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Healthy Place Making: Improving Public Health through Planning

PHIRST Webinar

Monday 20th October 2025

Hosted by PHIRST Insight

The role of planning in health

- Spatial planning has long been recognised as having an important role in tackling the causes of poor health
- Consider the role of
  - good quality housing
  - green space
  - active transport
  - access to healthy (and unhealthy) foods
  - local employment opportunities,
  - accessible and safe public spaces

The role of planning in health

- UK Government pledge to build 1.5million new homes in England by 2029
  - Construction of three new towns to begin before the next election

- Collaboration between local authority public health and planning departments on housing developments or other major infrastructure projects present an opportunity to influence population health

- Three studies funded through the NIHR PHIRST programme exploring building better partnerships between local public health and planning departments

Agenda

Three PHIRST study presentations:

1. Building healthy environments – the role of specialist 'Health Places' posts	PHIRST LiLaC
2. Supporting the delivery of healthier places: why planning and public health work better together	PHIRST South Bank
3. Improving Amenity Space and Place Quality in a Local Council	PHIRST Insight

5-minute comfort break

Panel Discussion:

Adam Briggs, Director of the NIHR Public Health Research Programme and Deputy Director of Public Health at Oxfordshire City Council

Andrew Charlesworth-May, Ministry of Housing, Communities and Local Government

Riham Lofti, Public Partner, Evaluation of the Residential Amenity Space and Place Quality SPD (Supplementary Planning Document) in Brent

Andrew Netherton, Programme Manager (Housing, Planning and Environments for Health), Directorate for Prevention and the Public Health System, Office for Health Improvement and Disparities

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Building healthy environments – the role of specialist 'Health Places' posts

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SOUTHAMPTON CITY COUNCIL

East Sussex County Council

Background

- New Healthy Places Officer roles were introduced at East Sussex County Council and Southampton City Council in 2022.
- The two councils wanted to explore the effectiveness of having such roles in creating healthy environments.
- So, the councils made a joint application to NIHR PHIRST scheme to undertake an independent evaluation.

Healthy Places Officer roles

- Settings: a city council (unitary authority) and a two-tier authority comprising the county council (so multiple local planning authorities).

- Dedicated capacity to drive work on healthy environments, but in turn, build and facilitate capabilities for healthy environments across local systems.

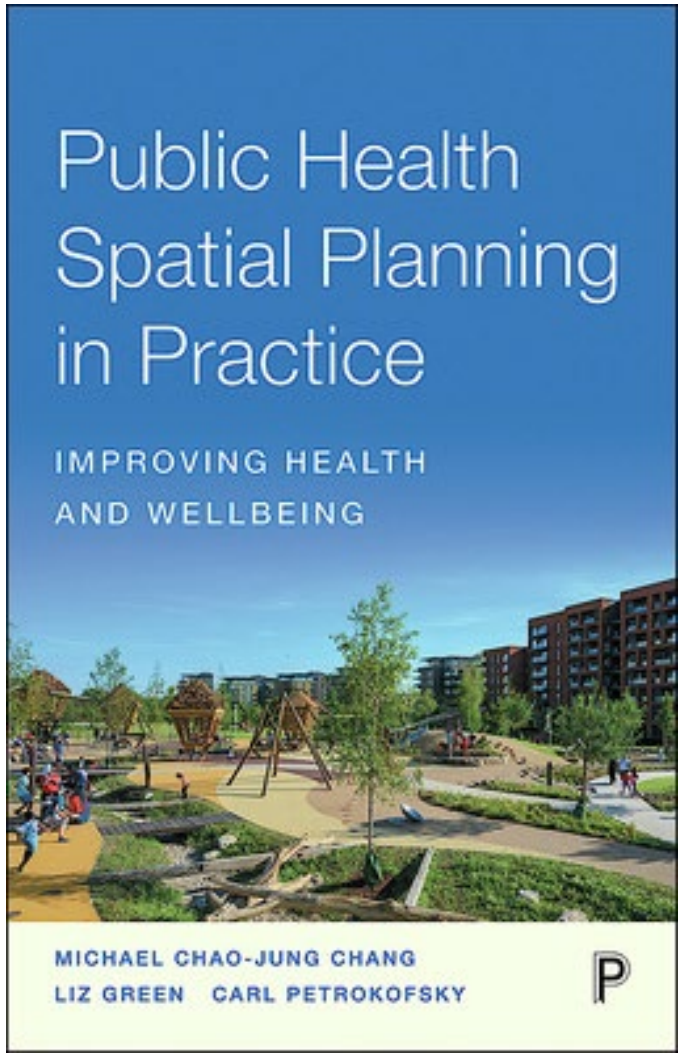
- Postholders had planning experience (by professional background) combined with interest and experience in public health.

