

O2 Masterplan Site, Finchley Road

Health Impact Assessment (HIA)

Version 1, January 2022

Prepared for LS (Finchley Road) Limited by Quod



Landsec





Quod

Health Impact Assessment

O2 Masterplan Site,
Finchley Road

LB Camden

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1 Introduction

1.1 This Health Impact Assessment has been prepared and submitted by Quod on behalf of LS (Finchley Road) Limited (the “Applicant”), to support an application made part in detail and part in outline (the ‘Application’) for the demolition and redevelopment of land encompassing the O2 Centre and associated car park, Homebase store, car showrooms and a Builder’s Merchant (the “Site”) within the London Borough of Camden (‘LBC’). The Site will be known as “the O2 Masterplan Site, Finchley Road”.

1.2 The ‘Proposed Development’ comprises:

“Part full and part outline planning permission comprising the following:

Detailed planning permission for Development Plots N3-E, N4, and N5 including demolition of existing above ground structures and associated works, and for residential development (Class C3) and commercial, business and service (Class E) uses in Development Plot N3-E, residential development (Class C3) and local community (Class F2) and commercial, business and service (Class E) uses in Development Plot N4, and residential development (Use Class C3) and commercial, business and service uses (Class E) uses in Development Plot N5 together with all landscaping, public realm, cycle parking and disabled car parking, highway works and infrastructure within and associated with those Development Plots.”

Outline planning permission for Development Plots N1, N2, N3, N6, N7, S1 and S8 including the demolition of all existing structures and redevelopment to include residential development (Class C3) commercial, business and service uses (Class E), sui generis leisure uses (including cinema and drinking establishments) together with all landscaping, public realm, cycle parking and disabled car parking, highway works and infrastructure within and associated with those Development Plots.”

1.3 Health Impact Assessments (HIA) are useful tools to assess and address the potential health impacts of development proposals. HIA systematically considers the ways in which planning and development might influence the health of a local population, with the aim of minimising negative impacts, maximising positive impacts and reducing health inequalities. This assessment process ensures that health is considered within the planning process.

1.4 Health is influenced by a combination of biological and environmental factors. Biological factors are largely inherent. However, environmental factors can be influenced through design and management of buildings and spaces which may be able to impact on health outcomes. These are recognised as the ‘wider determinants of health’ and include:

- General socio-economic, cultural and environmental conditions;
- Living and working conditions;
- Social and community influences; and
- Individual lifestyle factors.

- 1.5 Planning and development can play a key role within these wider determinants of health. The Marmot Review (2020)¹ outlines that, although there has been some progress since 2010, evidence shows stalling of life expectancy and a widening of the gap in health inequalities. To help improve health outcomes and reduce inequalities, further action needs to be taken on the social and wider determinants of health.
- 1.6 **LBC's Local Plan** (2017)² Policy C1 'Health and Wellbeing' outlines the LBC's ambitions to promote strong, vibrant and healthy communities. This includes the requirement for all major development schemes to include an HIA.
- 1.7 This HIA outlines the areas where the Proposed Development may impact on health, identifies the areas where potential negative impacts require mitigation, and explains how health related benefits will be maximised. The assessment applies the guidance as set out in the National Health Service (NHS) Healthy Urban Development Unit (HUDU) Planning for Health Rapid HIA Tool³ which identifies determinants for consideration within HIA and sets out a process on assessing health impacts of development proposals.

¹ Marmot, M., Allen, J., Boyce, T., Goldblatt, P., Morrison, J. (2020). Health Equity in England: The Marmot Review 10 Years On. Institute of Health Equality.

² LBC, 2017. Camden Local Plan

³ NHS London Healthy Urban Development Unit, 2019. HUDU Planning for Health Rapid HIA Tool (4th Edition).

2 Methodology

Site and Surrounding Context

- 2.1 The Site is approximately 5.77 ha and currently comprises the O2 Centre, which is arranged over three floors and contains a cinema, a mix of retail units, restaurants and cafes, a health club, a community room and a Sainsbury's store; hard-standing which is used as a carpark with space for 520 vehicles; a Homebase store; a number of purpose-built car showrooms; a Builder's Merchant; and Blackburn Road.
- 2.2 The planning application seeks to redevelop the site providing a mixed-use development supporting retail and community floorspace alongside, around 1,800 new homes and public realm. The Application is submitted as what is sometimes called a 'hybrid' application with Plots N3-E, N4 and N5 and associated access roads and infrastructure submitted in detail (the 'Detailed Proposals') and the remaining plots (N1, N2, N3, N6, N7, S1 and S8) and areas of the Site submitted in outline ('Outline Proposals').
- 2.3 The Detailed Proposals will include a total of 55,180 sqm (GIA) of residential floorspace (608 units) including an allowance for car parking.
- 2.4 The Outline Proposals will include up to 115,000 sqm (GIA) of residential floorspace including an allowance for car parking and basements
- 2.5 The Site falls within the West Hampstead ward of the LBC in inner London. The Site falls on the ward boundary therefore the adjacent ward (Swiss Cottage) has been considered to inform the Local Area baseline.
- 2.6 The HIA sets out an overarching perspective on the health issues relevant to the Site across the following geographic levels (where data is available):
 - West Hampstead and Swiss Cottage wards (defined as the 'Local Area');
 - LBC; and,
 - London.

Assessment Approach

- 2.7 The HIA will consider both the detailed and outline phases of the Proposed Development aligning with the wider planning application documents including **ES Volume 1**.
- 2.8 This HIA builds on the principles set out in the Healthy Urban Development Unit (HUDU) Guidance to develop a comprehensive assessment outlining how the Proposed Development could impact on health, identifying relevant pathways towards health outcomes, drawing on the wider determinants of health.
- 2.9 The assessment sets out how the design of the Proposed Development, and any mitigation measures required, would address any potential negative effects on health and promote beneficial health outcomes where relevant. This assessment is set in the context of the local

demographic and health baseline. This baseline analysis helps to inform how the health pathways and likely outcomes from the proposed development would have an impact in the area.

