

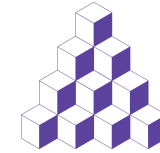
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Planning, Housing and Health

Planning and Housing Commission

Garreth Bruff

Aims



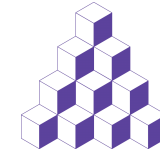
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Look at the changes ahead

Consider our different roles

Review of PH Commission and how this can support districts

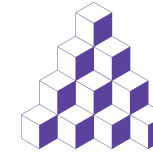
The big message for p & h



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- “creating the conditions where people can take responsibility for their own health and well being”
- Instead of focusing on deficits problems and needs this new approach will build on the assets of individuals families and communities and strengthen civic society

The potential



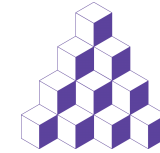
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Healthy places

“The **White Paper** makes clear that pollution, air quality, noise, the availability of green and open spaces, transport, housing, access to good-quality food and social isolation, all influence the health and well-being of the local population – all issues influenced to a greater or lesser extent by the planning system [and housing].”

Planning Magazine, 21 February

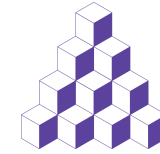
The reality?



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- **29% of new private sector housing should not have received planning permission**
(CABE Built Environment Housing Audit 2007)
- **21% affordable housing assessed as poor**
(CABE survey for HCA)
- **30,000 people die or seriously injured on roads in Britain annually; 27,868 thousand cars registered in 2009**
(Danny Dorling 2010)

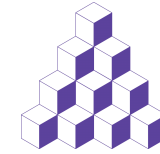
What's the real situation?



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- ***How does it look and feel in your area?***
- ***What are the issues you are focusing on in your district?***
- ***What role is planning and housing taking now?***

What's the real situation?



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Assessing the role of planning and housing

7th March 2011 Bolton

The Public Health Outcomes Framework

- **not a performance management tool** (shouldn't replicate approach of old National Indicator Set)
- **a consistent means** of presenting the most relevant, available data
- **Linked to new Health Premium**

Domain 1: Health Protection and Resilience

The activities to deliver this domain can most appropriately be coordinated nationally by Public Health England and local authorities will contribute to these outcomes particularly in their role in leading local resilience arrangements and in providing surveillance information.

Proposed indicators:

- Comprehensive, agreed, inter-agency plans for a proportionate response to public health incidents are in place and assured to an agreed standard.
- Systems in place to ensure effective and adequate surveillance of health protection risks and hazards.
- **Life years lost from air pollution as measured by fine particulate matter.**
- Population vaccination coverage (for each of the national vaccination programmes across the life course).
- Treatment completion rates for TB.
- **Public sector organisations with a board approved sustainable development management plan.**

Domain 2: Tackling the Wider Determinants of Ill Health

Locally, Health and Wellbeing Boards will take a broad approach to health improvement requiring the full participation by all partners to focus on improving the wider determinants of health that drive poor health outcomes especially in the most disadvantaged.

Proposed Indicators:

- Children in poverty;
- School readiness;
- Housing overcrowding rates;
- Truancy rates;
- Incidents of domestic abuse;
- Statutory homeless households;
- Fuel poverty;
- Access and utilisation of green space;
- Reduction in proven re-offending;
- Social connectedness;
- Cycling participation;
- Rates of violent crime;
- First time entrants to the youth justice system;
- Rates of adolescents not in education, training or employment;
- Proportion of people with mental illness and/or disability in settled accommodation and/or in employment;
- Proportion of people in long term unemployment;
- Employment of people with long term conditions;
- Killed or seriously injured casualties on England's roads;
- The percentage of the population affected by environmental, neighbour and neighbourhood noise;
- Older people's perception of community safety.

Domain 3: Health Improvement

Helping people to live healthy lifestyles and make healthy choices)

Nationally, there is a clear role for Government in contributing to delivering these indicators – through legislation or regulation, through partnerships with business and industry, through national campaigns. However, much of the delivery will take place at the local level – led by the Director of Public Health in partnership with Health and Wellbeing Boards, using the ring-fenced public health budget.

Proposed Indicators:

- Prevalence of healthy weight in 4-5 and 10-11 year olds;
- Prevalence of healthy weight in adults;
- Smoking prevalence in adults;
- Rate of hospital admissions for alcohol related harm;
- % of adults meeting recommended guidelines on physical activity;
- Hospital admissions caused by unintentional and deliberate injuries to 5-18 year olds;
- Number leaving drug treatment free of drug dependence;
- Under 18 conception rate;
- Rate of dental caries in children aged 5 years;
- Self-reported wellbeing.

Domain 4: Prevention of Ill Health

Nationally, the role of Government (in partnership with business and industry) will be critical. Across local Health and Wellbeing Partnerships, public health would share responsibility with the NHS, adult social care and children's services.

Proposed Indicators:

- Prevalence of recorded diabetes;
- Work sickness absence rate;
- Screening uptake;
- Chlamydia diagnosis rates;
- Child development at 2 - 2.5yrs;
- Maternal smoking prevalence;
- Hospital admissions caused by unintentional and deliberate injuries to under 5s;
- Rate of hospital admissions as a result of self harm;
- Incidence of low-birth weight of term babies;
- Breastfeeding initiation and prevalence at 6 - 8 weeks after birth;
- Proportion of persons presenting with HIV at a late stage of infection;
- Smoking rate of people with serious mental illness;
- Emergency readmissions rates to hospitals within 28 days of discharge;
- Health related quality of life for older people;
- Acute admissions as a result of falls or fall injuries for over 65s;
- Take up of NHS Health Check programme by those eligible;
- Patients with cancer diagnosed at Stage 1 and 2 as a proportion of cancers diagnosed.

