

A photograph of two women sitting at a table, engaged in a painting activity. The woman on the left is older, with short grey hair and glasses, wearing a blue cardigan. She is holding a red paintbrush and looking down at a piece of paper with colorful drawings. The woman on the right is younger, wearing glasses and a grey cardigan over a dark top with a necklace. She is also looking at the paper. The background is slightly blurred, showing what appears to be a community center or a classroom setting. The entire image is overlaid with a blue geometric pattern of overlapping squares and triangles.

## THE *FORWARD VIEW* INTO ACTION:

Registering interest to join the  
healthy new towns programme

## Introduction

1. The [NHS Five Year Forward View](#) published in October 2014, set out three gaps the health service must close in order to be sustainable into the future. Firstly, we must close the health gap, by radically upgrading our prevention efforts. Secondly, through the [New Models of Care programme](#), the NHS and its partners are already taking the first steps towards closing the care gap by redesigning how we deliver health and social care services. Thirdly, by 2020/21 we must close a financial gap by delivering efficiencies of 2-3% across the NHS's entire funding base.
2. Building strong communities and healthy places to live can contribute to each of these three gaps. Good urban and housing design promotes healthy lifestyles and can help prevent illness. It can also keep older people independent and healthy, supported by the latest technology to live in their own homes rather than in care homes. New developments also give us the opportunity to radically reshape health and care services, testing what can be achieved with fewer legacy constraints. By keeping people well and providing services in better, more productive ways, healthy places to live can also contribute to the long term financial sustainability of the NHS.

***“New town developments and the refurbishment of some urban areas offer the opportunity to design modern services from scratch, with fewer legacy constraints - integrating not only health and social care, but also other public services such as welfare, education and affordable housing.” NHS Five Year Forward View (October 2014)***

## Objectives of the programme

3. Many areas already promote health and wellbeing through “place-shaping”, including through better housing and urban design, and access to well-designed public spaces and facilities. The ambition of this programme is to go beyond existing good practice, developing new and creative approaches that offer the potential to make a substantial contribution to closing the three gaps. It is also to drive closer collaboration between local authorities, planners, developers and the NHS. In our early discussions, we have heard that this collaboration is often lacking or comes too late in the process.
4. More specifically, the programme has three core objectives:
  - a. To develop new and more effective ways of shaping new towns, neighbourhoods and strong communities that promote health and wellbeing, prevent illness and keep people independent;
  - b. To show what is possible when we radically rethink how health and care services could be delivered, freed from the legacy constraints (i.e. existing services) that operate in other areas. This will support the New Models of Care programme by adding to the learning about how health and care services could be integrated to provide better outcomes at the same or lower cost;
  - c. To accomplish the first two objectives in a way that can be replicated elsewhere, making learning available to other national programmes as well as other local areas.

5. Of course the NHS can't accomplish these objectives alone. So we are inviting areas with future population growth and housing needs to work with us to develop these radical new approaches to shaping the built environment. This may include but won't be limited to:
- Building healthier homes and environments that support independence at all stages of life. We would like to explore new ways of integrating housing, care and communities to keep people independent and in their own homes. For those who do need support, more innovative residential care facilities may be combined with flexible housing options and step-up or respite care.
  - Tackling unhealthy (and "obesogenic") environments by creating walkable neighbourhoods, delivering radically improved infrastructure for safe active travel and more accessible public transport, and by providing easy access to healthy and affordable food in the local area.
  - Implementing a new 'operating system' for health and care that achieves "triple integration" between primary and secondary care, mental and physical health, and health and social care. This means developing a flexible health and care infrastructure that is linked to specialist care when needed, but provides many more services in the home, in primary care and alongside other public services. This infrastructure would also provide a strong platform for people to manage their own health and care, together with their peers and the voluntary sector, by making the most of mobile and digital channels.
  - Creating connected neighbourhoods, strong communities and inclusive public spaces that enable people of all ages and abilities from all backgrounds to mix. Examples include 'dementia-friendly' design or ensuring that public spaces include features such as public toilets or benches that can make the difference between people being able to get out and about and being confined to their homes.
  - Designing healthy workplaces, schools and leisure facilities that make the most of opportunities to encourage physical activity, healthy eating and positive mental health and wellbeing.
6. The potential of this programme stretches beyond the health and care sector. Digitally-enabled 'smart' towns and neighbourhoods, supported by integrated and effective public services, are attractive places to live and work. They are also attractive to businesses and entrepreneurs, offering to encourage innovation and economic growth.