- 2.10 This HIA assesses the Proposed Development (during both construction and upon occupation) against these wider determinants of health, where relevant, to establish potential direct and indirect health impacts.
- 2.11 The HUDU guidance provides a checklist for assessing the health impact of planning proposals to establish a socio-economic and public health profile of the population, including:
- Housing quality and design;
 - Access to healthcare services and other social infrastructure;
 - Access to open space and nature;
 - Air quality, noise and neighbourhood amenity;
 - Accessibility and active travel;
 - Crime reduction and community safety;
 - Access to healthy food;
 - Access to work and training;
 - Social cohesion and inclusive design;
 - Minimising the use of resources; and
 - Climate change.
- 2.12 The baseline conditions have been informed by publicly available data including Public Health England (PHE) Profiles, LBC evidence base and community consultation where relevant.
- 2.13 The potential health pathways are then established within this HIA for each of the identified wider determinants of health, informed by an extensive literature review (the most significant document being the Marmot Review into Health Inequalities⁴).
- 2.14 To assess the potential health impacts, the Proposed Development's response to identified local health priorities through the health pathways is set out (Section 4). Quod has used the assessment matrix as provided within the HUDU Rapid HIA Tool to identify whether there will likely be a negative (-), neutral (0), positive (+) or uncertain (?) impacts on health.
- 2.15 Where negative impacts have been identified, potential mitigation measures and recommendations that could reasonably be undertaken are proposed, ensuring any negative impacts are minimised or prevented, and opportunities for the Proposed Development contribute to improvements in local health are maximised.

⁴ The Marmot Review, 2010. Fair Society, Healthy Lives. Strategic Review of Health Inequalities in England Post-2010.

2.16 HIA is a multidisciplinary process, therefore the assessment of the Proposed Development's potential health impacts has been informed through analysis of relevant technical assessments and documents submitted as part of the planning application, including:

- Relevant chapters of the Environment Statement (ES), Volume 1:
 - Chapter 5: Description of Proposed Development;
 - Chapter 6: Construction;
 - Chapter 8: Transport and Access;
 - Chapter 9: Air Quality;
 - Chapter 10: Noise and Vibration;
 - Chapter 11: Biodiversity;
 - Chapter 15: Socio-economics;
- Design and Access Statement (DAS);
- Planning Statement;
- Transport Assessment;
- Sustainability Strategy;
- Air Quality Positive Statement;
- Energy Strategy; and
- Statement of Community Involvement (SCI).

2.17 Key documents for reference within the HIA are the Development Specification, Parameter Plans and Design Codes. These documents form the three fundamental design control documents for the Proposed Development.

2.18 Reference to these documents is made throughout this HIA. The HIA should be read in conjunction with these documents.

3 Planning Policy Framework

3.1 A summary of policy which is of direct relevance to human health is set out below.

National Planning Policy

3.2 Chapter 8 ‘Promoting Healthy and Safe Communities’ of the **National Planning Policy Framework** (NPPF), 2021⁵ sets out a planning framework relevant to human health. It emphasises that planning and development should “*aim to achieve healthy, inclusive and safe places*” (para. 92).

3.3 The Planning Practice Guidance (PPG)⁶ further highlights the role of health, setting out the importance for Local Planning Authorities (LPAs) to identify local health needs, to plan effectively for the future. This includes working closely with other public health organisations and providers to support health infrastructure and promote healthy communities.

Regional Planning Policy

3.4 The **London Plan** (2021)⁷ Policy GG3 ‘Creating a Healthy City’ also emphasises the priority to reduce health inequalities and improve the overall health of Londoners, requiring that wider determinants of health are addressed through development in an integrated and co-ordinated manner. Specifically, the policy requires that potential impacts of development proposals on mental and physical health of communities are assessed 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*”.

3.5 The **London Health Inequalities Strategy** (2018)⁸ seeks to address persistent and, in some cases, widening health inequalities in London. The Strategy highlights that addressing the wider determinants of health (“*the conditions in which people are born, grow, live, work and age*”) is the most important thing that can be done to address health inequalities, and that development has significant potential to achieve this.

Local Planning Policy

3.6 **LBC’s Local Plan** (2017)⁹ notes the current challenge of health inequality facing the borough. The Local Plan outlines the borough’s ambition to improve health and wellbeing among residents beyond physical infrastructure (eg health facilities) taking an integrated approach to cover the wider determinants of health, ensuring all residents have access to good housing, jobs, skills, training and education, public transport and health and community facilities to help promote equality and inclusion supporting strong and resilient communities.

⁵ Ministry of Housing, Communities and Local Government, 2021. National Planning Policy Framework. London. HMSO.

⁶ Ministry of Housing, Communities and Local Government (Live Document) Planning Practice Guidance [online] Available: <http://planningguidance.communities.gov.uk/>.

⁷ GLA, 2021. The London Plan – March 2021.

⁸ GLA, 2018. The London Health Inequalities Strategy.

⁹ LBC, 2017. Camden Local Plan

- 3.7 Section 3 of the Local Plan highlights the importance of housing provision to health and wellbeing. This includes the provision of different housing types, sizes and tenures to ensure accessibility and affordability for all including vulnerable groups.
- 3.8 Policy C1 'Health and Wellbeing' outlines the Council's ambitions to promote strong, vibrant and healthy communities. This includes the requirement for all major development schemes to include a Health Impact Assessment (HIA) setting out where a development may positively contribute to creating high quality, active, safe and accessible places and how potentially adverse effects are mitigated. For developments that propose 100 homes or more the HIA should include details of engagement with stakeholders including the local community.
- 3.9 Paragraph 4.14 outlines the Council's integrated approach to health and wellbeing ensuring that it is not seen as an isolate topic. These bullets closely align with the themes of the HUDU Rapid HIA Toolkit including:
- **Housing quality** – ensuring residents have access to good quality accommodation that meets contemporary standards;
 - **Access to healthcare services and other services** - Policy C2 'Community Facilities' recognises that community facilities (eg schools and leisure facilities) are a vital part of supporting LBC's quality of life.
 - **Access to open space and nature** – ensuring access to open space to encourage physical exercise, relaxation and stress relief alongside reducing pollutants. Policy A2 Open Space outlines the Council's objective to protect, maintain and enhance open spaces and tackle deficiencies;
 - **Air quality, noise and neighbourhood amenity** – development can have significant effects on neighbourhood amenity and health Policies CC4 'Air Quality'; A1 'Managing the impact of development' and A3 'Biodiversity' each outline where development can influence / harm amenity;
 - **Accessibility and active travel** – improving travel environment to help prioritise and encourage active travel users such as walking and cycling;
 - **Crime reduction and community safety** – ensuring new development include design principles that contribute to community safety to design out crime and reduce fear of crime which can carry significant health effects (outlined in Policy C5 'Safety and Security');
 - **Access to work and training** – ensuring LBC residents benefit from local employment opportunities including access to skills and training;
 - **Social cohesion and lifetime neighbourhoods** – Policy D1 'Design' highlights the link between improved physical environment and health outcomes (both physical and mental) creating spaces that are safe and encourage healthy lifestyles (linking with access to open space, active travel and crime reduce); and,
 - **Climate change and minimising the use of resources** – Policies CC1 'Climate Change Mitigation' and CC2 'Adapting to Climate Change' seek to ensure buildings are designed to be more energy efficient to cope with changes to the climate system.

