

YOUR PLACE YOUR PLAN.

Winchester District Local Plan

Winchester District Local Plan 2040

Health Topic Paper

August 2024



Winchester
City Council

Winchester District Local Plan 2040

Health Topic Paper

Prepared by the Winchester District Council

Strategic Planning Team

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1. Introduction

- 1.1 This background paper has been prepared to support the Winchester Local Plan¹ (2040); its purpose is to explain how the Local Plan addresses a number of health issues identified during preparation of the local plan and set out in other evidence.
- 1.2 This paper also complements, Hampshire County Council's [Public Health in Planning Position Statement](#), which requires that the principles of health and wellbeing to be enshrined in local plans, through utilising the Joint Strategic Needs Assessment data to supplement the local plan evidence base to ensure local plans reflect the issues identified.
- 1.3 Health is a topic that cuts across a number of areas in spatial planning and can influence health outcomes either directly or indirectly. This paper therefore assesses key evidence² and how the Winchester Local Plan responds from a health perspective to ensure that the principles of health and wellbeing are embedded in the Local Plan.

¹ Winchester District covers two local planning authorities, Winchester and South Downs National Park. This paper typically refers to data for Winchester District as whole, as comparable data is unavailable at the local planning authority level. References to the Local Plan relate only to the Winchester Local Plan 2040.

² Key evidence is limited to those evidence documents more aligned with health outcomes, that is not to say other evidence documents are not relevant.

2. National Policy and Guidance

National Planning Policy

- 2.1 Paragraph 8 of the National Planning Policy Framework 2023 (NPPF) discusses the three dimensions of sustainable development and the roles that the planning system plays to achieve this, through three overarching objectives: -economic, social environmental. The social objective states:” *to support strong, vibrant and healthy communities, by ensuring that a sufficient number and range of homes can be provided to meet the needs of present and future generation; and by fostering well-designed, beautiful and safe places, with accessible services and open spaces that reflect current and future needs and support communities’ health, social and cultural well-being.*
- 2.2 Application of the social objective should not be undertaken in isolation but alongside the economic and environmental objectives.
- 2.3 Chapter 8 of the NPPF discusses the role of planning policies and decisions in promoting healthy and safe communities. Paragraph 96 requires that policies and decisions should aim to achieve healthy, inclusive and safe places, through enabling healthy lifestyles through provision of accessible green infrastructure, sports facilities, local shops, access to healthier food and encouraging walking and cycling.
- 2.4 As well as the explicit links between health and planning, the NPPF also requires consideration of a number of wider factors which are known to impact on health. The importance of access to high quality open space and opportunities for sport and recreation are discussed in paragraphs 102 to 104.
- 2.5 Under Chapter 9 Promoting Sustainable Transport paragraph 110 requires that planning policies should provide for attractive and well-designed walking and cycling networks, with supporting facilities. Paragraph 191 requires new development is appropriate for its location taking into account the likely effects of pollution on health and opportunities to improve air quality or mitigate impacts should be identified.
- 2.6 Chapter 12 Achieving Well-designed and Beautiful Places, refers to creating places that are safe, inclusive, accessible and which promote health and well-being. Paragraph 138 refers to the preparation of local design codes inline with the [National Model Design Code](#) and using assessment frameworks such as [Building for a Healthy Life](#). Chapter 14 Climate Change and Chapter 15 the Natural Environment, intrinsically cover matters pertinent to health and wellbeing.

- 2.7 Policy provided by the NPPF is expanded upon by Planning Practice Guidance (PPG) which includes a section on [Achieving Healthy and Inclusive Communities](#), this notes that local planning authorities should ensure that health, wellbeing and health infrastructure are considered in both plan making and in planning decisions.

Other Planning Guidance

- 2.8 In addition, to specific policy and guidance related to planning, the topic of health and wellbeing has in recent years been subject to much debate. Organisations such as The Town and Country Planning Association, have published a range of [documents](#), with a focus on health and actively promote a [campaign](#) for Healthy Homes with a pledge that states “*The Healthy Homes Pledge recognises everyone has a right to a healthy, affordable and secure home in a healthy environment.*”
- 2.9 In 2020, the Royal Town Planning Institute, published its [Dementia and Town Planning](#) practice note in recognition of the fact that there are around 850,000 people living with dementia in the UK and this is projected to increase to 1.6 million people by 2040. People living with dementia may experience the built environment differently to other people. Evidence has shown that good quality housing and well-planned, enabling local environments can have a substantial impact on the quality of life for someone living with dementia, helping them to live well in their community for longer.
- 2.10 Organisation [Housing LIN](#) has a shared goal of bringing together housing, health and social care issues and includes a range of articles exploring ageing communities. Its publication [Age-friendly Communities and Lifetime Neighbourhoods](#), identifies that the concept of lifetime neighbourhoods are driven by two factors:
- The increasing number and proportion of people who live into old age and whose independence can be limited by problems such as disability and isolation; and
 - Recognition that suitable housing only goes so far in maintaining health and wellbeing. The neighbourhoods in which homes are located provide resources that people need such as transport, shops, social contact, involvement in local issues and services, information and access to green space.
- 2.11 They then set out some considerations when planning new developments:
- How attractive, safe and easy it is to take exercise near to home;

- How common space can be designed to encourage people to meet and spend time with others; and
 - The best ways to encourage people of all ages to share facilities without conflict or fear.
- 2.12 At the other end of the age spectrum and in relation to the provision of open spaces and recreational facilities, is the organisation [Make Space for Girls](#), which campaigns for parks and public places to be designed with girls and young women and includes guidance to advise on the location and form of new open spaces to ensure users feel safe. The [guidance](#) is based around the themes of:
- Eyes on the park – presence of other users;
 - Awareness – ability to be able to navigate spaces and be seen; and
 - Inclusion – allowing all to feel they belong and can participate.
- 2.13 This guidance whilst focussed on girls and young women, could equally be applied to other sectors of the population such as the elderly.

Health and Social Care Act 2012

- 2.14 The Health and Social Care Act 2012, places the duty of improving the health of populations, through encouraging healthier lifestyles and addressing health inequalities, to upper tier and unitary authorities. For Winchester district this means Hampshire County Council as the responsible body.
- 2.15 Health and Wellbeing boards were established under the Health and Social Care Act 2012 to act as a forum in which key leaders from the local health and care system work together to improve the health and wellbeing of their local population.
- 2.16 The role of the [Hampshire Health and Wellbeing Board](#) is for the purpose of advancing health and wellbeing and to encourage persons who arrange for the provision of any health or social care services in Hampshire to work in an integrated manner.
- 2.17 Integrated Care Systems (ICSs) were legally established on 1 July 2022, covering all of England. These built on partnerships that were already in place across the country, with the aim of:
- improve outcomes in population health and healthcare;
 - tackle inequalities in outcomes, experience and access;
 - enhance productivity and value for money; and

- help the NHS support broader social and economic development.
- 2.18 They are formed by NHS organisations and upper-tier local councils and also include the voluntary sector, social care providers and other partners with a role in improving local health and wellbeing.
- 2.19 Hampshire Integrated Care Board (ICB) is the statutory organisation responsible for setting the strategic plan for the NHS in Hampshire.

3. Health in Winchester District – What’s the Evidence telling us?

- 3.1 Evidence on health matters for the Local Plan, comes from a number of sources, in addition regular meeting have been held with representatives from Hampshire County Councils Public Health Team and the Hampshire and Isle of Wight Integrated Care Board.
- 3.2 The following provides a brief summary of the key issues expressed in the various data sets, strategies and reports, in so far as they relate to place making and the local plan.

National Health Data for Winchester District

- 3.3 Government – Office for Health Improvement and Disparities - Public Health Outcomes Framework – [Winchester profile](#). This data set provides an overview of a number of health related indicators and whether these are declining or improving when compared to England averages, overall there appears to be no significant changes in Winchester compared to previous reports.
- 3.4 Census 2021 – With up to date census data now available it is possible to retrieve some Winchester focussed data which could have tangible links to the health and wellbeing of residents:
- 15.4% of residents are register disabled under the Equality Act;
 - 86% consider their health very good or good, compared to 3.4 with bad/very bad health;
 - In terms of household deprivation 30.4% of households are deprived in 1 dimension³ (that is having any person falling into one of the specified four categories); 9.5% 2 dimensions; 1.7% 3 dimensions and 0.1% 4 dimensions.
 - 1.6% of all homes are overcrowded; and

³ Four categories of household deprivation:

Education - A household is classified as deprived in the education dimension if no one has at least level 2 education and no one aged 16 to 18 years is a full-time student.

