Live Well" model to guide their work which contains six themes as shown in Figure 3.

Figure 3: Live Well Key Themes

3.20 The Alliance have committed to understand the issues across local neighbourhoods and prepare neighbourhood action plans to meet the needs of local populations. Health and wellbeing strategies and Livewell guides have been prepared for some neighbourhoods but not as yet for those close to or including the Garden Community. The Alliance is keen to ensure that the Garden Community embraces the Live Well themes and can be well aligned to support the wider determinants of health, for example with regards to providing access to open spaces, community support, jobs, skills, education and training.

Other Relevant Policy & Guidance

3.21 The ***Town and Country Planning Association*** (TCPA) has long championed that the way places are planned, designed, built and managed has a significance influence over whether communities are able to live healthy lives. As well as being a key partner in the Healthy New Towns programme, they have published ***a range of reports and guidance*** with an emphasis on health and wellbeing. The TCPA set out a range of guidance on what is needed to achieve healthier communities, including the importance of green infrastructure. It highlights that planning and health matters need to be considered collaboratively. A key message is that making places for everyone and that are accessible for all, will promote healthier lifestyles.

3.22 The ***Royal Town Planning Institute (RTPI) have published research*** which explores local, national and international planning practices enabling the creation and delivery of healthy places.

4 Tendring Colchester Borders Garden Community Development Plan Document (TCBGC DPD)

4.1 The proposal for a Garden Community at Tendring Colchester Borders has been established by policies as set out in the adopted Shared Section 1 of the respective Colchester and Tendring Local Plans. This was subject to detailed consideration and assessment via an Examination in Public which ran from 2018 through to 2021. This acknowledged that the overall needs of a growing population would need to be addressed, including requirements for health and other facilities to be available to meet the needs of new communities at the appropriate time.

4.2 The policies in the now adopted Section 1 of the Local Plans approved the general approach to the development of the Garden Community and its overall scale and nature. Recognising that further detail would emerge to guide and inform the proposals over time, the policy also required the Councils to prepare an additional level of planning policy through a subsequent 'Development Plan Document' (DPD).

Introducing the Tendring Colchester Borders Development Plan Document

4.3 The Councils have been working on the site specific DPD to take forward the policy set out in Section 1. This will confirm a long-term vision and area-based planning and delivery strategy for the site as well as defining the specific boundary within which new development would be expected, and the type and amount of uses that it will contain. It will set out a range of place-making and development objectives, site wide spatial and thematic policies and provide information on infrastructure, phasing and delivery. It sets out the planning policy and design framework to ensure the comprehensive and sustainable development of the site as a whole, whilst providing a specific focus on the initial period up to 2033 in line with the requirements of the Section 1 Local Plan.

4.4 The Plan is supported by a number of documents including an illustrative "strategic masterplan", which is drawn from earlier visioning and option development work as well as a range of other technical studies.

4.5 The production of the plan from a health perspective has been guided by the health and wellbeing context described previously and informed by the evidence base and public engagement. Through the engagement process, people emphasised a holistic view of how health and general wellbeing should be considered by and included within the Garden Community. People outlined how all aspects of such a large scale mixed use development could affect mental and physical wellbeing and emphasised the links between providing opportunities across all aspects from employment, social interaction, active lifestyles and feelings of community. People said they wanted the Garden Community to foster community spirit and a sense of shared responsibility among future residents.

4.6 The preparation of a 'Strategic Vision' was an important outcome of this process which drew from the initial engagement activity and set out a unified

vision, development principles and objectives for what could and should be achieved at the Garden Community. The visioning work was based around 5 themes of Nature, Movement and Connections; Community and Social Infrastructure; Buildings, Places, and Character; and Sustainable Infrastructure (as set out in Figure 4). The overall mission statement was as follows:

> *"Tendring Colchester Borders Garden Community aspires to become an exemplar and forward thinking new community in its own right, while resulting in clear benefits to its surrounding area. The new Garden Community will enable its residents to live healthy, happy, green, sustainable, connected and thriving lifestyles. This is a once in a lifetime opportunity to create a place to live, play and work in a better way."*

Figure 4: TCB Garden Community Strategic Vision:

The 'Draft Plan'

4.7 The 'Draft Plan' was published for formal statutory consultation over March to April 2022 (Regulation 18 of the Town and Country Planning (Local Planning) Regulations 2012).

4.8 The Draft Plan covered the same 5 themes as the strategic vision work, each of which had its own vision, strategic principles and objectives. The Draft Plan summarised the feedback received via the previous engagement work and set out policies providing more detail as to how the strategic principles would be achieved.

4.9 The elements most explicitly related to health are set out in the Community and Social Infrastructure theme. This included a number of objectives:

- Creating a place where it's easy to be healthy and happy:
- Inclusive public realm that creates the feeling of safety, a sense of place and interaction with nature.

- High quality and accessible sports facilities, playing pitches and greenspaces.
- Creation of a safe and overlooked walking and cycling network.
- Provision of healthcare, leisure, social and community facilities accessible by all modes of transport.
- Promotion of social interaction through shared amenity spaces.
- Active travel promoted.
- Connections established into the wider long distance leisure routes.