3.10 LBC's **Joint Health and Wellbeing Strategy refresh (2019)**¹⁰ updates the previous Strategy (2016-2019) to reflect the progress of the past years against the five strategy priorities:

- **Healthy weight, healthy lives** – creating a place where everyone has the opportunity to maintain and healthy lifestyle;
- **Reducing alcohol-related harm** – working together to reduce health inequalities, crime and disorder;
- **Resilient Families** – building community resilience and shifting the balance of service delivery towards earlier help and prevention;
- **First 1,001 days** – providing support in this life stage (from pregnancy to two years old) to ensure the best outcomes for children in critical first stages to improve life chances; and,
- **Ensuring good mental health for all** – promoting positive mental health and outcomes for people with serious mental health conditions and suicide prevention.

3.11 LBC's **Planning for Health and Wellbeing (2021)**¹¹ outlines how HIAs should be prepared including how the Council will manage development impacts on health and wellbeing, how the planning process can enhance the quality of life for new populations and in particular vulnerable populations. The document also signposts to wider Council health strategies and data for consideration within HIAs.

3.12 The guidance acknowledges the range of interrelated factors impacting health and wellbeing and therefore includes advice / signposting to other guidance on enhancing access to open space, housing standards, improving active travel opportunities and how to respond to noise and air pollution.

3.13 The environment in which we live is a large determinant of health, with factors such as transport, housing, education, income, unemployment and climate change having a key influence on healthcare provision.

3.14 Other determinants of health and wellbeing include:

- Physical activity – lack of physical activity can lead to poor health conditions including high blood pressure, cardiovascular diseases, some cancers and anxiety
- Active travel – easy method for individuals to meet the government's recommendations of at least 60 minutes of physical activity per day
- Access to open space – enables individuals to partake in physical activity, build social relationships and boost general health and self-esteem – improvements of these spaces will increase usage

3.15 Planning can play an integral role in shaping health for the ageing population, through the provision of new (and appropriate) housing and public realm. Key determinants of health and wellbeing for an ageing population include:

¹⁰ LBC. (March 2019). Camden's Joint Health and Wellbeing Strategy refresh

¹¹ LBC. (January 2021). Camden Planning Guidance - Planning for health and wellbeing

- Well-designed homes supporting residents to live independently;
- Social cohesion and community offering support networks and the security of familiar surroundings; and,
- The location of housing – accessibility of essential local services, the provision of high-quality green spaces and the design of public amenity spaces.

3.16 Local engagement with community, in particular vulnerable groups, is an important part of shaping design to ensure future developments and communities cater for all users. Public consultation was wide-ranging. A conscious focus was placed on engaging with ‘hard-to-reach’ groups including younger and older age groups.

3.17 The Guidance outlines the intention of the HIA - to systematically assess the potential impacts of a development on the social, mental and physical health of communities, highlighting whether a development will add to current health inequalities or have positive health outcomes.

4 Baseline Profile & Health Priorities

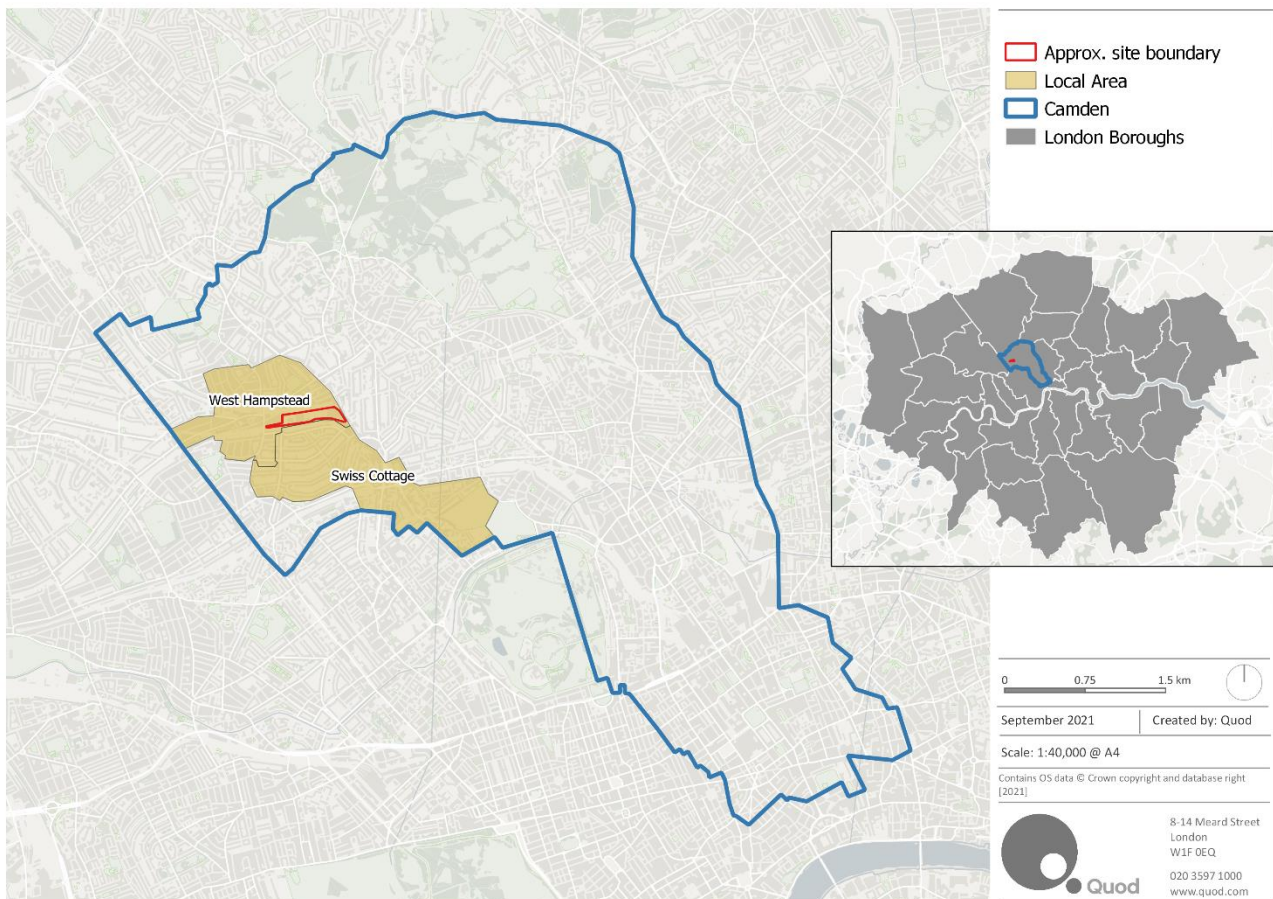
4.1 This section of the HIA sets out the health baseline conditions of West Hampstead ward and neighbouring Swiss Cottage ward (defined as the 'Local Area') where data is available, the LBC and London. The baseline information and the health policy context advise the health priorities in this HIA.

