

**FAIRFAX COUNTY PLANNING COMMISSION
POLICY PLAN COMMITTEE
THURSDAY, FEBRUARY 15, 2024**

PRESENT: Phillip A. Niedzielski-Eichner, At-Large, Chairman
Timothy J. Sargeant, Commissioner At-Large, Vice Chairman
Mary D. Cortina, Braddock District
John A. Carter, Hunter Mill District
Walter C. Clarke, Mount Vernon District
Jeremy Hancock, Providence District
Evelyn S. Spain, Sully District
Candice Bennett, Commissioner At-Large

ABSENT: John C. Ulfelder, Dranesville District
Daniel G. Lagana, Franconia District
Peter Murphy, Springfield District

OTHERS: Kelly Atkinson, Assistant Director, Planning Division (PD)
Department of Planning and Development (DPD)
Corinne Bebek, PD, DPD
William Nance, PD, DPD
Anna Ricklin, Health Department
Samantha Lawrence, Senior Deputy Clerk, Planning Commission,
Department of Clerk Services

ATTACHMENTS

- A. POLICY PLAN UPDATE & COMMUNITY HEALTH DISCUSSION
PRESENTATION
- B. COMMUNITY HEALTH IN THE POLICY PLAN PRESENTATION

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Chairman Niedzielski-Eichner called the Policy Plan Committee meeting to order at 7:30 p.m. in Conference Room 11 of the Fairfax County Government Center, 12000 Government Center Parkway, Fairfax, Virginia 22035.

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Chairman Niedzielski-Eichner asked staff to introduce themselves.

Corinne Bebek, Planning Division, Department of Planning and Development, introduced herself and stated that she came before the Committee to provide a presentation on updates to the Policy Plan. She also introduced the staff members who would be presenting on Community Health in the Policy Plan.

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Chairman Niedzielski-Eichner recognized a member of the public, who attended the Committee meeting.

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Chairman Niedzielski-Eichner asked that the Committee members introduce themselves. The Committee members in attendance introduced themselves to the audience.

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MINUTES APPROVAL

Commissioner Sargeant MOVED APPROVAL OF THE MINUTES FOR THE NOVEMBER 16, 2023 POLICY PLAN COMMITTEE MEETING.

Commissioner Cortina seconded the motion, which was carried by a vote of 7-0. Commissioners Ulfelder, Lagana, and Murphy were absent from the meeting. Commissioner Clarke was not present of the vote.

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Chairman Niedzielski-Eichner discussed the Committee members liaison roles with staff. He gave a brief description of the role of a liaison, the nature of that interaction, and the assigned topic area. Chairman Niedzielski-Eichner added that, as the Chair of the Policy Plan Committee, he would facilitate conversations with Ms. Bebek as it applied to processes. He added that considerations and decisions would be made by Committee members and staff.

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Ms. Bebek gave a presentation on updates to the Policy Plan. A copy of the staff's presentation is in the date file.

There was a discussion between Ms. Bebek; Kelly Atkinson, Assistant Director, Planning Division, Department of Planning and Development; and multiple Committee members regarding the following:

- Staff clarified that Clarion Associates, LLC, was retained by the County to conduct research on land use trends related to office, industrial, and retail uses;
- Staff disclosed that Clarion's research would be completed by April of 2024;
- Staff expressed their willingness to discuss other elements of interest brought forth by the Committee for research, as applicable to the Policy Plan;
- Concerns regarding the layout of the Policy Plan process, the method used for generating topics, community outreach efforts, and mitigation of issues identified by the community that were omitted from the plan's process;

- Staff clarified the Policy Plan process, the method used for identifying topics of concern were researched, and mitigation measures for consideration;
- Staff discussed the crosswalk overview process, research findings, and ways to educate the community on their concerns on the plan;
- The *Virginia Code*'s guidance on the Commission's authority to request data, reports, and information about localities to begin the planning process for an area;
- Staff confirmed their work with internal and external stakeholders to generate an outreach plan for community engagement;
- Staff discussed the number of phases in the plan, which included the following:
 - Topics for discussion;
 - The plan's areas of concern;
 - Follow-on motions that staff would recommend the Board of Supervisors consider as part of the process; and
 - Possible updates to area plans.
- Staff stated that the intent was to present Phase 1 of the Policy Plan to the Board of Supervisors before the 2025 August recess;
- Staff confirmed the list of names for leads and Committee liaisons assigned to each topic area of the Policy Plan elements;
- Staff discussed the roles of leads and liaisons for topic areas of the Policy Plan;
- Staff discussed the responsible parties for reviewing *Virginia Code* requirements and changes that would impact elements of the Policy Plan;
- Concerns regarding the amount of land the County would require for potential industrial use;
- The process in which Commission members would confer with the Board of Supervisors on various topics of concern that were not approved Board policies;
- A suggestion to reserve additional time for individual topics that were not covered on a meeting agenda;
- Appreciation for the method that determined how process informed the outcome and how equity flowed throughout that process;
- How the discussion on healthcare would impact the connection to transportation;

- Encouraged the Committee to find checkpoints in the process for issues across all elements;
- A recommendation that equity, and how it impacted the various elements of the Policy Plan, be a broader conversation for long term decisions;
- Staff discussed updates made to other jurisdictions' Comprehensive Plans;
- A recommendation that the National Capital Planning Commission's (NCPC) Extending the Legacy Plan and the Transportation Management Plan be included in the list of examples when making comparisons to other jurisdictions' Comprehensive Plans;
- Staff confirmed that NCPC was one of the entities on the list for outreach;
- Staff confirmed that NCPC updated their introductory chapter and incorporated equity considerations to their plan;
- Concerns that Design and Placemaking Policy was not incorporated into the Comprehensive Plan;
- A recommendation that staff utilize available in-house resources before seeking the assistance of outside experts to conduct research;
- A discussion on what a County's Design and Placemaking Policy would entail; and
- A recommendation to amend language to Phase 1 Overview: Timeline, Page 6 of staff's Policy Plan presentation:
 - Removal of language that referenced Phase 1 Topics Identified and replaced with Phase 1 Elements Identified in the Policy Plan.

