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# Greater Cambridge Shared Planning

# Health Impact Assessment SPD Consultation

University of  
Cambridge

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# 1 Introduction

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- 1.1 This document provides Representations prepared on behalf of the University of Cambridge (“UoC”) to Greater Cambridge Shared Planning (“GCSP”) on its ‘Greater Cambridge Health Impact Assessment (“HIA”) Supplementary Planning Document (“SPD”)’, released for consultation in Winter 2024.
- 1.2 By way of background, UoC is currently preparing an outline planning application for its site at North West Cambridge (known as Eddington). Eddington is the University’s response to the need to provide affordable housing for its staff so it can attract and retain top talent to maintain its global competitiveness. By housing staff in a purpose-built, high quality neighbourhood, the University also reduces the demand on the wider housing market in the city. By providing 50% of housing for staff and the remainder contributing to increasing the overall supply of housing in the city, the Eddington development supports the highly successful Cambridge eco-system which provides long-term growth and prosperity for the local, regional and national economy.
- 1.3 Outline Planning Permission for Eddington was originally granted in 2013 and so far 1,100 homes have been delivered with a further 700 under construction alongside a new local centre, community centre, primary school, hotel and student accommodation. The ability to bring forward further residential dwellings under the Outline Planning Permission (through Reserved Matters Applications) expired in 2023. As a result, the University needs to bring forward a new outline planning application for the ‘Future Phases’.

## 2 Detailed Comments

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- 2.1 Overall, the objectives of the SPD are supported, and UoC intends to support health and wellbeing through the design, delivery and maintenance at Eddington.
- 2.2 However, it is important for decision makers to acknowledge that the planning process (and land use in general) is only one part of the way that people can achieve the “highest level of health and wellbeing”. There are genetic factors, personal choice factors and factors related to service provision that are well outside of the control of the planning process. For an HIA to be a useful tool in shaping development it must focus specifically on those matters that can be controlled or directly affected by the planning process and land use. Generalised reviews of population health that fail to acknowledge the role of personal choice, genetic or public service provision outside the planning process will not be realistic or helpful in the planning context. While parts of the introductory chapters do acknowledge these other factors, and the checklist itself is focussed on these matters, it is important for decision makers to see clearer guidance on the remit of HIAs (and limitations to them) in the introductory chapters.
- 2.3 It is also important that the HIA should not need to replicate in detail anything that is controlled by building regulations or assessed in detail as part of the EIA or other supporting technical documents.
- 2.4 The HIA Checklist includes many requirements that exist as planning policies whether or not an HIA is required and we would encourage a consideration as to whether these matters need to be addressed in an HIA as well as the other settings.
- 2.5 There is no reference to the distinction between outline and detailed planning applications – where the nature and scope of an HIA needs to be quite different given the level of detail available. For example, the internal layout of homes is not decided at outline stage and it would be appropriate to scope that out of an HIA submitted with an outline planning application. A tiered approach based on planning stage should be introduced.
- 2.6 The SPD sets out three tiers of assessment: Desktop, Rapid and Full.
- 2.7 A full HIA requires comprehensive involvement of stakeholders in focus groups, panels or public consultations (as distinct from just a small steering group for a Rapid HIA). Section 4 of the SPD sets the thresholds for when each would apply and suggests that all developments over 100 homes would require a Full HIA. For a development of over 100 homes a Rapid HIA should be sufficient, including a steering group with the LPA who will have very good knowledge of local issues already. We do not think it is realistic for dedicated focus groups, including focus groups of vulnerable people, to be engaged for development at this scale.
- 2.8 The threshold should therefore be revised or the approach required in South Cambridgeshire is used across the whole area.