Employment -A household is classified as deprived in the employment dimension if any member, not a full-time student, is either unemployed or economically inactive due to long-term sickness or disability.

Health - A household is classified as deprived in the health dimension if any person in the household has general health that is bad or very bad or is identified as disabled.

People who have assessed their day-to-day activities as limited by long-term physical or mental health conditions or illnesses are considered disabled. This definition of a disabled person meets the harmonised standard for measuring disability and is in line with the Equality Act (2010).

Housing -A household is classified as deprived in the housing dimension if the household's accommodation is either overcrowded, in a shared dwelling, or has no central heating.

- 20% of the resident population is aged 65 and over (10% being aged 75 and over) – with older people generally experiencing health issues.

Hampshire Health Data for Winchester District

3.5 HCC Public Health Strategy 2023 – 2026

[Public Health Strategy 2023 - 2026 | Health and social care | Hampshire County Council \(hants.gov.uk\)](#)

The ambitions in the 2023 – 2026 Strategy, are:

- To increase the number of years Hampshire residents can expect to live in good health; and
- To reduce the unfair gap in healthy life years between the most and least healthy.

3.6 The strategy follows three key themes as summarised below:

Theme 1 - Healthy Places (healthy places, settings and communities) - Good health starts with the environment in which we live, learn, work and play. Improving these places and communities will enable more people to live healthier lives for longer and reduce the unfair gap between the most and least healthy.

Theme 2 - Healthy People – Hampshire County Council has a duty to protect the health and safety of residents in relation to emergencies like infectious disease outbreaks, extreme weather or chemical incidents.

Theme 3 - Healthy Lives. – Public health services and partnership working to directly support people to live healthier lives. This theme refers to older people and for these to remain healthy and independent for longer and to improve mental health and wellbeing.

3.7 Theme 1 in particular above identifies a number of matters reflected in the local plan - transport and climate change, including healthy streets, active travel and air quality; building healthy new places, that are accessible, safe and sustainable.

3.8 HCC Joint Strategic Needs Assessment

[Joint Strategic Needs Assessment \(JSNA\) | Health and social care | Hampshire County Council \(hants.gov.uk\)](#)

The JSNA includes a comprehensive amount of health-related facts and figures, which is regularly updated. The following highlights some key facts and figures in relation to Winchester District:

Demography - Winchester had a population of around 127,400 in 2021, of which 20.9% were aged 65 and over. This was slightly younger than the Hampshire average which had around 21.7% of the population aged 65 and

over. There were higher proportions of the population aged 65 and over in the more rural areas of the district, especially around Alresford (39%), Bishops Waltham (34%) and Olivers Battery (34%). In terms of aged 75 years and over population, this is forecast to increase by 25.9%. The population density was 192.8 people per square kilometre, which was lower than the overall population density of Hampshire (374.8).

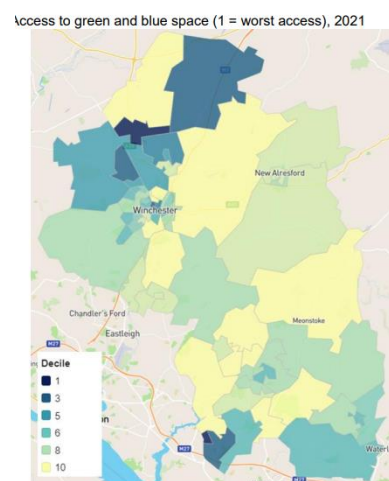
Births and Deaths – generally birth rates have been declining across Hampshire since 2013. Premature mortality is a good high-level indicator of the overall health of a population, Winchester District has one of the lowest rates of premature mortality for deaths under 75 and under 65, and one of the lowest of all age all-cause mortality rates.

Healthy Lives – the percentage of active adults has increased over the period 2015/16 – 2022/23 from 64% - 82%; correspondingly inactive adults has declined. Winchester District has less people recorded as overweight compared to the rest of Hampshire.

3.9 Healthy Places

This part of the [JSNA](#) (updated March 2024) covers 5 key sections, with a focus on place, area assets and the social and commercial drivers of health:

Physical environment - Green space, such as parks, woodland, fields and allotments as well as natural elements including green walls, are recognised as important assets for supporting health and wellbeing. In Winchester District there were 293 public sports facilities in 2023. This is a rate of 23.0 per 10,000 of the population, higher than Hampshire (16.2) and England (13.2).



Source: Access to Healthy Assets and Hazards

Home environment – this covers matters such as food insecurity, in the District there are small pockets with a greater risk of food insecurity in Winchester city (Stanmore and Winnall), in Springvale, Alresford, Bishop's Waltham and Wickham. Housing is a key determinant of health. Poor quality or unsuitable homes directly affect physical and mental wellbeing, creating or exacerbating health issues. Cold homes and fuel poverty are directly linked to excess winter deaths. The housing affordability ratio shows how affordable housing is compared with median gross earnings - the higher the ratio the less affordable housing has become. Housing in Winchester District in 2023 was less affordable than England (12.1 compared with 8.3), and Hampshire (9.6). Since 2002 the affordability ratio for Winchester has increased a larger amount than Hampshire or England and Winchester is the least affordable

district in Hampshire. However, Winchester District has a lower rate of overcrowded homes (by number of bedrooms) in 2021 than Hampshire. In 2022, as a whole Winchester had a slightly higher proportion of households living in fuel poverty than Hampshire (9.1% compared to 8.2%) but lower than England (13.1%). There were a higher number of households in fuel poverty in the more rural areas to the east of the district around Bramdean, but also in Stanmore.

Social and economic environment - Social isolation is the objective term used to describe an absence of social contacts or community involvement, or a lack of access to services, these can have negative impacts on health outcomes. Areas with greater social isolation across Winchester district include Winnall and Stanmore in Winchester city, Alresford and an area at the south of the district, Denmead. Employment can provide a positive sense of wellbeing and a stable income reduces the risk of poor mental health, the areas with lower estimated household incomes were in Stanmore and Winnall in Winchester city, and in the middle of the district in Bishop's Waltham. Winnall was also the area where there was the highest rate of people claiming benefits (including pension benefits and working age benefits).

Community safety – Overall for Hampshire the crime rate (including anti-social behaviour incidents) was 71.1 per 1,000 people in the population. Violence against a person was the most frequently reported crime (28.7 per 1,000) followed by theft (18.7 per 1,000). In Winchester District these rates were similar 69.4 for all crime types, 26.0 for violence against a person and 18.9 for theft offences. Winchester city centre had the highest rates of crime in the district.

Climate - CO² makes up 80% of greenhouse gas emissions and transport is the largest source of CO² emissions in Winchester District. In 2021 Winchester District had one of the highest domestic energy consumption rates in Hampshire at 63.9 kilotonnes of oil equivalent (Ktoe), compared with 60.4 for Hampshire and 59.3 for England. Gas was the largest source of domestic energy in Winchester (49.6 Ktoe in 2021), followed by electricity (20.3 Ktoe). In 2022 Winchester district generated 94,400 megawatts of solar powered electricity. Air quality in Winchester District is lower in the south of the district around Whiteley, where there are areas in the lowest decile for air quality across England. In Winchester District a smaller proportion of the population is exposed to high or medium levels of NO² than as Hampshire as a whole, however a slightly greater proportion are exposed to high levels of PM_{2.5}. Whilst those living in urban areas may be more at risk of adverse outcomes from heat waves, rural areas may be more at risk of wildfires. In Winchester District the area where the highest number of wildfires occurred between 2018 and 2023 was to the south near Denmead, near Wickham and Durley, and in the west around Hursley. In Winchester District in 2023 there were around

1,100 homes that fell into medium or high risk of flooding from the sea, rivers and surface water. Most of these homes were towards the south of the district around Denmead and Hambledon, and to the south of Whiteley.

Mental Health and Wellbeing Index – the [online tool](#) covers the MSOA's⁴ for the District – this identifies that both Winchester East and Winchester Stanmore have higher vulnerabilities towards mental health matters, compared to the rest of the District.

