



Belgrove House Health Impact Assessment

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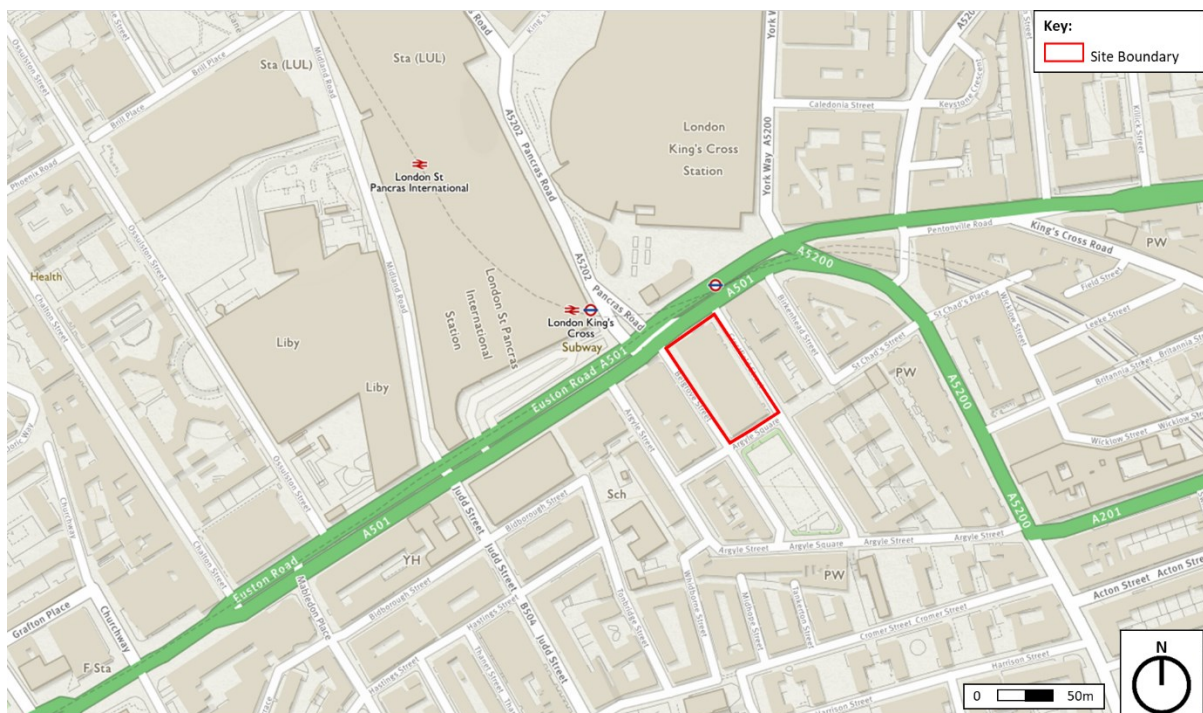
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INTRODUCTION

1. This Health Impact Assessment ('HIA') has been prepared on behalf of Precis Advisory / Access Self Storage (hereinafter referred to as the 'Applicant'), who is seeking planning permission for the demolition of an existing building and redevelopment of an approximately 0.3 hectare ('ha') site in the London Borough of Camden ('LBC'). The site is referred to as Belgrove House, and is located on Euston Road, opposite London King's Cross Station ('the site') (see Figure 1).
2. Belgrove House is currently a three-storey building, including a basement level, which is currently predominately in use as a storage facility (Use Class B8). Additionally, there are three retail units (Use Class A1 and A5) fronting Euston Road.
3. The Proposed Development is part of a wider proposal which includes the provision of affordable housing, affordable workspace and a retail unit off-site at Acorn House. Acorn House is located approximately a 4-minute walk from the site at 314-320 Grays Inn Road, London, WC1X 8DP. A separate HIA has been produced for the proposals at Acorn House and submitted in support of the corresponding planning application.

Figure 1. The Site – Planning Application Red Line Boundary



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The Proposed Development

Quantum of Development

4. Planning Permission is being sought for the re-development of the site which will comprise the demolition of the existing building on-site and the construction of a part 5 (fronting Argyle Square), part 10 (fronting Euston Road) storey building, in addition to a lower ground and basement level (hereafter referred to as the 'Proposed Development'). The Proposed Development will provide office, research and laboratory floor space (24,158m² gross internal area 'GIA') incorporating café and flexible retail and office floorspace, and an auditorium (869m² GIA).
5. In addition, the Proposed Development involves the removal of the existing tube entrances and construction of a new step free entrance to Kings Cross London Underground Line station along with associated highway, landscaping and public realm improvement works.

General Arrangement

6. As discussed above, the Proposed Development is ten storeys in height, and provides two below ground levels (lower ground and basement). The general arrangements of the uses is provided below:
- **Basement:** Plant will be located within the basement;
 - **Lower Ground:** Lower ground will provide a mix of retail, auditorium and meeting space in addition to ancillary facilities such as cycle storage and plant;
 - **Ground:** The majority of the ground floor will comprise the entrance lobby in addition to retail use; and
 - **Levels 1-9:** Office and laboratory space will be located across levels 1-9.
7. Figure 2 presents the ground floor plan, whilst typical floor plans are shown in Figure 3. Figure 4 represents the proposed building height.

Figure 2. Proposed Development – Ground Floor Layout

Ground Floor Plan

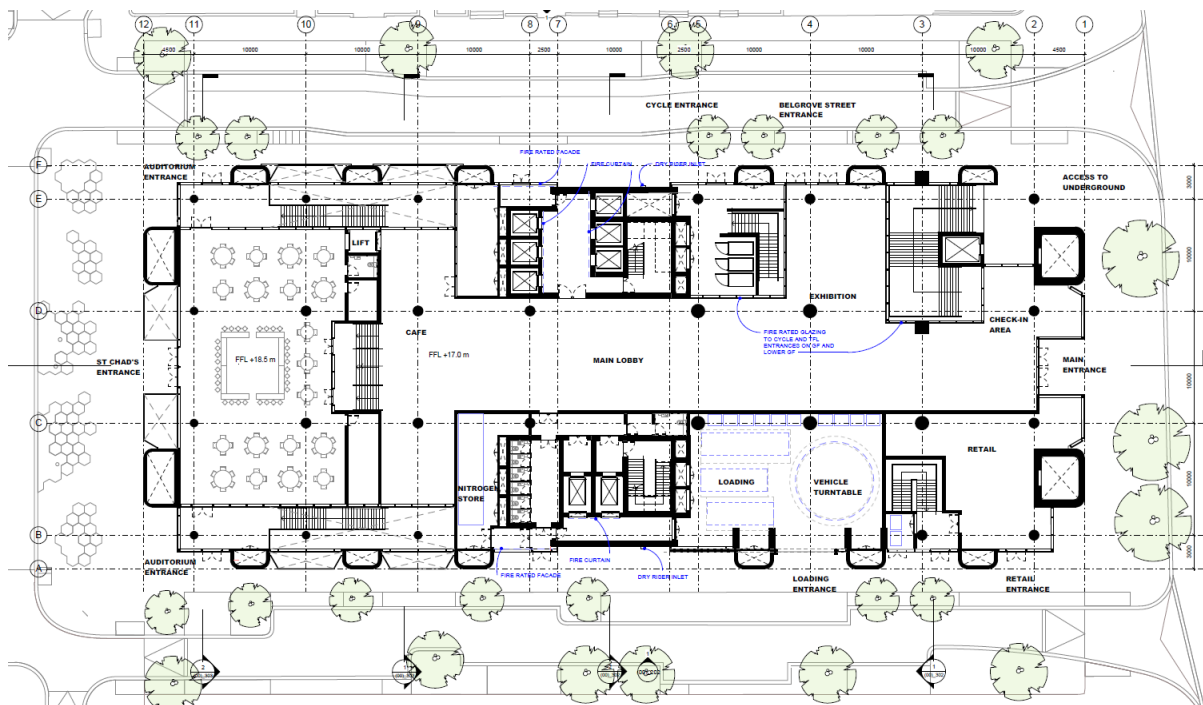
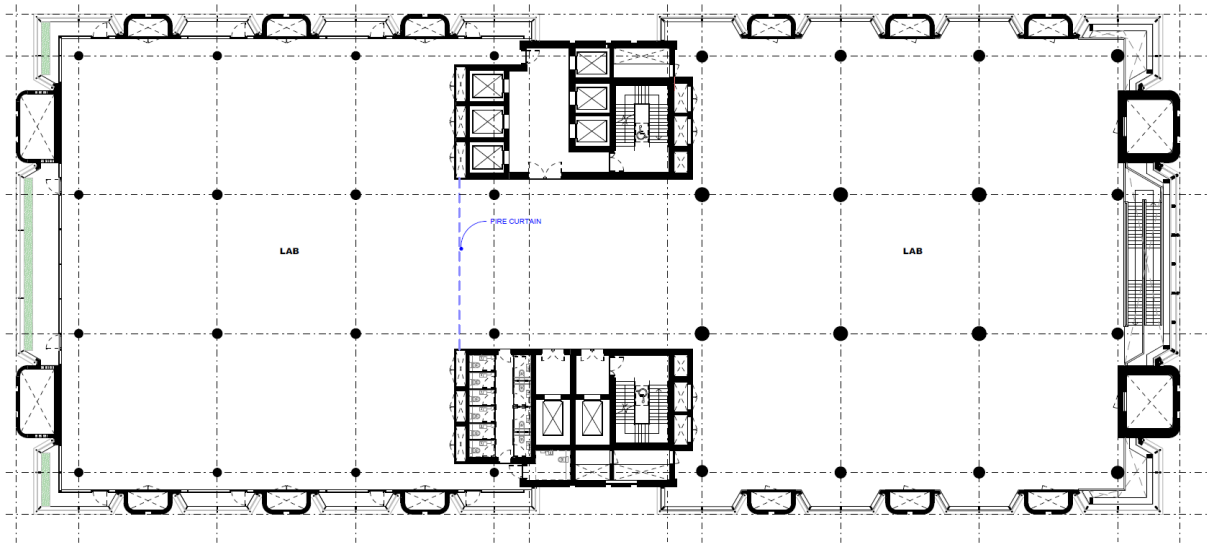


Figure 3. Proposed Development – Typical Floor Plans

Typical Floor Plan (Level 02)



Typical Floor Plan (Level 05)

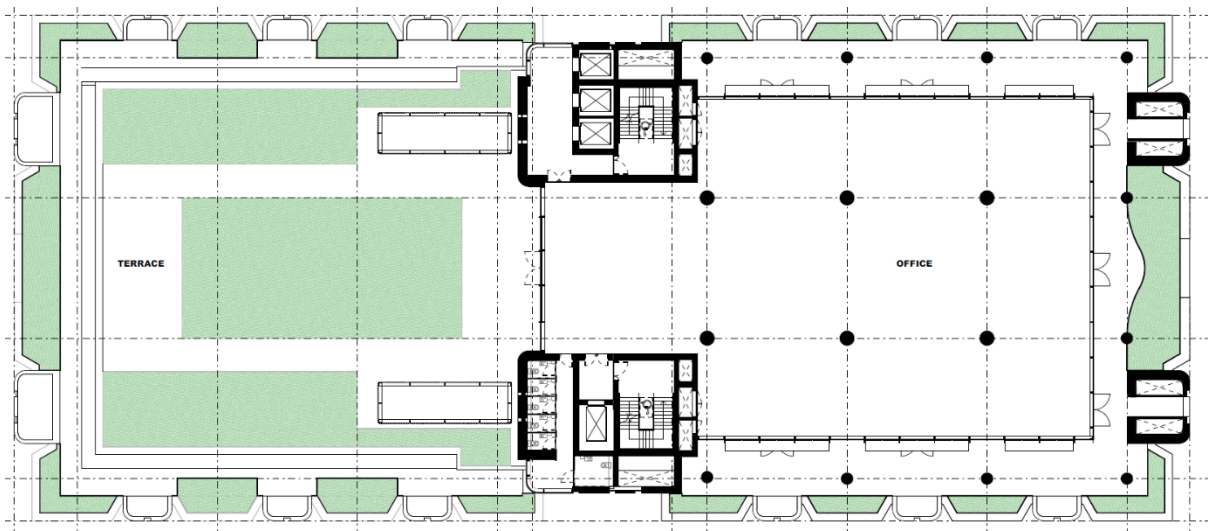
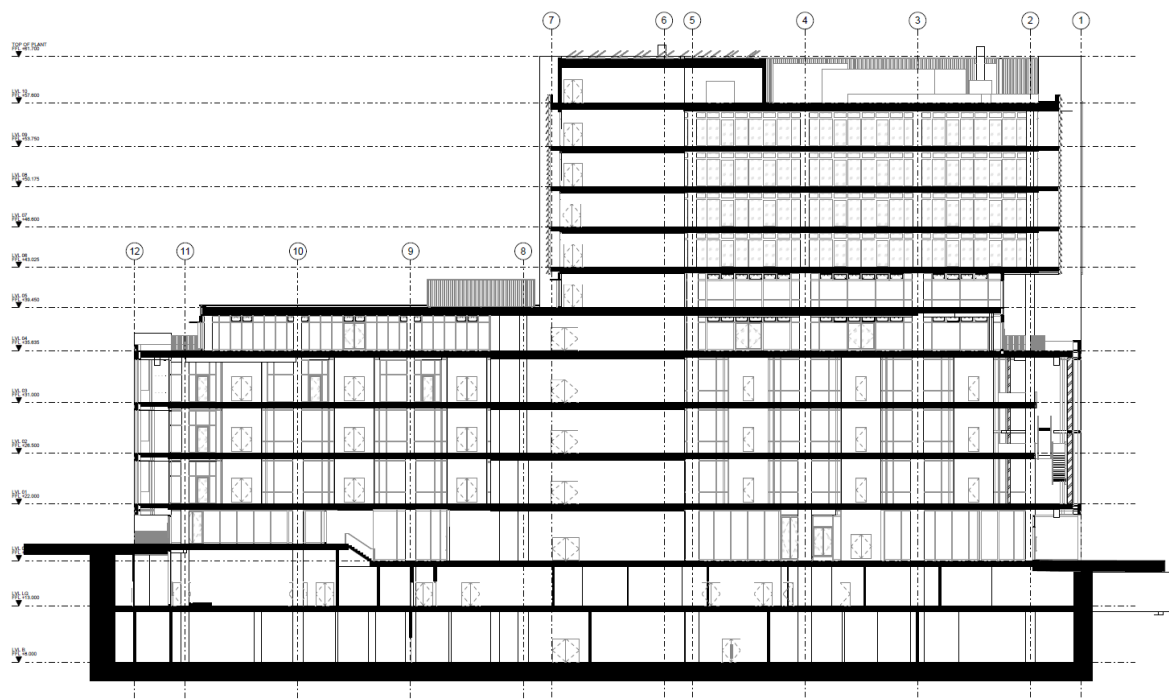


Figure 4. Proposed Development - Building Height (eastern elevation)



Overview of this HIA

8. In accordance with the requirements of The London Plan¹ Policy 3.2(c) (and consideration of the draft New London Plan²) and Policy C1 of LBC's Local Plan³, a HIA has been undertaken to help define and address any health issues in a systematic way. The methodology, baseline health context and health impact assessment are presented in this report.
9. In preparing this HIA, reference has been made to a number of data sources (these are referenced as relevant throughout this HIA) and to other standalone reports submitted as part of this planning application as relevant.
10. This HIA seeks to understand whether significant effects identified in other, relevant technical assessments would result in health effects. The HIA focuses on the following technical assessments, though other planning documents such as the Design and Access Statement and Planning Statement are also considered:
 - Air Quality Assessment;
 - Noise and Vibration Assessment;
 - Preliminary Ecological Appraisal;
 - Energy and Sustainability Statement;
 - Flood Risk Assessment;
 - Regeneration Statement and Employment and Skills Strategy;
 - Circular Economy Statement; and
 - Transport Assessment.

¹ Greater London Authority, (2016); The London Plan – The Spatial Development Strategy for London, Consolidated with Alterations Since 2011

² Greater London Authority, (2019); The London Plan The Spatial Development Strategy for Greater London Intend to Publish Version December 2019. The draft new London Plan Policy GG3 'Creating a healthy City' aims to reduce health inequalities and improve the health of Londoners by ensuring that the wider determinants of health are addressed in an integrated and co-ordinate way, taking a systematic approach to improve the mental and physical health of all Londoners and reducing health inequalities.

³ London Borough of Camden (2017); Local Plan.

11. The Proposed Development comprises commercial development only. As the Proposed Development does not introduce any new residential units or remove any existing residential units, there will be no change in the baseline population. As such, certain assessment topics have been scoped out of this Health Impact Assessment. This is discussed in further detail within the Methodology section below.

LEGISLATION AND PLANNING POLICY

12. A detailed review of key health related legislation and national, regional and local planning policy is provided in **Appendix A** of this HIA. The following legislative and planning policy documents have been considered within this assessment:
- The Localism Act 2011⁴;
 - The Health and Social Care Act 2012⁵;
 - The National Planning Policy Framework ('NPPF') 2019⁶;
 - Planning Practice Guidance ('PPG') (2019)⁷;
 - Fair Society, Healthy Lives (the Marmot Review) (2010)⁸ and The Marmot Review 10 Years on (2020)⁹;;
 - Healthy Lives, Healthy People: our strategy for public health in England (2010)¹⁰;
 - NHS England's Challenging Health Inequalities Report (2016)¹¹;
 - The London Plan – The Spatial Development Strategy for London, Consolidated with Alterations Since 2011 (2016);
 - The Draft New London Plan – The Spatial Development Strategy for Greater London Intend to Publish Version (2019);
 - The Greater London Authority's (GLA) London Health Inequalities Strategy September 2018 (2018)¹²;
 - GLA's Social Infrastructure Supplementary Planning Document (2015)¹³;
 - Joint Strategic Needs Assessment ('JSNA') for Camden (online database)¹⁴;
 - Camden Joint Strategic Needs Assessment, (2019);¹⁵
 - London Borough of Camden Joint Health and Wellbeing Strategy refresh (2018)¹⁶;
 - London Borough of Camden Planning Guidance: Planning for Health and Wellbeing (2018)¹⁷;
 - London Borough of Camden Planning Guidance: Access for All (2019)¹⁸; and
 - London Borough of Camden Local Plan (2017).