"I think it became clear to me … as time went on that you do need somebody who is familiar with the language, familiar with the policies and the procedures and the parameters that have to be met for developing planning policy, and who can I suppose advocate a little bit more for public health"

Outcome 1 – Collaboration and Partnership

Across Southampton (unitary) and ESCC (two-tier) as well as with PHIRST LiLaC.

- To collaborate (including across geographic boundaries (people and places) and ways of working/processes etc.
- Across officers, networks and geographies – ‘Healthy Places’ / ‘Planning for Health’ / ‘Healthy Environments’.
- Strengthened cross departmental working – facilitated wider systems working through the undertaking.
- ‘In it together’ – intersectoral working and relationships.
- More relevant policies and plans with health in mind.



Outcome 2 – Raising the Profile

- Healthy Places are central to population health management.
- Wider determinants – addressing ‘environmental determinants’.
- Amplification on ‘healthy environments’.
- Presence and development of ‘Healthy Policies’, ‘Health in All Policies’, ‘Climate and Health in All Policies’ within Local Plans and Neighbourhood Plans.
- Use of Health Impact Assessments (HIA)
- Hot Food Take Away – ‘Planning for Health’.

Outcome 3 – Wider Workforce Competencies and Development

- ‘Trail blazing’ (a new breed and generation of public health professionals).
- Investment (helping to make the business case for others).
- Local inform national best practice and capability.
- To acquire new skills and ways to engage.
- Developing a new workforce and work programmes

Evaluation outputs

- Briefing, with case studies
- Slide deck, infographic
- Video presentation
- Journal paper in Cities and Health + City Know-how

https://phirst.nihr.ac.uk/evaluations/building-healthy-environments/

Research Briefing - January 2024

Building and facilitating system capability to create healthy environments

A qualitative process evaluation

Local government can play a key role in developing built and natural environments that promote health through its statutory responsibilities for planning and other relevant functions. This briefing reports on an evaluation of Southampton and East Sussex councils' work to address healthy environments through the employment of specialist Healthy Places Officers.

KEY POINTS:

- Prior to the posts' introduction, intersectoral activity to build healthy environments was ad-hoc or reliant on individuals in both local authorities.
- The evaluation mapped a diverse range of policy areas including housing, transport and natural environments, with which the postholders are engaging. This has led to developments in intersectoral working, increased workforce capacity and emerging examples of more health relevant policies and plans in both authorities.
- It is unlikely that the scale of activities would have been achieved without the presence of these roles.
- Factors influencing change include resources and time, particularly for planning teams as well as wider political, economic and geographical drivers.

Background. The places where we live, work and play can support or hinder our physical and mental well-being (PHE, 2017). In East Sussex County Council (ESCC) and Southampton City Council (SCC), specialist posts have been funded to strengthen the public health and planning relationship, build capacity for planning for health within the local authorities as well as support local authorities to deliver health and wellbeing outcomes more widely, delivering on a Health in All Policies (HIAP) agenda.

The study. The evaluation aims were to identify early changes in capacity and ways of working that support efforts to promote healthy environments in local authority settings that can be linked in whole or in part to the investment in specialist dedicated posts. It also aimed to understand the ways in which these changes have come about and to assess any early impact these changes have on policy and practice. Data collection involved interviews with key stakeholders across a range of sectors and organisations, observations of events and meetings, workshops, and diaries completed by the Healthy Places Officers (HPOs). Case studies of local actions to facilitate and build healthy environments were also gathered.

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Evaluation of how 'hybrid' public health posts in local government support the delivery of healthier places in the Oxford-Cambridge Arc

A PHIRST South Bank evaluation

Findings - August 2025

Intervention:

- **Hybrid public health-planning posts employed by public health teams in two areas:**
  - **BMK: Bedford Borough, Central Bedfordshire and Milton Keynes**
  - **OCC: Oxfordshire County Council and five district councils**

Overall evaluation question:

- How do 'hybrid' public health-planning teams support the delivery of healthier places?