3.10 Air Quality and Transport

[Hampshire County Council](#) commissioned a report in 2021 to take a strategic overview in relation to air quality and transport, reflecting their role as both highway and public health authority. This report covered the matter of air quality and health in some detail, albeit not specific to Winchester District and highlighted a number of emerging issues:

- Non-exhaust PM (Particulate Matter) emissions – important to note that electrification of vehicles won't solve all of the air quality problems (brake and tyre wear and resuspension is very high; growth in larger vehicles of the same type and that electric vehicles are heavier than their conventional counterparts);
- As NOX (Nitrogen oxide) pollution reduces, ozone pollution may increase in urban areas; and
- Increasing recognition of the role of emissions of ammonia (primarily from agriculture) in the formation of secondary particulate matter in the atmosphere and resultant effects on human health.

3.10 Local Transport Plan 4

In addition, Hampshire County Council as the local highway authority has a statutory duty to have in place a local transport plan. [Local Transport Plan 4](#) (February 2024), replaces the previous version and takes a new approach to a number of matters and proposes the following changes:

- shift away from planning for vehicles, towards planning for people and places;
- meet national priorities to decarbonise the transport system;
- reduce reliance on private car travel;
- gives people a choice of high quality travel options;
- support sustainable economic development and regeneration; and promote active lifestyles.

⁴ MSOA Middle Super Output Area

LPT4 has identified six key outcomes:

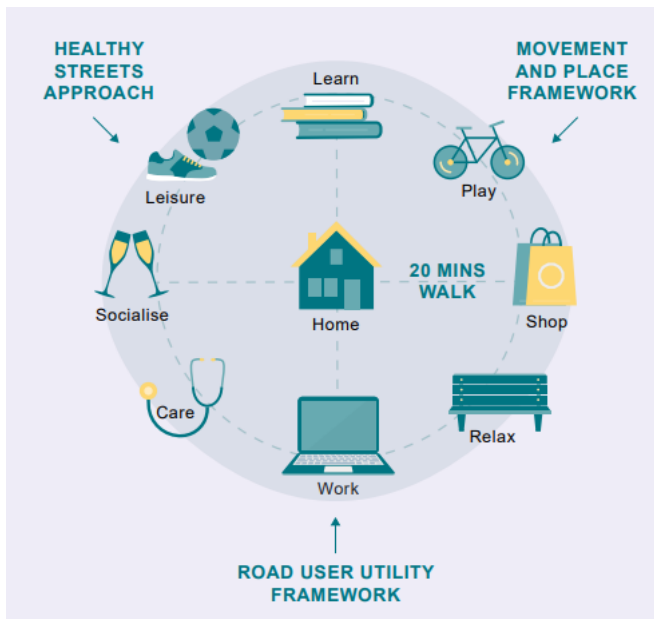
1. a carbon neutral, resilient Hampshire;
2. respect and protect Hampshire's environment;
3. thriving and prosperous places;
4. healthy, happy and inclusive lives;
5. improved air quality and less noise disturbance from transport; and
6. a transport network that protects and enhances our natural and historic environments, resulting in an overall net environmental gain.

3.11 Health and wellbeing in relation to people and places is a recurrent theme throughout LTP4 and provides some strong messages to be taken into consideration in plan making. As an example under Planning for People and Places a 'Healthy Streets Approach' is advocated which is based around ten healthy streets indicators.



Source HCC LTP4

3.11 A further example is through promotion of walking and cycling for short/local journeys and the creation of 'liveable neighbourhoods' also referred to as 20 minute neighbourhoods, being a key foundation for a net zero transport network.



Source HCC LTP4

- 3.12 Improving air quality is also referenced numerous times through LTP4 in recognition of the challenge that poor air quality is the largest environmental risk to public health, adversely affecting a range of health conditions, with vulnerable people impacted the most.

Winchester Health Evidence

3.13 Whilst the evidence base for the local plan includes a whole range of documents, the following are some of the key documents, that refer to matters that can impact health and wellbeing and have been used to inform a planning policy response through the local plan.

Integrated Impact Assessment

3.14 Planning legislation requires the preparation of a local plan to be accompanied by a sustainability appraisal (SA) and strategic environmental assessment (SEA) and habitats regulations assessment (HRA). Equality Impact Assessments (EqIA) and Health Impact Assessments (HIA), may also be undertaken. More recently local authorities are preparing integrated impact assessments (IIA) to encompass SA, SEA, EqIA and HIA, given the overlapping nature of some of the requirements. Indeed by incorporating an HIA this ensures health related issues are integrated into the plan making process. Human Health is also one of the SEA specified topics, as is population and air both of which are linked to health.

3.15 It is a requirement that the IIA is undertaken as an iterative process, being refined and repeated at each stage of plan making:

IIA reports published at [Regulation 18](#)

IIA reports published at [Regulation 19](#)

3.16 Baseline information and key issues were identified as part of the scoping stage of the IIA in 2020, which include a specific section on health. This included the following headline data:

- Considering the District as a whole, a daily net inflow of commuters results to the District, with a net change of 18,361 commuters recorded, key points of origin/destination being Eastleigh, Southampton, Portsmouth, Fareham Test Valley, utilising the main road corridors of the M3, A34 and A31.
- Alongside London, parts of the South East of England have higher property price to earnings ratios than other areas of the country. In Winchester, the ratio was 13.3 in 2019, compared to 8.8 ten years earlier in 2009.
- The average price for a property in the District in 2020 was £441,880 which is a result of a fluctuating upward trend over the past 10 years.
- In terms of rental prices in Winchester District, data for 2018 and 2019 indicate that rental prices in the District are the most expensive outside London, across all housing categories.
- Projected growth in older people (over 80 years) will impact on housing demands in the plan area.

- The specific needs of the homeless, rough sleepers and individuals with complex needs, such as mental health and substance dependency have grown and while their overall numbers are relatively low their needs are severe.
- The health of residents of the District was described as 'Good' or 'Very Good' by 86.0% of the population, compared to 83.6% for the South East and 81.2% for England and Wales.
- Life expectancy at birth in 2019 in the District was 82.0 years for males and 85.2 years for females, which is higher than the regional value of 80.7 years and 84.1 years, respectively.
- the proportion of Winchester District residents who are classified as overweight or obese has increased more substantially from 50.7% in 2015/16 to 57.4% in 2018/19, this is however, lower than the figure for England 62.3%.
- Residents of the District reported having higher levels of life satisfaction (8.08 out of 10.00) than the average for UK (7.71) in the 2018/19 period. This was an increase for the District from 7.93 in the previous year.
- average levels of anxiety recorded for the District fell during 2018/19 (from 3.38 to 2.94), they were slightly higher than the average for the UK (2.87)
- In Winchester, the areas estimated to have lower mental health and well-being are St John & All Saints, St Luke and St Bartholomew; the areas estimated to have higher mental health and well-being are Compton & Otterbourne, Swanmore & Newtown, Whiteley, St Paul, Olivers Battery & Badger Farm and Cheriton & Bishops Sutton. These wards are amongst the highest 10% of wards in Hampshire.
- social isolation and loneliness are more likely to be prevalent in urban areas rather than rural areas and, that perhaps surprisingly, they are clustered into the most densely populated areas.
- Health indicators in which the figures for the District are significantly worse than national average are numbers of serious injuries and deaths on the road; estimated diabetes diagnosis rate; and estimated dementia diagnosis rate.
- The most recent Active Lives Survey (reporting for the period May 2018/19) estimated that 15.0% of the population in Winchester is classified as inactive doing less than 30 minutes of moderate exercise per week. This is less than the figure for the South East of England which is 21.8% for this period. In Winchester District it is reported that 73.0% of the population met the aerobic guidelines of at least 150 minutes of moderate activity per week. This figure is higher than the regional figure of 66.2%.
- Between 76 – 87% of adults from the District walk at least once a week and between 12 – 17% cycle. The walking average was higher than the national average which was 60%. In terms of bicycle travel Winchester does not stand

out from the national statistic which reports that almost all authorities have less than 20% of their adult population cycling at least once a week.

- Air and noise pollution is also identified arising from transport impacts.

