



Policy 51

Health and Wellbeing (Strategic Policy)

- A. The Council will support development that promotes healthy lifestyles and reduces health inequalities, and results in a pattern of land uses and facilities which provide:
1. Access to sustainable modes of travel such as safe cycling routes, safe and attractive walking routes and easy access to public transport to promote active travel and reduce car dependency as well as air pollution, supporting the Healthy Streets approach as set out in Policy 1 'Living Locally and the 20-minute neighbourhood (Strategic Policy)'.
 2. Access to green infrastructure, including river corridors, local open spaces as well as leisure, recreation and play facilities to encourage physical activity, as set out in Policy 37 'Public Open Space, Play, Sport and Recreation '.
 3. Access to local community facilities, services and shops which encourage opportunities for social interaction and active and healthy living in accordance with Policy 1 'Living Locally and the 20-minute neighbourhood (Strategic Policy)', as well as contributing to dementia-friendly environments.
 4. Access to local healthy food, for example, allotments and food growing spaces including rooftop gardens, as set out in Policy 52 'Allotments and Food Growing Spaces' and food growing spaces.
 5. Access to free public toilet facilities which are open to all residents and visitors in major developments that are open to the public, and free 'Changing Places' toilets where appropriate as set out in London Plan Policy S6 (linked to the Council's Community Toilet scheme); and retain existing public toilet facilities.
 6. Access to free drinking water at appropriate locations in new or redeveloped public realm, in accordance with London Plan Policy D8.
 7. A safe, inclusive development layout and public realm that considers the needs of all, including the older population and disabled people, in accordance with London Plan Policy D5.
 8. Active Design which encourages wellbeing and greater physical movement as part of everyday routines.
 9. Access to healthy housing in accordance with Policy 13 'Housing Mix and Standards ' and Policy 28 'Local Character and Design Quality (Strategic Policy)' quality, to create internal environments and associated external spaces that support the health and wellbeing of future occupiers.
- B. This policy will be delivered by requiring developments to comply with the following:
1. A Health Impact Assessment must be submitted with all major development proposals.
 2. An Inclusive Design Statement is required as part of the Design and Access Statement.

3. The Council will refuse proposals for new fast food takeaways located within 400 metres of the boundaries of a primary or secondary school in order to restrict the availability of unhealthy foods to reflect London Plan Policy E9.
4. Existing health facilities will need to be retained where these continue to meet, or can be adapted to meet, residents' needs.
5. Applications for new or improved facilities or loss of health and social care facilities will be assessed in line with the criteria set out in Policy 49 'Social and Community Infrastructure (Strategic Policy)'.

Healthy Lifestyles

25.1 Health and wellbeing is a cross-cutting theme, which has links with many other parts of the Local Plan. A healthy place is one which encourages, supports and promotes healthy behaviours and environments and a reduction in health inequalities for people of all ages. It will provide the community with opportunities to improve their physical and mental health, and support community engagement and wellbeing. It is a place which is inclusive and promotes social interaction. Well-designed homes and buildings that are functional, accessible and sustainable, will enable healthy, comfortable and safe internal and external environments. Healthy places meet the needs of children and young people to grow and develop, as well as being adaptable to the needs of an increasingly elderly population and those with dementia and other sensory or mobility impairments.

25.2 The Richmond Health and Care Plan, developed in partnership with local people, voluntary community groups and health and care partners in the borough of Richmond, sets out a vision for improving the health and wellbeing of local people. This emphasises the whole life course of 'Start Well, Live Well and Age Well', which encompasses residents of all ages and demographics, that is also the basis of the Joint Health and Wellbeing Strategy. The Council's Prevention Framework 2021 to 2025 aims to embed prevention in the Council's wider work, particularly through the environment, to promote positive health and wellbeing and to address health inequalities.

25.3 The London Plan sets out that many determinants of health and wellbeing that can be shaped by the planning system, for example from transport and housing through to air quality and climate change, along with healthcare provision. It seeks an integrated and co-ordinated way to improving the mental and physical health of all Londoners. The London Plan promotes a Healthy Streets Approach to put improving health and reducing health inequalities at the heart of public space, which links with active travel.

Inclusive Design

25.4 An inclusive design approach is intended to ensure the diverse needs of all are integrated into proposals from the outset. This is essential to ensuring that the built environment, both the internal and external parts of buildings and the spaces in between, are safe, accessible, and convenient for all.