4.10 The Draft Plan included 8 broad policies overall, 7 of which specifically mention "health".

4.11 Policy 6 was the policy most focused explicitly on health and wellbeing. It built on the previous policy direction set by Section 1 and provided further detail about what should be included in the Garden Community and how future planning applications should be prepared e.g. the requirement for a health impact assessment, a healthy living and play strategy and engagement with health stakeholders.

4.12 One of the principles in Chapter six stated that "The Garden Community will be designed to make it easy for residents and visitors to live well. It will be about far more than the delivery of healthcare services but focused on creating environments that promote healthy living, are regenerative, restorative and relaxing - being active and tranquil will come naturally".

4.13 Part E of Policy 6 was a specific section on community & social infrastructure and stated:

"The Garden Community will create an active environment that promotes health and wellbeing and builds a strong community. The conditions for a healthy community will be provided through the pattern of development, good urban and public realm design, access to local services and facilities, opportunities for local employment, high quality open space and landscape design and safe places for active play, biodiversity and food growing, and which are all accessible by walking, cycling and public transport. Proposals must take account of the healthy new towns principles, the developing integrated neighbourhood model of working, as well as Sport England's Active Design principles.

Increased healthcare provision to serve the Garden Community will be achieved through the use of flexible space within centres and community buildings, and enhancements to existing facilities, including the wellbeing hub at the University of Essex. This should ensure that the facilities are flexible enough to be used as key assets in responding to the particular needs of the new community.

Proposals must be supported by a Health Impact Assessment (HIA) prepared in accordance with the advice and best practice as published by Public Health England and locally through the Essex Planning Officers' Association HIA Guidance Note, using the most up to date guidance. Any mitigation measures

identified in the Health Impact Assessment should be incorporated into the proposed development."

Developers should enter into early conversations with the local NHS commissioning teams (Integrated Care Board post April 2022), the North East Essex Health and Wellbeing Alliance, and other relevant partners to ensure that proposals reflect current health and social care models."

4.14 Other policies with clear implications on people's health and well-being included:

- Policy 1 (land use), which identified key land uses including the areas allocated for new neighbourhoods with all appropriate supporting services and facilities.
- Policy 2 (other requirements) which promoted active travel and movement, including creating social spaces and streets, ensuring safe and convenient access for people with diverse mobility needs, minimising noise and disturbance from construction and generally safeguarding the health, safety and amenity of occupiers or users of the proposed development.
- Policy 3 (Nature) to ensure a variety of types of new open spaces including for sports & recreation, children's play, promoting spaces that will be inclusive and accessible;
- Policy 4 (Buildings Places & Character) which included mix of dwelling types, sizes and tenure which provide high standard of living conditions, and suitable access to private amenity spaces.
- Policy 5 (Economic Activity) to provide a range of new employment skills and training opportunities.
- Policy 7 (movement) to prioritise sustainable and active movement patterns making walking, cycling and public transport the mode of choice for travel, including following guidance within 'Building for a Healthy Life' to create attractive public realm and streets.

4.15 The Draft Plan was the subject of a formal consultation, and comments were invited from all interested parties including (but not limited to) local residents, community organisations, statutory consultees and businesses.

Responses on the Draft Plan

4.16 The Regulation 18 Consultation (Spring 2022) received responses from 193 individuals. The Joint Committee for the Garden Community received a report at its meeting on the 18th July 2022 detailing those responses and highlighting where the Plan may need to change. People were particularly keen that the development is infrastructure led and did not result in existing infrastructure, services and facilities being overwhelmed. Specifically in relation to Policy 6, feedback was as follows:

- There was support for multi-functional community buildings and spaces.

- Support for the commitment to community-centred, long-term stewardship and recognition that further work is needed to make sure the right model is chosen. Some concerns were raised that there was insufficient information about the approach to stewardship.
- Wide ranging sports provision and green corridors and walkways were identified as being particularly important to promote healthy living.
- Development must meet the on and off-site infrastructure needed to support the development and mitigate the impact of development on the existing community and environment.
- Infrastructure must be delivered first as a key principle.
- Concern regarding the lack of detail on infrastructure requirements and its phasing. Several stakeholders stated that an Infrastructure Delivery Plan was needed to provide more information.
- The Garden Community presents a great opportunity to innovate the delivery of schools.
- Some indicated a need for a new special educational needs (SEN) school.
- Concern that there are no specific plans or commitment from the NHS to build a purpose built health centre within the whole of the Garden Community.
- A serving church presence in the new community would support the emerging community from its beginnings

4.17 In addition to the comments above, specific representations were made by health stakeholders. The North East Essex Clinical Commissioning Group (NEECG) responded to the Regulation 18 consultation on behalf of a number of organisations in the Suffolk and North East Essex Integrated Care System (SNEE), as did Lawson Planning on behalf of East Suffolk & North Essex NHS Foundation Trust (ESNEFT).

4.18 The responses generally welcomed the commitment in the draft plan for health and wellbeing policies to be a high priority and for health stakeholder bodies and representatives to play a key active role in the ongoing design and consideration of the proposals as they move through the planning process.

4.19 Specific comments included:

- Support for the overall vision, objectives and principles that related to promoting better health and wellbeing outcomes.
- Suggest that the policy on nature is more clearly linked to the policy on sustainable infrastructure.
- Support for the policy on Buildings, Places and Character as it reflected many of the principles related to healthy new towns.
- As well as supporting the policy proposals for Community and Social Infrastructure (Policy 6), NEECCG would like to explore ways of enabling provision of community hub spaces that would be flexible to enable health and wellbeing services to utilise.