⁴ Her Majesty's Stationery Office, (2011); Localism Act 2011

⁵ Her Majesty's Stationery Office, (2012); Health and Social Care Act 2012

⁶ Ministry of Housing, Communities & Local Government, (2019); National Planning Policy Framework

⁷ Ministry of Housing, Communities & Local Government, (2019); Planning Practice Guidance

⁸ University College London, (2012); Fair Society, Healthy Lives (the Marmot Review) 2010

⁹ The Institute of Health Equity (2020). Health Equity in England: The Marmot Review 10 Years On.

¹⁰ Department of Health, (2010); Healthy Lives, Healthy People: Our strategy for public health in England

¹¹ NHS England, (2016); Challenging Health Inequalities Report – Support for CCGs

¹² Greater London Authority, (2018); London Health Inequalities Strategy 2018

¹³ Greater London Authority, (2015); Social Infrastructure SPD

¹⁴ London Borough of Camden (2019); Joint Strategic Needs Assessment online database. Accessible online:

<https://www.camden.gov.uk/joint-strategic-needs-assessment>

¹⁵ London Borough of Camden (2019); Joint Strategic Needs Assessment for Camden 2019.

¹⁶ London Borough of Camden, (2019); Camden's Joint Health and Wellbeing Strategy refresh March 2019

¹⁷ London Borough of Camden, (2018); Planning for Health and Wellbeing. [URL:

<https://www.camden.gov.uk/documents/20142/4833316/CPG+Planning+for+health+and+wellbeing+March+2018.pdf/f84469ed-8fdd-67fb-bfea-c948f94dfcb4>

¹⁸ London Borough of Camden, (2019); Access for All. [URL:

<https://www.camden.gov.uk/documents/20142/4823269/Access+for+All+CPG+March+2019.pdf/5cac0e80-e10b-e3fd-dbbf-89ad7b2b0d00>

METHODOLOGY

13. This HIA has been prepared in line with Policy 3.2(c) of The London Plan:
“The impacts of major development proposals on the health and wellbeing of communities should be considered, for example through the use of Health Impact Assessments (HIA).”
14. This is endorsed in the local level through the LBC Local Plan Policy C1 which states that “...A) development to positively contribute to creating high quality, active, safe and accessible places” and “...B) A Health Impact Assessment must be submitted with all major development proposals”.
15. Additionally, the HIA has considered Policy GG3 (D) of the draft London Plan:
“To improve Londoners’ health and reduce health inequalities, those involved in planning and development must: assess the potential impacts of development proposals and Development Plans on the mental and physical health and wellbeing of communities, in order to mitigate any potential negative impacts, maximise potential positive impacts, and help reduce health inequalities, for example through the use of Health Impact Assessments.”
16. As noted in their validation checklist, the LBC require a HIA to accompany a planning application when:
 - The Proposed Development is of 10 or more new residential units; or
 - The Proposed Development is 1,000m² or more of additional commercial or visitor floorspace.
17. As the Proposed Development exceeds these thresholds, a HIA has been produced to accompany the planning application.
18. The methodology for preparing this HIA is predominantly derived from the NHS Healthy Urban Development Unit (HUDU) (2019) Rapid Health Impact Assessment Tool¹⁹ and the NHS HUDU Healthy Urban Planning Checklist (2017)²⁰.
19. The Rapid HIA Tool was designed to assess the likely health impacts of development plans and proposals. The Rapid HIA Tool is partly based on the World Health Organisation (WHO) publication by Hugh Barton and Catherine Tsourou, Healthy Urban Planning (2000)²¹. This publication places emphasis on the importance of considering health and quality of life in urban planning, and refocusing urban planners on making health objectives central to the decision-making process.
20. The Rapid HIA Tool helps to identify determinants of health likely to be influenced by a specific development proposal. ‘Determinants of health’ are factors that have the most significant influence on

¹⁹ NHS Healthy Urban Development Unit, (2019) Rapid Health Impact Assessment Tool

²⁰ NHS Healthy Urban Development Unit, (2017); Healthy Urban Planning Checklist

²¹ World Health Organisation, (2000); Healthy Urban Planning (ISBN: 113515936X)

the health of a population. The Rapid HIA Tool identifies the following 11 key determinants of health:

1. Housing Quality and Design;
 2. Access to Healthcare Services and other Social Infrastructure;
 3. Access to Open Space and Nature;
 4. Air Quality, Noise and Neighborhood Amenity;
 5. Accessibility and Active Travel;
 6. Crime Reduction and Community Safety;
 7. Access to Healthy Food;
 8. Access to Work and Training;
 9. Social Cohesion and Lifetime Neighborhoods;
 10. Minimising the Use of Resources; and
 11. Climate Change.
21. As per the Mayor of London's Social Infrastructure SPD²² this HIA is a 'Rapid HIA', which is one of three types of HIA. This Rapid HIA is a *"more resource intensive process, involving a more focused investigation of health impacts and recommending mitigation and enhancement measures"*¹⁸. A 'Desktop HIA' and a 'Full HIA' are the other two types of HIA. A Desktop HIA is a simplified HIA which draws on existing knowledge and evidence to complete the assessment. A Full HIA involves comprehensive analysis of all potential health and wellbeing impacts and includes qualitative feedback from local residents and other stakeholders. For the site, a Rapid HIA is the most appropriate form of HIA. It provides sufficient information on the health baseline of the site and surrounding area to allow for a systematic consideration of the likely health implications of the Proposed Development. It is also considered to be proportionate to the Proposed Development in question and provides for opportunities to suggest mitigation and enhancement measures as appropriate to the findings of the HIA.
22. Rapid HIA are predominantly qualitative rather than quantitative assessments, due to the wide and diverse range of health determinants that need to be assessed. As detailed in the Rapid HIA Tool, impacts on health determinants have been categorised as:
- Positive (+ve);
 - Negative (-ve);
 - Neutral (=); and
 - Uncertain (?)
23. Following on from the assessment of impacts of the Proposed Development on the key determinants of health, advice has been provided on measures to enhance health and wellbeing through the opportunities associated with the redevelopment of the site, and where necessary, to mitigate any potentially negative impacts.

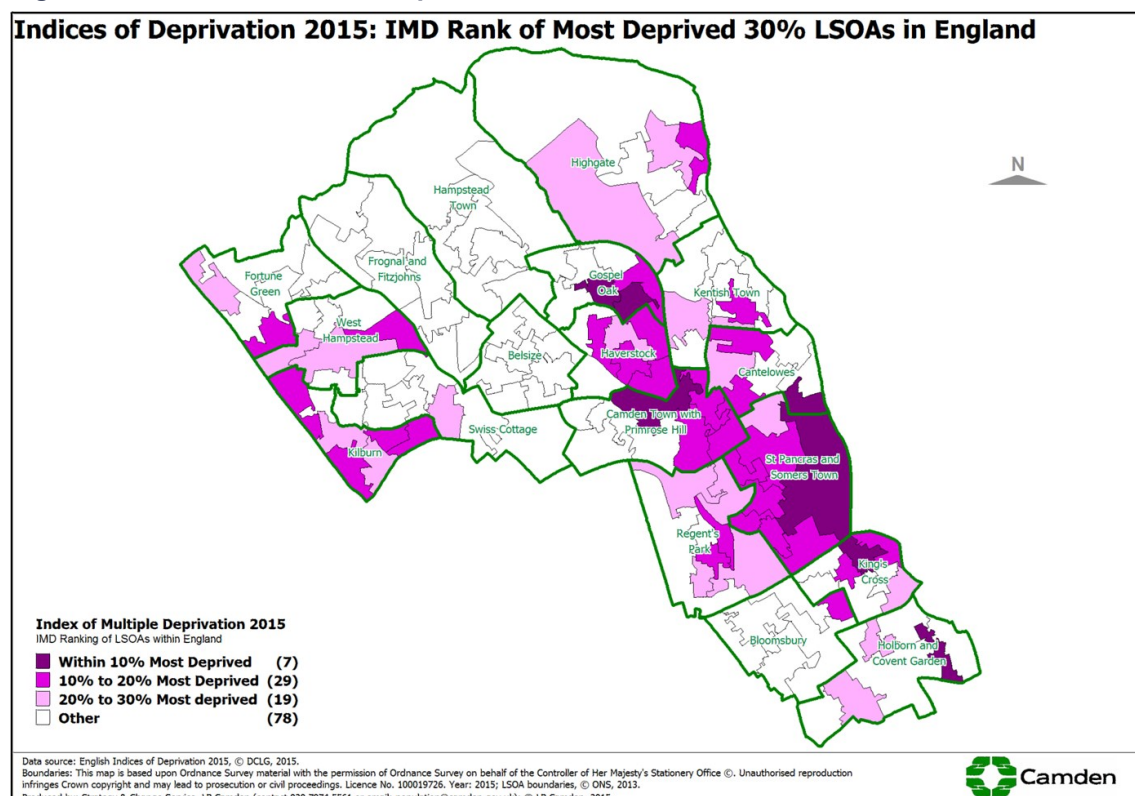
²² Greater London Authority, (2015); Mayor of London's Social Infrastructure Supplementary Planning Document

BASELINE REVIEW

Introduction

25. The site is located along Euston Road within the London Borough of Camden, London, England. Camden is made up of 14 wards, with the site located in the King's Cross Ward.
26. The LBC has an estimated resident population of 255,526 and is the 11th smallest borough in London. The population density within the LBC is 117.3 persons per hectare ²³.
27. The LBC is higher than the England average for deprivation with 25% of people being deprived compared to the average of 21.8% in England²⁴, and the health of people living within the borough is generally better than that compared with the England average. The only health indicators not considered to be 'better' or 'similar' to the England average are: the diabetes diagnosis indicator, which is 56.3% for the LBC, compared with the England wide 78.0% (i.e. worse than England wide), Tuberculosis (TB), which is 17.6% for the LBC and 9.9% England wide and New Sexually Transmitted Infections (STI) diagnoses which is 1,985 per 100,000 and for the LBC and 851 per 100,000 England wide.
28. Life expectancy at birth is at 87 years for women (best in London), and 82.7 years for men which is higher than the average ages for both women (83.2 years) and men (79.6 years) within England.
29. Figure 5 below details the differences in deprivation within the borough based on national comparisons, using quintiles of the Index of Multiple Deprivation (IMD) 2015, shown by lower super output area (LSOA)²⁵. In addition, Figure 6 provides an overview of the site in relation to transport links GPs and dentists.

Figure 5. Differences in Deprivation within the LBC.



²³ This data has been sourced from 2011 Census data and 2016 population projections. London Datastore, 2018, Land Area and Population density, Ward and Borough. Accessed online 24.05.2020 [url: <https://data.london.gov.uk/dataset/land-area-and-population-density-ward-and-borough>]

²⁴ Public Health England (2019); Local Authority Health Profiles, Camden. Accessed online 24.05.2020. [url: <https://fingertips.phe.org.uk/profile/health-profiles/data#page/1/gid/1938132701/pat/6/par/E12000007/ati/102/are/E09000007/iid/91872/age/1/sex/4>]

²⁵ A Lower Super Output Area (LSOA) is an area designed to improve the reporting of small area statistics. It is a geographical area made of roughly 1,500 residents and 650 households

Health Determinant 1: Housing Quality and Design

The NHS HUDU Planning for Health (2019) states that “Access to decent and adequate housing is critically important for health and wellbeing, especially for the very young and very old. Environmental factors, overcrowding and sanitation in buildings as well as unhealthy urban spaces have been widely recognised as causing illness since urban planning was formally introduced. Post-construction management also has impact on community welfare, cohesion and mental wellbeing.”

30. Around 19% of homes in London are recorded as being below the official Decent Homes standard²⁶. The proportion of homes in London failing to meet this standard has however fallen from 37% in 2006 to 19% in 2014. The proportion of homes below this standard has fallen slightly faster in London than in the rest of England since 2006, and in recent years, significant improvement has been made across all tenures. The private rented sector (PRS) still has the worst conditions, with 24% of homes below the standard in 2014, compared to 17% of owner occupied homes and 15% of social housing.
31. The cost of housing in the LBC is amongst the highest in the country. By tenure, 33% of the LBC households were owner occupied, but a higher proportion were owned outright (17%) than were owned with a mortgage/loan (15%), while less than 1% of homes were in shared ownership. Camden has a large social rented sector, with 23% of households rented from the council and 10% in other social rented. 32% of households are rented privately.
32. In 2010 the Mayor of London, published the London Housing Design Guide²⁷, which establishes a common set of housing design standards across all tenures in London. These standards include design specifications for shaping good places, creating housing for a diverse city, internal design and circulation space, space standards and climate change mitigation and adaptation. The standards are now applied through the London Plan²⁸ and the London Plan Housing Supplementary Planning Guidance (SPG)²⁹.
33. As stated in the GLA Housing SPG “Fully optimising housing potential will necessitate high quality, innovative design to ensure new development successfully responds to challenges and opportunities presented on a particular site.” Additionally, The London Plan includes Policy 3.5 ‘Quality and Design of Housing Developments’, which details that “...housing developments should be of the highest quality internally, externally and in relation to their context and to the wider environment...”.
34. The Proposed Development does not introduce any new residential units or remove any existing residential units.

²⁶ Greater London Authority, (2017); Housing in London: 2017

²⁷ Mayor of London, (2010); London Housing Design Guide

²⁸ Greater London Authority, (2016); The London Plan – The Spatial Development Strategy for London, Consolidated with Alterations Since 2011

²⁹ Greater London Authority, (2016); Housing Supplementary Planning Guidance

Health Determinant 2: Access to Healthcare Services and other Social Infrastructure

The NHS HUDU Planning for Health (2019), Health Determinant 2 states that “Strong, vibrant, sustainable and cohesive communities require good quality, accessible public services and infrastructure. Access to social infrastructure and other services is a key component of Lifetime Neighbourhoods. Encouraging the use of local services is influenced by accessibility, in terms of transport and access into a building, and the range and quality of services offered. Access to good quality health and social care, education (primary, secondary and post-19) and community facilities has a direct positive effect on human health. Opportunities for the community to participate in the planning of these services has the potential to impact positively on mental health and wellbeing and can lead to greater community cohesion.”

Healthcare

Primary Healthcare

35. Primary health care is the first point of contact for health care for the majority of people and is mostly provided by general practitioners (GPs), however pharmacists, opticians and dentists also provide primary health care services.
36. Clinical Commissioning Groups (CCGs) were created following the commencement of the Health and Social Care Act in 2012³⁰, which replaced Primary Care Trusts on 1 April 2013. There are a total of 211 CCGs within England, and each GP practice is now part of a CCG. The site lies within the Camden CCG.
37. There are several GP surgeries within proximity to the site, including but not limited to Bloomsbury Surgery located approximately 390m south of the site, Somers Town Medical Centre located approximately 510m north-west of the site and Killick Street Health Centre is located approximately 500m to the north-east (Figure 6).
38. The Proposed Development does not introduce any new residential units and therefore there will be no change to the population as a result of the Proposed Development, on this basis the impact of the Proposed Development on primary healthcare (i.e. GPs) has not been considered further.

Secondary Healthcare

39. Secondary health care is often referred to as ‘hospital and community care’ and can include planned (elective care) e.g. an operation, and emergency treatment. There are several walk-in centres and hospital facilities within the LBC. The closest walk-in centre and the closest accidents and emergency (A&E) department to the Proposed Development is at University College Hospital, located approximately 1.05km to the south-west of the site. The London Commissioning Region Healthcare NHS Trust had a total of 423,934 attendees to A&E in January 2020.
40. In 2018/19, 3.4% of construction workers within Great Britain had work-related ill health, compared to 3.2% of workers across all industries³¹.
41. The LBC provides a wide range of Health and Social Care services. These services include, but are not limited to: adult social care, including safeguarding vulnerable adults e.g. the elderly, and those suffering from domestic abuse; and children and family care, including children’s safeguarding and social care and adoption³².
42. The LBC provide further details on services available to residents within the borough on the Camden

³⁰ Her Majesty’s Stationery Office, (2012); Health and Social Care Act 2012

³¹ HSE, 2019. Construction Statistics in Great Britain, 2019 [URL: <https://www.hse.gov.uk/Statistics/industry/construction.pdf>]

³² The LBC is part of Adopt London North which is an adoption agency consisting of Barnet, Camden, Enfield, Hackney, Haringey and Islington

Care Choices webpage³³.

43. Whilst the Proposed Development does not introduce any new residential units, and therefore there will be no change to the population as a result of the Proposed Development, the impact on secondary healthcare, specifically emergency treatment has been considered with respect to workers during both the demolition and construction phase and once the Proposed Development is complete and operational.

