

Report to	South Downs National Park Authority
Date	25 March 2021
By	Performance and Projects Manager
Title of Report Decision	South Downs National Park Authority Health and Well-Being Strategy

Recommendation: The Authority is recommended to:

- 1. Approve the Health and Well-Being Strategy as set out at Appendix I**
- 2. Delegate authority to the Director of Countryside Policy and Management , in consultation with the Chair of the Authority, to make any amendments to the Health and Well-Being Strateg required to address any issues raised by the Authority.**

1. Introduction

- 1.1 The Partnership Management Plan (PMP) for 2020-25, includes a new outcome for Health and Well-being. The PMP was approved by the South Downs National Park Authority (SDNPA) on 01 October 2019 (agenda Item 12 Report NPA19/20-14). The SDNPA H&WBS defines how we will deliver PMP Outcome 7 “*The South Downs National Park is a well-used and well recognised asset for sustaining mental and physical health and well-being*” and the priority for the next 5 years which is; “*To develop initiatives which enable local communities and individuals to improve health and well-being*”. The SDNPA H&WBS it at **Appendix I**.
- 1.2 The Policy and Resources Committee (P&R) considered the SDNPA H&WBS at its meeting on 25 February (PR20/21-30 page 11). It resolved to recommend approval to the National Park Authority, subject to some minor amendments to be agreed between the Chair of the Committee and the Director of Countryside and Policy Management, these are set out in paragraph 3.4 below.

2. Policy Context.

- 2.1 Health and Well-Being sits within a broader work stream to connect individuals, families, groups and communities to the South Downs National Park. It also links to one of four national work streams developed by National Parks England in response to the Defra 25 Year plan. National Parks for All sets out a vision which is... ‘*that everyone should be able to discover and engage with protected landscapes to benefit the health and wellbeing of the whole nation*’
- 2.2 The SDNPA connects people to the National Park via number of touchpoints or opportunities, linked to our work in access and recreation, learning, volunteering, health and well-being, communities and our communications and engagement work. Many individuals may well touch at more than one point, and at different times and in different ways over their lives.

3. Issues for consideration

- 3.1 The Health and Well-Being strategy provides a framework for our activity on Health and Well-being. It identifies the issues, presents evidence to support them and sets out how the SDNPA working with partners will address them.
- 3.2 We will engage positively with health bodies and local networks of providers and commissioners in and around the National Park. This will enable us to better understand what we can do by working in partnership with them to help deliver our outcome and priorities.
- 3.3 We want to encourage, support and develop a better appreciation of what use can be made of the National Park as a place for healthy outdoor activity and relaxation and as a place where physical and mental health and emotional well-being can be nurtured and supported.
- 3.4 The SDNPA H&WBS was received by the Policy and Resources Committee at its meeting on 25 February. At that meeting members requested some minor amendments, which have been taken on board. On page 10 of the strategy an amendment has been made to reflect the fact that the 10km buffer does not limit work beyond that range. On page 13 explicit reference has been made to the links to the Communications and Engagement Strategy, most notably the ladder of stewardship.

4. Options & cost implications

- 4.1 Delivering the SDNPA H&WBS will be a mixture of core funding for posts and the existing work that is done which contributes to H&WB, such as some of the outreach and youth engagement and our access and communities work. Funding for specific projects will be sought when required through the SDNPA internal mechanisms and from external funding sources including the South Downs Trust. We will seek partnership collaborations that enable us to bid for larger project funding and seek to develop sustainable funding models for increased provision where it is possible to do so.

5. Next steps

- 5.1 If the Strategy is approved by members, it will be placed on the SDNPA website, where a new section for Health and Well-Being is being developed. It will also be shared widely with relevant partners and other National Park Authorities. It also provides the context for our work in this area. The Connecting People and Communities Theme Board has oversight of this area of work and will monitor delivery of the actions approved in the corporate plan and any projects that are developed as a result of implementing the strategy.

6. Other Implications

Implication	Yes*/No
Will further decisions be required by another committee/full authority?	No
Does the proposal raise any Resource implications?	<p>The strategy itself hasn't had significant resource implications, other than staff time to develop it and a small cost of £400, to produce a summary version ready for publication on the website once the strategy is approved.</p> <p>Resources for delivery will either be through staff time, or bids into the strategic fund or via the relevant theme board budget on an annual basis.</p>
How does the proposal represent Value for Money?	<p>The production of the strategy itself does not impose any spending requirements on the Authority. By articulating clearly, the objectives we want to achieve the strategy sets the framework for projects and other activity we may wish to undertake to deliver it. Each will be considered on its own merits. The officer</p>