- Support for securing funding which could provide opportunities to assist meeting healthcare service provision requirements.
- Support for promoting economic opportunities, including the creation of jobs for local people.
- A commitment to review a Health Impact Assessment.
- Welcomes reference made to a health & wellbeing hub being sited at the University of Essex Campus and suggests this could be part of early infrastructure to support initial residents of the Garden Community, prior to other facilities being provided.
- Highlighting current issues and existing capacity constraints in the Primary Care sector.

The Submission Version Plan

4.20 The DPD has now been updated to reflect the comments received on the Draft Plan and the finalisation of the evidence base.

4.21 The DPD has carried forward the policies set out within the Draft Plan. It therefore continues to contain a range of policies, the majority of which will have demonstrable impacts on promoting a healthy and successful place. As an illustration this includes policies are included on:

- Land uses to create compact new neighbourhoods with good access to the full range of services and facilities to enable people to live happy lives;
- Economic opportunities across various sectors – creating new job opportunities and capitalising on existing strengths such as those related to the growth of the University of Essex.
- A range of housing types and tenures including 30% affordable housing.
- Good access to new open spaces, sports and recreation.
- A focus on sustainable movement with high expectations and measures to maximise active travel – integrating high quality walking and cycling connectivity within the site and with its environs.
- Creating communities and neighbourhoods with a strong sense of belonging, served by a range of supportive social and community services and facilities, and a long term stewardship and governance arrangement led by local people.

4.22 A specific policy in the Submission Version relates to social and community infrastructure. It requires proposals to come forward in line with the NHS Healthy New Town principles and Sport England's Active Design guidance. It also requires that appropriate health and well being services must be provided to new residents and occupiers of the Garden Community from first occupation. Proposals for the development of the Garden Community must include a new **Health & Wellbeing Hub** to be provided in the early phases of development, as well as flexible space for health provision within centre and community buildings.

4.23 The DPD requires developers to enter into early conversations with the local health stakeholders, including the North East Essex Health and Wellbeing Alliance, and other relevant partners to ensure that proposals reflect current health and social care models.

4.24 The DPD requires that the phasing of health facilities and services must be set out as part of future planning applications to explain how health provision will meet the needs of the community as it grows. Proposals must be accompanied by a 'Health Strategy' that sets out what health and wellbeing services will be provided, prepared in collaboration with key health stakeholders. This must include detail on the size of the health centre, the provision of and relationship to other flexible community space and any off-site mitigation to address the needs of the population.

4.25 Planning Applications must be supported by a Health Impact Assessment (HIA) prepared in accordance with the advice and best practice as published by Public Health England and locally through the Essex Planning Officers' Association HIA Guidance Note, using the most up to date guidance. Any mitigation measures identified in the Health Impact Assessment should be incorporated into the proposed development.

5 Evaluation against the NHS Healthy New Town Principles

5.1 As the DPD has been prepared, consideration has been given to addressing and applying the 10 principles from the "Putting Health into Place" guidance. This has provided a useful framework to evaluate the approach taken so far with regard to health and wellbeing matters.

5.2 An overview of how the proposals align with the 10 principles is set out in the table below.

Principles	How does TCB perform?
1. Plan Ahead Collectively	
1.1 Establish shared leadership early on	The Councils have worked in partnership with health stakeholders during the production of the Section 1 and 2 plans as well as the emerging DPD. The Councils have engaged with the promoter of the scheme as well as neighbouring landowners such as the University. The plans have also been subject to engagement throughout their production involving a wider cross section of the community.
1.2 Agree a joint health vision statement, supported by joint goals	Health is integrated throughout the vision and objectives for the Garden Community. The Councils and health stakeholders will work with the developers to prepare a 'health strategy'.
1.3 Get health into local policy frameworks	Adopted Local Plans contain policies to improve health and wellbeing. The DPD also contains specific health policies and policies that intend to lead to better health and wellbeing outcome..
1.4 Influence development decisions	Health has been considered throughout the evolution of the proposed Garden Community in the plan making process. For example via promoting compact walkable neighbourhoods and access to open space, leisure & recreation.
1.5 Embed long-term income streams	Developer contributions will be required to fund a wide range of social, community facilities. A sustainable long-term governance and stewardship of community assets will need to evolved alongside the consideration of more detailed proposals.
2 Assess local health and care needs and assets	
2.1 Understand local needs and assets	The Essex Health and Wellbeing Strategy and JSNAs for the area consider the current baseline and highlight issues.
2.2 Lay the foundations for evaluation	The DPD contains a chapter on monitoring and sets out a range of indicators to assess the improvement of health and reduction in health inequalities.
3 Connect, involve and empower people and communities	
3.1 Engage early and regularly with	The Councils have undertaken engagement using a variety of methods and targeting different sections of society. For