Theoretical framework:

- Hybrid posts as a complex, adaptive intervention
  - Functions rather than forms (Hawe, 2012)

Data:

- n-**44** stakeholders were recruited for interviews or small focus groups – this included public health professionals (n-8) and planners (n-11)
- 15 (past, present and proposed) local plans from BMK and the OCC area were obtained for document analysis

The 5 functions of hybrid teams

Functions	Function statement
1. System Leadership	To lead system-wide change by embedding public health in corporate strategy while fostering collaboration and shared accountability
2. Public Health Capability	To build the knowledge, confidence and strategic capability of public health professionals to meaningfully engage with and input into planning systems
3. Planning Policy Influence	To support planning policymakers to integrate a public health perspective into local plans and policies through evidence, advocacy and collaboration
4. Development Management Support	To improve the governance, decision-making processes and health-related outcomes of development management by contributing evidence and strategic input
5. Community Engagement & Advocacy	To enable meaningful community engagement in healthy placeshaping while advocating for the health needs of underrepresented groups

Some testimonials…

> I've gone through the quite a traditional public health route … [but] I would say I had absolutely no training about the built environment or planning whatsoever … We'd talk about the **social determinants** of health, but not really have the tools to do much about it …
>
> [Redacted name of postholder] was able to tell us where we could **influence**, what we could ask for and what was **realistic**, and without that I think there's a danger we come out with general comments, but don't give specifics: we make broad requests which don't necessarily then translate into requirements in the local plan.

Stakeholder testimonial – public health consultant

> [Redacted name of postholder] was commenting on **all aspects of walking, natural infrastructure, accessibility to facilities and services** within the area. We were getting a **completely wide view** on the development and how it needed to be changed … The comments were **more bespoke** … He was able to break down a lot better to get more holistic comments that are fed through into what should result in a **better scheme**

Stakeholder testimonial – development management officer

> There was an excellent presentation … about how we should look at health in the widest possible sense … She was so enthusiastic, I found her **absolutely inspiring**. When I left there, I was absolutely buzzing thinking: 'I'll come back to the council and tell them all about it'. Because I do believe it **touches every single committee**.

Stakeholder testimonial – parish councillor

A postholder’s view

What worked well?

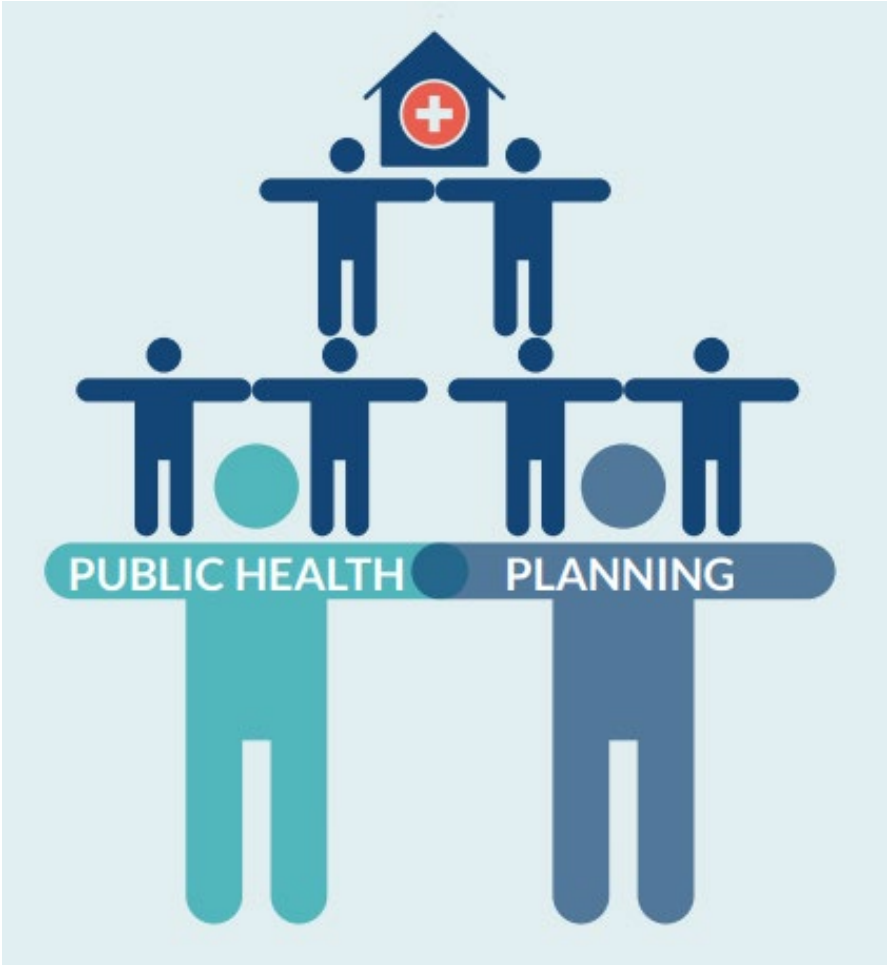
What challenges were there?