3.17 The scoping report of the IIA also included baseline data for Equalities as defined by the Equalities Act 2010 which identifies nine 'protected characteristics', again the following key issues were identified:

- More people aged 60 or over than in the general population.
- Winchester (353.9) presently has a relatively high old age dependency ratio compared to the South East (316.7) which indicates that the number of people of state pension age per 1,000 people of working age is comparatively high. In Winchester, this figure is expected to rise to 465.0 by 2043.
- Of Winchester's population, 85.5% stated that their daily activities are 'not limited' by a long term illness, while 8.6% are 'limited a little' and 5.9% are 'limited a lot' by an illness/disability.
- The area performs less favourably (ranked 195 out of 317) in relation to living environment which considers the quality of housing as well as air quality and road traffic accidents.
- Areas within Winchester Town (St John and All Saints wards) are within the 30% most deprived areas in England, parts of the St Bartholomew ward and the St Luke ward are within the 40% most deprived areas in England.
- While Winchester is one of the 20% least deprived districts/unitary authorities in England, around 7.7% (1,500) children live in low income families.
- Estimated that 3,906 out of 50,226 households were fuel poor in 2018, which equates to 7.8% of all households in the District (South East England is 7.9%).
- 2.6% of the population provided unpaid care for 20 hours or more, whilst for England and Wales the figure is 3.8%.

3.18 From analysis of the baseline information, the IIA then identifies a number of key sustainability issues facing the district and to be addressed through the local plan, many of which have links with health and wellbeing. These include but are not limited to:

- Reducing journeys by private car;
- Need for affordable housing;
- Open space deficiencies;
- Pockets of deprivation; and
- High levels of growth of older people.

3.19 The outcome of the IIA scoping report is the identification of a number of objectives against which the emerging local plan is assessed to determine if the policies and proposals could be reframed to ensure better outcomes. Of relevance to health and wellbeing are the following objectives which reflect

the SEA topic of 'human health', together with the appraisal questions, there are however other objectives which include appraisal questions which refer to the protection/creation of blue/green infrastructure which by their nature could offer opportunities to have a positive impact on both physical and mental health:-

SA Objective	Appraisal questions – <i>Does/is the local plan/policy...?</i>
SA 2: To reduce the need to travel by private vehicle in the District and improve air quality.	<p>SA 2.1: Provide easy access to public transport provision and active travel networks, including those for walking and cycling?</p> <p>SA 2.2: Support development which is able to access Town/District/Local Centres, services and facilities (e.g. shops, post offices, GPs, schools) and/or key employment areas via active travel networks and/or public transport?</p> <p>SA 2.3: Minimise increases in traffic in the Air Quality Management Areas within and adjoining the District?</p>
SA 4: To improve public health and wellbeing and reduce health inequalities in the District	<p>SA 4.1: Make provision for new, or replacement healthcare facilities to ensure there is capacity to meet the level of development planned for and access for all?</p> <p>SA 4.2: Promote health and wellbeing by providing access to and maintaining, enhancing, connecting and creating multifunctional open spaces, green/blue infrastructure, recreation and sports facilities?</p> <p>SA 4.3: Prevent, avoid and/or mitigate adverse health effects associated with potentially inappropriate neighbouring uses which could detrimentally impact residents (for example noise and light pollution)?</p> <p>SA 4.4: Avoid directing sensitive development (e.g. housing, schools, offices and health facilities) to areas of poor air quality (e.g. major roads and/or industrial areas)?</p> <p>SA 4.5: Make provision for personal private outdoor space within new developments?</p>
SA 5: To support community cohesion and safety in the District.	<p>SA 5.1: Facilitate the integration of new neighbourhoods with existing neighbourhoods?</p> <p>SA 5.2: Meet the needs of specific groups in the District including those with protected characteristics and those in more deprived areas? (Note this will be informed by the more detailed Equalities Impact Assessment that will be carried out as part of the IIA.)</p>

SA Objective	Appraisal questions – <i>Does/is the local plan/policy...?</i>
	<p>SA 5.3: Promote developments that will benefit and will be used by both existing and new residents in the District, particularly within the District's most deprived areas?</p> <p>SA 5.4: Help to deliver cohesive neighbourhoods with high levels of pedestrian activity/outdoor interaction, which will allow for informal interaction between residents?</p> <p>SA 5.5: Help to reduce levels of crime, anti-social behaviour and the fear of crime</p>
<p>SA 6: To provide housing of a decent standard to meet needs in the District.</p>	<p>SA 6.1: Deliver the range of types, tenures and affordable homes the District needs over the Plan Period?</p> <p>SA 6.2: Address the housing needs of more specialist groups, including older people and people with disabilities?</p>
<p>SA 7: To ensure essential services and facilities and jobs in the District are accessible</p>	<p>SA 7.1: Provide for development that is well linked to existing services and facilities (e.g. shops, post offices, GPs, schools, broadband) and employment areas?</p> <p>SA 7.2: Provide for additional services and facilities and higher paid employment opportunities to support new and growing communities and address areas of deprivation? The different transport modes for accessing services, facilities and jobs are covered under SA 2 above</p>
<p>SA 9: To support the District's biodiversity and geodiversity.</p>	<p>SA 9.1: Conserve and enhance designated and undesignated ecological assets within and outside the District, including measurable biodiversity net gain?</p> <p>SA 9.2: Conserve and enhance ecological networks, including not compromising future improvements in habitat connectivity?</p>
<p>SA 14: To manage and reduce flood risk from all sources</p>	<p>SA 14.1: Limit the amount of development in areas of high flood risk and areas which may increase flood risk elsewhere, taking into account the impacts of climate change?</p> <p>SA 14.2: Promote the use of SuDS and other flood resilient design?</p>

Strategic Housing Market Assessment

3.20 Winchester [Strategic Housing Market Assessment Update](#) (SHMA) (July 2024) – the purpose of the SMHA is to establish a robust evidence base for determining housing needs to inform the local plan, this therefore also explores the housing needs of different populations across the District. The following highlights those matters with a link to health and wellbeing.

3.21 Changes to household by age:

this data indicates a growth in most age groups and in particular older age groups

	2020	2040	Change in Households	% Change
Under 25	1,611	2,022	411	25.5%
25-34	5,158	7,405	2,247	43.6%
35-49	12,491	14,546	2,055	16.4%
50-64	15,012	15,326	314	2.1%
65-74	7,736	9,602	1,866	24.1%
75-84	6,106	9,571	3,465	56.7%
85+	2,894	5,663	2,769	95.7%
TOTAL	51,008	64,134	13,126	25.7%

Source : SHMA 2024 Demographic Projections (table 4.3)

3.22 Older Persons population (2022)

	Winchester District	Hampshire	South East	England
Under 65	78.9%	77.9%	80.3%	81.4%
65-74	10.2%	10.9%	9.9%	9.6%
75-84	7.6%	8.0%	7.0%	6.5%
85+	3.3%	3.2%	2.8%	2.5%
Total	100.0%	100.0%	100.0%	100.0%
Total 65+	21.1%	22.1%	19.7%	18.6%
Total 75+	10.9%	11.2%	9.8%	9.0%

Source : SHMA Older persons population (table 5.1)

3.23 The SMHA utilises population projections to 2040 to establish changes to the over 65 population in the district. This is evidenced in the table below, which indicates some substantial changes over the period of the local plan.

Projected Change in Population of Older Persons, 2020 to 2040 – Winchester

	2020	2040	Change in population	% change
Under 65	99,375	115,040	15,665	15.8%
65-74	13,469	16,698	3,229	24.0%
75-84	8,920	13,919	4,999	56.0%
85+	3,990	7,759	3,769	94.5%
Total	125,754	153,416	27,662	22.0%
Total 65+	26,379	38,376	11,997	45.5%
Total 75+	12,910	21,677	8,767	67.9%

Source : SHMA table 5.3

3.24 Section 5 of the SMHA focuses on older and disabled people’s housing needs and concludes that for 2020 – 2040 period :

- a 45% increase in the population aged 65+ (potentially accounting for 43% of total population growth);
- an 70% increase in the number of people aged 65+ with dementia and 59% increase in those aged 65+ with mobility problems;
- a need for around 1,000 housing units with support (sheltered/retirement housing) – all in the market sector;
- a need for around 540 additional housing units with care (e.g. extra-care) – the majority in the market sector;
- a need for additional nursing and residential care bedspaces but current need and supply in broad balance; and
- a need for 400 dwellings to be for wheelchair users (meeting technical standard M4(3)).