new and existing communities to involve residents	example, Community Liaison Group, an electronic postcard from the future, interactive pin boards as well as the more formal consultations on plans. The Community and Stakeholder Report , Feb 2021- October 21 , summarises the engagement that took place in 2021 which helped shape the draft version of the plan. Further engagement took place on visioning and masterplanning.
3.2 Establish community resources and information	The DPD includes requirements to provide community facilities and green infrastructure which can help local communities to grow and develop.
3.3 Enable community governance and stewardship	The DPD requires governance and stewardship to be addressed as part of the preparation of more detailed proposals.
Create compact neighbourhoods	
4.1 Create compact spaces and places	Initial strategic masterplan work has included consideration of ensuring that new neighbourhoods are compact with good access to local services and facilities. The policies set out in detail what is required from the proposal including a requirement for a range of services and amenities to be accessible by active modes of transport in accordance with guidance on walkable neighbourhoods
4.2 Design places and services to maximise use and impact	Proposed local centres will host different social infrastructure collocated into multi-functional play and sports clusters. Locating leisure with other uses can help increase awareness of opportunities to take part in sport and leisure. Community facilities will include flexible community buildings that can be used for a variety of purposes, including health provision.
4.3 Practise inclusive design	The DPD requires the neighbourhoods to include homes of varying size, type, tenure and densities. It requires provision of 30% affordable homes and address wide needs such as Care, Assisted Living and Other specialist Housing, as well as addressing needs for student housing and pitches for gypsy and travellers.
4.4 Design multi-functional green spaces	The DPD seeks to provide a wider range of new and accessible green open spaces, including multipurpose sports, recreation and open spaces facilities to be delivered as multipurpose facilities well integrated into their landscape settings.
Maximise active travel	
5.1 Embed active travel from the earliest stages of planning and 5.2 Design active travel to meet local	The principles around active travel have been built into the masterplanning from an early stage, including the provision of walking and cycling routes within 400m of all homes. The DPD reinforces this through policy which states that the Garden Community will be designed with active travel at its core. It sets out a number of requirements for future planning applications, including demonstrating compliance with best

needs	practice, wayfinding and signage.
Inspire and Enable Healthier Eating	
6.1 Develop a joint commitment to plan for healthier eating	Allotments are to be included as part of the network of open space. The supporting text explains that the design and planning of the GC will ensure that residents are within a reasonable walking distance of fresh food.
6.2 Provide access to affordable healthy food and food growing	As above the DPD requires the provision of allotments and a range of productive uses such as orchards, growing fields, edible walkways and community gardens. It also requires the consideration of opportunity to provide space for growing food in private amenity space.
6.3 Provide opportunities to learn about healthier eating	A group of representatives from the health system and from the local councils is being established. One of its objectives is to consider what types of health services (including learning) should be provided.
Foster Health in Homes and Buildings	
7.1 Create buildings of all types that support and facilitate good health 7.2 Provide suitable homes that are healthy and efficient	The DPD requires neighbourhoods to include homes of varying size, type, tenure and densities. It also requires new homes to meet and where possible exceed the Governments technical standards to provide homes and space within them to be adapted to meet changing needs and take account of working from home. New homes are to be designed to maximise energy efficiency including orientation, insulation and solar gain. It also requires the provision of superfast broadband or equivalent.
7.3 Create workplaces that stimulate productivity, efficiency and resilience	The DPD includes new employment land. The Policy requires the employment land to be connected by walking, cycling and rapid transit routes.
7.4 Provide educational settings that support growth and development	The DPD sets out the requirement for the provision of new schools. Each school will be located to play a key role in each new neighbourhood.
7.5 Set up community hubs that support health and social connections	The masterplan for the Garden Community contains a number of neighbourhoods based around centres. Policies require community facilities to be provided in these centres where they are easily accessible to all.
Enable Healthy Play and Leisure	
8.1 Enable community activities and events	The DPD sets out the range of community facilities and infrastructure including open space and play, as well as the need to fund future governance and stewardship.
8.2 Create play and leisure spaces for everyone	The DPD sets out that open spaces, leisure, and play facilities should be incorporated into the Garden Community including natural free play.

9 Develop health services that help people stay well	
9.1 Strengthen and integrate 'out-of-hospital' care	Representatives from health have been involved in the planning of the Garden Community from the outset and have advised on impacts on primary and community care. This will be informed through the preparation of a health strategy and the determination of planning applications
9.2 Develop the future workforce 9.3 Link health services to wider community assets 9.4 Support self-management 9.5 Use digital technology to support care	A group of representatives from the health system and from the local councils is being established. One of its objectives will be to consider what services should be provided, how they are provided, and workforce planning. It is recognised that issues of resourcing, digital and wider service delivery will need to be considered further and reflect the context at the point of need. Work on this will be advanced through the preparation of a Health Strategy and Health Impact Assessment.
Create integrated health and wellbeing centres	
10.1 Maximise the benefits of integrated health and wellbeing centres 10.2 Strategic estates planning 10.3 Develop a schedule of accommodation 10.4 Options for project funding	The DPD requires both dedicated and flexible community space that can be used for health. This will be further informed by work on a health strategy and planning applications. Issues relating to the delivery of physical buildings will need to be considered further as more detailed proposals and strategies emerge.

6 Next Steps

6.1 The DPD will be considered by the Councils in 2023 and then published for consultation as the "submission version" under Regulation 19. It will be submitted to the Planning Inspectorate and an Examination in Public will be held, with potential adoption in 2024.

6.2 It is important to recognise that the purpose of this topic paper is to explain the work done to date. Whilst considerable work has been done to consider how the Garden Community could come forward, such as via the preparation of the Strategic Masterplan, more detailed proposals will come forward in subsequent stages. It is expected that the developers of the site will be working up their proposals in more detail during 2023 and preparing to submit a planning application in late 2024.