Check our outputs…

A 1-page infographic – key takeaway messages for use by local public health and planning teams

A 5-page research briefing – key findings and recommendations for both local councils, national policymakers and professional development

A full 84-page report – full details, including background, methods, findings and recommendations via a full slide deck report



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An Evaluation of the Residential Amenity Space and Place Quality Intervention

PHIRST Insight & Brent Council

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Introduction & Background

What is this about & why is it important?

Background

- Amenity space is shared or private space within developments.
  - E.g. balconies, gardens
  - E.g. shared gardens or lounges

- Place design, including amenity space, is critical to physical, social and mental wellbeing.

The Place Quality Intervention

The intervention has four parts;

1. **Amenity space guidance: Supplementary Planning Document (SPD)**
2. **Amenity Space Quality Statement Template**
3. **Training for Planning Officers**
4. **Community and Quality Review Panels (CRP and QRP)**

The Place Quality Framework

- The Place Quality Framework provides an overarching reference point for good design.

  - ✓supporting physical and mental wellbeing
  - ✓building strong and integrated communities
  - ✓encouraging vibrancy and intergenerational mixing

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Project Aims

Project Overview – Aims

- The main aim of this evaluation was to **assess the extent to which the new Place Quality Intervention is being integrated into the planning application process.**

- The study also explored **collaboration between health and planning teams** within Brent council.

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Methods

How did we do this?

Project Overview - Methods

The study used a range of methods from **July 2024 to February 2025** including:

- **observations** of review panels (n=15)
- **document analysis** (n=8)
- assessments of **planning officers' understanding** (x2)
- semi-structured **interviews** (n=43)

We focused on understanding perspectives of different people involved in the planning process.

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Key results

What did we find?

Factors that help and hinder use of the guidance

- Factors perceived to **help** were:
  - Positive attitude
  - Common language
  - Provision of a template or checklist

"A form will make a huge difference because I think some developers will read through it and will really respond to everything."

Council Planning Management

Factors that help and hinder use of the guidance

- Factors perceived to **hinder** were:
  - Awareness and understanding
  - High workload
  - Competing priorities
    - Drive for profit
    - Need for affordable housing

“In a constrained site, it is not possible to meet the numerical space requirements as this would eat into profit. (…)"

Applicant

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What are the factors perceived to help and hinder collaboration between planning and public health teams?

Collaboration between planning and public health teams

- Factors perceived to **help** the relationship include:
  - Good relationship at senior level
  - Positive past collaboration
  - Shared goals around health and wellbeing

"…that quickly evolved into a conversation around health and well-being and so, using that piece of guidance as a springboard, ***we're now looking ever increasingly at the relationship between public health and placemaking****."*

Council Planning Management

Collaboration between planning and public health teams

- Factors perceived to **hinder** the relationship include:
  - High staff turnover
  - Lack of formal relationship
  - Limited time and capacity for engagement
  - Lack of shared terminology

"(…) ***everyone has a million and one things to do when you work in the Council*** *and it's difficult to sort of, you know, dedicate yourself to one aspect and focus on one aspect as much as you would like."*

Public Health Officer

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Recommendations

What can be done and why?

Recommendations for SPD implementation

- Ongoing training and ‘buddying’ with senior colleagues.
- Support for applicant teams
- Making the guidance template easier to use
- Applying the guidance in a flexible manner

Future ways of working between Planning and Public health

- **What can be done:**
  - Embed collaboration with public health and planning staff into job descriptions
  - Involve public health teams earlier
  - Create a bridging role
  - Engage senior staff

- **Why this is a good idea:** This ensures joint working from the outset and creates greater opportunities for collaboration

Authors and Acknowledgements

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