Education

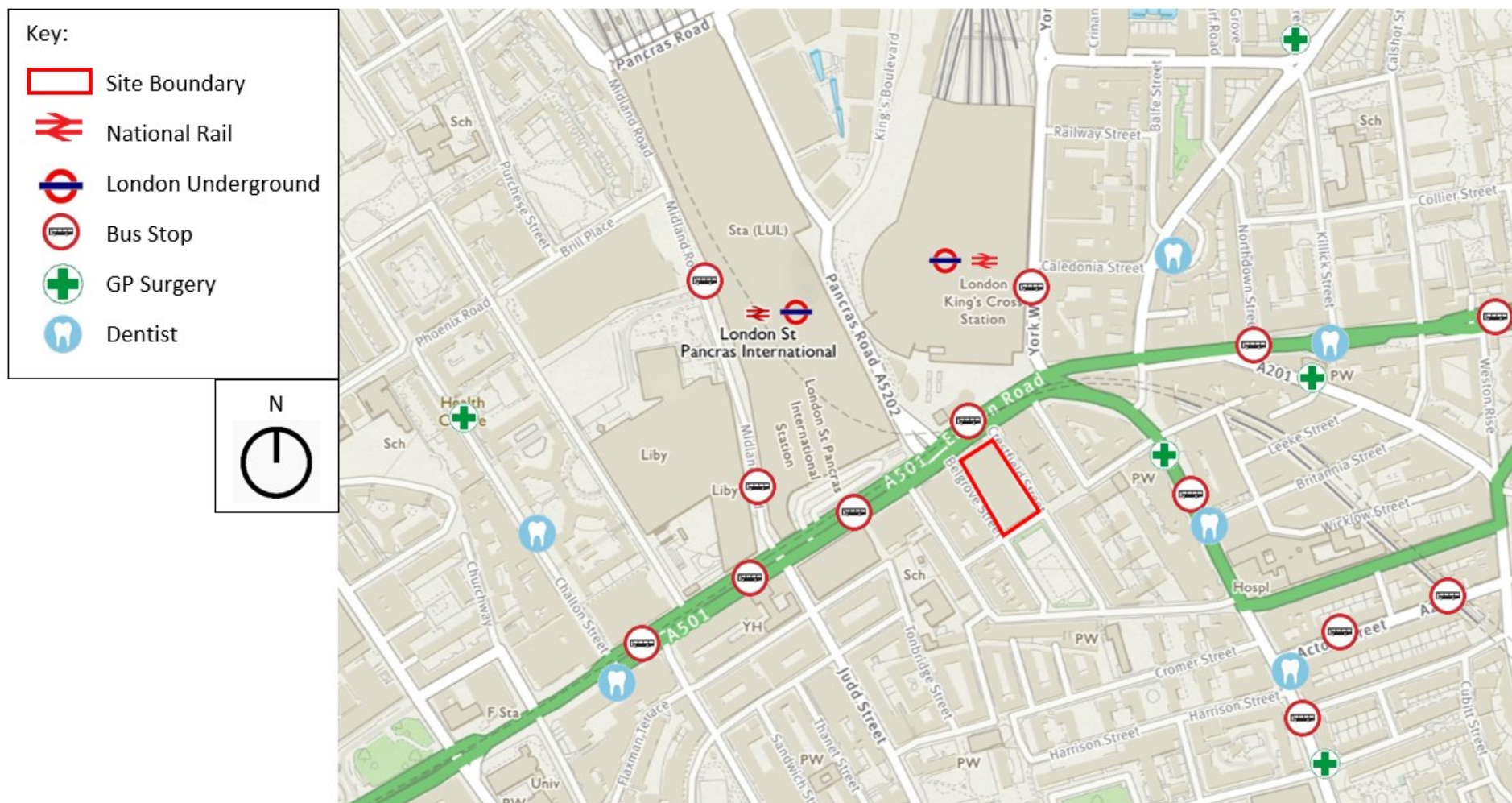
44. The Proposed Development does not introduce any new residential units and therefore there will be no change to the population as a result of the Proposed Development, on this basis the impact of the Proposed Development on both primary and secondary education has not been considered.

Other Social Infrastructure and Community Facilities

45. There are a wide range of community facilities available to residents within the LBC. The LBC manages several community facilities, including libraries, sport and fitness facilities, and community halls.
46. There are 9 libraries within the LBC, with the closest library to the site is the Pancras Square Library, which is located approximately 460m to the north of the site. Additionally, the British Library is located approximately 260m to the west of the site. While not managed by the LBC, the British Library offers free access to its reading rooms in addition to offering a number of free events.
47. Camden's swimming pools, leisure centres and gyms, of which there are 12, are managed by Better. Residents within Camden are eligible for concession rates as well as students, over 55s and those in receipt of benefit payments or have a disability. The closest leisure centre to the site is Pancras Square Leisure Centre, located approximately 455m to the north of the site. Other gyms situated closer to the site include pilates and yoga studios, and the more traditional style Anytime Fitness gym.
48. The LBC have a number of social media platforms (including Facebook and Twitter) which provide updates relevant to the community.
49. There are a number of youth clubs within the surrounding area which offer a wide range of activities and support services for young people. The closest youth club to the site is the Kings Cross Brunswick Neighbourhood Association Youth Work located approximately 120m south of the site.
50. The Proposed Development does not introduce any new residential units and therefore there will be no change to the population as a result of the Proposed Development, on this basis the impact of the Proposed Development on other social infrastructure and community facilities has not been considered further.

³³ London Borough of Camden, (2020); Camden Care Choices. Accessed online 16.06.2020 [URL: <https://camdencarechoices.camden.gov.uk/>]

Figure 6. Site and Nearby GPs, Dentists and Public Transport Facilities



Health Determinant 3: Access to Open Space and Nature

As detailed in the NHS HUDU Planning for Health (2019), access to open space and nature relates to *“Providing secure, convenient and attractive open/green space can lead to more physical activity and reduce levels of heart disease, strokes and other ill-health problems that are associated with both sedentary occupations and stressful lifestyles. There is growing evidence that access to parks and open spaces and nature can help to maintain or improve mental health. The patterns of physical activity established in childhood are perceived to be a key determinant of adult behaviour; a growing number of children and young people are missing out on regular exercise, and an increasing number of children and young people are being diagnosed as obese. Access to play spaces, community or sport facilities such as sport pitches can encourage physical activity. There is a strong correlation between the quality of open space and the frequency of use for physical activity, social interaction or relaxation.”*

51. Providing secure, convenient and attractive open/green space can lead to more physical activity and reduce levels of heart disease, strokes and other ill-health problems that are associated with both sedentary occupations and stressful lifestyles. There is growing evidence that access to parks and open spaces and nature can help to maintain or improve mental health. The patterns of physical activity established in childhood are perceived to be a key determinant of adult behaviour; a growing number of children and young people are missing out on regular exercise, and an increasing number of children and young people are being diagnosed as obese. Access to play spaces, community or sport facilities such as sport pitches can encourage physical activity. There is a strong correlation between the quality of open space and the frequency of use for physical activity, social interaction or relaxation.
52. Physical activity has been in decline since the 1960s; we are over 20% less active now than in the 1960's and are predicted to be 35% less active by 2030. Currently, only 21% of boys and 16% of girls meet the UK Chief Medical Officers' guideline of 60 minutes of physical activity per day. In adults, 67% of men and 55% of women are meeting the recommendations³⁴.
53. In 2016/17 in the United Kingdom 26% of the population were classified as obese. It is estimated that the proportion of people classified as obese in England could rise to 48% of men and 43% of women by 2030. In 2016 the percentage of children presenting as obese in Year 6 (10-11 year olds) was 23.6% in London, 20% of adults in London were identified as obese³⁵.
54. Within the LBC it is estimated that 16.7% of adults are identified as physically inactive³⁶ which is lower than the England average of 22.2%. When leaving primary school at the age of 11, approximately 1 in 3 children (within LBC primary schools) are considered obese.
55. The LBC have produced a Joint Health and Wellbeing Strategy (2019)³⁷ with the aim of promoting health and active lifestyles within both adults and young people. The 2019 strategy is an update from the Joint Health and Wellbeing strategy produced in 2016, since then the council have outlined key areas where improvements have been made:
 - Healthy weight, healthy lives;
 - Reducing alcohol related harm;
 - Building family and community resilience;
 - Ensuring support from pregnancy through to the first two years of life for children; and
 - Ensuring good mental health for all.

³⁴ British Heart Foundation, (2015); Physical Activity Statistics 2015.

³⁵ NHS Digital, (2018); Statistics on Obesity, Physical Activity and Diet, England: 2018

³⁶ London Borough of Camden, (2019); Joint Strategic Needs Assessment Executive Summary 2019. Accessed Online 24.05.2020 [URL: <https://opendata.camden.gov.uk/Health/JSNA-Executive-Summary-2019/uewk-kdd3>]

³⁷ London Borough of Camden, (2016); Joint Health and Wellbeing Strategy 2016-21

56. With regards to open space and nature, almost 25% of the total area of the LBC is open space, which equates to approximately 5.3 million square metres³⁸. This includes land that is not currently accessible by the public but which could become accessible upon improvement. On average 56% of households within the LBC have access to open space.
57. There are a number of parks and gardens in the surrounding area including St George's Gardens, Bramber Green and Argyle Square Gardens which is located directly to the south of the site. Argyle Square Gardens is a publicly accessible garden which offers green space in addition to a multi-use games area. Additionally, the site is located approximately 30m south of Kings Cross Square, a large area of public realm which offers informal seating areas.

³⁸ London Data Store (2013); Access to Public Open Space and Nature by Ward. Accessed online 24.05.2020 [URL: <https://data.london.gov.uk/dataset/access-public-open-space-and-nature-ward>]

Health Determinant 4: Air Quality, Noise and Neighbourhood Amenity

The NHS HUDU Planning for Health (2019), states that “The quality of the local environment can have a significant impact on physical and mental health. Pollution caused by construction, traffic and commercial activity can result in poor air quality, noise nuisance and vibration. Poor air quality is linked to incidence of chronic lung disease (chronic bronchitis or emphysema) and heart conditions and asthma levels of among children and young people. Noise pollution can have a detrimental impact on health resulting in sleep disturbance, cardiovascular and psycho-physiological effects. Good design and the separation of land uses can lessen noise impacts”

58. Two of the main environmental factors affecting neighbourhood amenity are noise and air quality, which are covered in this health determinant section.
59. An air quality assessment has been undertaken as part of the planning application for the Proposed Development.
60. Air Quality is an important public health issue, particularly in London, where it was estimated by the GLA that there were over 9,000 deaths attributable to long-term exposure to small particles and nitrogen dioxide (noting that there is some overlap in the numbers of deaths)³⁹.
61. In November 2002, the LBC designated an Air Quality Management Area ('AQMA') across the whole Borough for nitrogen dioxide (NO₂) and particulate matter (PM₁₀).
62. The LBC routinely monitor the following pollutants: NO₂; PM₁₀, through four continuous air quality monitoring sites. The sites are located on Euston Road, Russell Square Gardens, Holborn and Swiss Cottage.
63. The LBC has a network of 19 diffusion tube 'non-automatic' monitoring sites which monitor long term trends of NO₂ across the LBC. Two of the diffusion tubes sites are co-located with Euston Road and Swiss Cottage automatic monitoring sites.
64. The national air quality objectives and European Directive limit and target values for the protection of human health identify 40 µg/m³ as the annual mean objective for NO₂ concentrations, 40 µg/m³ for PM₁₀ concentrations and 25 µg/m³ for PM_{2.5} concentrations.
65. Euston Road monitoring station is located closest to the site (approximately 210m to the south-west of the site). The data for 2019 identifies that the annual mean concentration of NO₂ was recorded at 69.9 µg/m³ at the Euston Road monitoring station. Annual concentrations of NO₂ have shown a general downward trend in recent years, falling from 98.0 µg/m³ in 2011. This trend is comparable across the other automatic monitoring stations within the LBC.
66. Annual mean concentrations of NO₂ have exceeded the objective at all but one of the sites in at least one year since 2014; three of the six roadside sites recorded exceedances in 2019. In addition, the hourly mean objective for NO₂ has historically been exceeded at the Euston Road automatic site, but there have been no exceedances in any year at the Bloomsbury site. There has been a clear downward trend in annual mean concentrations and the number of 1- hour concentrations above 200 µg/m³ at the Bloomsbury and Euston Road automatic sites, the same general downwards trends is exhibited at the diffusion tube sites.
67. Both the Bloomsbury and Euston Road automatic stations measure PM₁₀ and PM_{2.5} concentrations. Results for the years 2014 to 2019 are summarised in Table 4 and indicate a downward trend in concentrations over the period. There have been no recorded exceedances of the annual mean or daily mean PM₁₀ objective, or the annual mean PM_{2.5} objective at either site since 2014.
68. Figure 7 and Figure 8 below represents the 2011 annual mean concentrations of NO₂ and PM₁₀ in LBC respectively. Note that this data is not as up-to-date as the information presented within the paragraph

³⁹ Kings College London, 2015, Understanding the Health Impacts of Air Pollution in London. Accessed online 11.05.2020 [url: https://www.london.gov.uk/sites/default/files/hiainlondon_kingsreport_14072015_final.pdf]

above, as the source has not been updated since 2012, however the figures provide a good visual for air quality within the LBC, and identify that the concentrations of key pollutants are highest along the main artery roads in the borough⁴⁰.

Figure 7. Annual Mean Concentration of NO₂ in the LBC in 2020 (Source: GLA, 2020)

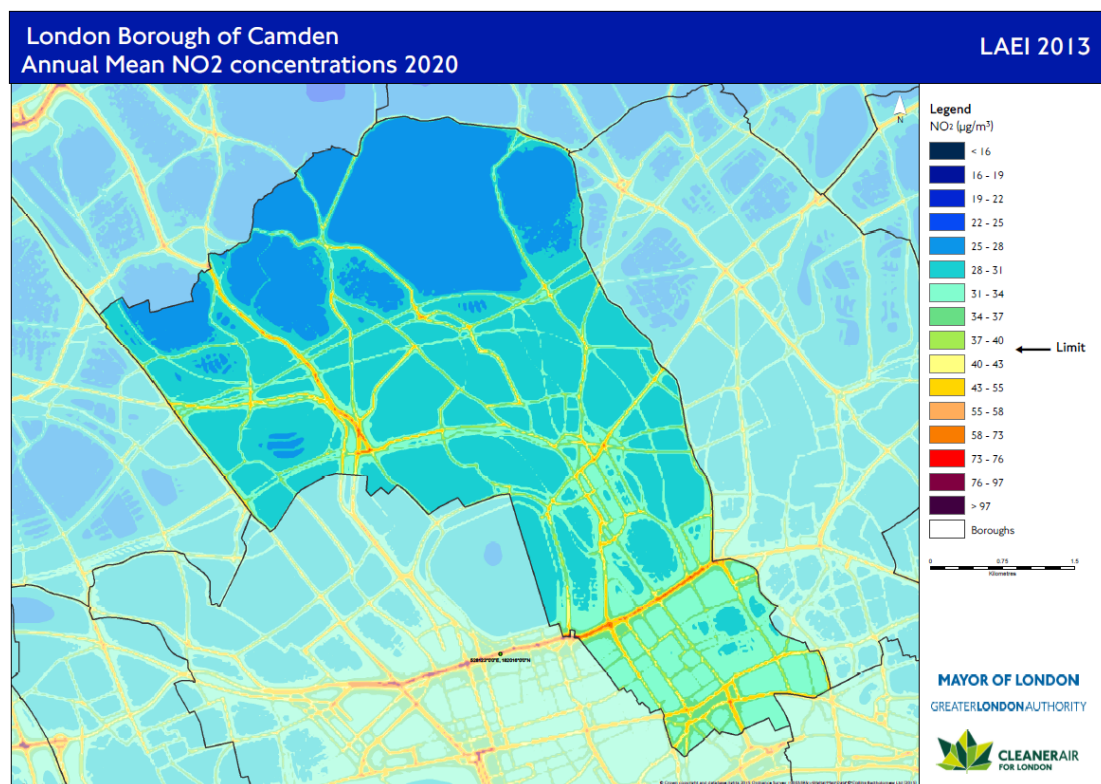
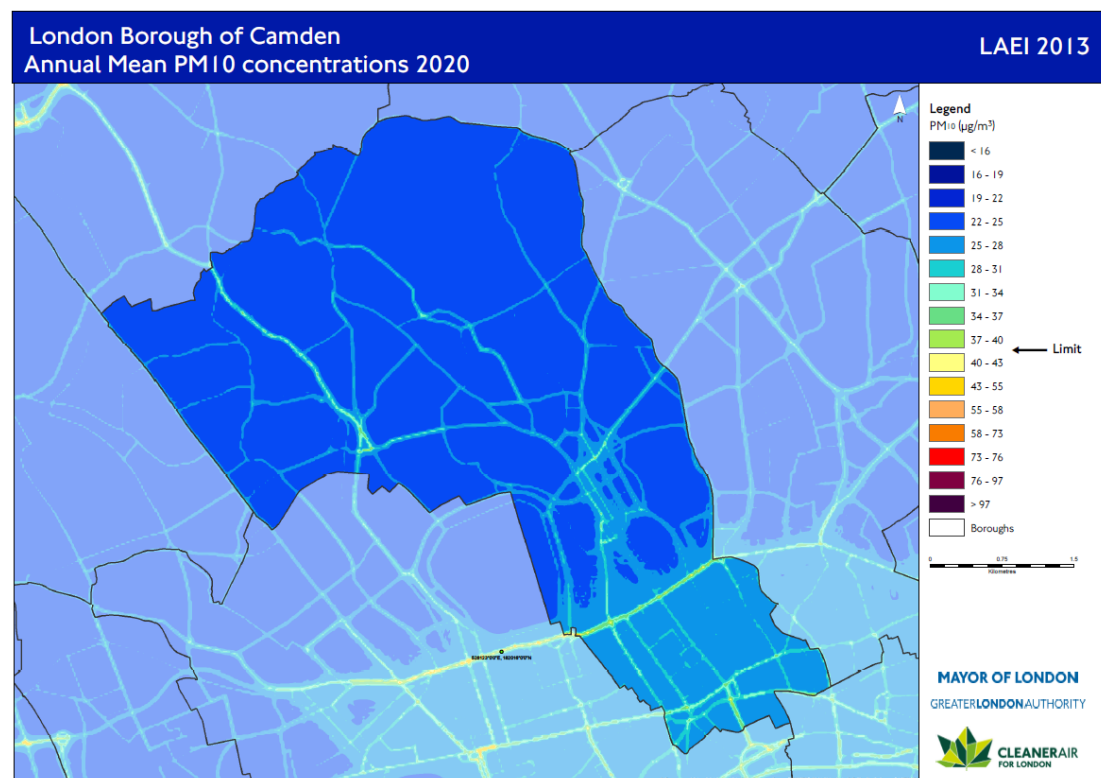


Figure 8. Annual Mean Concentration of PM₁₀ in the LBC in 2020 (Source: GLA, 2020)



⁴⁰ Greater London Authority, (2012); Air Quality in Camden: A Guide for Public Health Professionals

69. A vibration and noise baseline survey and assessment has been undertaken and is submitted in support of the planning application for the Proposed Development.
70. Existing background noise levels and noise levels incident upon the site of the Proposed Development have been measured at representative locations and analysed. The survey consisted of both attended and unattended measurements completed between 11 September 2019 and 18 September 2019. The dominant noise sources were identified as traffic noise from Euston Road, with other noise sources being from passing pedestrians.
71. The minimum measured background sound levels (noise level exceeded for 90% of the measurement period T, referred to as the 'background' noise level) were:
 - $L_{A90,15min}$ 56 dB during the day, and $L_{A90,15min}$ 53 dB during the night along Belgrove/Crestfield Street; and
 - $L_{A90,15min}$ 50 dB during the day, and $L_{A90,15min}$ 48 dB during the night along South of St Chad's Street.
72. Based on the requirements of the LBC, the normally operating plant noise limits at the worst affected existing noise sensitive premises are:
 - L_{Aeq} 49 dB during the day, and L_{Aeq} 46 dB during the night along Belgrove/Crestfield Street.
 - L_{Aeq} 43 dB during the day, and L_{Aeq} 41 dB during the night along South of St Chad's Street.
73. Based on the requirements of the LBC, the emergency plant noise limits at the worst affected existing noise sensitive premises are:
 - L_{Aeq} 66 dB during the day, and L_{Aeq} 63 dB during the night along Belgrove/Crestfield Street.
 - L_{Aeq} 60 dB during the day, and L_{Aeq} 58 dB during the night along South of St Chad's Street.
74. Due to the close proximity of the London Underground Lines to the site, vibration measurements were undertaken at one location at the north-west corner of the site. The survey was carried out to determine the specific vibration levels associated with the Circle, Victoria, Piccadilly and Northern Lines.
75. Levels experienced may vary depending on the type of train and position of the future buildings. The measured vibration levels were significantly below the LBC criteria and a significant increase in the number of trains would be required for the criteria to be exceeded. Based on this, tactile vibration due to trains is unlikely to be problematic for the Proposed Development.