25.5 One of the draft priorities for the new Community Safety Strategy, being brought forward in 2023 by the Richmond Community Partnership, is for safer neighbourhoods: crime and anti-social behaviour including volume crime such as burglary and motor vehicle crime, violent crime such as robbery and knife crime – and keeping children and young people safe. The Council has committed to developing an ambitious, long-term strategic approach to ending violence against women and girls, in the Violence Against Women and Girls Strategy 2022- 25, and through planning for example inclusive design can ensure women feel visible and safe in public spaces. The borough has had the lowest crime rate in London for the last three years, although the layout of development and public realm,

encouraging active and continual use of spaces, can reduce opportunities for crime and anti-social behaviour and the fear of crime. Designing out crime is also identified in Policy 28 'Local Character and Design Quality (Strategic Policy)', in Policy 19 'Managing the Impacts of Development on Surroundings ' in considering ways to manage impacts of evening and food and drink uses, and Policy 43 'Floodlighting and Other External Artificial Lighting ' in recognising the benefits of floodlighting for safety of movement.

25.6 Public toilets are a vital facility, and should be provided as part of major development that are open to the public, such as shops, sport, leisure and health care facilities, transport hubs, cultural and civic buildings, and large areas of public realm. The supporting text to London Plan Policy S6 sets out that a range of toilet facilities should be provided, and that provision should be safe, well-lit and clean with ongoing management and cleaning secured at the planning stage. The provision of Changing Places toilets can open up new areas and experiences for people with profound and multiple impairments, and their companions, removing the barrier that the lack of provision can create.

25.7 The supporting text to London Plan Policy D8 also sets out that the provision of accessible free drinking water fountains helps improve public health, and reduces waste supporting the use of reusable water bottles.

Older People

25.8 Life expectancy has been increasing over time and there is a national trend towards an ageing population. There is a projected significant increase to 2039 in the over-75 population and there are increasing numbers of older people living at home with long term physical and mental conditions such as dementia. Planning can play a role in the creation of environments and a public realm that are inclusive and accessible for the older population, including for those with dementia.

25.9 The Council is committed to creating a dementia-friendly community in the borough, as set out in the Richmond Joint Dementia

Strategy, to support people with dementia and their carers. It is recommended that developers have consideration to the Royal Town Planning Institute (RTPI) practice guide '[Creating better environments for people living with dementia](#)' (2020) which provides practical advice on how to incorporate dementia approaches in development proposals.

25.10 Design of the built environment should specifically consider the needs of the older population such as more seating opportunities and benches. A high quality, inclusive and accessible urban environment will enable the older population to remain independent and active for longer, thereby reducing the need for extensive adaptations to buildings.

25.11 Housing development should consider the needs of the older population. Opportunities to enable older people to downsize is recognised in Policy 13 'Housing Mix and Standards ', along with higher standards for inclusive access, and new accommodation should meet identified local needs as set out in Policy 12 'Housing Needs of Different Groups '.

Young People

25.12 What happens in early life, starting from conception, affects health and wellbeing in later life. However, it is often the environment that makes it difficult for children and young people to stay healthy. Growing up in a healthy and safe neighbourhood is a key part of giving children the best start in life; places where children can play safely and access green spaces, breathe clean air, be active, and enjoy a healthy diet. Prevention is critical to ensuring that children and young people can fulfil their potential.

25.13 Planning can play a role in addressing environmental harms and assets in the places and spaces where young people spend the most time outside of the home, including the school, and the local neighbourhood. This links with the approach to restricting the availability of unhealthy foods set out in this policy. It also links to the wider cross-cutting themes and the details set out in other policies in this Plan, for example there are opportunities to work with schools to

encourage modal shift to sustainable transport and encourage low pollution walking routes, to prioritise active travel and promote the Healthy Streets approach.

health facilities required to meet the increased demand which arises from new developments.