	time invested in developing the strategy is worth the effort as it is helpful to have a framework to focus our future work.
Are there any Social Value implications arising from the proposal?	None
Have you taken regard of the South Downs National Park Authority's equality duty as contained within the Equality Act 2010?	<ul style="list-style-type: none"> The strategy itself seeks to advance equality of opportunity between persons who share the relevant protected characteristics (age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, gender and sexual orientation) and those who do not share it; Due regard in this context involves having due regard in particular to: <ul style="list-style-type: none"> a) The themes and objectives in the strategy seek to remove or minimise disadvantages suffered by persons sharing a relevant characteristic connected to that characteristic; b) It specifically encourages the Authority and other providers to take steps to meet the needs of persons sharing a relevant protected characteristic different from the needs of persons who do not share it; c) It is a key objective of the strategy to help ensure that persons sharing a relevant protected characteristic are encouraged to gain access to the National Park for the purposes of improving their health and well-being by encouraging the provision of support and services to enable those under served in being able to access the National Park to do so.
Are there any Human Rights implications arising from the proposal?	None
Are there any Crime & Disorder implications arising from the proposal?	None
Are there any Health & Safety implications arising from the proposal?	The only implications are likely to be for any increase in the amount of direct delivery of activities such as walks and supported conservation activities, or arts based activities. There are existing risk assessments and procedures to cover each of these scenarios
Are there any Data Protection implications?	None
Are there any Sustainability implications based on the 5 principles set out in the SDNPA Sustainability Strategy?	The objectives of the strategy do support the principle of a strong healthy and just society

7. Risks Associated with the Proposed Decision

- 7.1 The SDNPA H&WBS does not give rise to any risks in that it merely sets out an approach to what we want to do. Risks are most likely to occur in relation to individual projects, each

of which would have their own risk register. The most general risk to this area of work at this time is the impact of Covid 19. This has prevented some of our partners from being able to deliver services and has had an impact on delivery of some projects and may result in some no longer being able to operate.

- 7.2 Covid 19 has increased the need from individuals, families and communities for some of the health and well-being benefits of being in natural green space.
- 7.3 Being clear about what we want to deliver and making and maintaining good links with partners is one way of helping to mitigate some of the impact from Covid 19.

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Appendices	I. South Downs National Park Authority Health and Well-being Strategy
SDNPA Consultees	Chief Executive; Director of Countryside Policy and Management; Director of Planning; Chief Finance Officer; Monitoring Officer; Legal Services.
External Consultees	None
Background Documents	Report to P&R Committee 25 February

Health and Well-being Strategy



CONTENTS

	Page
1. Introduction and background	3
2. The key issues for health and well-being in the National Park	6
3. Strategic review for Health and Well-being in the SDNP	7
4. Objectives and Delivery	9
Appendices	
i. SDNPA Partnership Management Plan Policies	14
ii. Reference strategy documents	16
iii. Glossary of terms and Acronyms	17

1. Introduction and background

- 1.1 We believe that the South Downs National Park (SDNP) is an under-utilised and under-recognised asset for improving the mental and physical health and general well-being for those who live in and around it. In addition, the National Park contains a number of thriving and distinctive town and village communities and therefore has an important role as a beacon of sustainable development.
- 1.2 The National Park provides a universal offer of inspiring landscapes, rich in culture and wildlife; places to nourish mind, body and soul; excellent visitor services; well developed and maintained access routes; great opportunities for volunteering and for learning outside the classroom, alongside targeted interventions for specific groups of people or places.
- 1.3 Our vision for the National Park is set out in the [Partnership Management Plan 2020 - 25](#). The vision is: that people will understand, value and look after the vital natural services that the National Park provides; that the relationship between people and landscape will enhance their lives and that communities in and around it will become more self-sustaining and empowered to shape their own future. The evidence is set out in the [State of the South Downs National Park Report 2012](#).
- 1.4 There are a number of national drivers for the prioritisation of health and well-being. Across Government there is recognition and an increasing commitment, to promote and support healthy communities and to support individuals to become more active. This stretches across a number of Government departments and national organisations. Most relevant for the work of the South Downs National Park are Defra, Public Health England and Sport England.
- 1.5 The Defra 25-year Environment Strategy has an aim to connect people with the environment to improve health and well-being, specifically making reference to the roll-out of social prescribing. The NHS Long Term Plan puts more emphasis on prevention, including social prescribing. The Prevention Green Paper outlines the importance of proactive, predictive, and personalised prevention. It signals a new approach for the health and care system. It will mean the government, both local and national, working with the health and care system, to put prevention at the centre of all our decision-making.
- 1.6 The Defra 8-point plan lists two priorities for National Parks in relation to health and well-being; to promote innovative schemes for National Parks to serve national health and to realise the immense potential for outdoor recreation in National Parks.
- 1.7 The Sport England Strategy: Building an Active Nation 2016-21 contains a range of cross-Government measures to reduce physical inactivity and spread the benefits of sport and physical activity to everyone. It also outlines a broadening of Sport England's role to supporting and measuring both sport and certain types of physical activity.

- I.8 Public Health England (PHE) Strategic Plan 2016 Better Outcomes by 2020-22 supports work across government on sustainable travel to promote increased levels of physical activity through walking and cycling and contributes to the implementation of the government's sports strategy.
- I.9 Prevention is a priority for PHE, their Four Year Strategic Plan includes clear priorities on health prevention and on working towards a healthier, fairer society. National Parks England and PHE have signed a joint [Accord](#) to promote the Health and Well-Being benefits of the National Parks.
- I.9.1 The NHS Long Term Plan commits to increasing funding for primary and community care by at least £4.5bn over the 10 years from 2019. This is to support a range of initiatives including increasing physical activity and supporting people with mental health conditions. One way they aim to deliver this is through increasing support for social prescribing. The Government sees the 2020s as being the “decade of proactive, predictive and personalised prevention”. This will involve more targeted support, tailored lifestyle advice, personalised care and protection against future threats.
- I.10 The South Downs is an important natural asset offering invaluable green space that can be used by individuals to improve physical and mental health, in turn supporting thriving communities through increased and improved health and well-being.
- I.11 The Health and Well-Being system is complex - currently in the South Downs National Park there are 4 Authorities with a public health remit, each with a statutory Health and Well-being Board. There are 6 Clinical Commissioning Group areas, 15 Clinical Commissioning Groups and 4 Sustainable Transformation Plans. Each have differing priorities. This current landscape is constantly changing due to political and financial constraints.