Health Determinant 5: Accessibility and Active Travel

The NHS HUDU Planning for Health (2019) states that “Convenient access to a range of services and facilities minimises the need to travel and provides greater opportunities for social interaction. Buildings and spaces that are easily accessible and safe also encourage all groups, including older people and people with a disability, to use them. Discouraging car use and providing opportunities for walking and cycling can increase physical activity and help prevent chronic diseases, reduce risk of premature death and improve mental health.”

76. The site is bound to the north by Euston Road, to the east by Crestfield Street, to the south by St Chad's Street, and to the west by Belgrove Street.
77. The site has a TfL Public Transport Accessibility Level (PTAL) of 6b with excellent transport links such as underground services, buses and overground services. The closest tube station to the site is King's Cross St Pancras which provides Northern, Piccadilly, Victoria, Metropolitan, Hammersmith & City and Circle Line underground services. An entrance to the station is located within the site boundary along Euston Road. The entrance connects the site to the main ticket hall via a tunnel under Euston Road.
78. Additionally, the main entrances to both Kings Cross Station and St Pancras International are located within 90m of the site. Kings Cross Station offers regular national rail services, whilst St Pancras International offers both regular national and international rail services..
79. There are several bus stops located near the site providing services across London. The closest bus stop being King's Cross St Pancras (Stop D) and Kings Cross St Pancras (Stop E) which provide regular services to locations such as Honor Oak, the City of London, Bow, Hackney Wick and Stoke Newington.
80. Existing pedestrian and cycle facilities and routes are provided in the local area in all directions. The site is located approximately 195m to the north-east of Cycleway 6 which runs from Kentish Town to Elephant & Castle.

Health Determinant 6: Crime Reduction and Community Safety

The NHS HUDU Planning for Health (2019) states that “Thoughtful planning and urban design that promotes natural surveillance and social interaction can help to reduce crime and the ‘fear of crime’, both of which impacts on the mental wellbeing of residents. As well as the immediate physical and psychological impact of being a victim of crime, people can also suffer indirect long-term health consequences including disability, victimisation and isolation because of fear. Community engagement in development proposals can lessen fears and concerns.”

81. Recorded crime peaked in Camden in 2002-03 with over 53,000 offences, but fell to 28,400 by 2014-15. In the financial year 2018-19 a total of 36,541 offences were recorded, this has increased by approximately 8% to 39,455 for the 2019-20 financial year⁴¹. By type, recorded offences were for: Theft (17,035; 43%); Violence Against the Person (6,761; 17%); Vehicle Offences (3,653; 9%); Burglary (3,245; 8%); Public Order Offences (2,071; 5%), Drugs (1,981; 5%); Robbery (1,964; 5%); Arson and Criminal Damage (1,609; 4%); Sexual Offences (671; 2%); Possession of Weapons (226, >1%); and all other offences (239; >1%).
82. King’s Cross Ward has an above average rate of violent crime for London and is consistent with the crime rate for the LBC. King’s Cross is listed as having the fifth highest crime rates in Camden with the most common offences being ‘violence against the person’ and ‘drug offences’. The closest metropolitan police station to the site is Islington Police Station located approximately 980m north-east of the site.
83. In 2018/19 the street population services in Camden engaged with 815 rough sleepers, up from 784 the previous year – the second highest number of rough sleepers across London Boroughs⁴². The proximity of main transport hubs such as Kings Cross, is a key factor in attracting new rough sleepers to Camden who continue to arrive in the Borough from parts of the UK and other countries. Therefore, there is a potential for high number of rough sleepers in the area.
84. The LBC have a ‘Community Safety’ section on their website, which provides links to community safety websites, relevant community safety contacts and a link to Camden’s Community Safety Partnership.
85. The Community Safety Partnership manages crime and public safety issues. It makes sure agencies work together with communities to tackle crime and increase community safety which are important concerns for residents and businesses. The priority is to tackle domestic violence, sexual violence, exploitation, youth violence, the impact of the night time economy on communities, antisocial behaviour, hate crime, preventing extremism and building community cohesion. The Community Safety Partnership is facilitated by the Community Safety Service who co-ordinate work on community safety in Camden. The Partnership includes people from Camden Council, Camden Police, NHS Camden, NHS Islington, London Probation Service, Camden Victim Support as well as other statutory and voluntary agencies.
86. The nearest fire station to the site is Euston Fire Station located approximately 550m to the south-west of the site.

⁴¹ Metropolitan Police Service (2020) Financial Year 2019/20 Crime Statistics [Accessed 08.06.20 URL: <https://www.met.police.uk/sd/stats-and-data/met/year-end-crime-statistics-19-20/>]

⁴² London Borough of Camden (2019) Homelessness and Rough Sleeping Strategy 2019-2024 [URL: <https://www.camden.gov.uk/documents/20142/1730554/Homelessness+and+Rough+Sleeping+Strategy+Final+Web.pdf/c0f422db-a424-be66-d1ec-b27bc5f336d0?t=1581508445598>]

Health Determinant 7: Access to Healthy Food

As detailed in the NHS HUDU Planning for Health (2019), “Access to healthy and nutritious food can improve diet and prevent chronic diseases related to obesity. People on low incomes, including young families, older people are the least able to eat well because of lack of access to nutritious food. They are more likely to have access to food that is high in salt, oil, energy-dense fat and sugar. Opportunities to grow and purchase local healthy food and limiting concentrations of hot food takeaways can change eating behaviour and improve physical and mental health.”

87. There are many local shops and supermarkets located within proximity of the site. A number of convenience stores such as Marks & Spencer and Waitrose are located within King's Cross and St Pancras International stations. Additionally, there are a number of convenience stores within the surrounding area including a Sainsbury's Local located approximately 210m to the north-east of the site.. These stores sell a wide range of fresh and frozen food, and have fast food choices, which include healthy ranges such as salads and sandwiches.
88. There are a number of hot food takeaway chains within close proximity to the site, including 'Burger King' located approximately 35m south-west of the site; additionally there are a number of hot food takeaway chains located within Kings Cross and St Pancras Station. There is currently a 'McDonalds' located within the site boundary fronting Euston Road.
89. There are a number of restaurants, including 'La Regina' located approximately 20m east, 'The Megaro Eatery' located approximately 20m west and 'Nandos' located approximately 120m north of the site.
90. There are pubs and bars within proximity to the site including but not limited to McGlynn's Free House, The Betjeman Arms and The Dolphin.

Health Determinant 8: Access to Work and Training

The NHS HUDU Planning for Health (2019) states that *“Employment and income is a key determinant of health and wellbeing. Unemployment generally leads to poverty, illness and a reduction in personal and social esteem. Works aids recovery from physical and mental illnesses.”*

91. Nearly three-quarters of the LBC’s residents are working age. On average, it is a relatively young, highly qualified, and diverse population. However, stark inequalities remain with people and families on low and middle incomes affected by high house prices and rental costs.
92. The Annual Population Survey for the year to December 2019 (latest) estimates that 51% of the working-age population of Camden were qualified to NVQ level 4 or above, below the average for London (60%) or Great Britain (44%).
93. Nearly half of the working age population in LBC are qualified to degree level or above; over 60% are employed, three-quarters in professional roles.
94. The median gross pay of people working in Camden is the 7th highest in London and 8th in the UK: median gross annual pay for full-time employees working in Camden was £39,149 in 2018, compared with £38,154 for London. Average pay increased in Camden in 2016-2017 by 2.6%, on a par with that for London⁴³.
95. The overall employment rate in Camden is relatively low and the economic inactivity rate relatively high in comparison with London; and England and Wales (this is supported by findings from the 2011 Census which confirms Camden’s employment rate is lower than London or England and Wales, amongst the lowest in London, but consistent with Central London boroughs). Although, students living in the borough account for much of this, but some Camden residents still face significant barriers to accessing employment.
96. Fewer Camden residents are in work as a proportion of the working age population nationally. The Annual Population Survey estimated the Camden employment rate at 72.6% in 2018 Q4, 6.6 percentage points higher than the same quarter last year, but 1.8 percentage points lower compared to Central London comparators⁴⁴.
97. There has been a 20% growth in Camden residents in employment between 2001 to 2011, from 91,900 to 110,200 and a 10% growth in the number of people being employed in Camden from 227,700 to 250,000.
98. Work experience opportunities are provided by the LBC for those aged between 14 and 19 years, as well as work related and learning opportunities, which are managed by the LBC and are advertised on their website.

⁴³ ONS Annual Survey of Hours and Earnings, 2018.

⁴⁴ ONS Annual Population Survey, 2018 Q4 (Camden accuracy +/- 4.2%).

Health Determinant 9: Social Cohesion and Lifetime Neighbourhoods

The NHS HUDU Planning for Health (2019), states that, “*Friendship and supportive networks in a community can help to reduce depression and levels of chronic illness as well as speed recovery after illness and improve wellbeing. Fragmentation of social structures can lead to communities demarcated by socio-economic status, age and/or ethnicity, which can lead to isolation, insecurity and a lack of cohesion. Voluntary and community groups, properly supported, can help to build up networks for people who are isolated and disconnected, and to provide meaningful interaction to improve mental wellbeing. Planning proposals should be developed in consultation with differentiated community groups (such as children, young people, residents, families, businesses, faith groups, community organisations). They should be involved in the planning of the project from the beginning and throughout the life cycle of the project. Opportunities for post-planning qualitative consultations should be considered with these different groups to explore a range of social, emotional and health needs.*”

99. There are a number of community groups available to local residents. The groups range in targeted age and interest, from youth clubs, to community garden networks and community groups aimed at keeping the local people of Camden safe. The wide range of local groups available provides the foundations for a strong, diverse and cohesive community network.
100. In addition to these community groups, there are a number of religious groups located within the LBC. The 2011 census identified that the three largest religions / beliefs in the LBC were No Religion (37%) Christian (34%) and Muslim (16.4%). Other religions present include Jewish and Hindu, though in lower numbers.
101. Of the 203 Local Authorities within the UK, the LBC ranked 31st for the lowest overall wellbeing inequality. This indicates that the distribution of wellbeing is relatively equal throughout the local area⁴⁵. According to the Subjective Personal Well-Being (Happiness) surveys⁴⁶, the LBC has a ‘Life Satisfaction’ score (of 7.48) similar to that of the UK, which had a score of 7.71 out of 10, and a happiness score of 7.38 (compared with 7.56 for the UK). The LBC also has a ‘worthwhile’⁴⁷ score of 7.63 which is lower than the 7.89 for the UK, and an anxiety score of 3.3, which is higher than the 2.87 of the wider UK.
102. Particular groups of people are at greater risk of loneliness and isolation, including older people, people living alone, those with disabilities and poor health, minority groups and carers. The Camden JSNA has identified that within the LBC, older people with lower incomes, living alone are at greater risk of loneliness and isolation.
103. The LBC has 42% of older people (over 65) living alone, higher than the London average of 34% and England average of 31%⁴⁸. Additionally, 12% of the population within the LBC are people aged over 65 years, and the number of older people living alone is expected to increase. It is expected that the risk of isolation and loneliness is expected to increase within the LBC as a whole, the risk surrounding the site is considered to range from low to very high, as shown on Figure 9 below.
104. The LBC has many community clubs for older people to encourage social meeting. These clubs run activities and classes for any Camden residents over 50 such as beginners computer club, easy yoga, tai chi, knitting and sewing clubs.

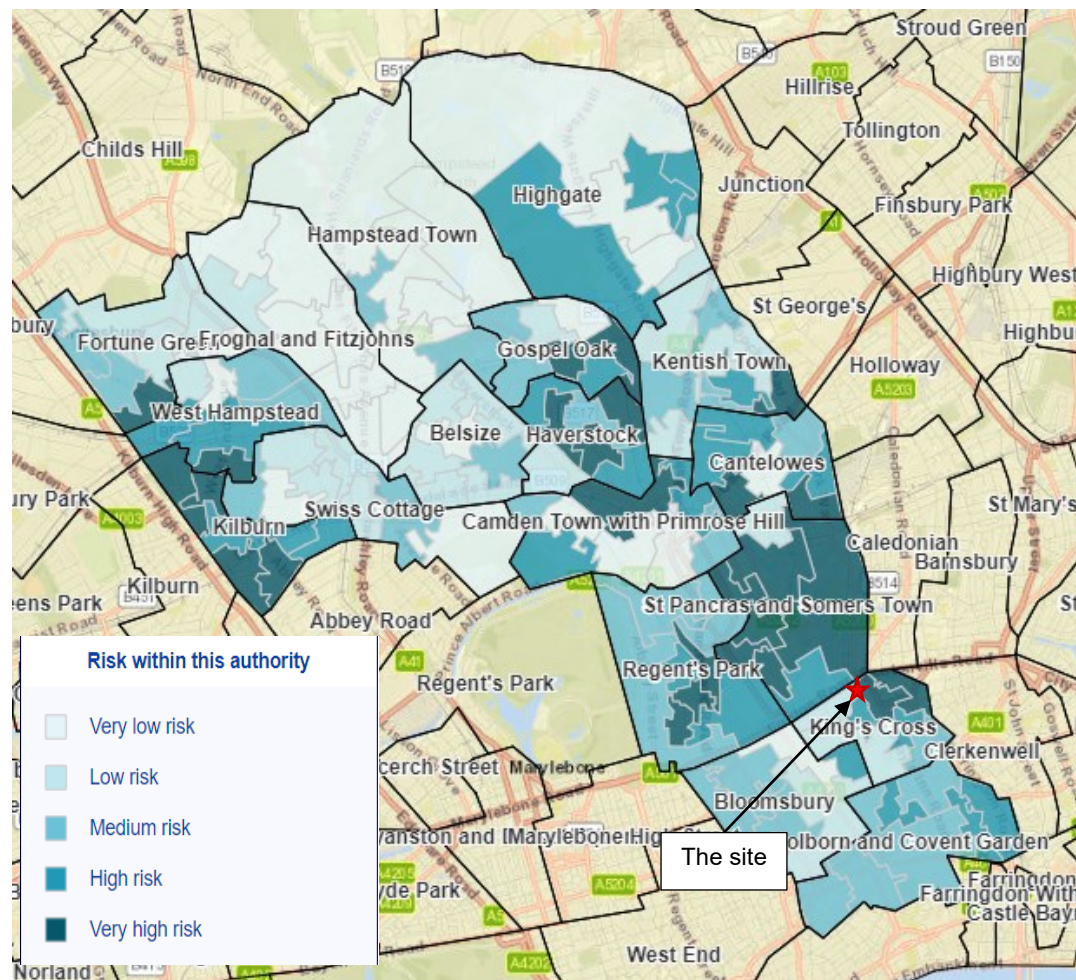
⁴⁵ What Works Wellbeing, 2017, Measuring wellbeing inequality in Britain. Accessed online 07.06.2020 [url: <https://whatworkswellbeing.org/product/measuring-wellbeing-inequality-in-britain/>]

⁴⁶ London Datastore, (2020); Subjective Personal Well-Being (Happiness), Borough. London Borough Profiles 2011-2014 (Excel Spreadsheet). Accessed Online 07.06.2020 [URL: <https://data.london.gov.uk/dataset/subjective-personal-well-being-borough>]

⁴⁷ The ‘worthwhile’ score measures to what extent the participants feel that the things they do in their life are worthwhile.