Ms. Bebek thanked the Committee members for their time and confirmed that suggested revisions to the Policy Plan would be incorporated. She added the Committee would be presented with a draft copy of the Outreach Plan for consideration.

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Anna Ricklin, Health Department, introduced herself and gave a presentation on the Community Health in the Policy Plan. A copy of the staff's presentation is located in the date file.

Ms. Ricklin came to a stopping point in her presentation and took questions from the Committee.

There was a discussion between Ms. Ricklin and multiple Committee members regarding the following:

- A reference was made to one of the visuals presented that provided information on the life expectancy across the County;
- Concerns regarding inequities in some areas of the County compared to others and staff's suggestions on ways to mitigate some of those challenges;
- A recommendation that equity, as a policy, was thoroughly defined and included policy guidance that supported all areas of the County;
- A recommendation that additional funding may be required in areas that did not provide quality trails or other publicly funded facilities;
- Concerns regarding the types of healthcare systems, emergency response times, types of community centers, and the types of land use priorities developed along the Richmond Highway corridor;
- A request that staff provide additional information on the types of resources that had been allocated to the Richmond Highway corridor over the years; and
- Staff discussed the methodology for developing the community health data for physical activity trends across Fairfax County.

Ms. Ricklin continued her presentation on the Community Health in the Policy Plan.

There was a discussion between Ms. Ricklin and multiple Committee members regarding the following:

- Staff clarified language in the plan that would ensure a healthier community by offering flexibility in land use that was based on the Countywide Strategic Plan;
- Staff explained how the accessibility component would fit into the health element of the Policy Plan;
- A discussion on ways community gardens could be incorporated into the Policy Plan;
- Staff confirmed that at the County level, community gardens were permitted at the front of residences;
- Staff discussed the food systems, the different components, available resources, and how they would be incorporated into a future community health policy plan;
- Staff discussed ways to incorporate active living in areas of the County that did not have resources to promote active lifestyles;
- Staff discussed ways to ensure the County provided adequate resources in areas that were neglected;

- A reference was made to the Park Authority's Great Parks, Great Communities Park System Plan, which provided a breakdown by planning area of the County with a list of recreational resources;
- Staff discussed the land use challenges when determining the appropriate locations for recreational resources, community services, retail establishments, and mixed-use communities;
- A discussion on whether the health impact, statistical data analysis of crime and violence, and public safety reinforcement would be useful for existing communities;
- A discussion on the impact of the current remote work trend, designed elements to counteract social isolation, and retrofitting buildings for other uses could be part of the community health conversation;
- A recommendation that neighborhoods and civic spaces be designed around health; and
- Staff stated they were open to incorporating a community health element section that would be integrated across all sections of the Policy Plan.

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CLOSING

February 15, 2024

The meeting was adjourned at 9:37 p.m.
Phillip A. Niedzielski-Eichner, Chairman

An audio recording of this meeting is available in the Planning Commission Office,
12000 Government Center Parkway, Suite 552, Fairfax, Virginia 22035.

Minutes by: Samantha Lawrence

Approved: March 7, 2024

Jacob Caporaletti

Jacob Caporaletti, Clerk
Fairfax County Planning Commission

County of Fairfax
Commonwealth of Virginia

The foregoing instrument was acknowledged before me this 25 day of April 2024,

by Jacob Caporaletti

[Signature]

Signature of Notary

Notary registration number: 2114113

Commission expiration: January 31, 2028



Policy Plan Update & Community Health Discussion

February 15, 2024

Attachment A



PLANNING & DEVELOPMENT



Policy Plan Update

Agenda



- 1 Authorization
- 2 Phase I Overview
- 3 Crosswalk Discussion
- 4 End-Product Possibilities
- 5 Discussion
- 6 Community Health Presentation

Policy Plan Update

Board Authorization



Review, Update,
and Streamline
Existing Elements



Align with
Strategic Plan,
One Fairfax &
Other Policies



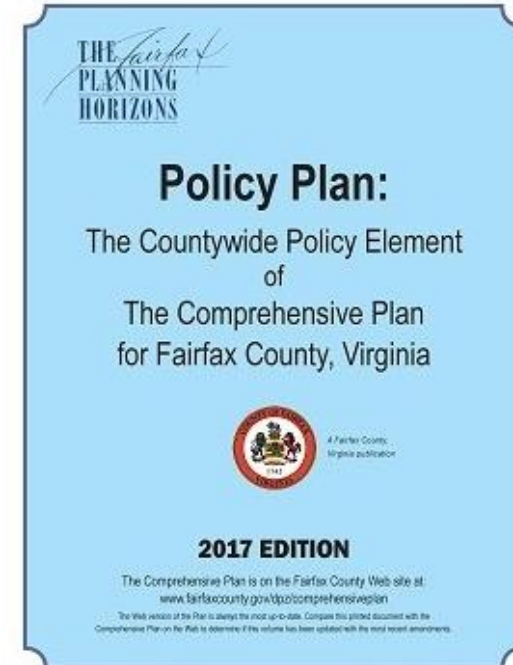
Add New
Policies

Policy Plan Update

Phase 1 Overview: Topics

- Preface
- Land Use
- Transportation
- Environment
- Parks and Recreation
- Human Services
- New: Community Health, Equity
- Ongoing: Public Facilities, Housing