6.3 It will be via the preparation and determination of planning applications where matters will be considered further, with additional information to set out the anticipated impacts of the proposed development on health matters to come forward via the preparation of a Health Strategy and Health Impact Assessment (HIA).

Planning Application Requirements

6.4 The draft DPD sets out a number of pieces of work linked to health and wellbeing that must be submitted with a future planning application or done prior to the planning application. These are summarised below:

- Strategic Masterplan prepared and approved by the Councils, through a collaborative process with key stakeholders before the consideration of detailed proposals and determination of planning applications.
- Neighbourhood Masterplan prepared and approved by the Councils, through a collaborative process with key stakeholders before the consideration of detailed proposals and determination of planning applications.
- Neighbourhood Design Codes prepared and approved by the Councils, through a collaborative process with key stakeholders before the consideration of detailed proposals and determination of planning applications.
- A Landscape and Green Infrastructure Strategy for the whole Garden Community must have either been prepared and approved by, or otherwise submitted to and formally approved in writing by the Councils before the determination of any planning application for development of the site.
- A Strategy that sets out the latest evidence of housing need and demand and the proposed mix of dwelling types, sizes and tenure.
- An Economic and Employment Strategy will be required as well as work to promote skills & learning, which must be approved by the Councils, prepared collaboratively with the Councils and relevant stakeholders.

- A transport assessment, public transport strategy, a travel plan, mobility hubs strategy and micromobility management strategy are all required to be submitted with a planning application.
- Proposals must be supported by a Health Impact Assessment, prepared in accordance with the latest advice and best practice. Developers should enter into early conversations with the local NHS commissioning teams (Integrated Care Board post April 2022), the North East Essex Health and Wellbeing Alliance, and other relevant partners to ensure that proposals reflect current health and social care models.

Future engagement

6.5 Representatives from the health sector and planning have a working group established. The purpose of the group is to keep partners updated on progress, to shape and inform the final DPD, the planning application and the delivery of homes on the site. It will also have oversight of a “health strategy” that sets out how services will be delivered for the future residents of the garden community.

6.6 Work on planning applications will be led by the developers. It is anticipated that this begin in 2023 and will include an extensive approach to community engagement.

6.7 Once planning applications are submitted they will be published and formally consulted on via the Councils.

Appendix A – JSNA summaries

2017 JOINT STRATEGIC NEEDS ASSESSMENT (JSNA) for Essex

Key challenges identified in the JSNA 2017:

- Life expectancy is down in Essex.
- There is an ageing population with more people with long term conditions.
- The life expectancy gap is widening and there are significant health inequalities.
- 1 in 3 10-11 year olds and two thirds of adults are overweight or obese.
- People with mental health problems struggle to get housing and work.
- Mental health issues are common and suicide has increased.
- Dementia diagnosis is not as good as we want it to be.

2019 JSNA Colchester Profile

An updated JSNA was undertaken in 2019 and profiles were produced for each local authority area. Key issues identified for Colchester are:

- The population profile has a similar to the county average for Children and Young aged 0-15 (18.8%), but with a higher rate of 16 to 64 years olds (64%) and smaller proportion of older people aged 65+ (17.2%) compared to the Essex average (18.9%, 60.6%, 20.5%).
- Travel times to local services by walking or public transport is slightly shorter than the Essex average. The time to hospitals is significantly lower than the County average, presumably due to Colchester having a hospital.
- Average incomes are 8.45% lower than the Essex average and below the England average by 0.8%. The amount of residents claiming out of work benefits is lower than the Essex and England averages.
- The % of pupils achieving a 9-4 or 9-5 (equivalent A-C GCSE) is higher than the England and Essex average.
- Obesity levels in children are below the English average, although the % of obese children in reception was higher than the Essex average. Obesity levels in adults (64%) is above the England average (61%).
- Average life expectancy is above the England average. However, excess winter deaths in the over 85s (36.8%) is higher than the England rate of 29.3% and Essex average of 31.7%.
- The % of mothers known to be smoking at the time of delivery was higher (14.7), joint highest with Tendring in the County, and above the England rate.
- The rate of hospital admissions in children was the highest (120.74) in Essex (88.22) and higher than England (96.44). The age standardised rate of emergency hospital admissions due to hip fractures was higher than the

Essex and England average. The incidence of prostate cancer was the second highest in Essex and worse than the England rate.

- The prevalence of long-term mental health issues was the highest in Essex. The rate of hospitalisation for intentional self-harm was significantly higher than the rate across Essex and England. The suicide rate is higher than the rate for Essex as a whole and England.