Health Profile

4.2 Table 4.1 presents a summary of the current health profile for residents of the Local Area and LBC, in addition to the London average for comparison. This table splits the baseline into three sections: health outcomes, risk factors and wider determinants.

4.3 These spatial areas are displayed below in Figure 4.1.

Figure 4.1: Spatial Study Areas



- 4.4 Most of the data in Table 4.1 is extracted from Public Health England (PHE) Local Health¹² and PHE Camden Health Profile¹³. This data is compiled from various sources including the NHS, ONS and the Annual Population Survey. PHE datasets also include data from the 2011 Census¹⁴ and the Sports England Active Lives Survey¹⁵. The data presented in Table 4.1 is not available at the ward level and therefore no data is provided for the Local Area. Data presented in Table 4.2 covers 2011 Census data which is available at ward level and therefore data is provided for the Local Area.
- 4.5 The majority datasets in Table 4.1 use indicators based on a standardised population number (generally per 100,000 population), or as a percentage of the whole population. The Standard Mortality Ratio (SMR) is calculated based on national averages with 100 representing the average expected number. Therefore, a score of over 100 indicates more deaths occurred than expected and a score under 100 indicates less deaths occurred than would be expected.

Table 4.1: Health Profile Summary

Health Indicator		LBC	London	England
Health Outcomes				
Life Expectancy at Birth (in years)	Male	83.1	80.3	79.4
	Female	87.7	84.3	83.1
Under 75 mortality rate: all causes (SMR)		280.7	298.8	326.0
Under 75 mortality rate: cardiovascular disease (SMR)		58.5	69.1	70.4
Under 75 mortality rate: cancer (SMR)		110.8	117.4	129.2
Under 75 mortality rate: all causes considered preventable (SMR)		157.2	160.7	180.8
Suicide Rate (per 100,000 population)		12.7	8.0	10.4
The rate of complaints about noise (per 1,000)		20.1	16.8	6.4
Fraction of mortality attributable to particulate air pollution		6.6%	6.4%	5.1%
Risk Factors				
Obese children (age 10-11 years)		35.9%	38.2%	35.2%
Adults classified as overweight or obese		48.2%	55.7%	62.8%
Smoking prevalence in adults (current smokers)		17.6%	15.4%	14.3%

¹² Public Health England, 2021. Local Health. Available at: <https://fingertips.phe.org.uk/profile/local-health>

¹³ Public Health England, 2021. Camden Health Profile. Available at: <https://fingertips.phe.org.uk/profile/health-profiles>

¹⁴ Office for National Statistics, 2011. Census

¹⁵ Sports England, 2020. Active Lives Survey 2019/20.

Health Indicator	LBC	London	England
Physically active adults (150+ mins moderate intensity activity per week)	65.8%	65.2%	66.4%
Fuel poverty	13.7%	15.2%	13.4%
Wider Determinants			
Violent Crime (per 1,000 population)	25.7	24.9	29.5
Killed and seriously injured on roads (per 100,000 resident population)	50.9	39.5	42.6
Children in low income families (all dependent children under 20)	11.9%	14.6%	15.6%
Statutory homelessness - Eligible homeless people not in priority need	0.1	1.0	0.8

Table 4.2: Self-Reported Health 2011 Census Summary

Health Indicator	West Hampstead	Swiss Cottage	Local Area	LBC	London
General health (self-reported)					
'Very Good' and 'Good'	86%	87%	87%	86%	84%
'Fair'	9%	9%	9%	10%	11%
'Bad' and 'Very Bad'	5%	4%	4%	6%	5%
Long Term Health Problem/Disability – day-to-day activities limited	13%	12%	12%	14%	14%

Health Outcomes

- 4.6 The Council's Local Plan¹⁶ states that LBC has one of the “*largest health inequality gaps*”¹⁷ between occupational groups for both men and women. This is also reflected in LBC's Joint Strategic Needs Assessment (JSNA) (2019)¹⁸ noting the greater inequality in life expectancy among LBC men than women.
- 4.7 Life expectancy and cause of death measurements represent the cumulative effect of risk factors, prevalence and severity of disease, and differences reflect health inequalities. As presented in Table 4.1, Life expectancy in LBC was higher for both men and women than both the London and England averages. Data for LBC suggests that the life expectancy for females (87.7 years) was marginally higher than the life expectancy for males (83.1 years).
- 4.8 The 2011 Census included a question self-reported health, where individuals identify their health as being either very bad, bad, fair, good and very good. According to 2011 Census data, 87% of individuals in the Local Area reported to be experiencing “very good” or “good” health

¹⁶ LBC, 2017. Local Plan

¹⁷ LBC, 2017. Local Plan, paragraph 4.1

¹⁸ Camden and Islington Public Health (PH) Intelligence and Information Team (November 2019). Camden JSNA Executive Summary

which was higher than proportions in LBC (86%) and London (84%). A summary of these statistics is provided in Table 4.2.