3.25 This indicates that there is a clear need to increase the supply of accessible and adaptable dwellings and wheelchair user dwellings as well as providing specific provision of older persons housing, on the basis there is a clear link between age and disability.

Settlement Hierarchy Review

- 3.26 Winchester [Settlement Hierarchy Review](#) (updated in 2024), this reflects the presence of a number of services and facilities and how these contribute to the role and function of the settlements across the District, which is then used to inform the distribution of new development through the local plan. This includes the provision of health care facilities such as doctors, dentist and opticians, which are typically present only in the larger settlements.

Design

- 3.27 Winchester [Design](#) workshops were held during preparation of the local plan, these highlighted matters of interest to participants, including designing for health and wellbeing to ensure that the emerging local plan policies reflected all the matters that could impact on health.

Air Quality Studies

- 3.28 Air quality is noted as having an impact on the health of residents. This is due to the fact that a major source of air pollution is road traffic emissions, including major roads such as the M3, A34, A31 and A303. Other pollution sources, including commercial, industrial and domestic sources, also make a contribution to pollution concentrations.
- 3.29 In Winchester District, there are two air quality monitoring stations both in Winchester City, one at Romsey Road and the other at St Georges St. The centre of Winchester was designated as an [Air Quality Management Area](#) (AQMA) in 2003 and an [Air Quality Action Plan](#) was prepared in May 2017 in compliance with the Environment Act 1995 (Part IV), to outline how the City Council proposed to put in place a number of measures to work towards the annual mean air quality objective for nitrogen dioxide. This pollutant exceeded required limits close to busy roads within the city centre and it was identified that road traffic related emissions needed to be reduced by a quarter to meet the necessary acceptable limits. The aim of the Action Plan was to reduce congestion and vehicle emissions in the city centre, with the focus on improving average NO₂ concentrations.
- 3.30 It is recognised that long term exposure to high concentrations of pollutants including nitrogen dioxide is associated with health impacts such as heart and lung conditions and can contribute to heart disease and cancer. Additionally, air pollution particularly affects the most vulnerable in society such as children and older people. There is also often a strong correlation with equality issues, because areas with poor air quality are also often the less affluent areas.
- 3.31 The Air Quality Action Plan set out a number of core actions:

- Review current car parking charges and increase the cost to park in central car parks;
 - Review and consider introducing restrictions of delivery vehicles by time of day;
 - Introduce a Park and Ride site in the North of Winchester;
 - Introduce new parking charges to limit diesel and high polluting petrol cars parking in central car parks;
 - Reduce emissions from lorries and buses in the city centre by 2020;
 - Reduce emissions from all Council owned, leased or contracted vehicles by 2020;
 - Put in place requirements to integrate air quality fully into the planning process;
 - Continue to work with and lobby Hampshire County Council to identify and deliver additional projects; and
 - Monitor the performance of the plan and reassess the need to introduce additional measures to achieve the objective.
- 3.32 As a consequence annual [air quality status reports](#) have been prepared, the latest report dated [June 2024](#) states that between 2019-2023, a decreasing trend in NO2 concentrations has generally been observed at all monitoring locations. Whilst there are some year-to-year variations in concentrations, these are likely due to meteorological influences, all 2023 concentrations remain below the pre-pandemic 2019 concentrations. Compliance with the annual mean nitrogen dioxide annual mean objective across the AQMA has been achieved since 2020, given these results it is anticipated that the AQMA may be revoked in the future.
- 3.33 However, it is necessary to retain good practices already in place, through implementation of the [Air Quality Supplement Planning document](#) published in 2021. This requires proposals for new development, within or near to the AQMA to prepare air quality statements and/or undertake air quality assessments depending on the scale and nature of the proposal. This then enables the Council to make a judgement in terms of potential impacts on air quality and any necessary mitigation measures to be taken.
- 3.34 An Air Quality Strategy is in preparation for the whole of the District and will be published for consultation later in the year. The purpose of the emerging strategy is to establish a framework to improve the health of everyone to achieve cleaner air by 2030, in terms of links with the local plan this is through the location and design of new developments, providing sustainable transport links, encouraging active travel, and increasing access to open space and recreational facilities.

Open Space

3.35 Access to open space of any form has been acknowledged as being beneficial for wellbeing. The Council has both a [Playing Pitch Strategy](#) 2018 (which is the process of being updated) and an [Open space assessment](#) 2022. This includes a detailed assessment for the parishes within the local plan area. The Assessment has been reviewed in the light of population increases in the district, and the provision of new open spaces in conjunction with new housing, to see whether open space infrastructure is 'keeping pace' with the provision of new houses. The assessment applies an open space standard of 40m² per person (4.0 ha per thousand population).

3.36 The following categories of open space are included in the assessment :

- Allotments;
- Informal green space – this is publicly accessible and usable open space;
- Natural green space - publicly accessible woodland, wetland, river floodplain, grassland, heathland or meadow, i.e., spaces which have natural characteristics and wildlife value but which are also open for public use and enjoyment;
- Play space - Equipped children's and young people's play space; and
- Parks, sports and recreation grounds.

3.37 The results reveal :

The following Parishes / Wards continue to have a surplus of accessible open space when assessed against the 4.0 ha standard in the Local Plan:

- Bighton
- Bishop's Waltham
- Compton & Shawford
- Crawley
- Curdridge
- Hursley
- Littleton
- Newlands (NB- Wellington Park included but not Berewood which is still under construction)
- Otterbourne
- Shedfield
- Swanmore
- Whiteley
- Badger Farm
- Winchester – St Michael Ward

The following Parishes / Wards have gone from a **DEFICIT** to a **SURPLUS** of accessible open space:

- Colden Common (due to the 'Kingsgate' development)
- Headbourne Worthy (due to the 'Kings Barton' development)
- Oliver's Battery (due to the acquisition of Texas Field as an 'asset of community value')

The following parishes / Wards continue to have a deficit of accessible open space when assessed against the standard in the local plan.

• Bishops Sutton	-1.54 ha
• Boarhunt	-0.98 ha
• Denmead	-8.41 ha
• Durley	-2.29 ha
• Kingsworthy	-0.18 ha
• Northington	-0.47 ha
• Old Alresford	-0.32 ha
• South Wonston	-6.04 ha
• Southwick & Widley	-2.77 ha
• Sparsholt	-2.33 ha
• Wickham	-4.63 ha
• Winchester – St Barnabus Ward	-29.85 ha
• Winchester – St Luke Ward	-7.57 ha
• Winchester – St Paul Ward	-31.86 ha
• Wonston	-1.39ha

The following parishes / Wards have gone from a **SURPLUS** to a **DEFICIT** of open space:

• Micheldever	-1.12 ha*
• New Alresford	-5.07 ha*
• Winchester – St Bartholomew	-3.11 ha**

*Due to a recalculation, ** due to ward boundary change in 2016

Source : WCC Open Space Assessment 2022

Strategic Transport Assessment

3.38 A key part of the evidence base for the local plan is an assessment of transport impacts, the [Strategic Transport Assessment](#) published in August 2024, reflects the growing recognition of the impacts of transport on health matters. There is an emphasis is now on place-making rather than capacity improvements by enabling travel by public transport, walking and cycling to lessen the impacts of road traffic and realise the wider benefits offered by these more sustainable modes; for example, carbon reduction, better use of public space, and benefits to public health e.g. through improvements in air quality, reductions in road casualties, and improved opportunities for physical activity through the trips people make every day. The percentage of adults that achieve at least 150 minutes physical activity per week for Winchester district is 63.4%, compared to 56% nationally. Across the district, 30.4% adults walked for travel (not leisure) and 6.9% cycled for travel. The percentage of people walking was much higher than the Hampshire average of 26.2%.