2019 JSNA Tendring Profile

An updated JSNA was undertaken in 2019 and profiles were produced for each local authority area. Key issues identified for Tendring are:

- Tendring has the highest percentage of residents aged 65 and over in Essex. The proportion of under 65s is lower than the Essex average.
- The Old Age Dependency ratio is significantly above the Essex and England average.
- Tendring residents have the third highest travel times to local services and an average time to hospital above that of the Essex average.
- The average weekly income was 13% below the Essex average and 5.7% below the England average. The number of residents claiming out of work benefits is the highest in Essex and above the England average.
- The % of pupils achieving a 9-4 or 9-5 (equivalent A-C GCSE) is significantly lower than the England and Essex averages.
- Obesity levels in children and adults were the second highest in the County. Tendring has the highest rate of mortality from drug use in the County and higher than the England average.
- Life expectancy is the lowest for the County and lower than the England average.
- The rate of conceptions in women aged under 18 was the second highest in Essex and significantly higher than that for Essex and England. The infant mortality rate is the highest in Essex and higher than that of Essex and England.
- The % of mothers known to be smoking at the time of delivery was higher (14.7),joint highest with Colchester in the County, and above the England rate.
- Tendring had the highest rate of diagnosis of hypertension in Essex and above the average for Essex and England. The age of emergency hospital admissions due to hip fractures was the second highest in the County, and above the County and England average. The proportion of registered patients with dementia was the highest in the County.
- The prevalence of long-term mental health issues was the highest in Essex. Severe mental health conditions were significantly higher than the prevalence across the County and England. The suicide rate was the highest in Essex and significantly higher than that of Essex and England.

Appendix B – Relevant National and Local Policies and Strategies

National Planning Policy Framework (NPPF)

The NPPF sets out the Government's planning policies for England and makes it clear that sustainable development is at the heart of the planning system. Achieving this means the system has 3 overarching objectives. One of these, a social objective, is to support strong, vibrant and healthy communities (para 8). With regards to plan making, the NPPF says that plans should contain strategic policies that should set out an overall strategy for the pattern, scale and design quality of places, and make sufficient provision for, amongst other things, community facilities such as health infrastructure (para 20).

The NPPF in section 8 (para 92 -103) 'Promoting healthy and safe communities' continues to highlight the need for healthy places and states planning policies and decisions should reflect this and address identified local health and wellbeing needs such as green infrastructure, sports facilities, and access to healthier food. Furthermore section 9 (para 104 – 113) on 'Promoting sustainable transport' says that opportunities to promote walking, cycling and public transport use are identified and pursued in the earliest stages of plan-making.

Section 11 (para 119-125) of the NPPF 'Making effective use of land' outlines how planning should promote effective use of land whilst ensuring healthy living conditions. Section 12 (para 126 – 136) on achieving well design places, says that Planning policies and decisions (para 130) should ensure that developments create places that are safe, inclusive and accessible and which promote health and well-being.

National Planning Policy Guidance (NPPG)

The NPPG provides more detailed guidance on interpreting Government Policy. It includes a section on Healthy and Safe communities. It advocates joint working between planning and health sectors and sets out what the Government means by a 'healthy place' (Paragraph 003 Reference ID53-003-20191101).

National Design Guide (NDG) /National Model Design Code (NMDC)

The National Planning Policy Framework makes clear that creating high quality buildings and places is fundamental to what the planning and development process should achieve. The National Design Guide, and the National Model Design Code and Guidance Notes for Design Codes illustrate how well-designed places that are beautiful, healthy, greener, enduring and successful can be achieved in practice. It forms part of the Government's collection of planning practice guidance and should be read alongside the separate planning practice guidance on design process and tools.

The NDG addresses the question of how we recognise well designed places, by outlining and illustrating the Government's priorities for well-designed places in the form of ten characteristics. Health is identified in a number of these. For example, when talking about identity, the NDG states that well designed places, buildings and spaces have a positive and coherent identity that everyone can identify with, contributing towards health and wellbeing, inclusion and cohesion. In terms of

Movement, the NDG highlights that a well-designed movement network defines a clear pattern of streets that promotes activity and social interaction, contributing to health and wellbeing.

The purpose of the NMDC is to provide detailed guidance on the production of design codes, guides and policies to promote good design. It expands on the ten characteristics of good design set out in the NDG. For example, in relation to housing design, it guides that consideration should be given to layouts that maximise natural daylight, provide privacy, provision of private garden space as well as communal open spaces as all being important influences on health and wellbeing.

Colchester Borough and Tendring District Local Plans

Tendring and Colchester Councils agreed to work together to address strategic planning matters across their areas and prepared a shared Section 1 for the Local Plans. Section 1 identifies shared strategic priorities and how they will be addressed. It includes a framework for accommodating future planned growth, provides a strategic vision for how planned growth will be realised and sets key strategic objectives and policies for growth topics.

Section 1 identified the health inequalities and challenges identified in the area. The need to address health matters was identified in the Vison for the area:

> *…new and expanded education and health care facilities enabling healthy and active lifestyles will be planned and provided along with other facilities to support the development of substantial new growth.*

Section 1 has five strategic objectives, one of them is addressing healthcare needs:

> T*o work with partners in the NHS, Public Health and local health partnerships to ensure adequate provision of healthcare facilities to support new and growing communities.*

Section 1 confirmed the broad location of the Tendring Colchester Borders Garden Community (TCBGC) which would contain between 7,000-9,000 new homes, new employment and a range of supporting social and community facilities. It also established (Policy SP 8) a requirement for a site specific 'Development Plan Document' to be produced to establish more detailed planning policies for the site and allocate specific areas of land for development. Policy SP 8 requires all future development in the allocation Promotion to comply with 14 principles. Specific references to health are made, as well as more implicit references around sustainable travel. It also made reference to securing the highest quality of planning, design and management of the built and public realm and creating an environment that promotes health, happiness and well-being. It also referred to the need for increased primary healthcare capacity to serve the new development.