- 4.9 The 2011 Census data shows there to be 12% of residents in the Local Area have day to day activities limited due to long term health problems or disability. Within the Local Area, West Hampstead had a slightly higher proportion of individuals having difficulty carrying out day-to-day activities (13%) when compared to the proportion in Swiss Cottage (12%). The proportion in the Local Area was lower than across both London (14%) and England (14%).
- 4.10 The under 75 mortality rates in the LBC were lower than rates in London and England for all indicators as shown Table 4.1. The under 75 mortality rate from cardiovascular diseases is 58.5 deaths per 100,000 which was considerably lower than rates in London (69.1 deaths per 100,000) and England (70.4 deaths per 100,000).
- 4.11 The rate of noise complaints per 1,000 people was recorded to be 20.1, which is higher than rates in London (16.8 per 1,000 people) and England (6.4 per 1,000 people). Intuitively, LBC also had a higher fraction of mortality attributable to particulate air pollution (6.6%) when compared to London (6.4%) and England (5.1%).

Risk Factors

- 4.12 When examining healthy behaviours, the rate of obesity in children aged 10-11 years is slightly higher in LBC (35.9%) when compared to England (35.2%) but lower than the proportion in London (38.2%). Data regarding the proportion of children regarded as being overweight¹⁹ is not available for the wards within the Local Area.
- 4.13 The proportion of adults classified as being overweight was lower in LBC (48.2%) when compared to London (55.7%) and England (62.8%). Furthermore, the proportion of adults residing in LBC classified as being physically active²⁰ is 65.8%, higher than the proportion in London (65.2%) but marginally lower than the proportion in England (66.4%).
- 4.14 The World Health Organisation (WHO) identifies smoking as the driving cause of preventable morbidity and mortality, with smoking accounting for 1 in 6 of all deaths across England. According to PHE statistics, there is a higher prevalence of smokers in LBC (17.6%) when compared to London (15.4%) and England (14.3%).

Mental Health

- 4.15 Mental health and physical health are inextricably linked, with poor physical health often leading to mental health problems and vice versa. Individuals that suffer from substance misuse, obesity, smoking and cancer are increasingly likely to experience mental health problems.

¹⁹ Adults are recognised as overweight when they have a body mass index (BMI) above 25

²⁰ Physically active adults are individuals that partake in at least 150 minutes of physical activity per week

- 4.16 Poor mental health is also strongly linked with poverty and socio-economic disadvantage. Individuals in homelessness and institutional settings (such as care homes and prisons) are more vulnerable to poor mental health.
- 4.17 Suicide is a significant cause of death in the in young adults and is also an indicator of poor mental health. The suicide rate in LBC (12.7 per 100,000 people) is considerably higher than in London (8.0 per 100,000 people) and England (10.4 per 100,000 people). While LBC reports a higher rate than comparable areas, this reflects a decrease from previous data, as set out in the Joint Strategic Needs Assessment (JSNA).
- 4.1 Data on long-term mental health conditions (such as depression and anxiety) is recorded through the GP patient survey undertaken annually by NHS England²¹. The data is self-assessed and reported by individuals through the survey asking patients about their health today. The percentage of individuals reporting a long-term mental health condition through the GP Survey was 13% in Camden Clinical Commissioning Group (CCG), which is the higher than proportion for the London NHS region at 8%. And England?

Wider Determinants

- 4.2 In addition to illnesses and diseases, accidents and other behaviours that put people at greater risk are also of relevance to health and wellbeing.
- 4.3 Data from PHE²² shows that in LBC, there are 25.6 violent offences per 1,000 population, which is lower than the proportion recorded in London (24.9). However, there is a much higher incidence of death or serious injury in road accidents in LBC with 474.7 incidents per 100,000 population significantly higher than the 172.8 incidents per 100,000 population across London.
- 4.4 LBC were recorded to have the lowest proportion of children living in low income families at 11.9%, which was lower than proportions in both London (14.6%) and England (15.6%). Statutory homelessness was also lowest in LBC at 0.1 per 1000 but highest in London (1.0 per 1000).

Health Deprivation

- 4.5 The Government's Indices of Multiple Deprivation (IMD) (2019)²³ measures deprivation by combining indicators including a range of social, economic and housing factors, to establish a single deprivation score for each small area (Lower-layer Super Output Area (LSOA)) across England. All LSOAs are ranked relative to one another according to their level of deprivation.
- 4.6 These factors are divided among seven domains of deprivation, outlined as follows:
- Income deprivation;
 - Employment deprivation;
 - Education, skills, and training deprivation;

²¹ NHS England, 2019. GP Patient Survey.

²² Public Health England, 2021. Local Health. Available at: <https://fingertips.phe.org.uk/profile/local-health>

