



City of Long Beach  
Department of Health  
and Human Services

Los Angeles County  
Department of Public Health

City of Pasadena  
Public Health Department

County of Riverside  
Department of Public Health

Santa Barbara County  
Public Health Department

County of San Bernardino  
Department of Public Health

County of San Diego  
Health and Human Services  
Agency

Ventura County  
Public Health

December 18, 2015

Office of Planning Research,

Thank you for the opportunity to provide comments on the Draft General Plan Guidelines.

Our organization, the Public Health Alliance of Southern California (Alliance), is a collaboration of local health departments, whose members are statutorily responsible for the public health of over 50% of the state's population. The Alliance advances multi-sector policy, systems and environmental change to enhance and support chronic disease prevention.

We commend the Office of Planning and Research (OPR) for the excellent work on the development of the Draft General Plan Guidelines. In particular, we strongly support and applaud the inclusion of guidance on public health, climate change and infill development. These updates bring the guidelines in step with the growing momentum toward integrative planning that best supports health across our State. We also commend OPR on the strong public outreach process and are confident the resulting draft guidelines will further benefit from this collaborative effort. Drawing upon the expertise of our members, many of whom work closely with local jurisdictions on efforts to create healthy community plans, we provide the following additional suggestions for the guidelines.

### **Chapter 3: Public Engagement and Outreach**

The discussion of socioeconomic status in the cultural considerations that begins on page 33 offer useful guidance on how to conduct this outreach, but given the structural inequities that have often been perpetuated through planning processes, we think more directive guidelines concerning the engagement of disadvantaged communities is in order.

We further recommend the California Health Disadvantage Index as a tool for identifying communities that are disadvantaged from a Social Determinants of Health perspective. The Public Health Alliance has developed a Health Disadvantage Index (HDI tool) <http://phasocal.org/data/hdi/> which ranks census tracts in California relative to their level of health disadvantage/ vulnerability.

### **Chapter 4: Required Elements**

#### **Land Use Element**

##### School Siting and Educational Facilities (p.60)

We recommend stronger language directing both Health Department and Planning Department involvement within school siting decisions. This would ensure that

School Districts do not plan in a silo and outside basic planning principles that exist to prevent locating schools near point-source or mobile-source polluting land uses or contaminated sites. We recommend including the analysis of nearby contamination and water quality in the “Sample Data for Consideration” in this section.

#### Considerations in Land Uses Near High-Volume Roadways (p.75)

We value having the discussion around considerations in land uses near high-volume roadways as part of the guidelines. However, we think it is critical for the State to take the lead in recommending how to operationalize this guidance. Conflicting perspectives at the local level make it challenging to come to consensus on what to do; guidance and best practices research from the State would help add to the discussion. Consider operationalizing the recommendations already listed by adding guidance within the “model policies and examples” section (Appendix A)

- Consider opportunities to discuss the role of other agencies and collaboration. For example, consulting with Caltrans for freeway adjacent sound walls/trees to mitigate impacts
- Consider opportunities to discuss enforcement. For example, model program could be through a city’s Building and Safety Department – ensuring compliance on HVAC (like regular elevator inspections)

#### Improved Guidance on Planning in Rural Communities

Planning in rural communities presents a significantly different set of challenges than planning in more urbanized areas. We recommend the inclusion of more detailed guidance to help agencies effectively plan for rural communities that typically lack access to services that fulfill basic human needs as a way to support health and improve quality of life. Language in this section may need to highlight concepts related to inventive and innovative land use approaches based on multisector collaboration, shared economies and widespread community involvement in the decision-making process.

#### **Circulation Element**

##### Active Transportation: Bicycle and Pedestrian Networks (p.105)

Under the “recommended data” section, include the same data that is listed for other transportation modes: population demographics, travel patterns, housing and opportunity centers, employment centers, transit routes and headways, cost of transportation by income and location, etc.

#### **Housing Element**

##### Health and Climate Change (p. 137)

The displacement of disadvantaged residents from transit-accessible, location-dense urban cores is a major challenge. We appreciate the way housing element guidance recognizes the multiple important ramifications of housing decisions on climate change, health, and transportation. We encourage OPR and the State of California to develop financing mechanisms to help address this challenge.

## **Conservation/ Safety Element**

### Air Pollution

A significant implementation gap exists between agencies that are statutorily responsible for air quality compliance, and cities and counties whose land use decisions dictate much of the pollution. We recommend bringing land use decision making into closer synch with air conformity standards by adding Air Quality as a required General Plan element as is already the case in the San Joaquin Valley Air Pollution Control District.