PLAN
FORWARD



Policy Plan Update

Phase I Overview: 2022 - 2023 Recap



- Board Authorization
- Phase I Element Identification, Process Development
- PC Policy Plan Committee Establishment
- Staff Team Assembly
- Staff Research on Policy Plan History and Use
- Clarion Work Initiation (Office, Industrial, Retail)
- Policy Crosswalk Completion
- Outreach Process and Plan Development

Policy Plan Update

Phase I Overview: Timeline



December 2022 - 2023

BOS Authorization; PC Policy Plan Committee Established; Phase I Topics Identified; Internal Research; Policy Crosswalk

Mid-2024

Outreach Kick-off; PC Policy Plan Committee Mtgs

Late 2024

Policy Development Begins

Early-2024

Internal Research, Outreach Plan Finalization, PC Policy Plan Committee Mtgs

Through 2024

Community Engagement (iterative) and PC Policy Plan Committee Mtgs

Through 2025

Policy Development Continues; Further Outreach and Research; Schedule Public Hearings



Policy Plan Update

Crosswalk: Overview



- Crosswalk existing Policy Plan Elements with: Strategic Plan, One Fairfax, Communitywide Housing Strategic Plan, Economic Success Strategic Plan, Resilient Fairfax, CECAP, and other documents with an eye towards, “where is the Plan now and where does it want to go?”
 - For each policy/objective:
 - Recommend no change to policy/objective,
 - Update/Streamline policy/objective, or
 - Create a new policy/objective.
 - Identify:
 - Sections that are outdated, need revisions, or new text,
 - Updated/new maps that are needed,
 - Review appendices to identify criteria that may already be in the Zoning Ordinance

Policy Plan Update

Crosswalk: Findings



- Total Objectives, Policies, and Appendices in Policy Plan (excluding Public Facilities Element)
 - 103 Objectives
 - 63 Objectives need modification/new policies to address crosswalk docs
 - May need new Objectives to address new policies
 - 40 Objectives need minor editorial changes to bring into present/future
 - 474 Policies
 - Almost all need to be updated in some capacity (refined, modernized, edited, removed)
 - 25 Appendices
 - Some can be removed based on Zoning Ordinance overlap

Policy Plan Update Crosswalk: Findings

- Policy Plan Changes Needed:
 - New policies to explicitly address Equity, Health, and other goals/targets set by crosswalk documents;
 - Removal of duplicative and outdated policies;
 - Spelling, grammar, punctuation, other minor editorial changes;
 - Modernization of narratives and goals;
 - Updated maps and data;
 - Language guide development and glossary updates.



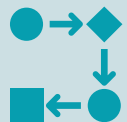
Policy Plan Update Crosswalk: Next Steps



Research and Data Compilation



Outreach Plan Finalization



Begin Streamlining Effort and Start Outreach Process

Policy Plan Update

End-Product Possibilities



Considerations

- Encode Platform
- End Users
- Purpose
- Functionality
- Ease of future updates
- Policy vs. Implementation



Process may result in a few final product options

Policy Plan Update

Examples from Other Jurisdictions

- [Charlotte Future 2040 Comprehensive Plan](#)
- [Richmond 300 Master Plan](#)
- [Raleigh 2030 Comprehensive Plan Update](#)
- [Thrive Montgomery 2050](#)
- [Prince William County 2040 Comprehensive Plan](#)
- [Loudoun County 2019 Comprehensive Plan](#)



Policy Plan Update

Upcoming Policy Plan Committee Meetings



- **March 7th Meeting**
Proposed Outreach Plan; Strategic Plan
- **April 4th Meeting**
Outreach Plan Discussion (part II)
- **May 23rd Meeting**
TBD
- **June 27th Meeting**
TBD

DISCUSSION



Community Health in the Policy Plan

February 15, 2024



PLANNING & DEVELOPMENT



Agenda



1. Why health?
2. How healthy is our community?
3. Impacts of the built environment
4. Peer community examples
5. New directions: place and health
6. Discussion



Why health?

Why is health an important value for planning?

- Health is part of our humanity - a state of being we all share
- Critical for learning, working, and caring for others
- Poor health makes it difficult to be a productive member of society - i.e., it affects the economy
- Healthy activities promote social connection and help build community

We live out our lives - our health -
in *places*



What is health?

Health is a state of complete physical, mental and social well-being - not merely the absence of disease or infirmity.

(WHO, 1948)

Public Health is what we do together as a society to ensure the conditions in which everyone can be healthy.





Health and place

Zip code > Genetic code

Health is shaped over a lifetime of living in homes, using transportation, accessing services, and making choices based on what resources are nearby.

Health status is one of the most tangible ways to measure equity among different racial and ethnic groups living the same place.





How healthy is our community?