- 3.39 Car ownership is a key indicator of the need to access services and facilities and whether there is the option of walking/cycling or public transport. When looking at the built up area of Winchester City compared to the wider district. Census 2021 car ownership data reveals that, 22% of households (Winchester City area) do not have a car/van compared to 13.5% of the wider district, conversely 25.9% have 2 cars/vans compared to 34.35 of the wider district. This suggests that those residents in the more built up area have greater opportunities to not use their car for some journeys, which would have a number of benefits not just for improving health and wellbeing. The transport assessment also picks up on matters such as pollution, air quality and carbon reduction.
- 3.40 The following baseline summaries are set out in the report :

Winchester Town Area

The Winchester Town Area has the highest levels of transport accessibility across the District, with services and supporting infrastructure for public transport, walking, and cycling in the district. The area's roads comprise of a dense street network with a one-way system, necessary for managing existing high levels of traffic movement within and around the centre.

Travel demand in the highway peaks is primarily caused by the significant in and out-commuting patterns to/from the centre of Winchester and reflects the City's role as a regional employment centre.

Travel by sustainable modes continues to be negatively impacted by private car use predominantly associated with vehicles accessing the town from outer areas, despite the popular Park & Ride scheme specifically targeting these trips. Traffic volumes within the centre and observed congestion in the centre of town and on the approaches to the centre mean that local bus services can sometimes be irregular and unreliable, making them less attractive as an alternative to the car.

Overall, the area experiences issues because of the dominant highway network including congestion, some areas of poor air quality and road casualties, although improvements have been made in recent years and significant plans are in place for improvements.

South Hampshire Urban Area

Most existing housing developments within the SHUAs provide footpaths which are attractive enough for most people to consider short trips by foot, however the distance to destinations reduces the attractiveness of trips being made by this mode. Public transport options currently consist of limited and infrequent bus services between settlements.

The SHUAs highway network comprises a mix of minor country roads connecting villages and towns, smaller roads within the settlements and good links to the strategic M27 and A3 (M) routes, although parts of the latter are susceptible to suffering from congestion, which is expected to increase in future.

The SHUAs have very high proportions of car or van ownership by households, as well as higher proportions of residents who are in older age categories than Winchester Town Area. This, combined with the lower levels of service for public transport and active travel modes means that the existing population is likely to have a relatively high dependency on private car travel which could result in issues relating to air quality (currently within objective levels) as well as worsened highway congestion and parking demands as development increases if alternative options are not sufficiently provided.

Market Towns and Rural Areas

As with the SHUAs, relatively limited and infrequent bus services link market towns with smaller villages within the MTRA itself but there is good access to bus services from neighbouring authorities. Access to the rail network is from Micheldever and/or Shawford stations, both of which are served by frequent services to local major settlements.

Several junctions experience congestion, which tend to be in the vicinity of the larger market towns and rural areas, with the number likely to increase in future at a similar level to the other spatial areas.

The MTRAs have similar population demographics, vehicle ownership and air quality levels to the SHUAs. Based on the current situation, the relatively high distance from the settlements within this spatial area to the strategic road network may mean that increased development could result in higher congestion on the local road networks as well as other transport-related impacts such as vehicle collisions and reduced air quality.

3.41 The following sustainable transport measures are also identified:

- Local cycle walking implementation plan (LCWIP) is being prepared, this proposes a network of cycling corridors and core walking zones, these will incorporate the Healthy Streets principles which are reinforced in LTP4;

- Bus Service Improvement Plan (October 2021) identified a number of improvements with a focus on the Winchester city centre, but also opportunities to improve bus/rail interchange and a new park and ride to serve the north side of Winchester;
- Travel plans are a requirement for larger development proposals, in addition to Travel Plans, 'smarter choices' measures could also be considered. The initiative is based around several simple concepts intended to encourage and incentivise the uptake of either sustainable transport where a journey is essential, or the utilisation of modern technology or working practices, to avoid the need to travel.
 - 'Smarter Choices' is an established approach which includes a range of measures such as:
 - Workplace and School Travel Plans;
 - Personalised Travel Planning;
 - Teleworking, teleconferencing, and home shopping;
 - Travel Awareness campaigns;
 - Public Transport Information and Marketing;
 - Local Collection Points; and
 - Car Clubs and car sharing schemes.

Winchester Vision 2030 (One Great Win)

- 3.42 In recognition of the various good qualities experienced by Winchester Town together with the challenges of climate change, being an historic city and transport issues, there was a need for an overview of urban design related to planning matters. This has been achieved through [One Great Win](#) a website dedicated to expressing a vision for the next ten years for Winchester Town. The website includes a series of 'handbooks' covering:- lifetimes, ecology, culture, home and movement.
- 3.43 Health is mentioned in a number of the accompanying handbooks in recognition of the health benefits of open space, good quality environments and being able to access local facilities. The concept of 15 minute cities is reflected in the vision, whereby residents have access to daily facilities by walking or cycling.

Feedback from previous local plan consultations

Local Plan Launch – 2018

4.1 Whilst this consultation was broad, the matter of health provision in terms of facilities/health infrastructure was mentioned by a number of respondents

4.2 Responses were received from the following key organisations:

[West Hampshire Clinical Commissioning Group](#), - referred to the need to ensure health infrastructure is taken into account as part of new sites coming forward through appropriate Section 106/CIL contributions.

[Hampshire County Council – Public Health](#) – requested a specific strategic objective and policy referencing health, and the need to emphasise the links between health and the built and natural environment, in relation to hot food takeaways, sustainable travel, residential design (inclusion blue/green infrastructure), ageing population, retention of open space

Strategic Issues and Priorities – 2021

4.3 This consultation asked specific questions in relation to the issues to be addressed in the local plan:

- Carbon Neutrality;
- Biodiversity and the Natural Environment;
- Conserving and Enhancing the Historic Environment;
- Homes for All;
- Creating a Vibrant Economy;
- Promoting Sustainable Transport and Active Travel;
- Living Well;
- Low Carbon Infrastructure and Local Plan Viability;
- Delivery and Success of the Local Plan.

4.4 Under the theme of living well the consultation asked for views on :

- Access to open space in the district, in order to protect health and wellbeing and reduce inequality.
- How to create strong communities and neighbourhoods which support health and wellbeing of our residents into the future.
- The 15-minute neighbourhood concept and how it might develop.

- 4.5 Responses were reported to a meeting of the Councils' [Local Plan Advisory Group](#) on 24 November 2021, under the Living Well theme the following summary was presented:

Do you think current Local Plan and national policies around the provision of open space are adequate for protecting health and well-being and reducing inequality?

No = 67%. Yes = 19% . 14% were unsure or supported review of standards but made no comment on adequacy of current standards.

Other 'open space' points raised:

- Green Belt.
- Maintain existing open space – protect from development.
- Provide more local open space – designate as 'NPPF Local Green Space'
- Review Playing Pitch Strategy (Sport England).
- Accessibility of open space is a problem – wheelchairs, buggies, mobility scooters need paths.
- Address inequality of access – deficiency in St Luke's Ward, many of whom also do not have private amenity space in homes.
- Mental health benefits of access to nature and greenspace. Recommend adoption of standards (Natural England; Woodland Trust).

Do you have any suggestions for how we can plan positively to create multi-generational neighbourhoods and communities where social isolation is reduced and opportunities for independent mobility are promoted?

Summary of the key points raised:

- Design of new developments
 - Smaller housing developments; Mixed housing typologies and tenures to create balanced communities; Accessibility and lifetime homes
- Community Infrastructure – important for social connection and tight supported communities.
- Movement/ Transport (Cycling and Walking infrastructure, Public transport , Air Quality).
- Location of new development (the Development Strategy), and how this indirectly influences health and well-being (15 minute cities, Settlement boundaries, Brownfield first, Inner City accommodation).

- 4.6 These informed preparation of the Regulation 18 local plan, in particular when the SIP was published for public consultation, there was not a specific topic on design and living well. Feedback on the SIP raised these issues and initiated a series of design workshops (hosted by Design SE) which lead to a Design Process which is now embedded into various policies in the local plan.

In addition the concept of 15 minute cities was taken forward into 20 minute neighbourhoods as part of the spatial strategy.

Local Plan Regulation 18 - December 2022

- 4.7 This consultation presented a complete draft local plan for comment. The matter of health provision in terms of facilities/health infrastructure was mentioned by a number of respondents, in addition responses were received from the following key organisations:

[Hampshire and Isle of Wight Integrated Care Board](#) – the response focussed on feedback on the level of development proposed and sites identified and impacts on primary care provision, on a site by site basis through identification of local surgeries and capacity at these to support planned growth.