⁴⁸ London Borough of Camden (2017) Accessed online 07.06.20 [URL: <https://opendata.camden.gov.uk/download/8ct9-9i4k/application/pdf>]

Figure 9. Risk of Loneliness for Persons Aged 65 Years and Older⁴⁹



⁴⁹ Age UK (2016) Age 65+ Risk of Loneliness [Accessed 07.06.20 URL: <http://data.ageuk.org.uk/loneliness-maps/england-2016/camden/>]

Health Determinant 10: Minimising the Use of Resources

The NHS HUDU Planning for Health (2019) states that, *“Reducing or minimising waste including disposal, processes for construction as well as encouraging recycling at all levels can improve human health directly and indirectly by minimising environmental impact, such as air pollution.”*

105. The LBC is one of seven boroughs in the North London Waste Plan⁵⁰, along with the London Boroughs of Barnet, Enfield, Hackney, Haringey, Islington and Waltham Forest. Together the seven boroughs have developed the North London Waste Plan (DPD), which sets out the waste management targets for the individual boroughs and allocates sites suitable for waste handling and management across all of the seven boroughs.
106. At 31.1% in 2018/19, the LBC ranked 20th for recycling rate from households of all 32 of the London boroughs. The average recycling rate across the London boroughs was 34.1%, with Bexley recording the highest recycling rates of 54.1%. The average recycling rate for London was lower than the average rate for England, which was 43.5%⁵¹.
107. Through the London Environment Strategy, the Mayor is seeking to make London a zero waste city with no biodegradable or recyclable waste sent to landfill by 2030 and by aiming to achieve 65% recycling from London’s municipal waste, this will be achieved through a 50% recycling rate from LACW by 2025 (Policy 7.2.1) and 75% from business waste by 2030 (policy 7.2.2).
108. The LBC are working to improve their recycling rates, the Camden Local Plan includes Policy CC5 ‘Waste’ which is to *“aim to reduce the amount of waste produced in the borough and increase recycling and the reuse of materials to meet the London Plan targets of 50% of household waste recycled/composted by 2020 and aspiring to achieve 60% by 2031”* and *“make sure that developments include facilities for the storage and collection of waste and recycling..”*.

⁵⁰ North London Waste Plan (2015); Joint Waste Plan for the London Boroughs of Camden, Barnet, Enfield, Hackney, Haringey, Islington and Waltham Forest

⁵¹ DEFRA (2020); Household Waste Recycling Rates, Borough [Accessed online 07/06/20 URL: <https://data.london.gov.uk/dataset/household-waste-recycling-rates-borough>]

Health Determinant 11: Climate Change

The NHS HUDA Planning for Health (2019) states that *“Planning is at the forefront of both trying to reduce carbon emissions and to adapt urban environments to cope with higher temperatures, more uncertain rainfall, and more extreme weather events and their impacts such as flooding. Poorly designed homes can lead to fuel poverty in winter and overheating in summer contributing to excess winter and summer deaths. Developments that take advantage of sunlight, tree planting and accessible green/brown roofs also have the potential to contribute towards the mental wellbeing of residents.”*

109. UKCP18⁵² gives ‘probabilistic projections’⁵³ for a number of atmospheric variables. UKCP18 projections consider the local climate effects arising from four different emissions scenarios. Probabilistic projections give a range of possible climate change outcomes and their relative likelihoods i.e. unlikely, likely or very likely ranging across 10th to 90th percentiles. The RCP8.5 emissions scenario has been used (with the 50th percentile data), as it represents the most reasonable emissions scenario with regards to climate policy, land use and technological development.
110. Future UKCP18 climate change projection data for the 2080s (covering the years 2070 – 2099) has been reviewed in relation to the London area, this is in order to determine the likely climatic conditions in the areas surrounding the Proposed Development in the future. Note that the 2080s (which cover the years 2070 – 2099) have been reviewed, as the indicative lifespan of building structures is 50 years⁵⁴, and therefore the 2080s (covering the years 2070 – 2099) have been identified as the most likely ‘end-years’ of new development, and therefore present a worst-case scenario when considering impacts on new development from climate change.
111. A review of the key climatic variables within the UKCP18 projections (for the London area) has identified that:
- By the 2080s, the mean average air temperature is projected to increase by +2.94 °C annually, to 13.39 °C. The mean daily maximum temperature is projected to increase by +3.1°C, and the mean daily minimum temperature is projected to increase by +2.89°C;
 - Annual average precipitation is due to decrease by 0.53%, with a +16.23% increase in the winter average precipitation, and a -26.31% decrease in the summer average precipitation. The autumn and spring averages have small decreases of between 5.1 and 5.25%;
 - Wind annual average wind speed (measured in meters per second (m s⁻¹)) is projected to marginally decrease in speed in the 2080s, by -0.065m s⁻¹; and
 - Total cloud cover is projected to decrease annually by 6.22%, this decrease in total percentage cloud cover is most prevalent in the summer average, where the summer average is due to decrease in the 2080s by 15.21%. There is projected to be a marginal increase (of 0.93%) in the average winter cloud cover.

⁵² UK Climate Projections (UKCP18). Accessed Online 07.06.2020 [URL: <http://ukclimateprojections.metoffice.gov.uk/>]

⁵³ Probabilistic projections give a range of possible climate change outcomes and their relative likelihoods i.e. unlikely, likely or very likely ranging across 10th to 90th percentiles.

⁵⁴ British Standard BS EN 1990:2002, (2002); Eurocode – Basis of Structural Design

HEALTH IMPACT ASSESSMENT

Table 1 Health Impact Assessment

	Assessment Criteria	Relevant?	Details/Evidence	Potential Health Impact?	Recommended Mitigation or Enhancement Measures
1. Housing Quality and Design					
1.1	Does the proposal seek to meet all 16 design criteria of the Lifetime Homes Standard or meet Building Regulation requirement M4 (2)?	No	<p>The Lifetime Homes Standard and Building Regulation requirement M4 (2) relate to residential development only. The Proposed Development does not provide for any residential uses, focusing instead on the provision of office, research and laboratory floorspace incorporating café and flexible retail and office floorspace and an auditorium. As such, the Proposed Development has been designed in accordance with relevant guidance appropriate for these uses.</p> <p>Whilst the Proposed Development does not provide any residential uses, the Proposed Development is part of a wider proposal which includes the provision of affordable housing off-site at Acorn House. A separate HIA has been produced for the proposals at Acorn House and has been submitted in support of the corresponding planning application. Refer to the Acorn House HIA for detail of the assessment of the health impact associated with housing quality and design for the overall project.</p>	=	N/A
1.2	Does the proposal address the housing needs of older people, i.e. extra care housing, sheltered housing, lifetime homes and wheelchair accessible homes?	No	<p>The Proposed Development does not provide any residential uses, and as such does not need to address housing needs of older people.</p> <p>Refer to the Acorn House HIA for detail of the assessment of the health impact associated with housing quality and design for the overall project.</p>	N/A	N/A
1.3	Does the proposal include homes that can be adapted to support independent living for older and disabled people?	No	<p>The Proposed Development does not provide any residential uses, and as such does not need to provide homes which are adaptable for older and/or disabled people.</p> <p>Refer to the Acorn House HIA for detail of the assessment of the health impact associated with housing quality and design for the overall project.</p>	N/A	N/A
1.4	Does the proposal promote good design through layout and orientation, meeting internal space standards?	Yes	<p>The Proposed Development does not provide any residential uses, and as such does not need to meet the internal space standard for residential units.</p> <p>The Proposed Development has been developed with layout and orientation in mind, and has been designed to for the intended uses, for example:</p> <ul style="list-style-type: none"> The proposed building has been designed with two separate cores located to the east and west façade which maximises the internal space by enabling an open plan layout across the building footprint. This will enable life-sciences research laboratories to be located on the largest floorplates at floors 1-3; 	+ve	N/A

	Assessment Criteria	Relevant?	Details/Evidence	Potential Health Impact?	Recommended Mitigation or Enhancement Measures
			<ul style="list-style-type: none"> The cores both have ground level access and includes lifts to the upper and lower floors; and The open plan layout and offices height ensures that the development is multi-aspect, maximising the number of daylight hours received. 		
1.5	Does the proposal include a range of housing types and sizes, including affordable housing responding to local housing needs?	No	<p>The Proposed Development does not provide any residential uses, and as such does not need to provide a range of housing types and sizes.</p> <p>Refer to the Acorn House HIA for detail of the assessment of the health impact associated with housing quality and design for the overall project.</p>	N/A	N/A
1.6	Does the proposal contain homes that are highly energy efficient (e.g. a high SAP rating)?	Yes	<p>The Proposed Development does not provide any residential uses, and therefore there are no 'homes' that need to be highly energy efficient. However, the Proposed Development has been designed in consideration of renewable energy use, which is reflected in the Energy Strategy.</p> <p>It has been estimated a 43% carbon saving over Part L 2013 (using SAP 10 carbon figures) will be achieved for the full site-wide development⁵⁵. A cash in lieu contribution of £570,000 is proposed to be made to the LBC's carbon abatement fund, in order to offset the remaining 57% of the carbon dioxide emissions associated with its regulatory energy use.</p> <p>The Proposed Development aims to minimise CO2 emissions to the atmosphere arising from the operation of, and within, the building.</p> <p>To minimise CO2 emissions, the energy strategy devised for the Proposed Development follows the three step energy hierarchy outlined in both the adopted and the draft London Plan. In order of priority, these steps are:</p> <ul style="list-style-type: none"> Be lean, i.e. adopt energy efficient design construction; then Be clean, i.e. use low-carbon energy supply; then Be green, i.e. use on-site renewable energy generation and storage. <p>The reduction in carbon emissions achieved through demand reduction measures (i.e. GLA 'Be lean'-stage) will be 23%. This meets and exceeds the 15% reduction target proposed in the emerging GLA policies.</p> <p>Refer to the Acorn House HIA for detail of the assessment of the health impact associated with housing quality and design for the overall project.</p>	+ve	N/A
2. Access to Healthcare Services and Other Social Infrastructure					

⁵⁵ Energy and Sustainability Statement, Atelier 10 (2020); prepared in support of the planning application.

	Assessment Criteria	Relevant?	Details/Evidence	Potential Health Impact?	Recommended Mitigation or Enhancement Measures
2.1	Does the proposal retain or re-provide existing social infrastructure?	Yes	<p>The existing building on-site is predominately in use as a storage facility (use class B8), in addition to providing three retail (use class A1) and hot food takeaway (use class A5) unit fronting Euston Road. There is therefore no social infrastructure (i.e. health space, education, community, play space etc.) currently on the site.</p> <p>The Proposed Development does not introduce any new residential units and therefore there will be no increase in population as a result of the Proposed Development, or associated demands on social infrastructure (i.e. health and social care, education and community facilities).</p> <p>The Proposed Development does not include any social infrastructure. However, it does include the provision of café and re-provision of the hot food take away use on the ground and lower ground floors, providing and re-providing these amenities for local residents. A publicly-accessible entrance into a café and lobby is proposed from Argyle Square, animating the square and giving access into a publicly-accessible lower-ground floor auditorium.</p> <p>Additionally, there is an existing entrance to Kings Cross St Pancras Tube Station. There is currently no step-free access to the underground and rail network on this side of Euston Road and the proposals include a new step-free underground entrance within the footprint of the Proposed Development. The improvement to the tube entrance will maintain and improve the site and surrounding areas connectivity to off-site social infrastructure.</p>	=	N/A
2.2	Does the proposal assess the impact on health and social care services and has local NHS organisations been contacted regarding existing and planned healthcare capacity?	Yes	<p>This HIA has been undertaken to help define and address any 'healthcare' issues in a systematic way. This includes the impact of the Proposed Development on healthcare services from the workers during the demolition/construction of the Proposed Development, and from the retail, event space, laboratory and office workers during the operation of the Proposed Development. The methodology, baseline health context and health impact assessment are presented in this report.</p> <p>Typically, in term of healthcare services, consideration is given to the availability of GPs to serve an incoming resident population. As previously discussed, the Proposed Development does not provide any residential uses, and therefore will not generate a residential population on site.</p> <p>With regards to social care, as the Proposed Development does not provide any residential uses there will be no additional demand on social care services.</p> <p>Regarding the impact on A&E services, 1.71%⁵⁶ of workers across all industries are injured at work per annum. Based on this, it is estimated that there will be approximately 18 additional workplace accidents per year during the demolition/construction phase and 14 additional workplace accidents per year once the Proposed Development is complete and operational. This is considered to result in a very small increase in annual A&E visits to the London Commissioning Region Healthcare NHS Trust. As discussed within the baseline review section of this report, the London Commissioning Region Healthcare NHS Trust had a total of 423,934 attendees to A&E in January 2020.</p>	=	<p>It is recommended that security operatives at the site should have complementary training in First Aid which should be helpful in addressing minor healthy issues at work and preventing them from needing to access external outside medical attention.</p> <p>When the construction contract is let, the contractor(s) will confirm in detail their methods of site safety and ways to minimise risk of injury to construction staff. It is expected that a</p>

⁵⁶ HSE (2019) Health and Safety at Work, Summary Statistics for Great Britain 2019 [URL: <https://www.hse.gov.uk/statistics/overall/hssh1819.pdf>]

	Assessment Criteria	Relevant?	Details/Evidence	Potential Health Impact?	Recommended Mitigation or Enhancement Measures
			<p>The Proposed Development does not provide new health facilities as part of the Proposed Development.</p> <p>Considering that the Proposed Development will not provide any residential uses and local, regional and national NHS policy accounts for growing demand on its services and aims to target investment into underserved services, the Proposed Development is not likely to impact the local healthcare provision. Therefore, consultation with local NHS organisations has not been undertaken. Engagement with health organisations may be undertaken during discussions on securing planning obligations including financial contributions such as Section 106 and Community Infrastructure Levy (CIL).</p>		experienced contractor would have robust procedures which ensure the safety of their construction workers to the best of their professional ability. The construction phase of the Proposed Development will comply with the Health and Safety at Work Act 1974.
2.3	Does the proposal include the provision, or replacement of a healthcare facility and does the facility meet NHS requirements?	No	There is no existing healthcare provision on the site, and therefore no facility to retain or re-provide as part of the Proposed Development. The Proposed Development does not provide a dedicated healthcare facility.	N/A	N/A
2.4	Does the proposal assess the capacity, location and accessibility of other social infrastructure, e.g. primary, secondary and post 19 education needs and community facilities?	No	<p>The Proposed Development does not introduce any new residential units and therefore there will be no increase in population as a result of the Proposed Development, or associated demands on social infrastructure (i.e. education and/or community facilities).</p> <p>As such, the Proposed Development is not expected to affect other existing social infrastructure near the site, including those associated with educational and community facilities.</p>	N/A	N/A
2.5	Does the proposal explore opportunities for shared community use and co-location of services?	Yes	<p>The Proposed Development does not include provision for specific community uses or the co-location of services.</p> <p>It is noted that the Proposed Development includes communal areas, such as the ground floor lobby, which is conducive to communal gatherings and encourages interaction amongst users. From Argyle Square a publicly-accessible entrance into a café and event, meeting and education space is proposed, animating the square and giving access into a publicly-accessible lower-ground floor auditorium. Additionally, the landscaping strategy provides usable publicly accessible areas, at ground level outside the entrance to the Proposed Development.</p>	=	N/A
3. Access to Open Space and Nature					
3.1	Does the proposal retain and enhance existing open and natural spaces?	Yes	<p>The existing site does not provide any open or natural space. It is noted that the pavements along Euston Road, Crestfield Street, Belgrove street and Argyle Square are adjacent to the red line boundary of the site, but these currently just provide pedestrians routes adjacent to the site.</p> <p>Whilst the Proposed Development does not introduce any dedicated ground floor open or natural spaces, the proposal will enhance the existing streetscape. The Proposed</p>	+ve	N/A

	Assessment Criteria	Relevant?	Details/Evidence	Potential Health Impact?	Recommended Mitigation or Enhancement Measures
			<p>Development will also provide a private landscaped terrace for users of the Proposed Development.</p> <p>Furthermore, the Proposed Development will provide 'green streets' along Belgrove and Crestfield Streets, and the full pedestrianisation of St Chad's Street to the south of site connecting the site seamlessly to Argyle Square, an existing area of open space to the south of the site. Informal seating areas will be located along St Chad's Street.</p>		
3.2	In areas of deficiency, does the proposal provide new open or natural space, or improve access to existing spaces?	Yes	<p>The LBC define areas deficient in public open space as those which are more than 280m walking distance away from a public open space within a multi-functional role, that is a space over 0.25 hectares. The site is not located within an area deficient in public open space as defined by the LBC Local Plan.</p> <p>An upgraded entrance to the Underground is proposed introducing step-free access, linking the building into King's Cross/ St. Pancras via a new connection at lower-ground floor to the pedestrian tunnel beneath Euston Road improving the connection to Kings Cross Square.</p> <p>The Proposed Development will introduce private terrace amenity space, which will be beneficial for the health and wellbeing of users of the building.</p> <p>As detailed above, access to the terrace amenity space provided will be for users of the building, whilst the 'green streets' along the pavements will be accessible to the general public (noting that this falls outside of the red line boundary of the site). The pavements will be enhanced through the planting and landscaping proposals which aim to create accessible, open spaces for people to enjoy.</p> <p>As well as horizontal landscaping, vertical landscaping will also form part of the landscaping strategy. The landscaping proposals aim to increase biodiversity and create new habitats through planting and the provision of green and brown roofs.</p> <p>As part of the Proposed Development St Chad's Street is proposed to be pedestrianised with a two-way cycle lane. This will improve the connection between the site and Argyle Square, an existing area of open space.</p>	+ve	N/A
3.3	Does the proposal provide a range of play spaces for children and young people?	Yes	As the Proposed Development does not provide any residential uses, there will be no additional demand for play space for children and young people. The Proposed Development does not provide play space for children and young people.	-ve	N/A
3.4	Does the proposal provide links between open and natural spaces and the public realm?	Yes	<p>The Proposed Development improves the connection between the site and the existing Argyle Square Gardens (an open and natural space) to the south of the site by proposing St Chad's Street as a pedestrian environment with a two-way cycle lane.</p> <p>Additionally, an entrance is proposed along St Chad's Street which will connect the café and event, meeting and education space at Belgrove House to the wider setting, including Argyle Square.</p> <p>An upgraded entrance to the Underground is proposed introducing step-free access linking the building into King's Cross/ St. Pancras via a new connection at lower-ground floor to the pedestrian tunnel beneath Euston Road improving the connection to Kings Cross Square.</p>	+ve	N/A

	Assessment Criteria	Relevant?	Details/Evidence	Potential Health Impact?	Recommended Mitigation or Enhancement Measures
3.5	Are the open and natural spaces welcoming and safe and accessible for all?	Yes	<p>The Design and Access Statement and the Design Principles outlines how the scheme has been progressed with consideration of the principles of inclusive design including visitors, staff and the wider community in mind.</p> <p>The Proposed Development will not result in any loss of open and natural spaces. However, the Proposed Development will provide terraces for users of the building. The 'green streets' will be accessible to all. Users with disabilities are not segregated and are able to move freely through the 'green streets'.</p> <p>In order to ensure the site is physically accessible for all, the Proposed Development will meet all relevant building regulations. The design of the Proposed Development has taken regard of the Camden Planning Guidance on Access for All which supports the policies within the Camden Local Plan and forms a Supplementary Planning Document.</p>	+ve	N/A
3.6	Does the proposal set out how new open space will be managed and maintained?	Yes	<p>The Design and Access Statement indicates that the public realm area will be maintained and landscaped.</p> <p>The Proposed Development has been designed with management and maintenance in mind, in order to discourage crime. Including landscaping which does not impede natural surveillance, external lighting in key locations such as entrances, at terrace level and within the pedestrianised St Chads Street.</p>	+ve	N/A
4. Air Quality, Noise and Neighbourhood Amenity					
4.1	Does the proposal minimise construction impacts such as dust, noise, vibration and odours?	Yes	<p>During demolition/construction works associated with the Proposed Development, standard management controls will be in place to minimise construction impacts from dust, noise, vibration and odours. These standard measures have been included within the Construction Management Plan (CMP), which has been prepared and will be submitted in support of the planning application. Measures include, but are not limited to:</p> <ul style="list-style-type: none"> In order to mitigate construction noise, vibration, odour and dust the works will employ the 'Best Practicable Means'. Including application of methods recommended in BS 5228: Noise Control on Construction and Open sites, for example, undertaking works to ensure minimum disturbance, using mucker attachments to excavators in lieu of pneumatic breaker and utilising separation cut lines to minimise vibration transfer where applicable; Construction processes will be monitored using air quality monitors to record particulates and the results compared to London wide monitoring stations. A site action level measured over 15 minutes will be agreed through consultation with LBC Environmental Team, once set appropriate mitigating action would be taken if this level is approached.; The contractor will develop a Code of Construction Practice (CoCP) in relation to construction noise and fugitive dust which will include the following: 	=	Preparation of the CMP, submitted in support of the planning application, with dust, noise, vibration and odour mitigation measures included.