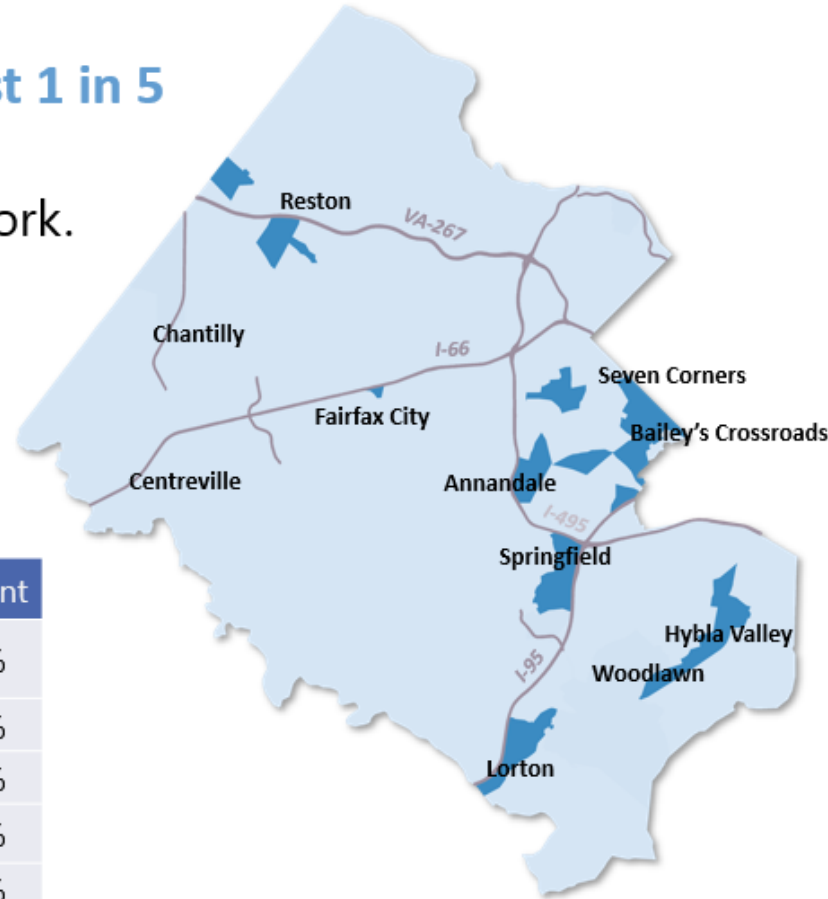
Data on Community Health

Health and Place: Physical activity

In **26** neighborhoods, **at least 1 in 5 (20%)** adults say they get no physical activity outside of work.

The 5 neighborhoods with the highest percent of adults with no physical activity after work:

Neighborhood	Percent
Culmore/Courtland Park – Bailey's Crossroads	34%
Willston Center – Seven Corners	32%
Mount Vernon Woods – Woodlawn	28%
North Buckman - Woodlawn	28%
Hybla Valley	28%



Only **1 in 50 (2%)** workers ride a bike or walk to work.

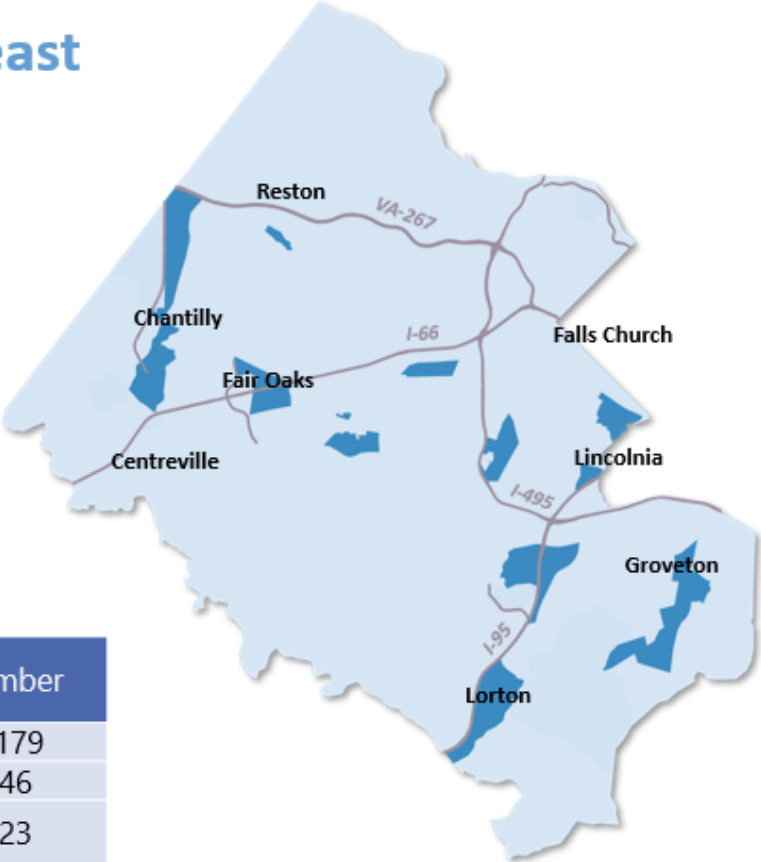
Nearly **half (45%)** of workers travel 30 minutes or more to work.



An average of **172** traffic crashes involve pedestrians each year.

Health and Place: Nutrition and healthy eating

In **26** neighborhoods, **at least 532** households are food insecure.