As part of the now adopted Section 1 Local Plans, Policy SP6 (relating to strategic infrastructure needs) referenced three important aspects related to health & wellbeing:

- That an appropriate scale of healthcare infrastructure will need to be provided as part of the new development.

- A requirement for new development to maximise its positive contribution in creating healthy communities and minimising negative health impacts, both in avoidance and mitigation, as far as was practicable.
- To provide the conditions to establish a healthy community across a range of matters including through good urban design, with good access to local services and facilities; green open space and safe places for active play and food growing, and which are all accessible by walking, cycling and public transport.

With regards to transport, Policy SP6 requires the DPD for the Garden Community to include details of the design and delivery of Route 1 of the Rapid Transit System and a programme for the integration of the Garden Community into the system. It also required target modal shares for each transport mode and details of sustainable transport measures to support their achievement.

Policy SP 9 requires the Supplementary Planning Document and any planning application to address specific principles and requirements in the design, development and delivery of the new garden community. There is one specific reference to health:

> *Increased primary healthcare capacity will be provided to serve the new development as appropriate. This may be by means of new infrastructure or improvement, reconfiguration, extension or relocation of existing medical facilities.*

There is a comprehensive evidence base supporting the Section 1 Plan. The Baseline Compendium identifies the existing health infrastructure. There are a series of papers on “healthy places” that relate to open spaces, playing pitches and green infrastructure.

The Examiners report concludes that the Garden Community would have access to a wide range of services and facilities, including healthcare.

Colchester’s Section 2 Local Plan was adopted on the 4th July 2022. It is a Borough wide Plan that provides the policy framework, site allocations and development management policies until 2033.The Vision for the Plan says that by 2033 Colchester will be acclaimed for, amongst other things, its healthy communities. It sets out the following objective with explicit reference to health outcomes:

Promotion of healthy lifestyles through the provision and enhancement of sport, leisure and recreation facilities, public open space and green infrastructure. The plan contains development management policies on health and wellbeing:

- Policy DM1: Health and Wellbeing – requires all developments to help promote healthy and active lifestyles;
- Policy DM18: Provision of Public Open Space – requires all new residential development to meet the recreational needs of new communities and open space must increase opportunities for participation in healthy lifestyles and;
- Policy DM20: Promoting Sustainable Transport and Changing Travel Behaviour – The Policy seeks to increase modal shift to sustainable modes of transport.

Tendring's Section 2 Local Plan was adopted on the 25th January 2022. It is a District wide plan with the exception of the allocated TCBGC. However, it sets out strategic objectives for healthcare as follows:

- To work with partners in the National Health Service, local health organisations, Essex County Council and local community groups to ensure adequate provision of healthcare facilities to support growing communities.
- To work with Public Health to promote and encourage healthy lifestyles through developments and planning to ensure that the people of Tendring have opportunities to be as healthy as possible.
- To provide a network of interconnected multi-functional natural green and blue spaces which secures a net gain in biodiversity and geodiversity; promotes healthy lifestyles; and enhances the quality of the natural and built environment.

The Plan contains a chapter on healthy places and Policy HP1 sets out what the Council will do to improve the health and wellbeing of residents by: working in partnerships with health professional bodies; supporting the NHS; encouraging healthier communities; requiring a Health Impact Assessment (HIA) on all sites delivering 50 or more dwellings; seeking enhanced health facility provisions from developers; and increased contact with nature and open space.

This Policy contributes towards achieving Objectives 5 and 6 of this Local Plan.

The Plan states that:

> *4.1.1 Good health and wellbeing means that wherever possible people are free of illness or disability and they have a positive physical, social and mental state. The Council wants people in Tendring District to have healthier, happier and longer lives with less inequality.*

In addition to the specific policy on improving health and wellbeing, the chapter contains policies on community facilities, green infrastructure and open space, sports and recreational facilities. Furthermore, the Plan contains policies on transport and accessibility. The Vision for the Garden Community is that there will be major investment in rapid transit services to the town centre, pedestrian and cycle connections and a new link road between the A120 and A133. Policy CP2 is concerned with improvements to the transport network and identifies that Housing Infrastructure Fund (HIF) monies have been secured to provide the link road and Rapid Transit System and are subject to further detailed planning.

NHS: Putting Health into Place : Healthy new towns programme

The Healthy New Towns programme was a collaboration led by the NHS and a number of other organisations. It is significant as it recognised the need to better link planning and health, ensuring collaboration at the point of planning new housing developers and to work with communities to design healthier places. The Putting Health into Place report sets out the learning from the NHS Healthy New Towns Programme. This was launched in 2015 to explore how the development of new places could provide an opportunity to create healthier and connected communities with integrated and high-quality health services. The NHS, with a number of organisations, worked with 10 demonstrator sites and drew out key lessons which are shared in the publication. There are 10 principles in the publication which capture

the learning from the programme. It also includes case studies, lessons learned and clear actions for councils, developers and the NHS. As well as the 10 demonstrator sites other local authorities, developers and the health sector engaged in the programme.

Homes England, Building for a Healthy Life (BHL)

Homes England curated 'Building for a Healthy Life', a newer variation of Building for Life, as a design tool to help improve the design of new and growing neighbourhoods. It has been produced by Homes England in partnership with NHS England and integrates the findings from the Healthy Towns Programme. It has been created as a design code to allow a broad range of people to use it easily. It is organised across 3 headings and contains 12 considerations to think about the qualities of successful places and how these can be best applied to the individual characteristics of a site and its wider context.