### Water (p.153, 200, 351)

Given the State's imminent and significant challenges related to access to clean and plentiful water sources to fulfill basic human needs, we appreciate the guidance provided in the document regarding the integration of the General Plan process with other types of water planning. We recommend strengthening the guidance to help agencies charged with protecting health and safety become collaborators in developing water plans that allow healthy growth, while balancing supplies for existing demand.

One area of ongoing challenge is accessing a single "go to" source of reliable, easy to understand data on drinking water quality. Public Health Departments want to encourage the consumption of tap water, and the provision of this service to communities is a core service. However obtaining information on the safety of drinking water systems is not straightforward, and must be collected individually by water agency. We recommend collecting and regularly updating data on drinking water quality, and making it available through OPR's General Plan Guidelines mapping tool.

## **Chapter 5: Healthy Communities**

### Health (p. 216)

The Alliance commends the guidance provided by this document related to the inclusion of health in planning, both within Chapter 5, and in the multiple instances where health considerations have been integrated into other aspects of the Guidelines. Local Health Departments can be a valuable resource to those wishing to create plans that support health. We would recommend mention of the following additional resources on this topic:

- The California Planning Roundtable (CPR) has spent significant time collaborating with experts in planning and public health to develop practical tools for planners:
  - a. CPR has developed a definition of Healthy Communities (based on the Health in All Policies model) to guide planners and stakeholders through an introduction to what to consider when developing Health Element policies and/or programs.
    - i. <http://www.cprroundtable.org/publications/healthy-communities-definition>
  - b. CPR has recently published a white paper on the Social Determinants of Health for Planners which provides a clear primer as to why public health professionals and advocates are working towards greater collaboration with planners <http://www.cprroundtable.org/publications/social-determinants-health-planners/>
- The Public Health Alliance California Health Disadvantage Index (HDI tool) <http://phasocal.org/data/hdi/> ranks census tracts in California relative to their level

of health disadvantage/ vulnerability. We recommend the inclusion of this tool in the list provided on page 232.

Finally, it appears that some portion of the description of the Healthy Communities Planner in the callout box on page 220 may have been cut off.

## **Chapter 6: Social Equity, Environmental Justice and Community Resilience**

We commend the frank discussion of the links between social inequities, health disparities and planning decisions in Chapter 6, and hope it will help planners address the legacy of structural inequality in our jurisdictions. Identifying and changing policies that perpetuate inequity can be a lengthy process. We encourage OPR and the State to develop staff and educational supports for jurisdictions undertaking this work.

### **Appendix A: Model Policies**

#### Public Transit (p.342)

- Add the following
  - Implement a citywide bike sharing system to support the Mobility Element objectives
  - Beautify, and implement amenities at transit stops such as shelters, seating, refuse cans, “next trip” travel times, trees, art, and plants
  - Align transit trip pick-up times with school start and end times to encourage trips via transit and to promote personal safety

#### Biking and Walking (p.342)

*Objective: Increase the viability of walking as a method of transportation*

- Add the following
  - Develop and implement an Americans with Disabilities Act Transition Plan
  - Conduct a pedestrian network inventory, including assessing all sidewalks for obstacles in the path of travel and ADA compliance
  - Assess walk signal times near sensitive uses such as schools and senior centers, and re-time signals to increase walk time for people walking slowly
  - In areas with many destinations and/or high-pedestrian volume areas, implement protected right and left turns
  - Include greening to build climate resilience and enhance user experience

#### Healthy Communities (p. 365)

We strongly support the model Healthy Communities presented in this section, and feel that the breadth of the policies presented reflects the complex nature of healthy community promotion.

*Objective: Assist with conversion of liquor stores...*

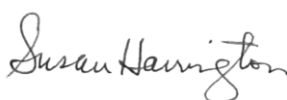
- Add the following:
  - Consider adding tobacco to the objective: “Liquor” and tobacco “~~stores~~” outlets

Most importantly, we appreciate the acknowledgement that the process of updating a General Plan is a costly effort, which many of our cities are currently not able to undertake. We feel that these guidelines are strong in their nuance and complexity, but acknowledge that this complexity may inadvertently challenge under-resourced jurisdictions to realize the

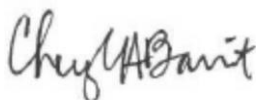
promise of this document. We encourage the state to identify additional revenue streams to support this work for all cities.

The draft General Plan guidelines provide a strong and welcome advance in support of health. We look forward to continuing to work with the state to optimize the health of all residents across our region.

Sincerely,



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