The 5 neighborhoods with the most food insecure households:

Neighborhood	Number
Beacon/Valley View – Groveton	1,179
Fair Oaks	946
Lincolnia Park – Lincolnia	923
Hunter Woods North – Reston	919
Northeast Lorton	873

Nearly **1 in 4 (24%)** Fairfax County adults are obese.

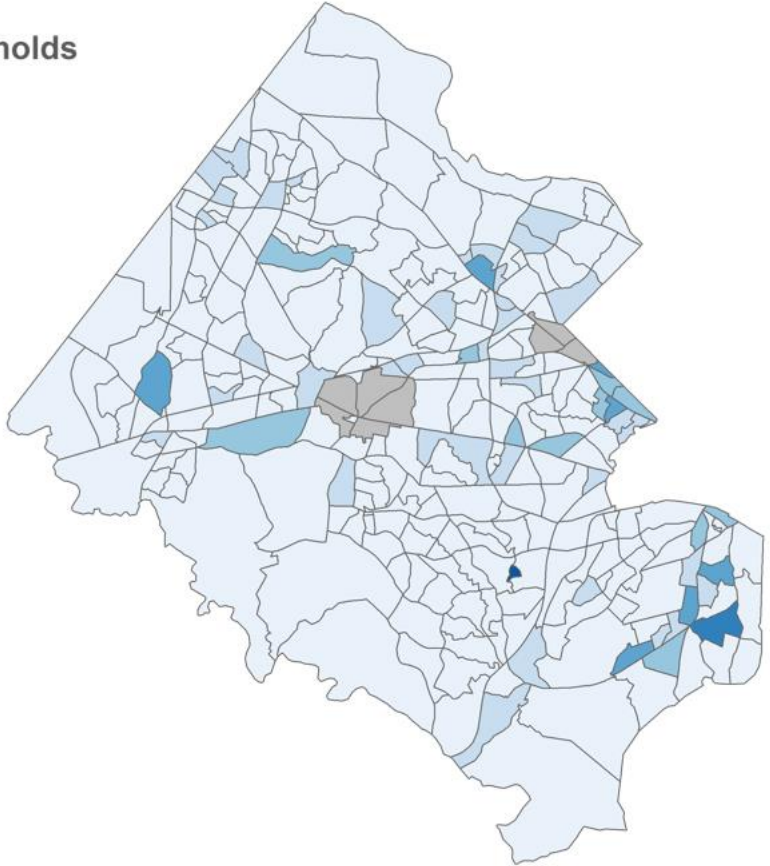
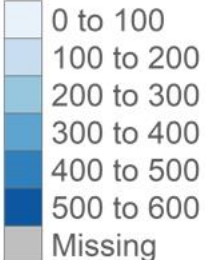


58% of Fairfax County residents are overweight or obese

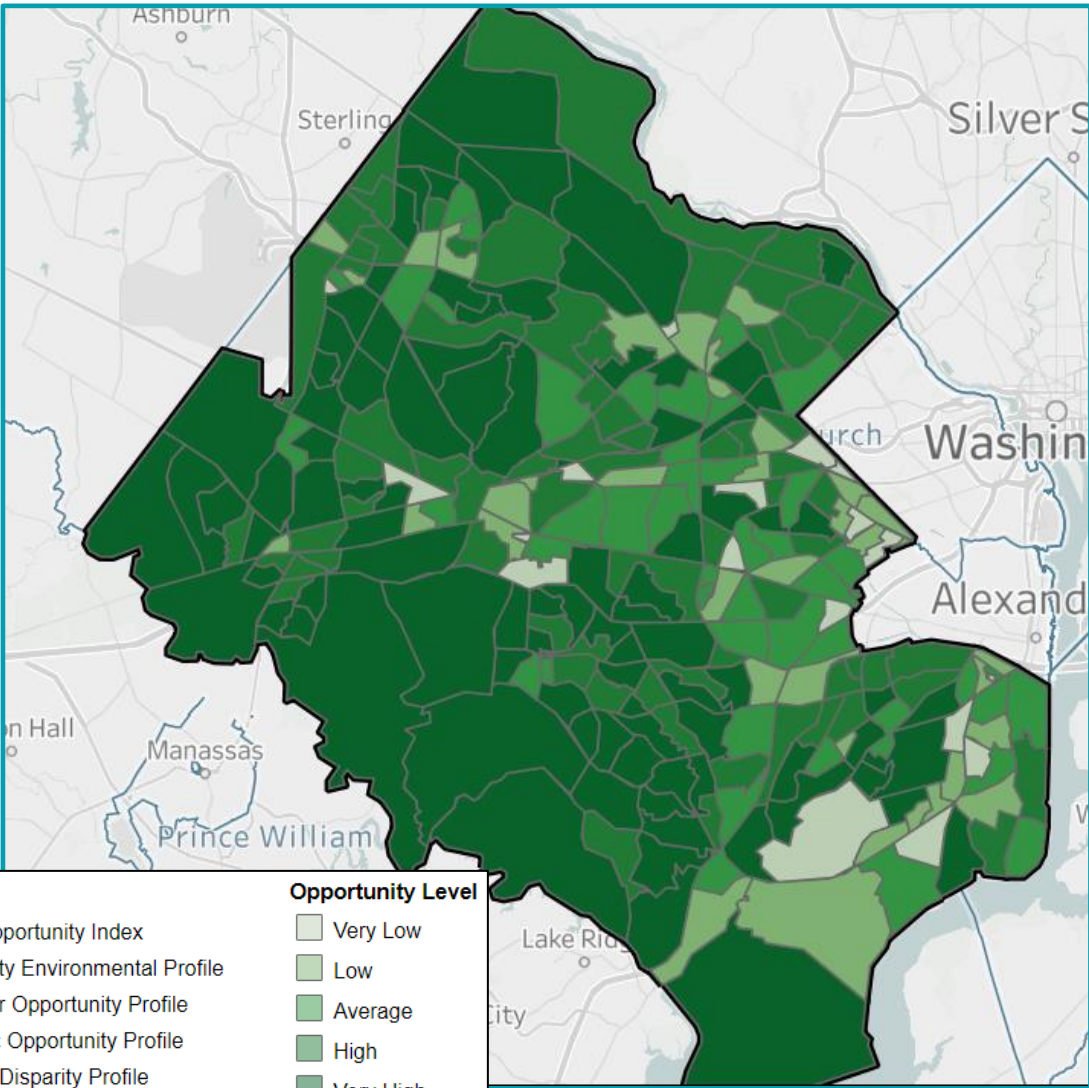
Health and Place: Access to opportunity (*jobs and services*)