[North and Mid Hampshire Locality, Hampshire and Isle of Wight ICB](#) – the response relayed feedback from local practices and primary care networks in relation to the proposed sites for development and capacity to deal with increases in population.

4. What are the Key Health Issues arising from the Evidence?

- 5.1 The above excerpts provide a sample of not only what the local plan evidence reveals in terms of health, but also some key facts from county level and national data, this gives a good indication of the three common themes emerging.

An Ageing Population

- 5.2 The population is generally getting older, and Winchester is no exception. Whilst proportions of those aged 65 and over are not significantly different to elsewhere, by the end of the plan period these will fall into the over 85-year category and their needs in terms of housing and support will have changed.
- 5.3 Indeed, the SHMA expresses some significant changes, including but not limited to 45% increase in the population over 65 years; 70% increase in those with dementia and 59% increase in those with mobility issues.

Physical and Mental Health

- 5.4 There are strong links between being physically active and mental health. Whilst the above evidence does not suggest that there are significant issues in the district, there are some indications that matters could be improved.
- 5.5 For example, whilst the proportion of Winchester residents who are classified as overweight or obese has increased more substantially from 50.7% in 2015/16 to 57.4% in 2018/19, this is lower than the figure for England 62.3%. Yet when looking at activity in terms of moderate or aerobic exercise data estimates that 15.0% of the population in Winchester is classified as inactive doing less than 30 minutes of moderate exercise per week, this being less than the 21.8% figure for the South East of England. However more people participated in aerobic exercise, compared to elsewhere.
- 5.6 In terms of mental health vulnerabilities, social isolation and loneliness are more likely to be prevalent in urban areas rather than rural areas despite being clustered in the more densely populated areas of the district. Winchester East and Winchester Stanmore have higher vulnerabilities towards mental health matters, compared to the rest of the district.

Air quality

- 5.7 Links between air quality and health outcomes are well documented nationally. The above evidence also suggests this is a key issue for the district, not only given the strong road links through the district, but also with a particular focus on Winchester city which has been subject to focussed air quality monitoring and mitigation measures for a number of years.

5. How does the Winchester Local Plan respond to the evidence in terms of health?

- 6.1 Whilst the Local Plan must be read as a whole, there are many aspects of it that refer to health impacts and outcomes.
- 6.2 The IIA being an integrated assessment, includes a number of strategic objectives with direct and indirect reference to health and wellbeing, this has been used throughout preparation of the local plan to ensure that policies and proposals respond positively to health and wellbeing matters. This also ensures that the local plan complies with the requirements of the NPPF as summarised in Section 2 above.
- 6.3 The [Infrastructure Delivery Plan \(IDP\)](#) is a key part of the evidence base that supports and should be read in conjunction with the local plan. The number of households in the Winchester District is projected to grow by approximately 15,000 dwellings during the Local Plan period. Therefore, planning to meet the infrastructure needs of this growth is an essential component of the Local Plan.
- 6.4 The IDP therefore identifies the lead health and public services and service providers and in response to engagement with these the local plan has been amended. Further details on this is set out in the IDP. Ongoing engagement will be necessary to ensure that as the local plan progresses and sites gain planning permission and move into the implementation phase, health infrastructure is considered alongside other infrastructure requirements.
- 6.5 The idea of nature based solutions are referred to throughout the local plan, in both policies and supporting text, in recognition of the broad benefits offered to health and other matters. Nature based solutions are defined as “*Nature-based solutions is an umbrella term for interventions that work with nature to address socio-environmental challenges, simultaneously benefiting people and biodiversity. They include the protection and restoration of ecosystems, sustainable management of land and water, reversing biodiversity loss and tackling the negative effects of climate change*”.
- 6.6 The following table highlights how the local plan responds to the three key health issues identified above, from the high-level assessment of key pieces of evidence relating to health and wellbeing in Section 3 above. It should be noted that the table simply highlights direct references to the identified key health issues, albeit there will be indirect consequences of benefit to the three issues from application of the many and varied policies within the local plan.

Winchester District Proposed Submission Local Plan (Regulation 19) 2020-2040 – How the Plan is responding to the three common themes for health and wellbeing in Winchester- An Ageing Population, Physical and Mental Health and Air Quality

Health Issue	Policy Reference in Winchester District Local Plan 2020-2040	Commentary
An Ageing Population	Vision	Refers to enhancement of the sustainability of communities ; evolving communities.
	Objectives – living well, homes for all	Objective ii refers to inclusive communities Objective iv refers to high quality, adaptable housing to meet local needs (size, type and tenure).
	Strategic Policy SP2	Part ix refers to individual and community wellbeing, health and safety and social inclusivity. Part x refers to undertaking an assessment of infrastructure and service capacity. This will include liaison with the NHS ICB where highlighted in the Plan site allocations.
	Strategic Policy CN1	Part vii refers to adaptable space. Parts xi and xii refer to design of buildings to balance temperatures and reduce amount of heat.
	Strategic Policy D1	Part ii refers to high quality public realm; easily navigable with permeable and accessible routes, for all users through the development including for those living with dementia, people with disabilities or anyone whose has reduced mobility; Part iii refers to connections with blue/green infrastructure to create safe and accessible walking/cycling routes Part vi refers to car parks, footpaths and public spaces have been designed to support access by people with poor mobility.

Health Issue	Policy Reference in Winchester District Local Plan 2020-2040	Commentary
		<p>Part ix refers to within mixed use development, locating local services and community facilities in a central and/or easily accessible part of the development</p> <p>Part xii refers to bus stop infrastructure to both support active travel whilst not negatively impacting on those with mobility issues.</p> <p>Part xiii refers to designing buildings with clearly identifiable and accessible entrances; landmarks, waymarking and environmental and public realm improvements to aid with navigation;</p> <p>Part xiv. refers to providing seating in new public spaces and along longer pedestrian routes where appropriate in order to provide an interesting and stimulating sensory environment.</p>
	Strategic Policy D2	Part vi refers to improving public realm and creating a better environment for walking, wheeling and cycling and address issues for people with reduced mobility.
	Strategic Policy D3	Part iii refers to Relevant local evidence set out in the 10 Characteristics of well-designed places, in the National Design Guide.
	Strategic Policy D4	Part iii refers to Relevant local evidence set out in the 10 Characteristics of well-designed places, in the National Design Guide
	Strategic Policy D5	<p>Part iv refers to Create a strong sense of place</p> <p>Part v refers to Plan for integrated development, providing for a mix of housing types, sizes and tenures that addresses the range of local housing needs, and encourages community cohesion.</p>

Health Issue	Policy Reference in Winchester District Local Plan 2020-2040	Commentary
		Part xi refers to Provide for accessible open space to meet identified local needs and/ or increase accessibility to existing open spaces.
	Strategic Policy T1	Part iii refers to 20 minute neighbourhoods Part v refers to Safe, attractive, secure and convenient ways that encourage all users, including those with disabilities and reduced mobility, to use more sustainable forms of transport such as walking, wheeling, cycling or buses.
	Strategic Policy T4	Part ii refers to Addresses the needs of people with disabilities, children and those with reduced mobility in relation to all modes of transport; including the provision of appropriate crossings at appropriate locations.
	Policy NE3	Refers to improvements in the open space network and in-built recreation facilities and allotments within the district, to achieve the type of provision, space required and levels of accessibility and ensuring that intergenerational areas are co-designed into any provision. This Policy also introduces the concept of nature based solution which would make a positive contribution to various health matters.
	Policy NE4	Refers to The green infrastructure shall be accessible for all with high levels of accessibility in primary areas, and promote health, wellbeing, community and cohesion and active living; encourages public access to and within the natural environment.
	Policy NE11	Requires sites to provide adequate open space - residential care homes and specialist housing for older