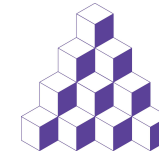
Domain 5: Prevention of premature mortality

At the local level, improvements in these indicators will be driven by local Health and Wellbeing Partnerships with shared responsibility across the NHS, public health and care services. Some delivery will be for other local partners to prevent seasonal mortality, National contribution across Government, the NHS Commissioning Board and other national bodies in setting policy or to avoid mortality as a result of major emergencies.

Proposed Indicators:

- Infant mortality rate;
- Suicide rate;
- Excess seasonal mortality;
- Mortality rate of people with mental illness;
- Mortality rates from the following diseases in the u75s: communicable disease; cardiovascular disease; cancer; chronic liver disease; chronic respiratory disease.

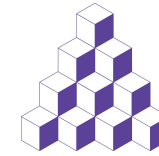
What do we think?



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- ***Where do local planning and housing functions contribute?***
- ***What should we be prioritising in future?***

Contribution of PHC

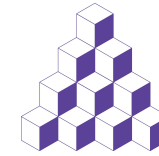


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GMS priority: Creating Quality Places

1. **An integrated investment framework and spatial framework** – GMSF, LIP2, Housing Strategy and Action Plan
2. **A more effective housing market** – local lettings policies, landlord accreditation, NAHP, accelerating housing delivery
3. **An integrated infrastructure strategy** – energy, flood risk and water management, water quality, green infrastructure, waste and minerals
4. **Collaboration** – stakeholders, research and intelligence, efficiencies, new Government initiatives

Collaboration & relationships



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Planning & Housing Commission

6 elected members, 5 partners and advisors
(see handout)

Planning Officers Group

GM wide voice for Chief Planning
Officers (Chris Finley, Salford)

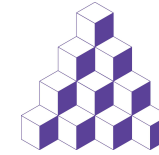
Housing Officers Group

Service heads leading joint work (John
Rooney, Oldham)

Spatial Planning Infrastructure Group

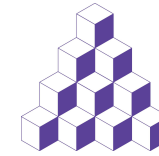
Support network and resource pool of lead
strategic planners (Paul Allen, Bury)

GM Housing Strategy & Action Plan



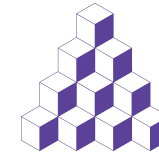
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- Put in place conditions to support and accelerate delivery of housing growth
- Understand spatial implications of GMS, inc supporting infrastructure
- Transform the quality of GM's residential offer
- Improve quality of private rented housing
- Rapid transformation to low carbon economy
- Focussed intervention on most deprived areas
- Housing & well-being



Local Investment Plan ... LIP1

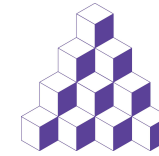
- Brought together £375 million of HCA investment, including:
 - NAHP, HMR, PFI, Decent Homes (ALMO and RSL), LA New Build & Kickstart Round 1, Mortgage Rescue...
- HCA likely to have invested £30 million additional NAHP in GM 2010/11, producing 798 additional units.
- Takes us up to end of March 2011



..... Local Investment Plan 2

- Support economic growth
- Deliver housing growth
- Create places people want to live
- Provide better life chances for our residents
- Make the best use of assets and achieve more for less
- **But is very different to LIP1....**

... where we are now on LIP2



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- Prospectus for public & private sector investment in housing and regeneration
- Why GM is a good place to invest (rather than somewhere else)
- Developing private sector investment opportunities - 'new models'
- What will Ministers want? Housing numbers, with minimal grant input
- But sticking to our strategic objectives from GM Strategy, GM Housing Strategy, etc.

7th March 2011 Bolton

What is GMSF

- **Spatial expression of GMS**
- **Collaborative framework for GM – duty to co-operate, localism agenda, abolition of regional level**
- **framework for investment – maximise impact of scarce resources**

And what it is not!

- not a replacement for RSS
- not a 'single plan' for GM
- not statutory and binding

It remains the case that

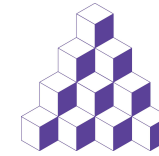
- GM has 10 LPAs
- each LA needs to drive forward its own priorities
- each LA will continue to make its own planning decisions

What will it cover?

- genuinely sub regional issues – large employment sites, town centres, infrastructure
- framework for key distributive decisions
- encourage/accommodate public and private investment
- opportunity led - matching supply and demand

What is the health dimension?

- What are key health issues and messages?
 - Work; Healthy choices; green space?
- What are spatial implications?
 - Access and connectivity?
- What scale works best?
 - District or GM wide?



Looking ahead

LIP 2

Approved by AGMA Exec Board 28th January 2011

- Developing a Local Investment Agreement
- Moving to implementation with new delivery models for housing being prioritised

GMSF

- Incorporating results of studies and initial responses to topic papers
- Reporting to Leaders in June
- Wider consultation after this

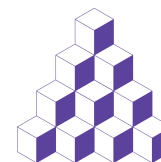
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