Number of Households with No Vehicle by Census Tract (2017-2021)

Number of Households

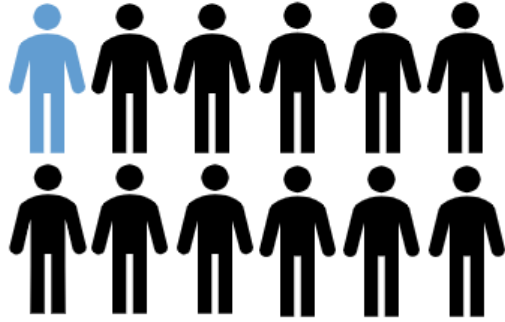


Health Opportunity Index

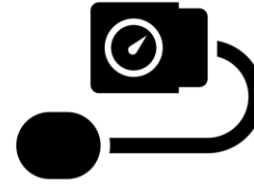


Health and Place: Chronic disease

1 in 12 (8%) adults in Fairfax County have been diagnosed with type 1 or type 2 diabetes.*



1 in 7 (14%) adults have prediabetic blood sugar levels, putting them at greater risk of developing type 2 diabetes.*

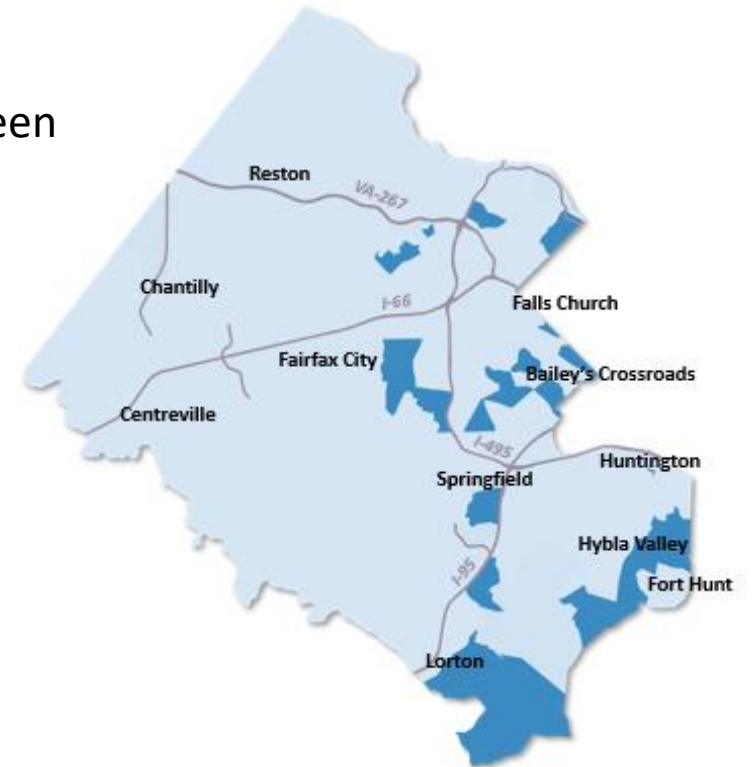


Black/African American residents are hospitalized for high blood pressure at least **9 times** the rate of Hispanic/Latino and White residents.*