	Assessment Criteria	Relevant?	Details/Evidence	Potential Health Impact?	Recommended Mitigation or Enhancement Measures
			<ul style="list-style-type: none"> - The type of works to be undertaken. - Construction techniques to be used. - The site layout and access arrangements. - Times and duration of site operations. - An inventory and timetable of all dust-generating activities. - Principle Contractor(s) Statutory Obligations and duties. - How staff will be trained in the use of noisy machinery. - How materials are to be handled to minimise the potential for noise nuisance. - Times and durations of any abnormal noise and how the public will be kept informed. - The appropriate range of dust suppression and control measures to be implemented in accordance with a 'high risk' site as defined under the Best Practice Guidance for 'The Control of Dust and Emissions from Construction and Demolition' (Greater London Authority and London Councils). - The on-site storage of fuels or chemicals. - Identify the Site Environmental Management Representative (SEMR). • The site will be registered to the Considerate Constructors Scheme (CCS); • Early contact will be made with key neighbours, particularly with the management team of adjacent Derbyshire House Offices, Kings Cross Methodist Church and the various independent Hotels and other adjoining properties, to ensure regular contact is maintained throughout the demolition and construction process. Any site person receiving a concern or complaint from adjacent properties or passing pedestrians shall refer the matter immediately to the site manager, who will record the fact and refer the matter to the management team who will subsequently carry out an investigation. A Freephone contact number will be displayed on the external hoarding; and • Ensuring that all construction plant and equipment is maintained in good working order and not left running when not in use. 		

	Assessment Criteria	Relevant?	Details/Evidence	Potential Health Impact?	Recommended Mitigation or Enhancement Measures
			Properly controlled demolition/construction works, compliant with the LBC's requirements and using best practicable mitigation / control measures are unlikely to cause significant adverse health effects.		
4.2	Does the proposal minimise air pollution caused by traffic and energy facilities?	Yes	<p>The air quality assessment report provided by Air Quality Consultants Ltd. (as the air quality specialists) has identified that the trip generation on local roads as a result of the Proposed Development, once operational, is above the screening threshold of 100 LDVs for inside an AQMA (as set out in the EPUK/AIQM guidance). The Proposed Development is expected to increase Annual Average Daily Traffic (AADT) by 319 vehicles on Euston Road and 194 vehicles on Argyle Square which is above the aforementioned criteria. There are no receptors sensitive to the annual mean objectives alongside the affected section of Euston Road, but there some existing properties at the roadside of Argyle Square. The focus of the detailed assessment of road traffic impacts was on these receptors at Argyle Square. Impacts at existing receptors will be negligible and there will be no significant effects on air quality.</p> <p>Future air quality conditions at the site were also quantified. 'Official' predictions showed that the nitrogen dioxide, PM10 and PM2.5 air quality objectives are not predicted to be exceeded anywhere within the Proposed Development in the opening year. Future air quality conditions at the site are thus considered to be acceptable for the proposed uses. As requested by the LBC, a sensitivity test was undertaken which identified potential exceedances of annual mean NO2 objectives.</p> <p>Although based on 'official' predictions, annual mean concentrations of nitrogen dioxide are predicted to be below the objectives across the site, concentrations could potentially exceed the objective in some sections of the proposed development based on the results of the extremely worst- case sensitivity test. Whilst the annual mean objectives do not strictly apply at office accommodation, mitigation could be applied by way of mechanical ventilation either drawing air from the areas away from significant sources or including NOx filtration.</p> <p>In addition, the site is located close to many public transport amenities, cycling and pedestrian links. This promotion of an active lifestyle will help to minimise emissions caused by traffic flows from future occupants of the Proposed Development, as occupants are being actively encouraged to utilise other forms of transport (as outlined within the Travel Plan, submitted as part of the planning application).</p> <p>The Proposed Development is expected to be air quality neutral in terms of transport and building emissions, as such, no specific mitigation measures will be required to offset the emissions. The Proposed Development will be better than air quality for both transport and building emissions. However, the following measures have been included to minimise any transport related impacts:</p> <ul style="list-style-type: none"> Short-stay and long-stay cycle parking spaces will be provided in line with local and regional policy to further encourage the use of sustainable travel; and 	+ve	N/A above and beyond that incorporated during the design of the Proposed Development

	Assessment Criteria	Relevant?	Details/Evidence	Potential Health Impact?	Recommended Mitigation or Enhancement Measures
			<ul style="list-style-type: none"> A Travel Plan has been prepared for the planning application and will identify an appropriate package of measures aimed at promoting sustainable travel, with an emphasis on promoting alternatives to cars. <p>With respect to energy facilities, the Proposed Development will aim to minimise site-related emissions through the use of Air Source Heat Pumps (ASHP), mechanical ventilation with heat recovery (MVHR) and Photovoltaic (PV) panels. ASHPs are a form of low carbon technology as they are electricity based and no combustion occurs; therefore, not contributing to emissions (specifically NO₂ and Particulate Matter).</p> <p>In terms of the mechanical ventilation system proposed, mitigation would be required either in the form of mechanical ventilation units with NO_x filters (where exceedances have been predicted), or a mechanical ventilation system with air intakes situated where concentrations are predicted to be below the objective.</p> <p>Two backup generators will provide power during emergency situations which are likely to be tested on a weekly basis for a short duration (e.g. 60 mins). Dispersion modelling has been undertaken for the emergency diesel generator to determine whether significant effects on air quality (NO₂, PM₁₀ and PM_{2.5}) are likely to occur. The assessment showed that impacts at existing receptors would be negligible. In addition, based on the testing regime for the generators, it was demonstrated that plant emissions would not lead to any exceedances of the air quality objectives within the proposed development. Overall, emissions from the proposed emergency plant will have insignificant effects on air quality</p>		
4.3	Does the proposal minimise noise pollution caused by traffic and commercial uses?	Yes	<p>The effects of Noise and Vibration have been considered within a Noise and Vibration Assessment produced by Sandy Brown and submitted as part of the planning application.</p> <p>Traffic in the area, notably on Euston Road, is relatively heavy and as such a significant existing source of noise pollution. The Proposed Development has an appropriate glazing strategy which will minimise noise intrusion from traffic and commercial uses.</p> <p>The Proposed Development will cause a small increase in traffic during the demolition and construction phase and once the Proposed Development is complete and operational; therefore, any noise associated with traffic is likely to be negligible.</p> <p>The acoustic design associated with the Proposed Development will be designed closely with the MEP design, so as to ensure that external building services noise emission limits, as required by the LBC, will be achieved.</p> <p>Internal and external entertainment noise limits have also been set based on the requirements of LBC and an overall facade sound insulation performance of R_w+C_{tr} 28 dB to the events space. The Proposed Development's building envelope acoustic performances can in principle be maintained by suitably selected building constructions of the walls, roof, ventilation products and glazing systems.</p> <p>The Proposed Development has been designed in line with relevant standards, guidance and the LBC's requirements.</p>	=	N/A above and beyond that incorporated during the design of the Proposed Development
5. Accessibility and Active Travel					

	Assessment Criteria	Relevant?	Details/Evidence	Potential Health Impact?	Recommended Mitigation or Enhancement Measures
5.1	Does the proposal address the ten Healthy Streets indicators?	Yes	<p>The Proposed Development will have a positive impact on a number of the Healthy Street Indicators as set out by TfL, and listed below:</p> <ul style="list-style-type: none"> • Pedestrians from all walks of life; London's streets should be welcoming places for everyone to walk, spend time in and engage in community life. • People choose to walk, cycle and use public transport; A successful transport system enables more people to walk and cycle more often. • Clean air; Improving air quality delivers benefits for everyone and reduces unfair health inequalities. • People feel safe; The whole community should feel comfortable and safe on our streets at all times. People should not feel worried about road danger. • Not too noisy; Reducing the noise impacts of traffic will directly benefit health and improve the ambience of our streets. • Easy to cross; Making streets easier to cross is important to encourage more walking and to connect communities. • Places to stop and rest; A lack of resting places can limit mobility for certain groups of people. • Shade and shelter; Providing shade and shelter enables everybody to use our streets, whatever the weather. • People feel relaxed; More people will walk or cycle if our streets are not dominated by motor traffic, and if pavements and cycle paths are not overcrowded, dirty or in disrepair. • Things to see and do; People are more likely to use our streets when their journey is interesting and stimulating, with attractive views, buildings, planting and street art. <p>The provision of cycle parking and associated facilities including the provision of 'green streets' and the closure of St Chad's Street to traffic and the implementation of a two-way cycle path, will serve to encourage active travel, improving the People Chose to Walk, Cycle and Use Public Transport indicator.</p> <p>Improvements to the streetscape will improve the perception of pedestrian and cycle safety, improving the People Feel Safe and People Feel Relaxed indicators. Additionally, as a result of the high-quality design of the Proposed Development, including both horizontal and vertical landscaping, there will be a beneficial effect with regards to the Things to See and Do indicator.</p>	+ve	N/A

	Assessment Criteria	Relevant?	Details/Evidence	Potential Health Impact?	Recommended Mitigation or Enhancement Measures
			As part of the landscaping proposals there will be a number of seating areas which will improve the Places to Stop and Rest indicator.		
5.2	Does the proposal prioritise and encourage walking (such as through shared spaces?)	Yes	The Proposed Development will improve the public realm surrounding the site through greening and the pedestrianisation of St Chad's Street including the introduction of a two-way cycle lane. The proposals for St Chad's Street seek to create a pedestrian environment without cars. This will improve access to Argyle Square from the site. These public realm improvements and cycle storage will prioritise and encourage walking.	+ve	N/A
5.3	Does the proposal prioritise and encourage cycling (for example by providing secure cycle parking, showers and cycle lanes)?	Yes	The Proposed Development provides secure and covered cycle storage for building users at the lower ground floor. Furthermore, the Proposed Development will create the pedestrianisation of St Chad's Street (to the south of site) through which a two way cycle lane will be introduced.	+ve	N/A
5.4	Does the proposal connect public realm and internal routes to local and strategic cycle and walking networks?	Yes	The Proposed Development sits on a junction and next to cycle paths and pedestrian crossings. The new pedestrianisation of St Chad's Street and the two-way cycle lane connects the site and public realm along St Chad's Street with the surrounding local cycle and walking networks. Additionally, there is an existing entrance to Kings Cross St Pancras Tube Station. There is currently no step-free access to the underground and rail network on this side of Euston Road and the proposals include a new step-free underground entrance within the footprint of the Proposed Development. The improvement to the tube entrance will improve the site and surrounding areas connectivity to the wider surrounding area.	+ve	N/A
5.5	Does the proposal include traffic management and calming measures to help reduce and minimise road injuries?	No	The Proposed Development has limited highway proposals. There is no existing traffic calming within the vicinity of the site, and there is not a need for it to be implemented as part of the scheme, as there is limited traffic impact as a result of the Proposed Development. However, the Proposed Development does include indicative traffic calming along Crestfield Street, in addition to the pedestrianisation of St Chad's Street which will encourage walking and cycling in the local area.	=	NA
5.6	Is the proposal well connected to public transport, local services and facilities?	Yes	The site has a TfL PTAL of 6b with excellent transport links such as Underground services, buses and Overground services. The closest tube station to the site is King's Cross St Pancras, an entrance (via an underpass) to which is located within the site along Euston Road. King's Cross St Pancras provides Northern, Piccadilly, Victoria, Metropolitan, Hammersmith & City and Circle Line services. Additionally, the main entrances to both Kings Cross Station and St Pancras International are located within 90m of the site. The stations provide a range of regular national rail services with St Pancras International providing international rail services. There are several bus stops located near the site providing services across London. The closest bus stop being King's Cross St Pancras (Stop D) and Kings Cross St Pancras (Stop E) which provide regular services to locations such as Honor Oak, the City of London, Bow, Hackney Wick and Stoke Newington.	+ve	N/A

	Assessment Criteria	Relevant?	Details/Evidence	Potential Health Impact?	Recommended Mitigation or Enhancement Measures
			<p>Existing pedestrian and cycle facilities and routes are provided in the local area in all directions. The site is located approximately 195m to the north east of Cycleway 6 which runs from Kentish Town to Elephant & Castle. on the connectivity of the Proposed Development with the local transport network.</p> <p>The site has good pedestrian accessibility to retail, employment and leisure services within the local area.</p> <p>With regards to accessibility to local conveniences, there are many local shops and supermarkets located within proximity of the site. A number of convenience stores such as Marks & Spencer and Waitrose are located within King's Cross and St Pancras International stations. Additionally, there are a number of convenience stores within the surrounding area including a Sainsbury's Local located approximately 210m to the north-east of the site.. These stores sell a wide range of fresh and frozen food, and have fast food choices, which include healthy ranges such as salads and sandwiches.</p>		
5.7	Does the proposal seek to reduce car use by reducing car parking provision, supported by the controlled parking zones, car clubs and travel plans measures?	Yes	<p>The Proposed Development is car-free as per Camden Planning Guidance.</p> <p>By providing no standard car parking spaces, employees are encouraged to use sustainable modes of travel. The car-free nature of the development will restrict travel by private car for all users with the exception of blue badge users.</p> <p>The Travel Plan has been prepared for the planning application, has identified an appropriate package of measures aimed at promoting sustainable travel, with an emphasis on promoting alternatives to cars.</p> <p>The Travel Plan will be a 'living document' requiring monitoring, regular reviews and revisions to ensure it remains relevant to the site and those using the site and provides continuous improvements for its duration. A Travel Plan Coordinator (TPC) will be appointed to take responsibility for the management of the plan, and for ensuring its delivery. The TPC role for the site will be fulfilled by an appointed consultant or by the Proposed Developments management team.</p> <p>A marketing strategy will be employed with the aim of increasing sustainable travel by the residents, visitors and employees of the Proposed Development, in the form of a travel pack, detailing information on local public transport options, route maps, and information on nearby amenities and services.</p> <p>In addition, visitor parking is not permitted on-site.</p> <p>Short-stay and long-stay cycle parking spaces will be provided in line with local and regional policy to further encourage the use of sustainable travel.</p> <p>These arrangements would significantly restrict travel by private car and therefore encourage the use of sustainable forms of transport. Further encouragement of the use of public transport, walking and cycling are set out in the Travel Plan.</p>	+ve	Implementation of the Travel Plan
5.8	Does the proposal allow people with mobility problems or a disability to access buildings and places?	Yes	<p>The building and approaches have been designed to Approved Document M and BS 8300:</p> <ul style="list-style-type: none"> Users of the Proposed Development will access and be guided through the building and the site, without discrimination or limitation; 	+ve	N/A

	Assessment Criteria	Relevant?	Details/Evidence	Potential Health Impact?	Recommended Mitigation or Enhancement Measures
			<ul style="list-style-type: none"> Step-free access to the building will be achieved by means of level entrances and exits and passenger lifts; Where users may wish to use stairs, all staircases have been designed with handrails, to provide support; and Surface textures have been considered with wheelchair users in mind. 		
6. Crime Reduction and Community Safety					
6.1	Does the proposal incorporate elements to help design out crime?	Yes	<p>See Details / Evidence to Questions 3.4 and 3.5.</p> <p>The existing site is in use predominately as a storage facility in addition to retail units and does not currently maximise the space and opportunities of the site. The Proposed Development will enhance the character of the local area, by providing a new office led development on the existing site, which maximises the space and opportunities of the site. The Proposed Development uses will improve the character of the site through its high quality and considered design. The landscaped aspect of the Proposed Development provides 'green streets' that enhance the sense of 'community'. Lower levels of visual deterioration through significant public realm improvements and a greater 'pride of place' are also likely to reduce the relatively high levels of crime deprivation in the surrounding area.</p> <p>Pedestrian routes have been designed to be integrated and easy to direct and intuitive through the application of inclusive design and natural surveillance.</p> <p>The coordinated landscaping and lighting strategy will enhance the security of the site and will avoid conflict between lighting and vegetation.</p> <p>A CCTV system shall be installed at main points of entry to the Proposed Development.</p> <p>As part of the design of the Proposed Development, consultation has been undertaken with the Design Out Crime Officer to ensure the Proposed Development includes measures to prevent anti-social behaviour and rough sleeping.</p>	+ve	N/A
6.2	Does the proposal incorporate design techniques to help people feel secure and avoid creating 'gated communities'?	Yes	<p>See Details / Evidence to Questions 3.4, 3.5 and 6.1.</p> <p>With regards to 'gated communities', the Proposed Development does not include residential use and therefore will not create a 'gated' community.</p>	+ve	N/A
6.3	Does the proposal include attractive, multi-use public spaces and buildings?	Yes	<p>The Proposed Development has been designed to be an attractive building, improving on the aesthetic appearance of the existing building on-site through high quality architectural design. The Proposed Development has been designed for occupiers that undertake globally significant research and wish to collaborate within one of the largest clusters of knowledge-based businesses in the world. Life-sciences research laboratories can be located on the largest floorplates at floors 1-3, providing animation to the façades and a public window. HQ style offices can be located on floors 4-9. A generous ground floor provides occupant and public access via the main entrance on Euston Road into a reception and exhibition space.</p>	+ve	N/A

	Assessment Criteria	Relevant?	Details/Evidence	Potential Health Impact?	Recommended Mitigation or Enhancement Measures
			From Argyle Square a publicly-accessible entrance into a café and event, meeting and education space is proposed, animating the square and giving access into a publicly-accessible lower-ground floor auditorium.		