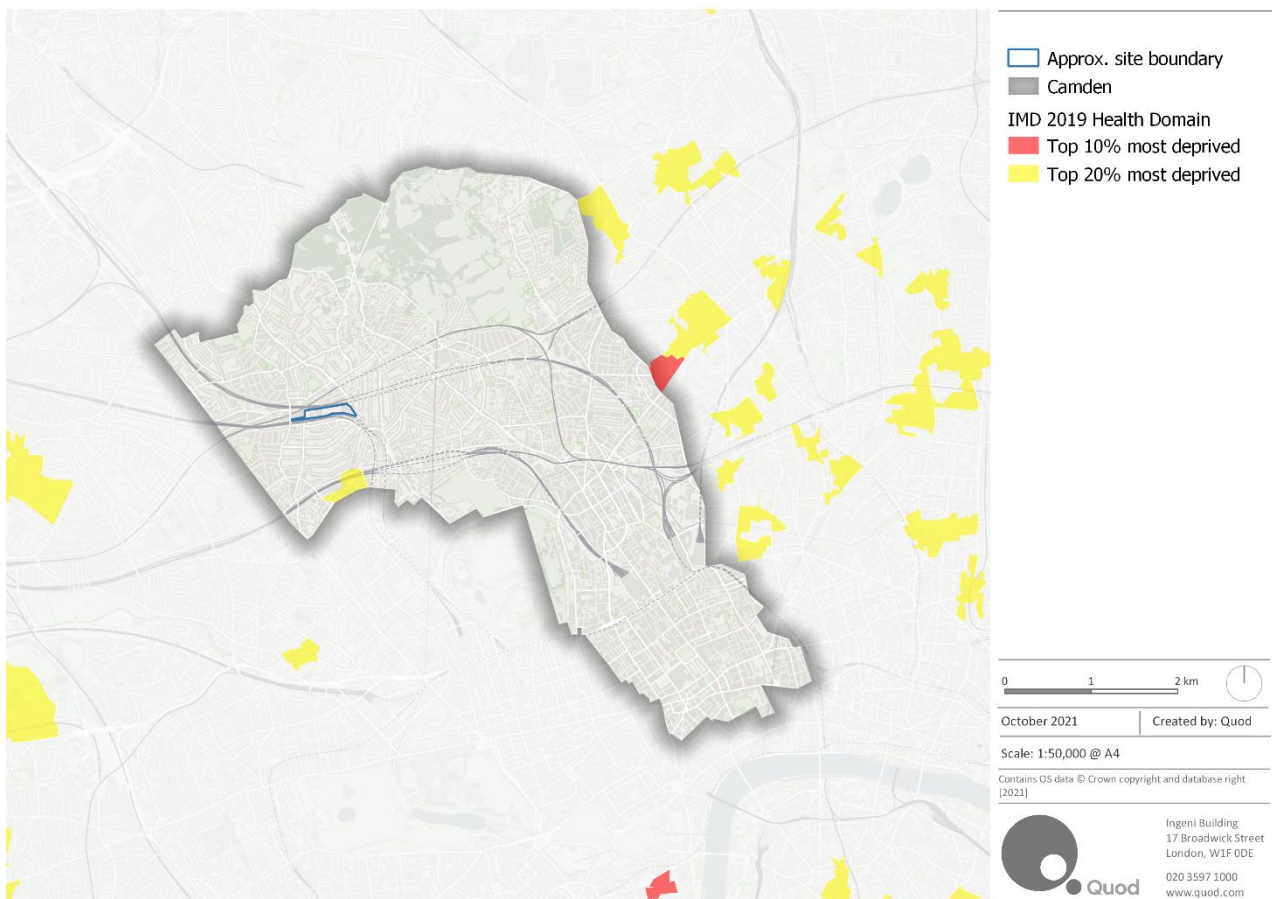
²³ Ministry of Housing, Communities and Local Government, 2019. The English Indices of Deprivation 2019

- Health deprivation and disability;
- Crime;
- Barriers to housing and services; and
- Living environment deprivation.

4.7 Health deprivation and disability measures “the risk of premature death and the impairment of quality of life through poor physical or mental health”²⁴. Measures of health include morbidity, disability and premature mortality. Figure 4.2 below shows the relative levels of deprivation within the health domain in the area surrounding the Site; areas in red are within the 10% most deprived in England, and those in yellow are within the 20% most deprived in England.

4.8 Figure 4.2 shows that an area approximately 900 m to the south of the Site is among the 20% most deprived nationally in terms of Health, which is the only area in LBC that is within the top 10% or 20% most deprived areas.

Figure 4.2: Indices of Deprivation: Health Domain



²⁴ Ministry of Housing, Communities and Local Government, 2019. The English Indices of Deprivation 2019: Statistical Release

Access to local social infrastructure

4.9 A full baseline is set out in ES Volume 1: Chapter 15 Socio-Economics. In summary, the baseline assessment indicates:

- There are ten primary schools within 1km of the Site, with the closest school being the Holy Trinity Church of England Primary School. Eight of the ten schools are within LBC with the remaining two falling in the City of Westminster (CoW) and London Borough of Brent (LBB). Please see Appendix 1 for the primary school map.
- There are ten secondary schools across LBC with The UCL Academy closest to the Site. Given the proximity of the Site to the borough boundary it is relevant to consider secondary schools in adjacent boroughs of CoW and LBB. Please see Appendix 2 for the secondary school map.
- There are 11 pharmacies, 15 opticians, 11 dentist surgeries and seven GP surgeries within 1km of the Site; the average number of registered patients per FTE GP is 1,587 which is lower than the suggested HUDU benchmark provision of 1,800 patients per FTE GP. The average across London (according to NHS Digital November 2021 data) is 1,965 patients per FTE GP.
- There are 19 publicly accessible open spaces within 800m of the Site²⁵. The Site is near some of London's largest and highly valued spaces including Primrose Hill and Regents Park which provide significant open space for the London population – however, LBC's Open Space, Sport and Recreation Study (2014)²⁶ identify the Site as being in an area of open space deficiency.

Health Priorities

4.10 Based on the Baseline Profile set out above, and local policy, the following are identified as key health priorities for consideration within this assessment:

- Reducing health inequality across the area (both between different neighbourhoods and between different people within those neighbourhoods);
- Improving the physical environment to encourage physical activity and active travel;
- Maximising access to education and employment opportunities;
- Tackling obesity through lifestyle and consumption choices;
- Tackling poor air quality;
- Tackling the level of violent crime (including reducing alcohol-related incidents);

²⁵ This catchment area for baseline assessment has been used in line with GLA Guidance (Play and Informal Recreation SPG (2012)

²⁶ LBC, June 2014. Camden Open Space, Sport and Recreation Study

- Provision of high-quality accommodation; and
- Promoting mental wellbeing.

4.11 These priorities relate to the Health Pathways set out in the Section 4 in a range of interconnected ways. Table 4.2 summarises the most relevant health pathways for each priority.