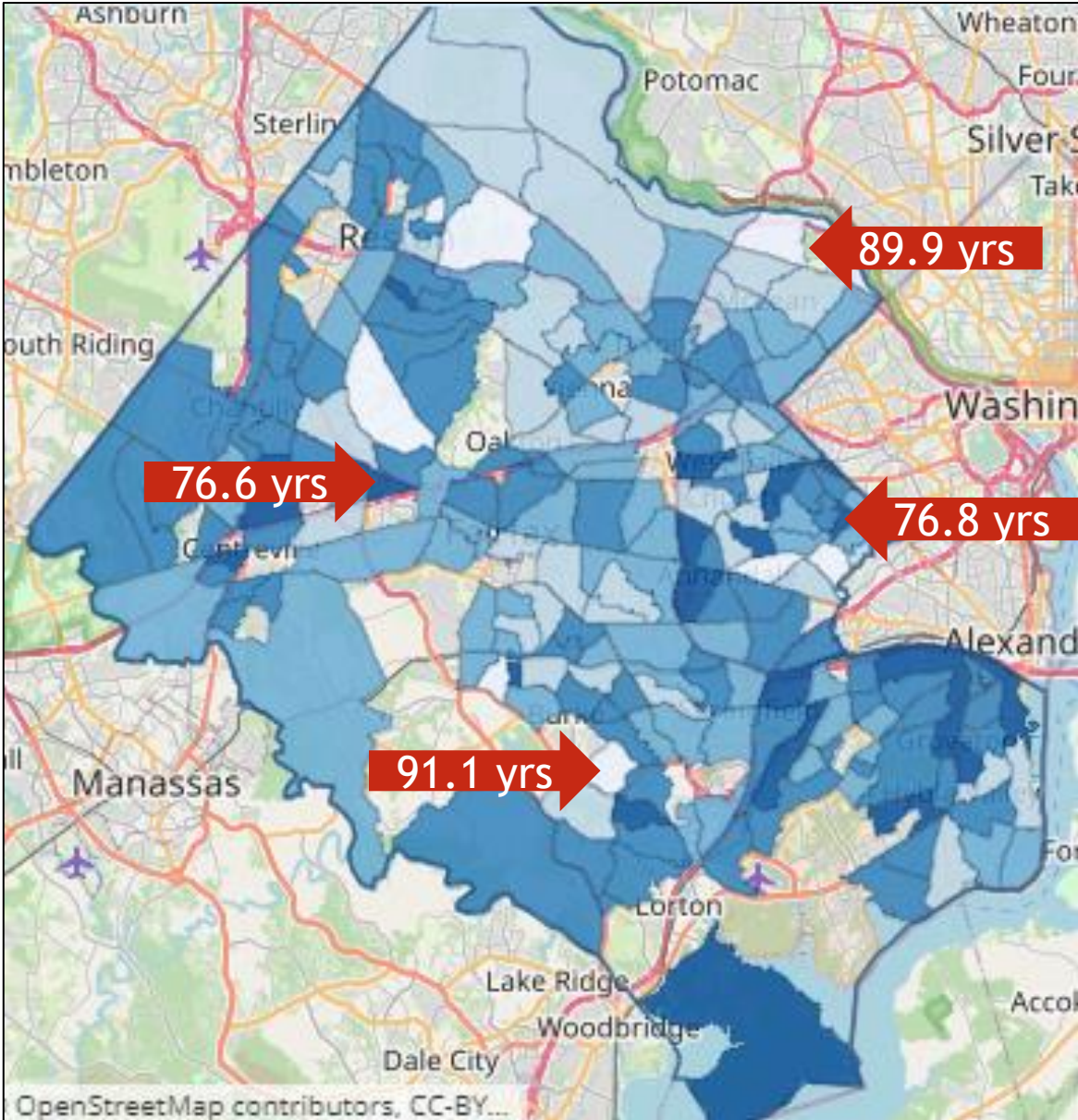
In **26** neighborhoods, at least **1 in 20 (5%)** of adults have been diagnosed with heart disease (county avg. = 4%)

The 5 neighborhoods with the largest percent of people with heart disease:

Neighborhood(s)	Percent
Montebello - Huntington	8%
Fair Vernon - Springfield	8%
Skyline Plaza - Bailey's Crossroads	6%
Gum Springs - Hybla Valley/Fort Hunt	6%
Pohick - Lorton	6%



Health and Place: Life expectancy across Fairfax County



Data Sources

Transportation related data is from the American Community Survey accessed through the Community Health Dashboard.

Pedestrian crash data is from the Virginia Department of Transportation.

Overall and neighborhood data on physical activity, food security, and disease rates are from the Behavioral Risk Factor Surveillance System through the Centers for Disease Control (CDC) PLACES 2023 Data Release for years 2020-2021.

Hospitalization data from Virginia Health Information's by-request data for years 2019-2021.

*The Health Opportunity Index was accessed through the Virginia Department of Health:
<https://apps.vdh.virginia.gov/omhhe/hoi/dashboards/health-districts>*


*Life Expectancy data is from the US Small-Area Life Expectancy Estimates Project (USALEEP) accessed through the Live Healthy Fairfax Community Health Dashboard:
<https://www.livehealthyfairfax.org/>*



Impacts of the built environment on health

Potential health impacts of our built environment


TRANSPORTATION

Factor	Direct impacts	Indirect or longer term impacts
 Transportation	<ul style="list-style-type: none">• Respiratory illness• Crashes and injuries• Cardiovascular health	<ul style="list-style-type: none">• Mental health• Community and social cohesion• Access to education, jobs, services (grocery, healthcare)

Pedestrian infrastructure and connectivity to transportation choices
Considerations for land uses near major roads
Road design

Potential health impacts of our built environment

HOUSING

Factor	Direct impacts	Indirect or longer term impacts
 Housing	<ul style="list-style-type: none">• Ability to afford basic needs (food, childcare)• Injuries• Respiratory illness• Maternal and child health• Mental health	<ul style="list-style-type: none">• Family stability• Educational attainment• Job opportunity• Access to parks and transportation options• Life expectancy

Proportion of affordable units for existing and future residents
Housing/jobs balance
Recreation opportunities near residential

Potential health impacts of our built environment


ENVIRONMENT

Factor	Direct impacts	Indirect or longer term impacts
 Environment	<ul style="list-style-type: none">• Respiratory illness• Water quality• Cardiovascular health• Mental health	<ul style="list-style-type: none">• Community and social cohesion• Learning

Amount of impervious surfaces
Trees and green space
Green building

Potential health impacts of our built environment

COMMUNITY DESIGN

Factor	Direct impacts	Indirect or longer term impacts
 Community Design	<ul style="list-style-type: none">• Community and social cohesion• Mental health• Public safety	<ul style="list-style-type: none">• Access to education, jobs, services (grocery, healthcare)• Educational attainment• Life expectancy

Urban design guidance
Community Business Centers
Transit Oriented Development
Mixed use development and co-location of services



Peer Community Examples

City of Fairfax Comprehensive Plan – 2022



Policy framework includes 6 chapters: Land Use, Multimodal Transportation, Environment and Sustainability, etc.