Evidence

- I.12 Biophilia¹ describes the connections that human beings subconsciously seek with the rest of life. This is based on affiliations that humans have for other life forms and nature, and which are rooted in our biology. It is argued that the lack of biophilic activities and time spent in nature, due to changes in lifestyle that mean more time spent indoors and in cars, may be strengthening the disconnect of humans from nature. The 2050 vision for the National Park is that “...*the relationship between people and the landscape will enhance their lives and inspire them to become actively involved in caring for it and using its resources more responsibly*”.
- I.13 Ground breaking research commissioned by the National Trust² published in the ‘**Places that make us**’ report suggests that “...*meaningful places generate a significant response in areas of the brain most commonly associated with positive emotions; demonstrating the strong emotional connection between people and places*”. The research is an in depth

¹ Wilson, E. O. (1984) *Biophilia: The Human Bond with Other Species*, Cambridge, Massachusetts, Harvard University Press.

² National Trust (2018) *The places that make us- Research Report*

study of neurophysiological, emotional and behavioural responses to meaningful places. It was carried out using cutting edge fMRI brain scanning technology. It found that meaningful places generate a significant emotional response in core emotion processing areas of the brain, which is consistent with the physical sensations people experience in these places; such as joy, calm and feeling energised.

- I.14 The PERFECT Project Factsheet no1³ sets out a wide range of robust evidence that green spaces have measurably positive effects on people's health. There is evidence that people who have accessed green spaces report a reduction in symptoms ranging from stress, fatigue, anxiety and depression. There is also evidence that these benefits may be most significant for marginalised groups.
- I.15 There is wide-ranging international evidence that spending time in green spaces is good for a range of mental health conditions such as attention deficit hyperactivity disorder, depression and dementia, by improving cognitive functioning and reducing anxiety.⁴ It has been shown that, adjusting for socio-economic factors⁵, people living in greener urban areas tend to be happier than people in areas with less urban greenery⁶. General health questionnaire scores have shown that people living in greener areas experience significantly lower levels of mental distress, while life satisfaction scores have indicated significantly higher levels of well-being among people living in greener areas. Even being able to see trees through a window offers benefits to both mental and physical health⁷.
- I.16 The mental health and well-being benefits of green space can also result from participation in activities occurring in such spaces, such as social interaction or physical exercise. Benefits include alleviation of stress and anxiety, and improved mood and attention span. People benefit from being more physically active, which impacts on levels of obesity, and has a wider range of other health benefits. People also benefit from social connections reducing the impact of social isolation and loneliness of being part of a green landscape
- I.17 Evidence⁸ indicates that participation in physical activity in a natural setting is associated with more improved mental health outcomes than is the case for participation in physical activity in an indoor setting.

³ PERFECT Interreg Europe Project, (2018) *Factsheet 1 – green infrastructure and health*

⁴ N Cianga and AC Popescu: 'Green spaces and urban tourism development in Craiova municipality in Romania'. *European Journal of Geography*, 2013, Vol.4, 34-45

⁵ R Mitchell and F Popham: 'Effect of exposure to natural environment on health inequalities: an observational population study'. *The Lancet*, 2008, Vol. 372 (9650), 1655-60

⁶ MP White, I Alcock, BW Wheeler and MH Depledge: 'Would you be happier living in a greener urban area? A fixed effects analysis of panel data'. *Psychological Science*, 2013, Vol. 24 (6), 920-8

⁷ RS Ulrich: 'View through a window may influence recovery from surgery'. *Science*, 1984, Vol. 224 (4647), 420-1

⁸ Spatial Planning for Health: An Evidence Resource for Planning and Designing Healthier Places. Public Health England, London, 2017, p.64

- 1.18 In the UK, illness as an outcome of physical inactivity has been calculated as costing the National Health Service alone between £0.9 billion and £1 billion per year⁹. Indirect costs have been estimated at £8.2 billion per annum¹⁰.
- 1.19 The People and Nature Network¹¹ sets out in detail the evidence relating to a range of health and well-being issues. Local health inequalities, are identified through the Health and Well-Being Board Joint Needs Assessments^{12, 13, 14}.

2. The key issues for health and well-being in the National Park

- 2.1 Access to accessible natural green space: we know there are deficits in the South Downs National Park (SDNP) despite being a largely rural area.
- 2.2 Lack of access to facilities and services in local towns and villages.
- 2.3 The demographic profile¹⁵ of those who are more likely to access the National Park means that those who currently use the National Park do not include underrepresented groups in or around the National Park.
- 2.4 Addressing poor awareness of the existence of the South Downs National Park particularly in certain demographic groups – young people, people living in urban areas and those from Black and Minority Ethnic (BAME) groups.
- 2.5 Lack of knowledge of what there is to do and see in the South Downs National Park.
- 2.6 Addressing barriers to access which are multiple and include: awareness and cultural and socio-economic issues. These can affect confidence in, or ability to access and use, the SDNP for some groups or individuals.
- 2.7 Severance and connectivity are issues, with major roads preventing many communities from easily getting access to the National Park.