6.4	Has engagement and consultation been carried out with the local community and voluntary sector?	Yes	<p>A Statement of Community Involvement has been prepared by London Communications Agency in support of the planning application⁵⁷.</p> <p>Activates undertaken as part of the consultation process included:</p> <p>Discussions with LBC began in October 2018. A sequence of design meetings were held with officers, three Design Review Panels (DRP) and one meeting with the Strategic Review Panel on Emerging Proposals.</p> <p>Public consultation on the emerging proposals coincided with the lockdown associated with the Covid-19 pandemic. However, the Applicant conducted a thorough consultation programme, which they shared with LBC in advance to ensure an appropriate approach during the pandemic. The main activities are broken down as follows:</p> <ul style="list-style-type: none"> • March 2020 – Began engaging with local stakeholder groups and close neighbours. • April 2020 – Consultation website launched for local stakeholder groups and close neighbours, with video presentations of emerging designs for both buildings narrated by the lead project architect. • Early June 2020 – Launch of the consultation website to the wider public and information on the emerging designs along with a feedback survey to submit comments. • Early June 2020 – Launch of a social media ad campaign promoting the consultation website run on Facebook and Instagram from Thursday 4 June until Thursday 19 June. • Late June 2020 – Development Management Forum (DMF) attended by 37 people and watched on Camden's YouTube channel by a further 230. • Early August 2020 – Virtual exhibition launched. launch of second social media ad campaign promoting the virtual exhibition run on Facebook and Instagram from 5 August until 18 August. • Mid August 2020 – Young person consultation event in partnership with King's Cross Brunswick Neighbourhood Association members. • Late August 2020 – Submission of planning application to Camden Council. Continuing engagement with local organisations and groups. <p>The Statement of Community Involvement demonstrates that public consultation has been undertaken and has:</p> <ul style="list-style-type: none"> • Informed local residents, businesses, councilors and other stakeholders about the redevelopment aspirations for the site; and • Helped gain a full understanding of local views of the proposal and engaged with the local and wider community. 	+ve	N/A
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	Assessment Criteria	Relevant?	Details/Evidence	Potential Health Impact?	Recommended Mitigation or Enhancement Measures
7. Access to Healthy Food					
7.1	Does the proposal facilitate the supply of local food, i.e. allotments, community farms and farmers' markets?	Yes	There are no plans for any allotments or community farms.	-ve	N/A
7.2	Is there a range of retail uses, including food stores and smaller affordable shops for social enterprises?	Yes	The Proposed Development will provide a café in addition to the re-provision of a hot food takeaway unit.	=	N/A
7.3	Does the proposal avoid contributing towards an overconcentration of hot food takeaways in the local area?	Yes	The existing site provides one hot food takeaway unit (Use Class A5). The Proposed Development will re-provide one hot food takeaway unit (Use Class A5), in addition to a new café use.	=	N/A
8. Access to Work and Training					
8.1	Does the proposal provide access to local employment and training opportunities, including temporary construction and permanent 'end-use' jobs?	Yes	<p>Employment generated during the demolition and construction phase is calculated using industry standard methodology (i.e. gross jobs years are calculated by dividing the total construction cost by the average gross value added (GVA) per head of construction workers within LBC).</p> <p>It is anticipated that the Proposed Development will support approximately 1,065 gross job years' worth of employment directly on site. This translates to an average of 105 full-time equivalent (FTE) construction workers situated on-site throughout the 38-month construction period⁵⁷.</p> <p>In terms of employable floorspace, the existing site provides:</p> <ul style="list-style-type: none"> • 10,815m² GIA self-access storage (Use Class B8) space; and • 800m² GIA food and retail space (Use Class A1/A5). <p>The Proposed Development provides 25,380m² GIA including, but not limited to: office, laboratory, retail and café uses.</p> <p>The existing site at Belgrove House is estimated to support approximately 40 FTE jobs. Once operational, the Proposed Development is anticipated to generate approximately 770 FTE jobs, equivalent to 840 jobs when taking into account part-time working patterns. This represents a net increase of 730 FTE jobs.</p> <p>The Applicant is proposing to commit to the following employment and skills initiatives:</p>	+ve	The Applicant is proposing to: maximise local employment during the demolition and construction phase and once the Proposed Development is operational; provide apprenticeship and work experience positions through the demolition and construction works; financial contribution towards employment and training initiatives; and commit to paying the London Living Wage to all employees directly employed.

⁵⁷ London Communications Agency, (2020); Statement of Community Involvement, submitted in support of the planning application.

⁵⁸ Volterra, (2020); Regeneration Statement and Employment and Skills Strategy, submitted in support of the planning application.

	Assessment Criteria	Relevant?	Details/Evidence	Potential Health Impact?	Recommended Mitigation or Enhancement Measures
			<ul style="list-style-type: none"> Use reasonable endeavours to maximise local construction jobs and jobs once the Proposed Development is complete and operational; The Applicant will commit to the recruitment of one construction apprenticeship for every £3m in construction build cost. The total amount will be agreed as part of the Section 106 discussions; The Applicant will offer work experience placements; based on the current proposed floorspace, this would be equivalent to 28 placements (for Belgrove and Acorn House); The Applicant will commit to paying at least the London Living Wage (LLW) to all directly employed full and part-time employees, and use reasonable endeavours to promote not less than the LLW for construction employment occurring through sub-contractors at the Proposed Developments (i.e. Acorn House and Belgrove House). As part of their overall S106 obligations, the Applicant will make a financial contribution towards employment and training initiatives. <p>Further details relating to the employment and skills initiatives proposed are presented within the Regeneration Statement and Employment and Skills Strategy⁵⁹.</p>		
8.2	Does the proposal provide childcare facilities?	Yes	As the Proposed Development does not provide any residential uses, there will be no additional demand for childcare facilities. The Proposed Development will not provide any childcare facilities.	=	N/A
8.3	Does the proposal include managed and affordable workspace for local businesses?	No	The retail space could be occupied by a local business. Whilst there is no dedicated space within the Proposed Development which provides managed and affordable workspace for local businesses, affordable workspace will be provided within the Acorn House development.	=	N/A
8.4	Does the proposal include opportunities for work for local people via local procurement arrangements?	Yes	See Details/Evidence to Question 8.1.	+ve	N/A
9. Social Cohesion and Lifetime Neighbourhoods					
9.1	Does the proposal consider health inequalities by addressing local needs through community engagement?	Yes	The Proposed Development has been designed, and will be constructed and managed, to ensure that health and healthy lifestyles are promoted to reduce health inequalities. The Proposed Development will be of a high-quality design which will ensure a healthy environment for the tenants of the Proposed Development through the open plan layout, landscaping and communal space. The communal spaces and improved public realm will help to create and develop healthy and sustainable places and communities for tenants and members of the public. From Argyle Square a publicly-accessible entrance into a café and	+ve	N/A

⁵⁹ Volterra, (2020); Regeneration Statement and Employment and Skills Strategy, submitted in support of the planning application.

	Assessment Criteria	Relevant?	Details/Evidence	Potential Health Impact?	Recommended Mitigation or Enhancement Measures
			event, meeting and education space is proposed, animating the square and giving access into a publicly-accessible lower-ground floor auditorium.		
9.2	Does the proposal connect with existing communities, i.e. layout and movement which avoids physical barriers and severance and land uses and spaces which encourage social interaction?	Yes	<p>The Proposed Development has been designed with layout conducive to social interaction in mind. The layout of the Proposed Development avoids severance, thus keeping future users connected to the space.</p> <p>The Proposed Development includes communal areas, such as the ground and lower ground floor event and exhibition space and café, this is conducive to communal gatherings and encourages interaction amongst users. Furthermore, the exhibition space will allow the building users to engage with the community and highlight the working undertaken on site.</p> <p>Additionally, there is an existing entrance to Kings Cross St Pancras Tube Station. There is currently no step-free access to the underground and rail network on this side of Euston Road and the proposals include a new step-free underground entrance within the footprint of the Proposed Development. The improvement to the tube entrance will improve the site and surrounding areas connectivity to the surrounding area.</p> <p>The pedestrianisation of St Chad's Street will remove the existing road barrier between the site and Argyle Square, and will increase social interaction through the provision of the landscaping strategy which offers wide pavements, planting and seating.</p>	+ve	N/A
9.3	Does the proposal include a mix of uses and a range of community facilities?	Yes	<p>The Proposed Development will include a mix of uses, including office and research and laboratory floorspace incorporating café and flexible retail and office floorspace, an auditorium and a new step free entrance to Kings Cross LUL station. The office, research and development space will provide both office space and life-sciences research laboratories.</p> <p>Whilst the Proposed Development does not provide designated community facilities, From Argyle Square a publicly-accessible entrance into a café and event, meeting and education space is proposed. This will give access into a publicly-accessible lower-ground floor auditorium. Furthermore, the events space will allow the building users to engage with the community and highlight the working undertaken on site. Additionally, as a result of the Proposed Development, the site will have increased levels of permeability, particularly in relation to the proposals to pedestrianise St Chads Street. Seating areas will be provided in addition to phone charging facilities.</p> <p>Refer to the Design and Access Statement for further detail.</p>	=	N/A
9.4	Does the proposal provide opportunities for the voluntary and community sectors?	Yes	The Proposed Development provides a space (the café and events space on the ground and lower ground floor of the Proposed Development) available to hire for functions, classes or community gatherings, for example.	+ve	N/A
9.5	Does the proposal take into account issues and principles of inclusive and age-friendly design?	Yes	See Details/Evidence to Question 5.8.	+ve	N/A

	Assessment Criteria	Relevant?	Details/Evidence	Potential Health Impact?	Recommended Mitigation or Enhancement Measures
10. Minimising the use of Resources					
10.1	Does the proposal make best use of existing land?	Yes	The proposals seek to develop the currently underutilised building which is currently in use as predominately a storage facility. There are significant socio-economic benefits associated with the new office, development and research facility including the proposed job creation and associated local spend.	+ve	N/A
10.2	Does the proposal encourage recycling (including building materials)?	Yes	<p>The Proposed Development will implement a CMP during the demolition and construction phases. This CMP will outline construction management measures, including measures specific to waste. The CMP will be implemented during the demolition and construction works. This will include the management of wastes in accordance with the Waste Hierarchy. As part of the hierarchy, the emphasis is firstly on waste avoidance and minimisation, and subsequently recycling, with landfill the final (and least desirable) option.</p> <p>During demolition/construction works, waste can arise from a number of activities and actions (such as the over-ordering of materials). This plan will implement a range of measures to manage and minimise the creation of waste, and encourage recycling:</p> <ul style="list-style-type: none"> • There will be no stockpiling of construction materials on site; • Construction materials will be stored appropriately, so as to prevent damage e.g. from adverse weather conditions; and • Construction materials required will be carefully quantified so as to help prevent overordering of materials. <p>Once the Proposed Development is completed and occupied, waste recycling (from operational waste arisings) will be encouraged, via the provision of waste recycling bins. This will be managed by a Servicing and Management Plan.</p> <p>A Circular Economy Statement has been prepared in support of the planning application. In order to implement circular economy principles, the Proposed Development has adopted the following strategies:</p> <ul style="list-style-type: none"> • Reuse of suitable demolition materials within new architecture, where this is technically, practically and economically feasible. The current intention is to reuse the existing bricks for paving and the existing concrete as aggregate for newly cast concrete. • A project specific material life cycle carbon analysis has been carried out to inform the design and specifications. Reuse, recycling and choice of materials with low embodied carbon have been prioritised and will also be prioritised in any future design decision making. <p>– All timber and timber products will be procured from legal sources.</p>	+ve	<p>Implementation of the CMP during demolition and construction works.</p> <p>Implementation of a Servicing and Management Plan</p>

	Assessment Criteria	Relevant?	Details/Evidence	Potential Health Impact?	Recommended Mitigation or Enhancement Measures
			<ul style="list-style-type: none"> - At least 90% of timber products to be sourced from suppliers accredited under Forest Stewardship Council (FSC) or Programme for the Endorsement of Forestry Certification (PEFC). - Intention to procure steel with at least 20% recycled content, with an aspiration for further increase pending market availability and feasibility. - Reinforcement steel will target at least 97% recycled content. - Intention to achieve at least 20% recycled content of the overall material volumes used for construction. - At least 20% recycled aggregates are targeted for concrete. - The use of GGBS as cement replacement will be targeted. An initial replacement of 50% GGBS is targeted, with an aspiration of 80%. - Recycled and local materials with third party verified environmental credentials and environmental product declarations will be prioritised. <ul style="list-style-type: none"> • At least 95% of construction, demolition and excavation waste will be reused or recycled. • At least 75% of operational waste will be diverted from landfill • Non-hazardous construction waste will be reduced to achieve at least 2 credit under BREEAM Wst01 by diverting unavoidable demolition and construction waste to reuse and recycling. The limits of total waste volume for 2 BREEAM credits are 7.5 m3/m2 GIA or 6.5 tonnes/m2 GIA. Pre-fabricated products with standard dimensions will be prioritised to avoid manufacturing and construction waste, while improving maintenance and reuse. • Material efficiency measures will continue to be monitored at each design stage through collaborative workshops attended by all stakeholders. • Bolted structural connections that enable disassembly will be prioritised over welded connections where this is structurally and technically feasible without incurring material inefficiency. • Grade and size of steel components will be considered to be stamped onto the material to facilitate their future reuse. • Robust design principles will be adopted where in areas where risk of damage or degradation is higher due to high usage. 		

	Assessment Criteria	Relevant?	Details/Evidence	Potential Health Impact?	Recommended Mitigation or Enhancement Measures
			<ul style="list-style-type: none"> A site specific pre-demolition audit has been conducted. A robust Resource Management Plan (RMP) informed by this audit and sustainable construction practices will be adopted. The building contractor will be contractually required to comply with, and go significantly beyond, best practice principles under the Considerate Constructors Scheme (CCS). Adequate dedicated storage space for recyclable waste will be provided. Operational energy and water use will be monitored through extensive sub-metering to encourage economy in use and enable corrective action. 		
10.3	Does the proposal incorporate sustainable design and construction techniques?	Yes	<p>The Proposed Development will incorporate sustainable design and construction techniques.</p> <p>The Proposed Development will provide dedicated cycle parking which is compliant with local and regional parking standards and encourages adoption of sustainable and green travel.</p> <p>In line with the above philosophy, the application of low energy lighting and passive improvements to building fabric are proposed.</p> <p>The primary method for heating, cooling and providing hot water uses air source heat-pump technology to limit pollution from fossil fuel boilers whilst maximising the heat / cooling output for energy used. Ensuring the GLA target is met.</p> <p>The Proposed Development has been designed to minimise CO₂ emissions associated with their operational energy consumption.</p> <p>Construction materials will be selected with sustainability in mind, with the aim to efficiently use of natural resources and consider potential environmental impacts.</p> <p>See above details regarding the Circular Economy Statement.</p>	+ve	N/A
11. Climate Change					
11.1	Does the proposal incorporate renewable energy?	Yes	<p>The Proposed Development includes LZC (low and zero carbon) technologies, notably air source heat-pumps and photo-voltaic (PV) panels. This includes the use of air source heat-pump for providing hot water. Thus, eliminating the need for fossil-fuel and supporting the decarbonising of the grid supplied electricity. The development will reduce its carbon emissions by 16% via renewable energy technologies.</p> <p>A mechanical ventilation system (MHVR) is also proposed to ensure sufficient air changes without heat loss.</p>	+ve	N/A

	Assessment Criteria	Relevant?	Details/Evidence	Potential Health Impact?	Recommended Mitigation or Enhancement Measures
11.2	Does the proposal ensure that buildings and public spaces are designed to respond to winter and summer temperatures, i.e. ventilation, shading and landscaping?	Yes	<p>The Proposed Development has been designed with passive energy reduction measures in place, and include thermal insulation, air tightness, maximising daylighting, and passive solar gain. Additionally, façade vegetation will contribute to the natural cooling ventilation system.</p> <p>The design has considered the impacts of varying temperatures and included measures to manage these variations within the Proposed Development.</p> <p>The Proposed Development provides new planting areas in the landscaped and terraced areas.</p>	+ve	N/A
11.3	Does the proposal maintain or enhance biodiversity?	Yes	<p>The Proposed Development will include 'green streets' and focal point within a busy and hard environment. The proposals include green infrastructure on many levels of the Proposed Development, both horizontally and vertically. The landscaping measures will increase biodiversity on site and create new habitats through diverse planting.</p> <p>The Proposed Development will provide green and brown roofs. The natural habitats created are designed to support a variety of plants, birds, animals and invertebrates.</p> <p>The Proposed Development is expected to achieve an urban greening factor in excess of 0.3 recommended by the GLA.</p> <p>The proposed landscaping measures will provide an improvement upon the existing situation, thus enhancing existing biodiversity on-site.</p> <p>During the construction phase a Biodiversity Champion will be appointed to monitor and limit environmentally detrimental activities including strict observation of the relevant UK and EU or international legislation. They will also train the workforce on the project to raise their awareness of environmental impacts during construction.</p>	+ve	Ecological enhancements for the Proposed Development include: bird boxes; diverse planting; and green and brown roofs.
11.4	Does the proposal incorporate sustainable urban drainage techniques?	Yes	<p>The proposed surface water drainage strategy for the site has been developed to utilise sustainable drainage techniques (SuDS) to attenuate surface water at source and reduce the risk of downstream flooding of the Thames Water sewer network in the local area.</p>	+ve	N/A