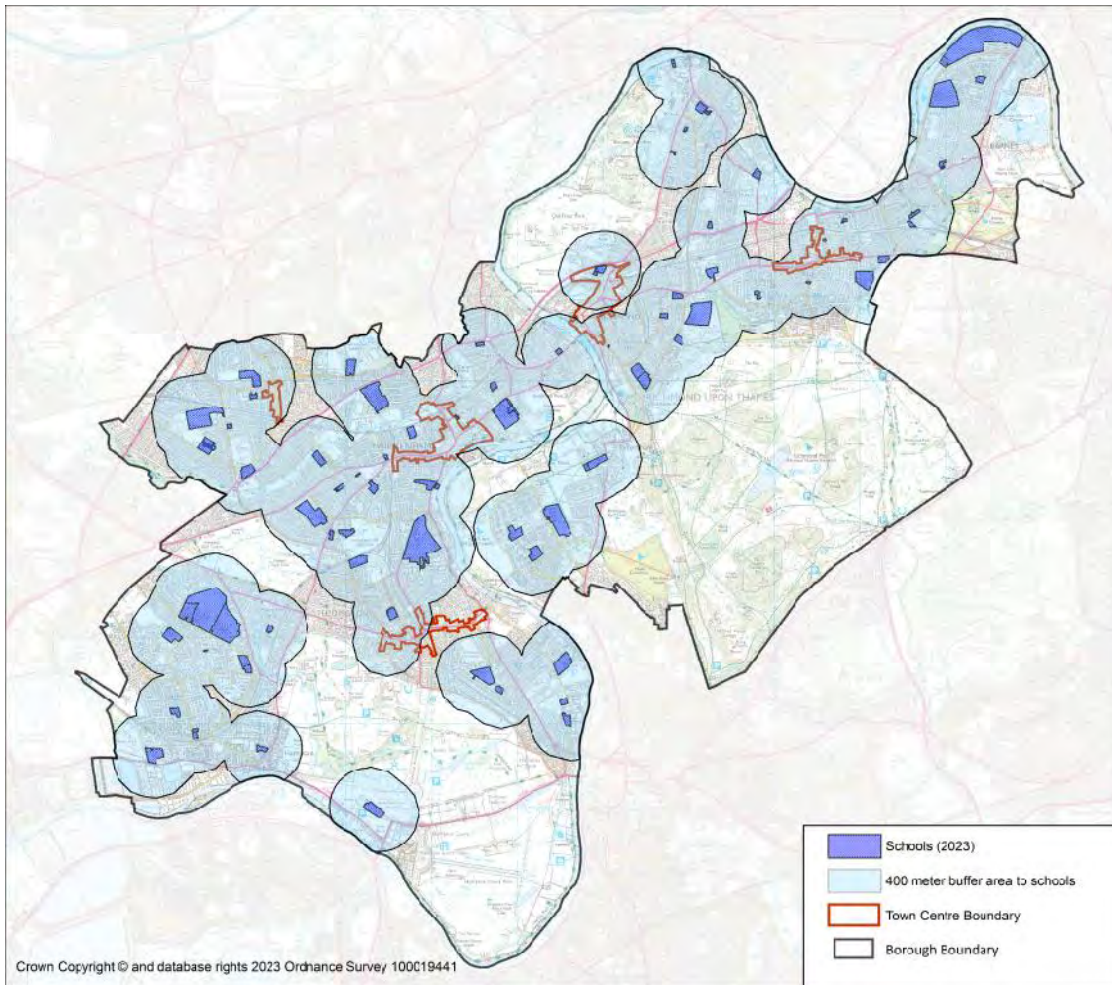
Health Impact Assessment

25.14 A Health Impact Assessment (HIA) must be submitted with all major applications. A HIA should assess the health impacts of ~~a~~ *proposed development* *s including consideration of existing health and wellbeing implications.*; *It should* identify ~~ing~~ mitigation measures for any potential negative impacts as well as measures for enhancing any potential positive impacts. ~~The London Healthy Urban Development Unit (HUDU) have developed a rapid HIA tool to quickly assess the impacts of a development plan or proposal and recommend measures, this tool should be used as early as possible in the planning process and established at pre-application stage. The HIA should be developed from RIBA Stage 1 to help influence concept and technical design as well as consider health and wellbeing inputs from community consultation processes such as workshops. The development of the HIA should demonstrate input from the lead architects and designers. The level of detail required for HIAs will be determined by the scale and impact of the development, HIA guidance is available online via the Council's website.~~ As set out in the Planning Obligations SPD, the *London Healthy Urban Development Unit (HUDU)* guidance and their Planning Contributions Model should be used to calculate the capital cost of the additional