Integrated Neighbourhoods	Distinctive Places	Streets for All
Natural connections	Making the most of what's there	Healthy streets
Walking, cycling and public transport	A memorable character	Cycle and car parking
Facilities and Services	Well defined streets and places	Green and blue infrastructure
Homes for everyone	Easy to find your way around	Back of pavement, front of home

The tool emphases the key role the built environment has on/in putting health into a place. It outlines how it can be achieved by implementing healthy and sustainable lifestyles and practices such as walking/cycling, provision of (retain) green and blue infrastructure, sports and playing facilities and improving equal accessibility

Essex Design Guide

The Essex Design Guide is a longstanding collection of guidance to inform the design of development in the County. The latest version dates from 2018 and covers a range of topics from air quality, layouts to parking design. As well as specific guidance on garden communities, it includes guidance on health and wellbeing which is an overarching theme.

The EDG states health and wellbeing can encouraged and improved by:

- supporting community leadership and participation through high-quality planning, design and management of the environment;
- promoting high-quality local employment, affordable housing, sport & recreation facilities, environmental sustainability and skill development;
- providing convenient local healthcare services with options for (and incentives towards) self-care;
- providing interesting and stimulating open spaces and natural environments to encourage people to be physically active;
- ensuring developments embody the principles of lifetime neighbourhoods and promote independent living;
- promoting access to healthy and locally sourced food;
- encouraging active travel, most particularly cycling and walking;
- creating a safe and accessible built environment with well-designed public spaces that encourage community participation;
- embracing the Smart Cities concept by incorporating and futureproofing for new technology; and
- ensuring that all work, educational or public spaces are sufficiently well designed to promote active and healthy lifestyles.

The theme of health and wellbeing is addressed more specifically in the following sections of the EDG: Landscapes and Greenspaces, Layout Design, Street and Roads, Internal Design Details, Architectural Details.

The guidance on garden communities sets out 11 key principles:

- Land value capture for the benefit of the community.
- Strong vision, leadership and community engagement.
- Community ownership of land and long-term stewardship of assets.
- Mixed-tenure homes and housing types that are genuinely affordable.
- A wide range of local jobs in the garden city within easy commuting distance of homes.

- Beautifully and imaginatively designed homes with gardens, combining the best of town and country to create healthy communities, and including opportunities to grow food.
- Development that enhances the natural environment, providing a comprehensive green infrastructure network and net biodiversity gains, and which uses zero-carbon and energy-positive technology to ensure climate resilience.
- Strong cultural, recreational and shopping facilities in walkable, vibrant, sociable neighbourhoods.
- Integrated and accessible transport systems, with walking, cycling and public transport designed to be the most attractive forms for local journeys.
- Provision of comprehensive and future-proof digital connectivity delivered via fixed and /or mobile technology to support the use of smart technology.

The design principles of garden communities place a firm focus on creating self-contained communities surrounded by green infrastructure and comprising residential, commercial and agricultural zones. Self-sustainability is put into practice through active, healthy lifestyles embodied in walking and cycling, locally grown produce and locally based employment and services.

North East Essex Health and Wellbeing Alliance – Live Well

The North East Essex Health and Wellbeing Alliance is a collaboration of commissioners, providers and other system partners working together as an integrated system to transform the health and wellbeing of the population of North East Essex. The proposed Garden Community falls within the Alliance area and the Alliance includes Colchester Borough Council, Tendring District Council and Essex County Council. The Alliance have adopted the “Live Well” model to guide their work. It contains six themes.

The Alliance have committed to understand each of their neighbourhoods and prepare neighbourhood action plans to meet the needs of local populations. Health and wellbeing strategies and Livewell guides have been prepared for some neighbourhoods but not for those covering the Garden Community. There is desire from the alliance to ensure that the development embraces the Live Well themes and enables opportunities to support the wider determinants of health, for example with regards to skills, education and training.

Others Relevant Policy & Guidance

The **Town and Country Planning Association** (TCPA) has long championed that the way places are planned, designed, built and managed has a significance influence over whether communities are able to live healthy lives. As well as being a key partner in the Healthy New Towns programme, they have published a range of reports and guidance with an emphasis on health and wellbeing.

The Healthy and safe communities (2014) guidance from the Department of Housing Levelling Up and Communities (DHLUC) and Ministry of Housing, Communities and Local Government (MHCLG) highlights the determinants of health and wellbeing and provides guidance on what is needed to achieve healthier communities, including the importance of green infrastructure. It highlights that

Planning and Health matters need to be considered collaboratively. A key message is that making places for everyone and that are accessible for all, will promote healthier lifestyles.

The **Royal Town Planning Institute** (RTPI) have published a range of guidance and research which explores local, national and international planning practices enabling the creation and delivery of healthy places. The "Enabling Healthy Placemaking" (2020) identifies 7 steps for healthier environments.

The RTPI has also published a practice note on Mental Health and Town Planning (2020) which gives advice on how planners can work within the current system and with other professionals to take account of mental health when making changes to the built environment.

In 2020 the RTPI published a practice note on how town planning can work with other professionals to create better environments for people living with dementia. The advice has been endorsed by the Alzheimer's Society and Public Health England.