## **Our offer to interested sites**

7. The NHS is seeking to establish up to five ambitious, long-term partnerships with local areas through which to develop healthier neighbourhoods and towns.
8. We invite expressions of interest from sites across England that are considering developments at different scales. Larger sites (for example, around 10,000 homes) are able to think radically about future health 'operating systems' and fundamental aspects of healthy place-making, such as transport infrastructure, housing or access to open space. Smaller sites, down to neighbourhoods of 250 homes, might focus on meeting the

needs of particular groups or experiment with particular design features; for example, the use of 'behavioural nudges' to encourage healthy behaviours.

9. We are particularly interested in hearing from partnerships that include NHS organisations considering how to make better use of underutilised estate. Some NHS organisations have large asset holdings that could be suitable for neighbourhood level developments including supported housing. Rather than disposing of these assets, it may make more sense to partner with local authorities and developers to create a longer term revenue stream that also contributes new housing.
10. We will develop a national offer of support with the aim of helping to reduce barriers to progress and accelerate healthy developments. Although we want to develop this offer alongside our partner sites, we envisage a package that could include the following:
  - Convening expertise such as national policymakers, global leaders in healthy built environments, cutting-edge designers, behavioural economists and leading academics, technologists and other innovators.
  - Removing barriers at the national level, by coordinating between government departments and escalating problems to the right decision-makers.
  - Specialist input into design of local health and care services, drawing on the New Models of Care programme, national clinical leaders and other global experts.
  - Working with local experts in public health to ensure that we maximise opportunities for health promotion and disease prevention.
  - Helping to bring enterprise and innovators to the table with tangible offers of assistance and investment.
  - National sponsorship including assistance with problem-solving and opportunities for national and international showcasing.
  - Supporting the design of technology-enabled 'smart' developments that support digital and mobile health.
  - Supporting planning by providing capacity and expertise at key points in the process, and supporting alignment between planners and developers. Where necessary, this may involve some funding support to local government partners.
  - Identifying viable methods for evaluating impact on health, wellbeing and other outcomes.

## **What are we looking for in our partners?**

11. We are seeking to partner with local partners that are ambitious as us about developing radical new approaches to developing new healthy neighbourhoods and towns. We are particularly looking for areas that:
  - Have ambitious ideas about how to collaborate with the NHS to promote healthy environments – and would benefit from closer engagement both nationally and locally from NHS organisations.

- Are in areas identified for future population growth or housing need (e.g. in regional or local plans).
- Are in the pre-application, pre-masterplanning or masterplanning phase.
- Are planning schemes of at least 250 homes (with no upper limit on the size of a development).
- Have the active backing of the relevant local authorities even if subsequent planning decisions are outstanding.
- Are keen to engage the expertise of globally recognised designers, clinical experts, public health specialists, technologists and from other innovators.
- Are interested in working with other sites with similar ambitions to solve common problems.

12. Additionally, we want to engage with a diverse set of schemes, including:

- Different types of communities or contexts (e.g. rural and urban areas);
- Different types of developments (e.g. urban extensions, regeneration projects);
- Developments of different scales and at stages of development that offer both shorter and longer term benefits realisation. We aim to partner with at least one site of 10,000 homes or more, but will consider neighbourhood schemes as small as 250 homes.

## How to express interest

13. Expressions of interest (EoIs) should be sent to [england.fiveyearview@nhs.net](mailto:england.fiveyearview@nhs.net) by 30th September at 1700 BST. The EoI form is two pages long in order to minimise the burden.

14. Interested sites are asked briefly to outline their development plans, with reference to paragraph 11 and 12. They are also asked to describe the size, type, location and stage of their development, with information about build-out time and scheme trajectory.

15. EoIs should identify a lead partner for the proposal, as well as other key stakeholders who could form a broader coalition or partnership, including the Local Planning Authority. Where lead partners are not local authorities or other statutory planning bodies (e.g. Development Corporations), they may be housing associations and registered social landlords, NHS Trusts and Foundation Trusts with land they wish to develop, or private developers and land owners.

16. Following submission of the EoIs we would like to have face-to-face discussions with interested sites to better understand their plans. We aim to announce our partners in the Autumn.

## Forward View into Action

### Registration of interest for healthy new towns programme

**Q1. Who is making the application?**

Who is the lead partner and who are the other organisations involved in the partnership? Interested areas may want to list wider partnerships in place. Please include the name and contact details of a single CEO best able to field queries about the application.

**Q2. Please provide a brief description of the site. (500 words max.)**

Please outline the name, location, total planned size (in housing units) as well as naming the local planning authority for the site. Please also outline the phase of the planning process, expected build-out rate and completion date for this site.

**Q3. How would your scheme promote health and wellbeing through the built environment? How could the NHS support you to deliver your ambition?**

**Q4. What opportunities are there to redesign how health and social care is delivered in your development? How could the NHS support you in delivering this?**