Takeaways

- 25.15** Planning can influence the built environment to support health and wellbeing, this includes helping to reduce obesity and excess weight in local communities. Obesity is one of the greatest health challenges facing London, and the creation of a healthy food environment is therefore important, as set out in the London Plan. Childhood obesity amongst school age children is a concern as evidence suggests that obese children are more likely to be obese adults and are at an increased risk of developing further health difficulties. Access to fast food takeaways can influence the ability of individuals to adopt healthy lifestyles and have the potential to undermine healthy eating initiatives that may be in place at the school.
- 25.16** The Council will refuse proposals for fast food takeaways located within 400 metres of the boundaries of a primary or secondary school. 400m is a 5-10 minute walk and it is suggested that this is the maximum distance that students would walk to and back from in their lunch break. Outside of these 400m 'restriction' zones, applications for fast food takeaways will be considered in line with other policies in this plan.
- 25.17** The following map shows the existing schools within the borough (as of April 2023) and the associated 400 metre buffer area, which are the 'restriction' zones for fast food takeaways:

Map 25.1 Existing schools within the borough (as of April 2023) and the associated 400 metre buffer area



Health Infrastructure

25.18 The National Health Service (NHS) is facing unprecedented challenges and are working to better integrate health and social care. A key aspect of the approach is reviewing estate requirements so that they reflect new clinical and community based recovery and support approaches, changes arising from the COVID-19 pandemic and what may be needed in the future. This includes the challenge of optimising the redevelopment of health sites and other infrastructure to improve provision and, where appropriate, contribute more widely to the area health needs.

25.19 The South West London Integrated Care System is the partnership responsible for planning, commissioning and buying health services for the borough. They work closely with other providers including for mental health - Southwest London and St George's

Mental Health NHS Trust, and for community services - Hounslow and Richmond Community Healthcare as well as NHS England in commissioning pharmacy services.

25.20 The NHS has moved to Integrated Care Systems, the ICS for South West London came into effect in July 2022. This is seeking to remove barriers that prevented an integrated system, to remove traditional divisions between hospitals and family doctors, between physical and mental health, and between NHS and council services. In the past, these divisions meant that too many people experienced disjointed care. It has established new partnerships between the organisations that meet health and care needs across an area, to coordinate services and to plan in a way that improves population health and reduces inequalities between different groups. It builds on the NHS Long Term Plan and continues to support the plan's

triple aim: Better Health for Everyone; Better Care for All Patients; and Sustainability of local and national NHS system. Place Leaders on behalf of the NHS work with partners such as the local authority and voluntary sector in an inclusive, transparent and collaborative way.

25.21 A Richmond Health and Care Estates Strategy has been prepared during 2021. Overall, this is to support new models of care and integrated working, developing flexible spaces and optimising use of the estate. With a broader model of health and social care working in a multidisciplinary way, there may be a future focus around health and social care community hubs to bring services to local areas. Flexible spaces could be used for social prescribing, including for community and voluntary groups, as a way that GPs, nurses and other primary care professionals can refer patients to local, non-clinical services to address health concerns and improve a patient's overall wellbeing, while reducing demands on primary (e.g. GPs) and secondary (e.g. hospital and community) care. Digitisation will also be key, and could bring efficiencies for example to access advice or for records storage, provided the digital infrastructure supports these ways of working in the health sector. The South West London Integrated Care System are also preparing an estates strategy.

25.22 There is pressure on health facilities in the borough with currently some shortfall in GP floorspace in parts of the borough. Existing

health facilities should be protected and the provision of new or improved facilities appropriate to local needs is encouraged. Applications for new or loss of health and social care facilities will be considered in line with the criteria of Policy 49 Social and Community Infrastructure and paragraph 24.12 sets out that written agreement of the relevant health body must be provided to assess the loss of any existing health facilities.

25.23 While this Plan supports health and social care provision for meeting local needs, the flexibility introduced by Government through Use Class E (commercial, business and service uses) does in principle allow for changes of use both to and from other Class E uses and medical / health services, provided there are no restrictive conditions on a specific property. The policy approach to retaining existing health facilities and assessing new or improved health and social care facilities set out above will apply where planning permission is required for a change of use, or to extensions and new development. Where necessary and justified, the Council will use conditions and/or planning obligations to limit uses consented within Class E in order to achieve the objectives of this policy and in line with the NPPF and accompanying PPG to ensure provision of required health infrastructure to meet local needs.

Policy 52

Allotments and Food Growing Spaces

- A. The Council will protect existing allotments and support other potential spaces that could be used for commercial food production or for community gardening, where possible.
- B. The value of the allotment space in visual, ecological, biodiversity and historical terms will also be taken into account where there is development pressure on the land. In the highly unlikely event of allotments becoming surplus to requirements, other open space uses will be considered first, particularly where the existing allotment is in an area identified as deficient in Public Open Space Provision.