⁹ P Scarborough, P Bhatnagar, KK Wickramasinghe, S Allender, C Foster and M Rayner: 'The economic burden of ill health due to diet, physical inactivity, smoking, alcohol and obesity in the UK: an update to 2006-07 NHS costs'. Journal of Public Health, 2011, Vol. 33 (4), 527-35

¹⁰ Game Plan: A Strategy for Delivering Government's Sport and Physical Activity Objectives. Department of Culture, Media and Sport /Strategy Unit, London, 2002, p.48.

¹¹ <https://www.southdowns.gov.uk/wp-content/uploads/2020/07/PANN-GI-in-the-SDNP-and-wider-SE-FINAL.pdf>

¹² West Sussex County Council <https://jsna.westsussex.gov.uk/reports/jsna-reports/>

¹³ East Sussex County Council <http://www.eastsussexjsna.org.uk/>

¹⁴ Hampshire County Council <https://www.hants.gov.uk/socialcareandhealth/publichealth/jsna>

¹⁵ <https://www.gov.uk/government/collections/monitor-of-engagement-with-the-natural-environment-survey-purpose-and-results>

- 2.8 A lack of access to transport and lack of public transport into and around the National Park.
- 2.9 Accessibility and infrastructure for people with a range of disabilities is also an issue.
- 2.10 Climate change and impacts on health are well established and include: heat islands, flooding, health issues exacerbated by heat, air pollution, water quality, and lack of access to healthy food. There is also increasing evidence of people experiencing climate change anxiety¹⁶.

3 The strategic review for Health and well-being in the SDNP

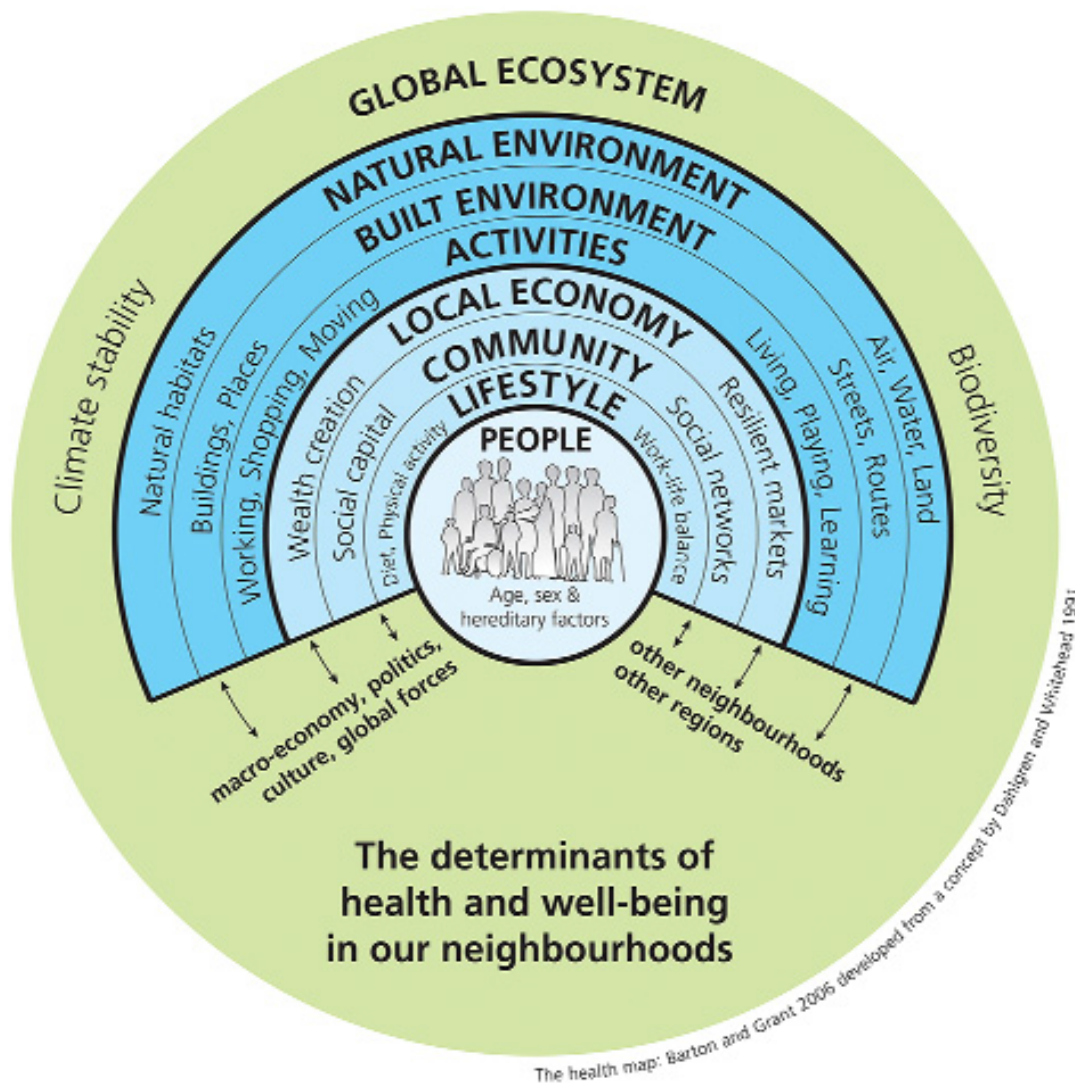
Our ambition for Health and Well-being is that:

The South Downs National Park is a well-used and recognised asset for sustaining mental and physical health and wellbeing across all sectors of the community

- 3.1 Our aim in identifying this priority is to do more to engage positively with health bodies and local networks of providers and commissioners in and around the National Park. This will enable us to better understand what we can do by working in partnership with them to help deliver our outcome and priorities.
- 3.2 One of the ways we want to do this is by encouraging, supporting and developing a better appreciation of what use can be made of the National Park as a place for healthy outdoor activity and relaxation and as a place where physical and mental health and emotional well-being can be nurtured and supported.
- 3.3 We can also work with relevant authorities and organisations to ensure that our built environment, particularly where there is new development in and around the National Park, includes new or improved accessible natural green space *on the doorstep* and provides opportunities for communities to thrive in a healthy environment.
- 3.4 Most Health and Well-Being Boards have identified similar priority areas, but with a different emphasis on each depending on their assessed need:
 - Starting well
 - Living and working well
 - Ageing well
 - Dying well
- 3.5 We have identified three themes based on the model of the social determinants of health and well-being in neighbourhoods, a health map developed by Barton and Grant in 2006. The model allows us to link the work across the SDNP and the SDNPA, linking themes and activities in our other strategic review areas and across our day-to-day

¹⁶ Susan Clayton Whitmore-Williams, et al. (2017), *Mental Health and Our Changing Climate: Impacts, Implications, and Guidance*. American Psychological Association

delivery. They cover work with communities and individuals and promoting the National Park.



From: **Factsheet 1 Green Infrastructure and Health**

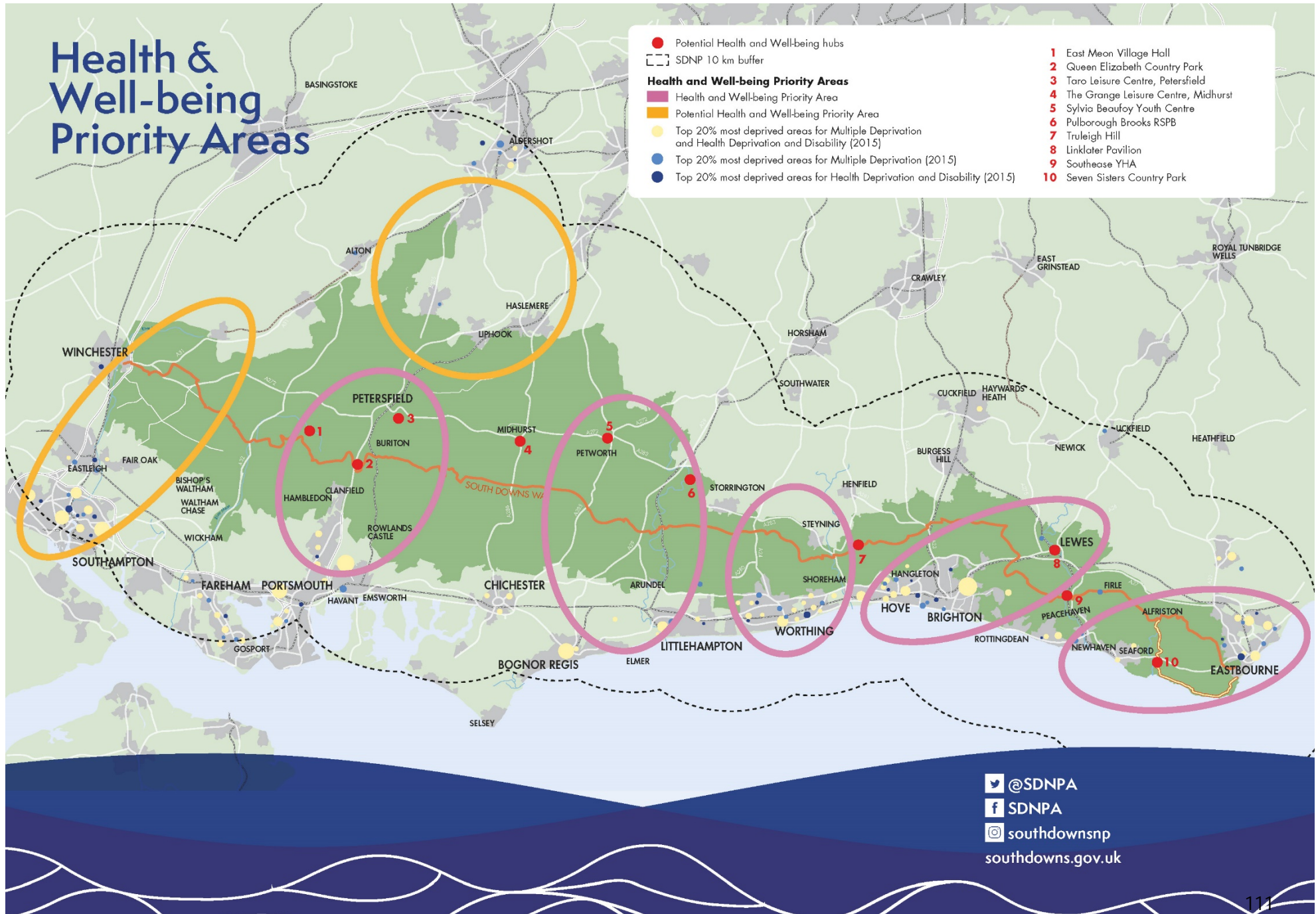
PERFECT (Planning for Environment and Resource Efficiency in European Cities and Towns) Interreg project