Environment & Sustainability:

- Sustainability Initiatives Goal 2: **Support physical activity and healthy lifestyles.**
- Outcome SI2.1: **Access to healthy, regionally-grown foods.**
 - *Action SI2.1.1 Evaluate regulations that permit urban agriculture on publicly-owned property and/or space for community gardens in new multifamily and mixed-use developments.*
 - *Action SI2.1.2 Work with Fairfax County to develop a healthy food access plan.*

City of Charlotte Comprehensive Plan – 2021

Policy framework has 10 overarching, cross-sectoral goals

Goal 6 focuses on health:

Healthy, Safe, and Active Communities: All Charlotteans will live and work in safe and resilient neighborhoods that enable healthy and active lifestyles by

- *reducing exposure to harmful environmental contaminants,*
- *expanding and improving the quality of tree canopy cover,*
- *encouraging investment in walking, cycling, and recreation facilities, and*
- *providing access to healthy food options and health care services.*

An Implementation Strategy details suggested actions, agency leads, and support agencies to ensure Plan goals are carried out.

King County, Washington Comprehensive Plan - 2016 (2022)

The Comprehensive Plan contains 6 Guiding Principles including: *Addressing Health, Equity and Social and Environmental Justice to reduce health inequities*

The principles in the Comprehensive Plan work together with goals in the Strategic Plan, e.g., *mobility, health and human services, safety and justice, and a healthy environment*

Chapter 4: Housing and Human Services

- *“Countywide Planning Policies provide a framework... for a range of affordable housing choices within neighborhoods that promote health, well-being, diversity and access to opportunities for employment, recreation, social interaction and cohesion, active transportation (walking, biking and public transit) and education.”*

King County, continued

H-204: King County shall strive to apply principles that lead to thriving healthy communities...

King County will support public health investments that help all residents to live... where they have the opportunity to make healthy choices. King County shall support:

Land use and zoning actions that promote public health by increasing opportunities for every resident to be more physically active.

E.g., concentrating growth in the Urban Growth Area; promoting urban centers; allowing mixed-use developments; supporting access to healthy, affordable retail foods; and adding pedestrian and bicycle facilities and connections.

Other plans to reference

[City of Charlottesville Comprehensive Plan - 2021](#)

[City of Richmond Comprehensive Plan - 2020 \(2023\)](#)

[City of Raleigh Comprehensive Plan - 2009 \(2023\)](#)

[Wake County, North Carolina Comprehensive Plan - 2021](#)

[District of Columbia Comprehensive Plan - 2006 \(2021\)](#)



New directions: place and health

A mandate for community health

The Countywide Strategic Plan provides clear direction:

HC1. Integrate considerations of health, well-being and equity into the development, implementation and evaluation of land use, transportation and housing policies and ordinances.

HNL 23. Link the county's public health and equity agenda to a public space agenda by updating the Comprehensive Plan to create healthier environments where access to basic needs, transit, affordable housing and healthy food is available.



We know there is demand from the community to consider health and intentionally plan for it - e.g. Reston update

We can build upon what we have: Many of our existing plans implicitly (if not explicitly) promote health - e.g. multimodal objectives, park plans

Ensure we make our community healthier while offering new flexibility in land use guidance

Vision for Community Health

Fairfax County will be a community where every resident has the opportunity to attain their full health potential, and no one is disadvantaged from achieving this potential because of where they live or other socially determined circumstances.



Vision for Community Health

Planning for Community Health can be achieved through objectives in five interrelated categories:



**Healthcare
& Services**



**Food
Systems**



Active Living



**Green Infrastructure
& Healthy Buildings**



**Social
Cohesion**

Integration and next steps

Co-benefits - health-promoting features can benefit equity and economic goals

Avoid unintended consequences - consider health impacts as we craft plan goals and identify priorities:

- What are benefits to health and equity?
- What are potential negative health impacts?
- Who does it benefit?
- Who could be left out?

Collaboration - work across many agencies and stakeholders to ensure *Community Health* plan guidance does, in fact, promote health across Fairfax County.









PLANNING & DEVELOPMENT



Community Health in the Policy Plan

Anna Ricklin, MHS
Health in All Policies Manager
Anna.Ricklin@fairfaxcounty.gov
(703) 859-0858

Summary: Potential health impacts of our built environment

Factor	Direct impacts	Indirect or longer term impacts
 Transportation	Respiratory illness; Crashes and injuries; Cardiovascular health	Mental health; Community cohesion; Access to education, jobs, services (grocery, healthcare)
 Housing	Ability to afford other basic needs (food, childcare); Injuries; Respiratory illness; Maternal and child health; Mental health	Family stability; Educational attainment; Job opportunity; Access to parks and transportation options; Life expectancy
 Community Design	Community and social cohesion; Mental health; Public safety	Access to education, jobs, services (grocery, healthcare); Educational attainment; Life expectancy
 Environment	Respiratory illness; Drinking water; Cardiovascular health; Mental health	Community cohesion; Learning