CONCLUSIONS

- 112.** This Rapid HIA has been prepared in line with relevant legislation, policy and guidance. A baseline review has identified information relating to the following 11 key determinants of health:
1. Housing Quality and Design;
 2. Access to Healthcare Services and other Social Infrastructure;
 3. Access to Open Space and Nature;
 4. Air Quality, Noise and Neighborhood Amenity;
 5. Accessibility and Active Travel;
 6. Crime Reduction and Community Safety;
 7. Access to Healthy Food;
 8. Access to Work and Training;
 9. Social Cohesion and Lifetime Neighborhoods;
 10. Minimising the Use of Resources; and
 11. Climate Change.
- 113.** The health impacts relating to the above 11 health determinants have been assessed against the Proposed Development, in the context of the site location, using the 'HUDU Rapid Health Impact Assessment Matrix'. Impacts on the future residents of the Proposed Development, and the local community, have been identified and are detailed in the Assessment Matrix in Section 5 of this HIA.
- 114.** The primary health benefits identified, include but are not limited to:
- The Proposed Development has been designed as a new life sciences building comprising approximately 24,158m² of office, research and development space (Use Class B1) that includes laboratory space, event, meeting and education space and a publicly-accessible lower-ground floor auditorium. In addition, the Proposed Development will provide 407m² of retail space (Use Class A1/A3) and 462m² of flexible retail and office space (Use Class A1/B1/A3/A5);
 - The Proposed Development will incorporate a new step free entrance to the London Underground (Kings Cross St Pancras), replacing the existing subways on Euston Road;
 - The Proposed Development will provide 'green streets', accessible terrace space for users of the Proposed Development, as well as the pedestrianisation of St Chad's Street;
 - Well-designed accessible spaces within the Proposed Development, that cater for the needs of the disabled as well as for the able-bodied;
 - The Proposed Development will include communal areas, including a publicly accessible café and event/education space;
 - The existing site is in use predominately as a storage facility in addition to retail units and does not maximise the space and opportunities of the site. The Proposed Development will enhance the character of the local area, by providing a new office led development on the site, which maximises the space and opportunities of the site. The Proposed Development uses will improve the character of the site through its high quality and considered design. The landscaped aspect of the Proposed Development provides 'green streets' that enhance the sense of 'community'. Lower levels of visual deterioration through significant public realm improvements and a greater 'pride of place' are also likely to reduce the relatively high levels of crime deprivation in the surrounding area;
 - The inclusion of LZC technologies including air source heat-pumps and PV panels. This includes the use of air source heat-pump for providing hot water. Thus, eliminating the need for fossil-fuel and supporting the decarbonising of the grid supplied electricity;

- The provision of short-stay and long-stay cycle parking spaces in line with local and regional policy to further encourage the use of sustainable travel. The pedestrianisation of St Chad's Street will include the provision of a two-way cycle lane in addition to informal seating areas which will encourage sustainable travel as a result of the improved pedestrian and cycle links. Furthermore, the improvements to the streetscape along Belgrove Street, Euston Road and Argyle Street will encourage sustainable travel;
- A net increase of 730 FTE jobs during the operation of the Proposed Development; and
- The 105 full-time equivalent (FTE) construction worker jobs created during the 38-month construction period of the Proposed Development.

115. A number of measures have been developed as part of the Proposed Development to promote health and wellbeing which include: a 'car free' development to promote sustainable travel to the Proposed Development; provision of private amenity space for office tenants; provision of 'green streets'; the pedestrianisation of St Chad's Street; and the implementation of a construction management plan to reduce adverse health risks from demolition and construction activities.

APPENDIX A POLICY AND LEGISLATION SUMMARY

The Localism Act 2011

116. The Localism Act 2011 is an Act to “make provision about the functions and procedures of local and certain other authorities; to make provision about the functions of the Commission for Local Administration in England; to enable the recovery of financial sanctions imposed by the Court of Justice of the European Union on the United Kingdom from local and public authorities; to make provision about local government finance; to make provision about town and country planning, the Community Infrastructure Levy and the authorisation of nationally significant infrastructure projects; to make provision about social and other housing; to make provision about regeneration in London; and for connected purposes.”
117. In short, the Act enshrines the ‘neighbourhood plan’, a new layer of development plan. Neighbourhood Development Plans are initiated by communities and become part of the Local Plan and the policies contained within them are then used in the determination of planning applications. Neighbourhood Development Orders and Community Right to Build Orders allow communities to grant planning permission either in full or in outline for the types of development they want to see in their areas.

Health and Social Care Act 2012

118. “An Act to establish and make provision about a National Health Service Commissioning Board and clinical commissioning groups and to make other provision about the National Health Service in England; to make provision about public health in the United Kingdom; to make provision about regulating health and adult social care services; to make provision about public involvement in health and social care matters, scrutiny of health matters by local authorities and co-operation between local authorities and commissioners of health care services; to make provision about regulating health and social care workers; to establish and make provision about a National Institute for Health and Care Excellence; to establish and make provision about a Health and Social Care Information Centre and to make other provision about information relating to health or social care matters; to abolish certain public bodies involved in health or social care; to make other provision about health care; and for connected purposes.”
119. The Health and Social Care Act 2012 was introduced following the Health and Social Care Bill 2011. The Act was established in order to promote and improve the NHS.

National Planning Policy Framework (2019)

120. The National Planning Policy Framework (NPPF), which was adopted in February 2019, sets out the Government’s planning policies for England and how these are expected to be applied. The NPPF provides a framework for which local people and their respective councils can produce their own local and neighbourhood plans, which are relevant to the needs and priorities of their communities.
121. The achievement of sustainable development is a key theme within the NPPF, and the three key themes to sustainable development (economics, social and environmental) are present throughout the NPPF. The NPPF states that the following objectives are required from the planning system when considering the social dimension of sustainable development: “...to support strong, vibrant and healthy communities, by ensuring that a sufficient number and range of homes can be provided to meet the needs of present and future generations; and by fostering a well-designed and safe built environment, with accessible services and open spaces that reflect current and future needs and support communities’ health, social and cultural well-being”.
122. Section 8 of the NPPF revolves around ‘Promoting Healthy and Safe Communities’. This section of the NPPF states that:

“Planning policies and decisions should aim to achieve healthy, inclusive and safe places which:

- promote social interaction, including opportunities for meetings between people who might not otherwise come into contact with each other – for example through mixed-use developments, strong neighbourhood centres, street layouts that allow for easy pedestrian and cycle connections within and between neighborhoods and active street frontages;
- are safe and accessible, so that crime and disorder, and the fear of crime, do not undermine the quality of life or community cohesion – for example through the use of clear and legible pedestrian routes, and high-quality public space, which encourage the active and continual use of public areas; and
- enable and support healthy lifestyles, especially where this would address identified local health and well-being needs – for example through the provision of safe and accessible green infrastructure, sports facilities, local shops, access to healthier food, allotments and layouts that encourage walking and cycling.”

Planning Practice Guidance (2014)

Health and Wellbeing

- 123.** The Planning Practice Guidance (PPG) is an online resource which collates planning guidance on various topics into one place. The PPG was launched in March 2014.
- 124.** Of relevance to Health and Wellbeing (updated 2017), the PPG states that “Local planning authorities should ensure that health and wellbeing, and health infrastructure are considered in local and neighbourhood plans and in planning decision making....”
- 125.** The PPG provides guidance on a range of health and wellbeing issues, including: the links between health and planning, and how to effectively incorporate these into local plans, development proposals etc.; how planning can help create a healthier food environment; who the main health organisation are that a local authority should contact; how the health and well-being and health infrastructure should be considered in planning decision making; and what a healthy community is.

The London Plan – The Spatial Development Strategy for London, Consolidated with Alterations Since 2011

- 126.** The London Plan was updated in March 2016 from the previous 2011 London Plan. The London Plan is the strategic plan for London with sets out the framework for the development of London over the next 20-25 years. Health and wellbeing is a constant theme throughout the London Plan Policies of specific relevance to health and wellbeing include:

‘Policy 3.1 Ensuring equal life chances for all’

- 127.** This policy aims to strengthen the already existing diversity of London, and to ensure that Londoners from all backgrounds have equal opportunities in life. The key means to achieving this aim include: includes helping people, groups or communities to find common grounds on how they can develop and sustain cohesive communities; making London more ‘age-friendly’; and understanding the key barriers to success, and individuals reaching their potential, so as to tackle these issues.

‘Policy 3.2 Improving Health and Addressing Health Inequalities’

- 128.** This policy details that the Mayor will work in conjunction with the NHS in London, boroughs and the community and voluntary centre to improve health and reduce health inequalities. Part D of the policy states that “*New developments should be designed, constructed and managed in ways that improve health and promote healthy lifestyles to help to reduce health inequalities.*”

‘Policy 7.1 Lifetime Neighbourhoods’

- 129.** As stated in Paragraph 7.4A of this policy of the London Plan:

“Three principles have been developed to help frame the concept of lifetime neighbourhoods as places

where people at all stages of their lives:

- can get around – neighbourhoods which are well-connected and walkable;
- as far as possible, can have a choice of homes, accessible infrastructure and services, places to spend time and to work, with a mix of accessible and adaptable uses; and
- belong to a cohesive community which fosters diversity, social interaction and social capital.”

- 130.** This policy advises that development should be designed with social and community infrastructure in mind, and that development should help reinforce or enhance the character, legibility permeability of the neighbourhood.
- 131.** This policies in Chapter 7 of The London Plan provide the context within which the targets set out in other chapters of the Plan should be met.
- 132.** Other London Plan policies relevant to the HIA include, but are not limited to: ‘Policy 3.5 Quality and Design of Housing Development’; ‘Policy 3.9 Mixed and Balanced Communities’; ‘Policy 3.16 Protection and Enhancement of Social Infrastructure’; ‘Policy 4.12 Improving Opportunities for All’; and ‘Policy 7.2 An Inclusive Environment’.

The Draft New London Plan – Consolidated Suggested Changes (2019)

- 133.** The Draft New London Plan was published for consultation in December 2017. The Examination in Public (EiP) on the London Plan was held between 15th January and 22nd May 2019. The Panel of Inspectors appointed by the Secretary of State issued their report and recommendations to the Mayor on 8th October 2019. The Mayor has considered the Inspectors’ recommendations and, on the 9th December 2019, issued to the Secretary of State his intention to publish the London Plan along with a clean and tracked version of the Intend to Publish London Plan. It is anticipated that the plan will be published and adopted this year, therefore the HIA has given weight to the draft policies outlined within the Plan. The key ones of which are outlined below.

Policy GG1 Building strong and inclusive communities

- 134.** This policy puts onus on those involved in planning and development to seek to ensure that London continues to generate a wide rand of economic and other opportunities that everyone is able to benefit from, as well as ensuring that good quality services, public places and open space, buildings and streets are designed well, to promote and build strong and inclusive communities.

Policy GG3 Creating a healthy city

- 135.** This policy states that “To improve Londoners’ health and reduce health inequalities, those involved in planning and development must:
- A) Ensure that the wider determinants of health are addressed in an integrated and co-ordinated way ...;
 - B) Promote more active and healthy lives for all Londoners...;
 - C) Use the Healthy Streets Approach to prioritise health in all planning decisions;
 - D) Assess the potential impacts of development proposals and development plans on the mental and physical health and wellbeing of communities ...for example through the use of Health Impact Assessments;
 - DA) plan for appropriate health and care infrastructure to address the needs of London’s changing and growing population;
 - DB) seek to improve London’s air quality, reduce public exposure to poor air quality and minimise inequalities in levels of exposure to air pollution.
 - E) Plan for improved access to and quality of green spaces, the provision of new green infrastructure, and space for play, recreation and sports;

F) Ensure that new buildings are well-insulated and sufficiently ventilated to avoid the health problems associated with damp, heat and cold.

G) Seek to create a healthy food environment, increasing the availability of healthy food and restricting unhealthy options.”

Fair Society, Healthy Lives (the Marmot Review) (2010)

136. The Marmot Review, published in 2010, was undertaken by Prof. Sir Michael Marmot in 2008. The Review is an independent review aimed at proposing the most cost-effective evidence-based strategies for reducing health inequalities in England. The Review had four main tasks:

- “Identify, for the health inequalities challenge facing England, the evidence most relevant to underpinning future policy and action
- Show how this evidence could be translated into practice
- Advise on possible objectives and measures, building on the experience of the current PSA target on infant mortality and life expectancy
- Publish a report of the Review’s work that will contribute to the development of a post- 2010 health inequalities strategy”

137. The review states that reducing health inequalities will require action on six policy objectives:

- “Give every child the best start in life
- Enable all children young people and adults to maximise their capabilities and have control over their lives
- Create fair employment and good work for all
- Ensure healthy standard of living for all
- Create and develop healthy and sustainable places and communities
- Strengthen the role and impact of ill health prevention”

Healthy Lives, Healthy People: Our strategy for Public Health in England (2010)

138. This document focuses on public health in England, with regard to its current state, and the commitment to protecting the population from serious health threats; helping people live longer, healthier and more fulfilling lives; and improving the health of the poorest, fastest.

139. This document was produced in response to The Marmot Review, and adopts its framework for tackling the wider social determinants of health.

140. As stated in paragraph 7 of the document, “...People living in the poorest areas will, on average, die 7 years earlier than people living in richer areas and spend up to 17 more years living with poor health. They have higher rates of mental illness; of harm from alcohol, drugs and smoking; and of childhood emotional and behavioural problems. Although infectious diseases now account for only 1 in 50 deaths, rates of tuberculosis and sexually transmitted infections (STIs) are rising and pandemic flu is still a threat.”

Camden’s Joint Strategic Needs Assessment (JSNA) 2019

141. The JSNA is a continual process of pulling together a wide range of information about the health and social care needs of people in Camden. JSNA projects focus on individual topics, such as Population (e.g. life expectancy), particular health problems (e.g. cardiovascular disease), unhealthy lifestyles (e.g. smoking), sexual health (e.g. STI’s) and specific groups of the population with additional need (e.g. people with learning disabilities).

142. The findings of JSNA work are published online through the council website by the health and wellbeing board, which summarises JSNA findings, factsheets and needs assessment reports.

143. The JSNA provides key information as a basis for the improvement of existing services and planning of future services, with the ultimate aim of improving health and wellbeing of people in the LBC.

LBC's Joint Health and Wellbeing Strategy Refresh (2019)

144. The LBC's Joint Health and Wellbeing Strategy aims to build on the achievements an aspiration of Camden's Health and Wellbeing Board. The Strategy is split into various chapters with carefully selected actions, which will be reviewed on an annual basis: 'Healthy Weight, Healthy Lives', which recognises the impacts of obesity and the need to maintain a healthy lifestyle; 'Live Well', which tackles the four main unhealthy behaviours of smoking, overconsumption of alcohol, poor diet and lack of physical activity, and poor emotional and mental wellbeing; and 'Age Well, which recognises the disparity between the number of people in the borough living longer with a diminished quality of life.

LBC's Local Plan (2017)

145. The Local Plan was adopted by the LBC. The Council's Local Plan sets the policies and guidance for the development of the LBC up to 2031, and identifies where the main developments will take place, and how places within the borough will change, or be protected from change.
146. The policies set out in the Local Plan follow the approach of the presumption in favour of sustainable development and show how it is expressed locally. The Plan states that the Council will ensure that planning applications that accord with policies in the adopted Local Plan and the London Plan will be approved without delay, unless material considerations indicate otherwise.
147. The Local Plan has three inter-related strategic objectives of 'reducing inequality and improving health and wellbeing', 'creating conditions for and harnessing the benefits of economic growth' and 'investing in communities and ensuring sustainable neighbourhoods'. These three strategic objectives form the basis of the Local Plan Strategic Vision, which describes what the borough will be like in 2031.
148. Policy C1 Health and Wellbeing of the Local Plan discusses that the council will require; A) "developments to positively contribute to creating high quality, active, safe and accessible places" and B) "major development schemes to include a Health Impact Assessment must be submitted".

LBC's Planning for Health and Wellbeing (2018)

149. The LBC's Planning for Health and Wellbeing was adopted in March 2018.
150. The CPG identifies:
- When HIAs should be prepared and what they might contain;
 - How the Council will manage the impacts of certain town centre uses on health and wellbeing;
 - How the planning process can enhance the quality of life for population groups with greater health and wellbeing needs; and
 - Provides signposting to wider health strategies and data prepared by the Council and partners that can contribute to the production of HIAs and assessment of planning applications.
151. The guidance should be read in conjunction with the Camden Local Plan (2017) and is aimed to help deliver Policy C1 on health and wellbeing and many other Plan policies.

LBC's Access for All (2019)

152. The LBC's Access for All was adopted in March 2019.
153. This guidance provides information on Access within the borough and supports Local Plan Policy C6 – Access for all and replaces the 'Access for all' section in CPG 6 Amenity (adopted 2011).
154. Other relevant policies in the Local Plan include:
- Policy D1 Design

- Policy D2 Heritage
- Policy C1 Health and wellbeing
- Policy H6 Housing choice and mix
- Policy T1 Prioritising walking, cycling and public transport
- Policy T2 Parking and car-free development

155. The guidance identifies that the LBC expect that access is considered at the beginning of the design process and expect all developments to be inclusively designed and useable by all.

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