

**Penzance Neighbourhood Plan Regulation 14 Consultation –
Response to West Cornwall Health Watch**

Thank you for your response to the consultation on the Penzance Neighbourhood Plan (PZNP).

“Health and Wellbeing” is one of nine core issues on which residents’ views were sought in 2015 during the very first phase of consultation.

So, although there is no specific section on this topic within the Plan, health and well-being are frequently referenced in the justification and/or policies in many of the key areas of the PZNP.

Within the **Housing** section, Policy H1 (Housing Mix) includes an expectation that new housing development will contribute to a range of housing tenures, types and sizes, while Policy H8 adds support for extra care supported living facilities and accessible dwellings in appropriate locations. In addition, the briefing note in the Plan for the Bellair allocated site refers specifically to the provision of dedicated affordable key worker housing. (*see specific response in Responses Masterfile, Housing*).

It is considered therefore that the policies in the Plan provide support for the types of housing referred to. Reference has also been added in the **Economy** section to the importance of employment in the health care sector (*see specific response in Responses Masterfile, Economy*)

Health and wellbeing run through all our **Green Infrastructure** policies, with the recognition in the “Context” narrative that all the elements of green infrastructure are “*important to the quality of our surroundings and in turn to our quality of life, health and wellbeing, as well as to biodiversity, the wider environment and the economy*”.

For example, Policy GI2 (Protecting, Enhancing and Extending Strategic Green Routes, Churchways / Historic Paths and other Public Rights of Way in the Countryside) recognises that access to the natural environment is “*essential to the health and well-being of our communities*”; and the paragraph headed Protecting Trees from Loss and New Trees in Development, together with Policy G3 in the Climate Emergency DPD, acknowledges the positive contribution of trees to mental health.

Finally, the “Context” summary of the **Development, Design and Heritage** (DDH) section cites “supporting health and wellbeing” as one of the benefits of the high-quality built environment that underpins our DDH policies. This is reflected in a number of specific policies, including:

- DDH3: Light Pollution and the Night Sky
- DDH4: Sustainability
- DDH5: Development and New Pedestrian and Cycling Links
- DDH6: Protecting Civic Spaces, Play Areas and Pedestrian Routes

In this way we positively address – through actual policies, and not just general comments – the connection between environment and community health.

Specific sites have not been allocated for healthcare or similar purposes in the PZNP because as a “main town”, development sites in Penzance were allocated in the Cornwall Site Allocations DPD. If future sites were to come forward, policies in the PZNP would do nothing to prevent such development other than in areas designated for protection (for example as green buffers, local green spaces or biodiversity areas, which are in themselves designated largely in the interests of community health and wellbeing).

We would also point out that health and well-being were integral to the preparation of the Cornwall Local Plan (CLP), which includes an entire policy section (Policy 16) devoted to this topic. It is at this level that broader issues of health and social care provision relative to housing growth were considered, and should be reassessed in the forthcoming CLP review.

Finally, healthcare providers are statutory consultees on major development proposals, and seek developer contributions towards the provision of appropriate facilities accordingly.

Devoting an entire section, including policies, to “Communities, Health and Social Care” would fall outside the remit of the PZNP, and would require resources and expertise beyond our means. Besides, much of the policy in this area is driven by more strategic policy and resource allocation at county, regional or national level, so an exercise involving “quantification in a robust analysis of the overall scale and type of health and social care provision appropriate to the Parish” would risk duplicating efforts elsewhere.

Overall, the points you raise about building health, social care and community well-being into planning policy are well made, but we feel they would be better pursued at unitary authority level (for example as part of the Local Plan review).

In general, we feel that the PZNP has gone as far as it can in embedding health and wellbeing into our narrative text and policies. However, we accept that it could be helpful to highlight more clearly some of the related issues as they affect the Parish.

We will therefore add a section on “Health and Wellbeing” to the first part of the PZNP, similar to the existing section on “Climate Change”, outlining some of the challenges we face and signposting to policies that address those challenges.