4. Objectives and Delivery

THEME 1 Realising well-being benefits for communities.	THEME 2 Realising well-being benefits for individuals.	THEME 3 Promoting the South Downs National Park as a place for health and well-being.
Objective 1: Identify priority areas to focus health and well-being provision within the South Downs National Park	Objective 4: Increase the numbers of individuals accessing the National Park from health pathways via social prescribing and other voluntary sector mechanisms	Objective 7: Develop partnerships and networks to share best practice and develop joint programmes
Objective 2: Support development and enhancement of doorstep greenspace for health and well-being	Objective 5: Establish tools to monitor and evaluate the benefits that access to the National Park has on individuals who use it for health and well-being	Objective 8: Understand what health and well-being providers are currently delivering within the National Park and explore opportunities to increase provision
Objective 3: Support community based planning to deliver health and well-being improvements for local communities	Objective 6: Engage with partners to raise awareness and use of the National Park as a health and well-being resource for under-represented groups	Objective 9: Promote and develop guidance and promotional materials to support use of the National Park to improve health and well-being

- 4.1 **Theme 1** relates to the benefits to communities of environmental resilience, balanced and healthy communities with access to a variety of multi-functional green space. In order to deliver Theme 1, we will use the evidence in the People and Nature Network, which provides a strong evidence base for areas with higher levels of poor health and health inequality having the poorest provision of access to natural greenspace. County Council Health and Well-being Board Joint Needs Assessments set out the evidence for particular groups and interventions in their areas. Both will be used to identify areas for increased investment in and around the National Park.
- 4.2 The People and Nature Network, the South Downs National Park Local Plan, and support for Neighbourhood and Community Planning will be critical in delivering health and well-being benefits for communities. We will develop place-based approaches to increasing awareness and use of the National Park and increasing provision of accessible natural green space.
- 4.3 In addition to the broader place-based approach, we aim to identify a number of locations across the National Park where, working with partners and local communities, we might develop facilities to deliver activities which support and improve the health and well-being of targeted individuals and communities. The following criteria will identify the most appropriate location for these:
 - Proximity of places in the National Park to areas of multiple deprivation and health deprivation
 - Proximity to accessible natural green space
 - Access to rights of way and other access routes
 - Availability of public or community transport
 - Availability of facilities e.g. toilets and refreshments
 - Local infrastructure and community capacity to engage
 - Potential to add value to existing provision from other organisations in the area

The map below sets out those priority areas and links to potential places in the National Park. While we show a 10km buffer around the National Park, we do carry out work beyond that buffer zone and have regional and sub-national reach, with some of our outreach and cultural heritage engagement work reaching as far afield as London. And we also aim to work with communities in the larger towns and cities outside our boundaries.



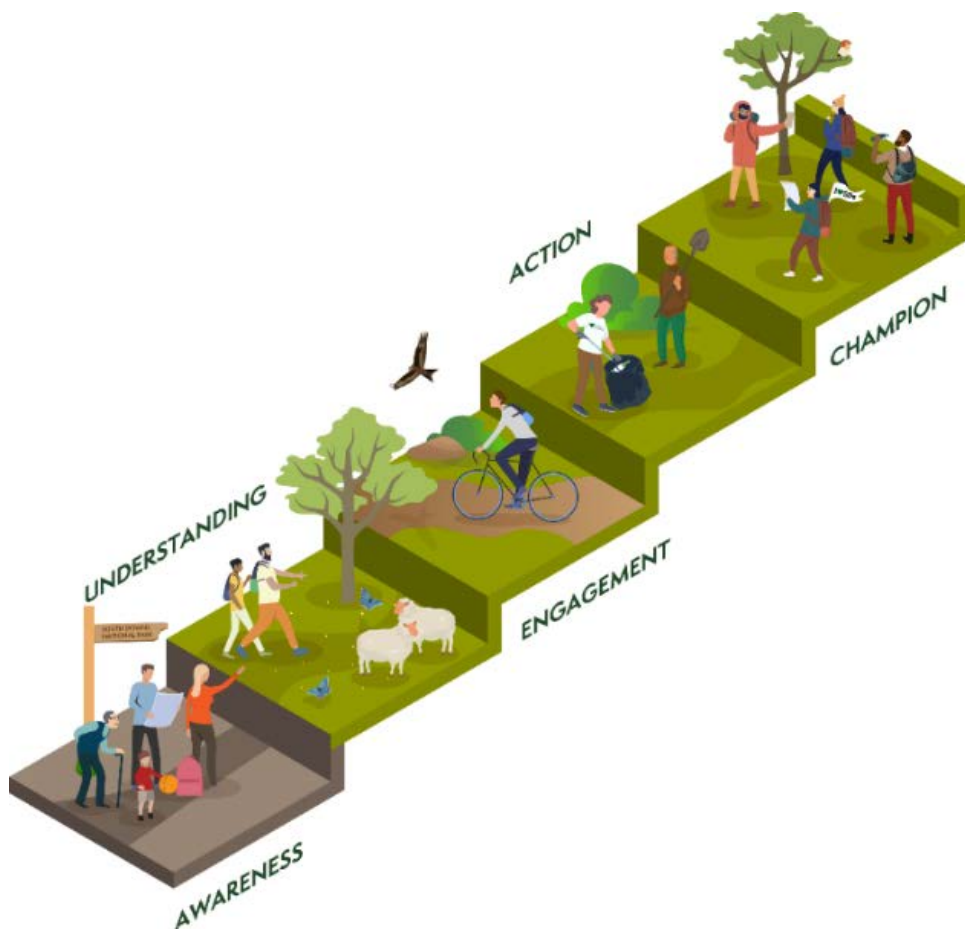
- 4.4 **Theme 2** relates to the physical and mental well-being benefits to individuals from specific areas and belonging to specific groups. To deliver Theme 2 we will focus on the priorities from the H&WB Boards, which all focus on; mental health and resilience; healthy lifestyles for young people; supporting individuals and communities to live healthier lives; and reducing isolation and loneliness for older people.
- 4.5 We will develop projects and collaborations which link to the NHS 5 ways to mental health and well-being: be active, keep learning, give to others, connect and be mindful.