Table 4.2: Health Priorities and Health Pathways

Identified Health Priority	Most Relevant Health Pathways
Reducing health inequality across the area (both between different neighbourhoods and between different people within those neighbourhoods)	All Health Pathways relevant
Improving the physical environment to encourage physical activity and active travel	Accessibility and active travel Access to open space and nature
Maximising access to education and employment opportunities	Access to healthcare services and other social infrastructure Access to work and training
Tackling obesity through lifestyle and consumption choices	Access to healthy food Access to open space and nature
Tackling poor air quality	Air quality, noise, and neighbourhood amenity
Tackling the level of violent crime	Crime reduction and community safety
Provision of high-quality accommodation	Housing quality and design Air quality, noise, and neighbourhood amenity
Promoting mental wellbeing	All Health Pathways relevant

5 Health Impact Assessment

- 5.1 The following section considers the wider determinants of health, and how each determinant has the potential to influence health and promote healthy behaviours.
- 5.2 A qualitative assessment of the Proposed Development's impact on health is then made, following guidance set out in the HUDU Rapid HIA Toolkit. Recommendations are identified (where appropriate) to minimise any identified negative effects and maximise opportunities for the Proposed Development to contribute to improvements in local health.

Consultation

- 5.3 As part of the planning process, consultation with the Council and local community has taken place to inform the design and priorities of the Proposed Development. The Masterplan has been shaped as a direct result of extensive and collaborative engagement with local stakeholders.
- 5.4 Public community consultation has been ongoing since June 2019. An initial phase of consultation began in June 2019 on a previous scheme. Formal public consultation on the new comprehensive masterplan proposals commenced in September 2020 and was undertaken in four phases to November 2021. These four consultation phases captured the community view and feedback including important local priorities.
- 5.5 Consultation comprised a thorough programme of surveys, workshops, webinars, virtual meetings with key stakeholders, in person events and site tours, alongside additional promotion and activities such as a dedicated project website, social media advertising, Instagram polling, newspaper adverts, press releases, flyers, newsletters, consultation summaries, news updates to the project website, presentations and tenants' briefings. In addition, the Applicant conducted a youth engagement programme in partnership with youth engagement specialists 2-3 Degrees.
- 5.6 Following each phase of consultation, the Applicant carefully analysed and considered feedback – publishing a summary online and sharing details with key stakeholders for transparency.
- 5.7 Top concerns raised by the public of relevance to this assessment include public space and green space; public realm; homes; safety and security; mix of uses and social infrastructure.
- 5.8 The need for more public open space locally, particularly green space, was a key concern throughout consultation with 72% of Phase 1 respondents highlighting more green spaces as the key priority for improvement in the Finchley Road/West Hampstead area. Phase 2&3 consultation noted that there was general support for the delivery of new green spaces on-site with the Applicant committing to deliver at least 50% of the Site as public realm.
- 5.9 The need for more affordable homes was a top concern across consultation events with 30% of Phase 2 survey respondents and 38% of Phase 3 survey respondents flagging this as a priority.

- 5.10 Engagement throughout Phase 3 consultation flagged safety and security across the Proposed Development as a local concern. Open form comment boxes suggested the proposals conform to Secured by Design Standards and public spaces are designed to allow for good sight lines, avoid hidden areas and spaces are well maintained to deter crime.
- 5.11 Phase 2 consultation noted a range of comments on the current mix of uses offered by the O2 Centre, with some people presenting a desire to retain uses offered here and others expressing a desire to see the area revitalised as the current centre is outdated. Uses to be retained included the cinema, leisure and retail.
- 5.12 Access to social infrastructure was flagged in the Phase 3 consultation with 21% of respondents noting a health centre or GP surgery would be beneficial to be included in the O2 Masterplan Site.
- 5.13 The feedback from public consultation informed the future design of the evolving Proposed Development as outlined throughout the assessment. Please refer to the **Statement of Community Involvement (SCI)** for full details of consultation.
- 5.14 The Applicant has fully considered the feedback received throughout the consultation process and is committed to continuing to engage with the local community throughout the planning determination period, the construction of the first phases and during the Reserved Matters Applications for the outline phases.
- 5.15 In addition to public consultation, the Proposed Development has been subject to extensive pre-application consultation with the Council, statutory and non-statutory stakeholders. The engagement has informed design including public spaces, buildings, transport and accessibility, inclusivity and sustainability.

Housing Design and Affordability

Potential Health Pathways

- 5.16 Access to good quality housing is essential for public health, particularly for vulnerable groups such as the elderly or young people, or low-income groups. The Marmot Review (2010) identified that bad housing conditions – which also include factors such as homelessness, temporary accommodation, overcrowding, insecurity and housing in poor physical conditions – constitute a risk to health, and this is most likely to affect the more vulnerable groups in society. The Marmot Review 10 Years On (2020) report also notes the direct impact of poor-quality housing on mental health including stress resulting from affordability issues and financial strain.
- 5.17 Several housing factors can impact on health causing mental disorders, physical illness and accidents; these factors include:
- Poor choice of housing location (poor access to local services);
 - Design and orientation;
 - Poor sanitation;
 - Unfit living conditions such as excessive damp, poor insulation;

- Unhealthy environmental quality; and,
- Overcrowding.

Health Impact Assessment

- 5.18 The Proposed Development includes delivery of around 1,800 new homes providing a mix of housing types and tenures. The Detailed Proposals include delivery of 608 homes of which 188 homes would be in affordable tenure (104 London Affordable Rent and 84 Intermediate Rent). The Detailed Proposals include 82 family sized homes (3 or more bedrooms) equating to 13% of all homes.
- 5.19 The housing provision across the Outline Proposals is not yet defined and will be set out in future Reserved Matters Applications (RMA), however, the Development Specification sets out the Applicant's intention to include a minimum of 35% affordable housing by floorspace (GIA) and habitable rooms across the Outline Proposals. This housing would be split 60:40 between Low Cost Rent and Intermediate Rent respectively. Table 8 of the Development Specification sets out the proposed housing mix percentage ranges for the Outline Proposals including size and tenure type ranges. This sets out that 45% to 50% of Low Cost Rent homes would be family sized. Table 9 sets an indicative mix for the Outline Proposals that has informed modelling for EIA purposes which results in provision of around 1,800 homes across the Proposed Development.
- 5.20 The layout of the buildings has evolved through the pre-application process with residential buildings placed to maximise dual aspect. Furthermore, internal layouts for the Detailed Proposals were analysed to improve daylight and sunlight across new homes.
- 5.21 All homes across the Proposed Development would be of high-quality meeting contemporary standards, supporting good quality of life.
- 5.22 This section responds to the following questions outlined in HUDU's Planning for Health Rapid HIA Toolkit that are relevant to this application):
- Does the proposal seek to meet all 16 design criteria of the Lifetime Homes Standard or meet Building Regulation requirement M4 (2)?
 - Does the proposal address the housing needs of older people, ie extra care housing, sheltered housing, lifetime homes and wheelchair accessible homes?
 - Does the proposal include homes that can be adapted to support independent living for older and disabled people?
 - Does the proposal promote good design through layout and orientation, meeting internal space standards?
 - Does the proposal include a range of housing types and sizes, including affordable housing responding to local housing needs?
 - Does the proposal contain homes that are highly energy efficient (eg a high SAP rating)?