Health Issue	Policy Reference in Winchester District Local Plan 2020-2040	Commentary
		people should provide adequate amenity space; allow use by less mobile residents including those using wheelchairs.
	Strategic Policy H5	Development proposals will be supported where they provide housing of a type, size and tenure that contributes towards meeting housing needs, with provision for affordable housing; sites of 10 homes or more 5% of all new market homes should be built to wheelchair adaptable standards to meet the requirements of Building Regulations M4(3)(2)(a) and 10% of all new affordable homes should be built to wheelchair accessible standards to meet the requirements of Building Regulations M4(3)(2)(b). Subject to site suitability, all new homes not built as wheelchair user dwellings to meet the requirements of Part M4(3) should be built to accessible and adaptable standards to meet the requirements of Building Regulations M4(2).; Proposals for well designed specialist and supported housing (including older persons housing) will be supported
Physical and mental health	Vision	Refers to enhancing natural environment; 20 minute neighbourhoods and active travel
	Objectives – living well, homes for all	Objective i refers to increasing opportunities for walking and cycling and enhancing access to outdoor recreation and the natural environment Objective ii refers to blue/green infrastructure Objective iii refers to active transport and minimising use of the private car
	Strategic Policy SP2	Cross refers to Local Transport Plan and Local Nature Recovery Strategy

Health Issue	Policy Reference in Winchester District Local Plan 2020-2040	Commentary
		<p>Part v refers to green infrastructure</p> <p>Part ix refers to individual and community wellbeing, health and safety and social inclusivity</p> <p>Part x refers to undertaking an assessment of infrastructure and service capacity. This will include liaison with the NHS ICB where highlighted in the Plan site allocations.</p>
	Strategic Policy CN1	Part iii refers to nature based solutions to deliver multifunctional benefits for health and wellbeing
	Strategic Policy D1	<p>Part ii refers to high quality public realm; easily navigable with permeable and accessible routes,</p> <p>Part iii refers to connections with blue/green infrastructure to create safe and accessible walking/cycling routes</p> <p>Part xii refers to supporting active travel</p> <p>Part xiv. refers to providing seating in new public spaces and along longer pedestrian routes where appropriate in order to provide an interesting and stimulating sensory environment</p>
	Strategic Policy D2	Part vii refers to the retention and opportunities for enhancement of existing green open spaces, and the improvement of the public realm including more public spaces, more natural features and tree planting
	Strategic Policy D3	Part iii refers to Relevant local evidence set out in the 10 Characteristics of well-designed places, in the National Design Guide
	Strategic Policy D4	Part iii refers to Relevant local evidence set out in the 10 Characteristics of well-designed places, in the National Design Guide
	Strategic Policy D5	Part iv refers to Create a strong sense of place

Health Issue	Policy Reference in Winchester District Local Plan 2020-2040	Commentary
		<p>Part vii refers to Create a layout that encourages walking and cycling, with a clear network of permeable and interconnected streets and high quality public realm that is well integrated into the surrounding area; including access to public transport, cycle routes, footpaths and bridleways and other Public Rights of Way;</p> <p>Part xi refers to Provide for accessible open space to meet identified local needs and/ or increase accessibility to existing open spaces</p> <p>Part xii refers to Incorporate a green infrastructure strategy, providing an integrated network of green spaces, taking advantage of opportunities for off-site links to the countryside</p>
	Strategic Policy T1	<p>Part ii refers to maximising opportunities to walk and cycle in compliance with the Hampshire Movement and Place Framework and Healthy Streets approach as set out in the adopted LTP4</p> <p>Part iv refers to Integrating sustainable and active travel routes into the layout with connections to the wider network and where appropriate integrated with the green / blue infrastructure networks</p>
	Policy NE3	<p>Refers to improvements in the open space network and in-built recreation facilities and allotments within the district, to achieve the type of provision, space required and levels of accessibility and ensuring that intergenerational areas are co-designed into any provision; New housing development should make provision for public open space and built facilities in accordance with the most up to date standards</p>

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	Policy NE4	Refers to Maintain, protect and enhance the function or the integrity of the existing green infrastructure network identified at a district and sub district level, including strategic blue and green corridors and spaces; The green infrastructure shall be accessible for all with high levels of accessibility in primary areas, and promote health, wellbeing, community and cohesion and active living; encourages public access to and within the natural environment
	Policy NE10	Refers to protection of open areas within settlement boundaries
	Policy NE11	Requires sites to provide adequate open space - Contribute to maintaining or enhancing the visual and environmental character of the area and supporting increase permeability and connection to existing areas of open space and wildlife corridors; Incorporate appropriate hard landscaping and planting;
	Policy NE14	developments should not have an unacceptable effect on the rural tranquillity of the area
	Policy NE15	Retention of trees, hedgerows and woodlands
	Policy NE17	Refers to Public access to and along the waterway for recreational opportunities and the importance of providing canopy shading for both the natural water environment and for people walking beside the waterway
Air quality	Vision	Refers to adapt to, improve resilience to and mitigate climate change, high quality environments; 20 minute neighbourhoods and active travel
	Objectives – living well, homes for all	Objective i refers to improving air quality Objective iii refers to active transport and minimising use of the private car

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		Objective viii refers to supporting green growth
	Strategic Policy SP2	Cross refers to Local Transport Plan and Local Nature Recovery Strategy Part v refers to air quality
	Strategic Policy CN1	Part iii refers to nature based solutions to deliver multifunctional benefits for health and wellbeing ... and air quality Part iv refers to sustainable modes of transport being fully incorporated into layouts Part v refers to recharging points for sustainable modes of transport
	Strategic Policy D1	Part iii refers to connections to create safe and accessible walking/cycling routes links with local services, public transport to encourage active travel Part xii refers to smart design and location of cycle parking, car parking and bus stop infrastructure in this policy to both support active travel
	Strategic Policy D2	Part vi refers to improving public realm and creating a better environment for walking, wheeling and cycling and address issues for people with reduced mobility Part viii refers to The delivery of transport improvements identified in the Winchester Movement Strategy, Winchester Walking Strategy and City of Winchester Local Cycling and Walking Infrastructure Plan and other relevant transport documents
	Strategic Policy D3	Part iii refers to Relevant local evidence set out in the 10 Characteristics of well-designed places, in the National Design Guide

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	Strategic Policy D4	Part iii refers to Relevant local evidence set out in the 10 Characteristics of well-designed places, in the National Design Guide
	Strategic Policy D5	<p>Part iv refers to Create a strong sense of place</p> <p>Part vi refers to Reduce the need for car use and encourage sustainable modes of travel, and active travel infrastructure; A Transport Strategy for the masterplan that evidences how the development will achieve a high internalisation of trips and an ambitious active travel mode share; A Public Transport and mobility hub strategy that provides for timely delivery of new bus, public transport and mobility infrastructure</p> <p>Part vii refers to Create a layout that encourages walking and cycling, with a clear network of permeable and interconnected streets and high quality public realm that is well integrated into the surrounding area; including access to public transport, cycle routes, footpaths and bridleways and other Public Rights of Way;</p> <p>Part viii refers to .Include measures to mitigate the traffic impacts of the proposed development on the strategic and local road networks</p>
	Policy D7	Refers to Development will only be permitted where it achieves an acceptable standard of environmental quality and avoids unacceptable impacts on health or quality of life; The potential for unacceptable pollution, resulting in adverse health or quality of life impacts, should be addressed by applications
	Strategic Policy T1	Part i refers to A genuine choice of sustainable and active transport modes of travel; prioritising walking, wheeling,

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		<p>cycling and public transport, followed by car clubs, electric/hydrogen vehicles and lastly private fossil-fuelled vehicles</p> <p>Part ii refers to Development so that it reduces the number of trips made by private motor vehicle; maximising opportunities to walk and cycle in compliance with the Hampshire Movement and Place Framework and Healthy Streets approach as set out in the adopted LTP4</p> <p>Part iii refers to the concept of 20 minute neighbourhoods</p> <p>Part v refers to Safe, attractive, secure and convenient ways that encourage all users, including those with disabilities and reduced mobility, to use more sustainable forms of transport such as walking, wheeling, cycling or buses,</p> <p>Part iv refers to Integrating sustainable and active travel routes into the layout with connections to the wider network and where appropriate integrated with the green / blue infrastructure networks</p>
	Policy NE4	Refers to The green infrastructure shall be accessible for all with high levels of accessibility in primary areas, and promote health, wellbeing, community and cohesion and active living; encourages public access to and within the natural environment; Includes proposals for walking, cycling and equestrian routes provided they contribute to a network of attractive and functional non-motorised travel routes
	Policy NE13	Requires development outside of settlement boundaries to not cause harm including by all forms of pollution
	Policy NE15	Retention of trees, hedgerows and woodlands