- 4.6 We will target our effort with those individuals that have long term health conditions, low level mental health issues and suffer from loneliness and isolation.
- 4.7 We aim to develop a variety of 'offers' for ways of improving Health and Well-Being across the National Park which may include but will not be limited to delivering or supporting:
- a. With partners develop a range of activities that **provide opportunities for physical activity** for individuals
 - b. With partners develop a range of activities to engage individuals to **connect with the landscape through Arts and Heritage**
 - c. With partners develop a range of activities and volunteering opportunities to **connect individuals to nature**
- 4.8 **Theme 3** relates to making information available to a range of professionals and the public to better understand what the National Park offers and how to access it. To deliver Theme 3 we will promote the National Park as a place for improving health and well-being. Acknowledging that some individuals might not feel comfortable and knowledgeable about how and where to access the National Park so barriers will need to be broken down. Success will be achieved by:
- a. Working in **close partnership and developing collaborations** with a number of institutions, local authorities, the NHS, local GP practices, schools, businesses, charities and other organisations
 - b. Carrying out **research and evaluative work** that helps us demonstrate the effectiveness of health and well-being activity provided across the SDNP

- c. Understanding how best to engage with changing and new social prescribing structures to target our bespoke information effectively and our offer is visible and taken up

4.9 In common with some other strategic areas of work our strategy for health and well-being is supported across a wide range of our activities. See our website for further details about those other work streams or strategies. **This work links very closely to our Communications and Engagement Strategy, most notably around the ladder of stewardship, which seeks to take people on a journey from awareness to deeper forms of engagement. Connection to nature for Health and Well-Being is one mechanism that can be a starting point for that journey for some people. The diagram below forms part of our Communications and Engagement Strategy and shows this.**



Appendix i - SDNPA - Partnership Management Plan

National Park Purposes

- 1:** To conserve and enhance the natural beauty, wildlife and cultural heritage of the area
- 2:** To promote opportunities for the understanding and enjoyment of the special qualities of the National Park by the public

Duty: To seek to foster the social and economic well-being of the local communities within the National Park in pursuit of our purposes

List the outcomes and policies from the PMP that are relevant here.

PMP outcomes:

Outcome 5 Outstanding experiences for communities and visitors are supported by high quality access and sustainable transport networks

Outcome 6 Widespread understanding of the special qualities of the National Park and the benefits it provides

Outcome 7 The South Downs National Park is a well-used and recognised asset for sustaining mental and physical health and well-being

Outcome 8 More responsibility and action is taken by visitors, communities and businesses to conserve and enhance the special qualities and use resources more wisely

Outcome 9 Communities in the National Park are more sustainable with an appropriate provision of housing to address local needs and improved access to essential services and facilities

PMP policies:

Policy 29: Enhance health and well-being of residents and visitors by encouraging, supporting and developing the use of the National Park as a place for healthy outdoor activity and relaxation.

Policy 30: Develop 'access for all' opportunities, particularly supporting those groups currently underrepresented in the national Park visitor profile.

Policy 32: Encourage and support creative and cultural activities which connect with and increase appreciation of the National Park's special qualities.

Policy 33: Build and maintain volunteering capacity, and diversify volunteer roles and range of opportunities to deliver National Park Purposes.

Policy 37: Encourage cycling for both commuting and leisure purposes through the development and promotion of a seamless and safer network and by protecting the potential opportunities for future off-road cycling infrastructure.

