

**Public Health and the New Growth agenda in Cambridgeshire**

*To:* **Cambridgeshire Horizons Board**

*Date:* **11<sup>th</sup> June 2008**

*From:* **Dr Liz Robin, Joint Director of Public Health,  
Cambridgeshire PCT and Cambridgeshire County Council**

*Purpose:* This paper describes the contribution that public health input can make, to ensure that planning for new growth in the Cambridge sub-region takes full account of the health and well-being needs of new communities. This is through consideration of sustainable physical and social infrastructure which contributes to healthy lifestyles, as well as input to planning of provision of health and social care facilities.

*Recommendation:* **The Board is asked to:**

Note and support the provision of specialist public health input into the Steering and Decision Making Framework of Cambridgeshire Horizons and its Partners.

***Contact:***

Name: Dr Liz Robin  
Job Title: Director of Public Health  
E-mail address: liz.robin@cambridgeshirepct.nhs.uk  
Tel: 01223 884897

## **1. What is Public Health?**

- 1.1 Public health aims include preventing disease, prolonging life and promoting health. The health and wellbeing of an individual is influenced by both the built and social environments. The wellbeing and economic prosperity of the new communities being planned and built in Cambridgeshire will be supported by developing an environment which is conducive to health.
- 1.2 Accredited public health specialists are largely employed within the NHS, although in recent years there have been an increasing number of joint appointments with Local Authorities and a history of close working between PCT Public Health teams and both County and District Councils. Currently the Director of Public Health for Cambridgeshire is a joint appointment between Cambridgeshire PCT and Cambridgeshire County Council, and manages a Public Health Directorate (structure attached at Annex 1) within Cambridgeshire PCT.
- 1.3 Public health input can play a useful role by advising on how both the built environment and the accompanying social infrastructure can play a role in maintaining and promoting the health of the new communities in Cambridgeshire. The PCT Public Health Directorate uses an approach based on the best available research evidence on the relationship between health, behaviour, and the environment, to inform the planning process.

## **2. Policy context**

- 2.1 The East of England Plan 2008 (Regional Spatial Strategy) has as one of its main objectives to improve the quality of life of people in the region. The Plan aims to ensure that new development fulfils the principles of sustainable communities, “providing a well-designed living environment adequately supported by social and green infrastructure”. The plan also seeks to effect a major shift towards walking and cycling as part of a strategy to reduce the impact and exposure to the effects of climate change. This policy favouring active transport is likely to have direct health benefits.
- 2.2 The overall strategic aim of the Cambridgeshire and Peterborough Structure Plan 2003 is to help sustain and improve the quality of life for present and future generations. The Structure Plan envisions planned and concentrated growth, with housing, jobs, services and facilities in sustainable locations. A key objective is to improve access and benefit the health and quality of life of all sectors of the community.

## **3.0 Cambridgeshire Primary Care Trust: Input to the Planning Process**

- 3.1 The Chief Executive of Cambridgeshire Primary Care Trust sits on Cambridgeshire Horizons’ Board.
- 3.2 The PCT Directorate of Strategy and Organisational Development makes a strong input to planning for the provision of health and social care services within new developments and leads negotiations for section 106 contributions to health. In carrying out this work, the Directorate works closely with the PCT Clinical Service Redesign Directorate and the PCT Contracting and Performance Directorate to ensure that the required clinical pathways are in place and implemented through contracts with approved service providers.

- 3.3 Historically, PCT Directorates have made an input to the planning process through responses to formal consultations, through the Cambridgeshire Horizons sub-group – the Health and Social Care Forum, and through delivery structures for the Northstowe and Urban Fringes developments. The input from the PCT Public Health Directorate has focussed on the broader impacts of planning proposals on the health and well being of the local population, whilst the input from the PCT Strategy and Organisational Development Directorate has focussed on development of health and social care services. Both PCT Directorates work closely together.

#### **4 Examples of Public Health input to the Planning Process**

- 4.1 Examples of the input that the Public Health Directorate has made or could make in future to support development of environments that optimise health include:

- Work on the links between social networks and population health, and the importance of considering this in the planning process, building on lessons learned during the early phases of the Cambourne development. This work has been previously presented to the Cambridgeshire Horizons Board by Dr Suan Goh. It led to further joint working with the Improving Health Partnership of Cambridge City and South Cambridgeshire under the auspices of the Local Strategic Partnerships (LSP) to inform community development strategies in new communities.

This work has shown that community development strategies must be based on flexible approaches and teams that can foster community cohesion in rapidly changing and potential diverse groups of people. A toolkit has also been developed to guide strategy development.

- Health impact assessment is one tool which may help to clarify health issues and point to measures to ameliorate health risks, although it is not always the best option for provision of public health input. A rapid impact assessment of options for locating health service and other amenities in North West Cambridge is a recent example.
- The National Institute for Health and Clinical Excellence (NICE) has a Public Health Programmes unit which provides evidence based guidance on broader public health issues including health and the environment. There is an increasing role for public health professionals in disseminating and interpreting NICE guidance as part of their input to local planning processes.

A relevant example is NICE Public Health Programme Guidance on 'Physical Activity and the Environment' produced in January 2008.

- The PCT is developing a strong service/academic partnership with the Cambridge Institute of Public Health, and through this is able to ask for expert and locally relevant advice from academics specialising in areas such as the impact of the built environment and transport systems on physical activity levels, and to support the Institute in generating local research proposals.

#### **5 PUBLIC HEALTH INPUT TO THE STEERING AND DECISION MAKING FRAMEWORK FOR CAMBRIDGESHIRE HORIZONS AND ITS PARTNERS**

- 5.1 The Steering and Decision Making Framework relevant to the new growth agenda in Cambridgeshire has Member Level and Officer Level groups

(attached at Annex 2). Specialist public health input is currently provided to the Northstowe Delivery Board and will be provided to the East Cambridge Delivery Board. The Director of Public Health is copied into the papers of the Senior Officer Board and can make a contribution as required. Attendance at other meetings can be arranged as appropriate.

- 5.2 It is important to note that public health specialist input has a different remit from the work of the PCT Strategy and Organisational Development Directorate, which leads the detailed planning of health services for new developments, and negotiation of section 106 agreements with regard to health. Both inputs will continue to be needed within the overall Steering and Decision Making Framework.

**Annex 1:** Cambridgeshire PCT Public Health Directorate

**Annex 2:** Cambridgeshire Horizons Steering and Decision Making Framework

Dr Lincoln Sargeant  
Consultant in Public Health Medicine

Dr Liz Robin  
Director of Public Health