Policy: 40: Manage the highway network and its infrastructure to integrate it more effectively into the landscape and reduce the impact of traffic on communities and visitors

Policy 45: Develop high quality learning experiences, particularly in the outdoors, and resource materials that link to the special qualities of the National Park

Policy 48: Support the towns and villages in and around the National Park to enhance their vital role as social and economic hubs

Policy 50: Housing and other development in the National Park should be closely matched to the social and economic needs of local people and should be of high design and energy efficiency standards, to support balanced communities so people can live and work in the area

Appendix ii - Reference Strategy Documents

National Strategies	Local Plans and Strategies
<p>Universal Personalised Care – Implementing the Comprehensive Model Jan 2019</p> <p>NHS Long Term Plan 2019</p> <p>Sport England 2016-21 – Towards an Active Nation</p> <p>Defra 25 year Environment Strategy 2018</p> <p>Landscapes review: National Parks and AONBs 2019</p> <p>Public Health England (PHE) Strategic Plan 2020-25</p> <p>Prevention Green Paper - Cabinet Office and Department of Health and Social Care July 2019</p> <p>National Parks England – Public Health England Accord 2017</p>	<p>Hampshire County Council - Health and Well-Being Strategy</p> <p>East Sussex County Council - - Health and Well-Being Strategy</p> <p>West Sussex County Council – Health and Well-Being Strategy</p>
SDNPA Plans and Strategies	
<p>The Corporate Plan 2020-25</p> <p>Partnership Management Plan 2020-25</p> <p>Climate Change Adaptation Plan 2017</p> <p>People and Nature Network 2020</p> <p>Local Plan 2019 - 2030 policies</p> <p>State of the South Downs National Park Report 2012 (SoNPR)</p> <p>SDNPA Cycling and Walking Strategy</p> <p>SDNPA Volunteer Strategy</p> <p>SDNPA Outreach Strategy</p> <p>SDNPA Cultural Heritage Strategy</p>	

Appendix iii - Glossary of Terms and Acronyms

List any that you use as set out below

Climate change – Changes in the earth’s climate and weather, due to the impact of human activity. There is more information on the SDNP climate change strategy and adaptation plan here: <https://www.southdowns.gov.uk/national-park-authority/our-work/climate-change-adaptation-plan-strategy/>

Clinical Commissioning Groups - Clinical Commissioning Groups (CCGs) were created following the Health and Social Care Act in 2012, and replaced Primary Care Trusts on 1 April 2013. They are clinically-led statutory NHS bodies responsible for the planning and commissioning of health care services for their local area. As of 1 April 2020, following a series of mergers, there are 135 CCGs in England.

Community based planning - Neighbourhood planning gives communities direct power to develop a shared vision for their neighbourhood and shape the development and growth of their local area. They are able to choose where they want new homes, shops and offices to be built, have their say on what those new buildings should look like and what infrastructure should be provided, and grant planning permission for the new buildings they want to see go ahead. Neighbourhood planning provides a powerful set of tools for local people to plan for the types of development to meet their community’s needs and where the ambition of the neighbourhood is aligned with the strategic needs and priorities of the wider local area

Defra – Department for Environment Food and Rural Affairs

Health and Well-Being Boards – Health and well-being 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 could work together to improve the health and well-being of their local population. They became fully operational on 1 April 2013 in all 152 local authorities with adult social care and public health responsibilities.

H&WB board Joint Needs Assessments - The Joint Strategic Needs Assessment (JSNA) is a process by which local authorities and Clinical Commissioning Groups assess the current and future health, care and well-being needs of the local community to inform local decision making.

Marginalised groups – sometimes also called social exclusion – refers to the relegation to the fringes of society due to a lack of access to rights, resources, and opportunities. In the UK this can be connected to a person's social class, race, skin color, religious affiliation, ethnic origin, educational status, childhood relationships, living standards, and or political opinions, and appearance. Such exclusionary forms of discrimination may also apply to people with a disability, minorities, LGBTQ+ people, drug users, institutional care leavers the elderly and the young. Anyone who appears to deviate in any way from perceived norms

of a population may thereby become subject to coarse or subtle forms of social exclusion
([Source Wikipedia](#))

NHS – National Health Service

NHS Long Term Plan – is a plan for the NHS to improve the quality of patient care and health outcomes

You can find out more about the Long term Plan here:

<https://www.longtermplan.nhs.uk/online-version/overview-and-summary/>

People and Nature Network - the People and Nature Network (PANN) sets out how a wide range of partners can work together to plan positively for nature and natural services within and surrounding the protected landscapes of the south east.

You can find out more about the PANN here: <https://www.southdowns.gov.uk/wp-content/uploads/2020/07/PANN-GI-in-the-SDNP-and-wider-SE-FINAL.pdf>

PHE – Public Health England

Social prescribing - Social prescribing, also sometimes known as community referral, is a means of enabling health professionals to refer people to a range of local, non-clinical services. The referrals generally, but not exclusively, come from professionals working in primary care settings, for example, GPs or practice nurses.

Sport England - Sport England (SE) helps people and communities across the country get a sporting habit for life. It also protects existing sports provision and must be consulted on any planning applications that affect playing fields in England.

Sustainable Transformation Plans - Sustainability and transformation plans (STPs) were announced in NHS planning guidance published in December 2015. NHS organisations and local authorities in different parts of England have come together to develop 'place-based plans' for the future of health and care services in their area.

You can find out more about STPs here <https://www.kingsfund.org.uk/topics/integrated-care/sustainability-transformation-plans-explained>

Underrepresented groups - describes a subset of a population that holds a smaller percentage within a significant subgroup than the subset holds in the general population. Specific characteristics of an underrepresented group vary depending on the subgroup being considered. In and around the National Park underrepresented groups usually include: those who experience socio-economic deprivation, young people, people from BAME (black and minority ethnic) communities, people with disabilities