Table 5.1: Housing Design and Affordability – Health Impact Assessment

	Potential Health Related Impacts
Housing Design and Affordability	Details/Evidence
Response	<p>Positive (+)</p> <p>The Proposed Development has been designed with inclusivity in mind to ensure all residents are able to use the site comfortably and independently. The design has incorporated design practice guidance and incorporated the principles for inclusive design which are detailed below.</p> <p>All residential units that form part of the Proposed Development would meet the minimum space standards contained within the London Plan, these being the most recent minimum space standards for residential development within London and to ensure high quality living environments for future residents. Where appropriate, and as encouraged by the Mayor, residential units would exceed these minimum standards.</p> <p>Homes across the Detailed Proposals will be designed to meet Building Regulations (2010) with 90% of dwellings designed to Building Regulation M4(2) and 10% meeting M4(3) in line with guidance. This will ensure that all dwellings are wheelchair-accessible or easily-adaptable as a minimum catering for needs of all. Wheelchair user dwellings will be distributed throughout the Proposed Development, across type, size and level to ensure that units are not clustered together and to provide housing choice.</p> <p>Homes across the Detailed Proposals will meet or exceed the regulations for space standards. The design of the Detailed Proposals offers many opportunities for dual aspect apartments which can be seen on the internal layouts shown on the submitted plans. The design has sought to ensure that the majority of larger apartments are dual aspect to ensure sufficient light and views in different directions. This adds flexibility and variety to the internal spaces as well as improving natural ventilation.</p> <p>Access to residential buildings across the Detailed Proposals will be designed in line with AD M Volume 1 Standards and all buildings, and parts of buildings, including balconies and roof terraces, will include step-free access. Circulation space and corridors will allow sufficient space for wheelchair users to easily manoeuvre and vertical circulation will include two passenger lifts. For full details please refer to the Design and Access Statement.</p> <p>The Design Codes submitted as part of this Application set rules and guidelines for the Outline Proposes to ensure the delivery of a coherent and high-quality neighbourhood. The Design Codes document sets out the Architectural and Landscape design recommendations for future design including building typologies.</p>

	Potential Health Related Impacts
	<p>The Proposed Development includes a range of housing types including studios and 1 – 3 bed and tenure including affordable housing (Low Cost Rent and Intermediate Rent).</p> <p>Energy efficiency and sustainability has been a key element of the masterplan design with the Applicant’s ambition to deliver a future-proofed approach to energy efficiency and low carbon buildings as set out in the Energy Strategy and Sustainability Statement. The Energy Strategy approach is based on a fabric first approach with good levels of insulation, efficient systems and controls providing a development that is both comfortable for occupants and addresses issues such as fuel poverty through reduced running costs.</p> <p>The Proposed Development will employ the energy hierarchy as set out in the London Plan (2021) – Be Lean, Be Clean and Be Green – to reduce energy consumption and emissions across the Proposed Development.</p>
Additional Mitigation and Recommendations	None required.

Access to Healthcare Services and Other Social Infrastructure

Potential Health Pathways

- 5.23 Public services and community infrastructure are important to build strong, sustainable and cohesive communities. Good access to public services including health services, education and community facilities has a positive effect on human health, without which people can be at risk of isolation and lack of support required to maintain a healthy lifestyle. Under-provision can also lead to longer travel times, increasing transport requirements and potentially increasing local pollution.
- 5.24 **ES Volume 1: Chapter 15, Socio-economics** sets out the existing local provision of social infrastructure surrounding the Site including primary healthcare and education (primary and secondary schools). This baseline reports that there are seven GP surgeries, 11 dentists, 15 opticians and 11 pharmacies within 1km of the Site.

Health Impact Assessment

- 5.25 As set out in **ES Volume 1: Chapter 15, Socio-economics**, the proposed homes delivered as part of the Proposed Development would generate demand for social infrastructure. Population modelling using the indicative mix set out in the Development Specification, estimates that the homes proposed would accommodate an estimated 3,661 residents – 1,241 within the Detailed Proposals (608 homes) and 2,420 within the Outline Proposals.

- 5.26 The Proposed Development includes provision for a health centre (minimum floorspace of 1,000 sqm gross internal area (GIA)). This centre could accommodate up to 11 full time equivalent GPs.
- 5.27 **ES Volume 1: Chapter 15, Socio-economics** provides a detailed assessment of the likely effects of the Proposed Development on social infrastructure.
- 5.28 Table 5.2 below provides an assessment of the potential health impacts of the Proposed Development in relation to access to social infrastructure.
- 5.29 This section responds to the following questions outlined in HUDU’s Planning for Health Rapid HIA Toolkit that are relevant to this application:
- Does the proposal retain or re-provide existing social infrastructure?
 - Does the proposal assess the impact on health and social care services and have local NHS organisations been contacted regarding existing and planned healthcare capacity?
 - Does the proposal include the provision, or replacement of a healthcare facility and does the facility meet NHS requirements?
 - Does the proposal assess the capacity, location and accessibility of other social infrastructure, eg primary, secondary and post 19 education needs and community facilities?
 - Does the proposal explore opportunities for shared community use and co-location of services?

Table 5.2: Access to Healthcare Services and other Social Infrastructure – Health Impact Assessment

Access to Social Infrastructure	Potential Health Related Impacts Details/Evidence
Response	<p>No social infrastructures is currently accommodated on-site. Existing uses on-site include the O2 Centre which offers a range of leisure uses (including private gym and cinema), car park, Homebase store, Car showrooms and Builder’s merchant.</p> <p>ES Volume 1: Chapter 15, Socio-economics assesses the likely effect of the Proposed Development on health services. Population modelling estimates that the residents accommodated by the Proposed Development would equate to demand for 2 GPs. The baseline assessment identifies that there is currently surplus capacity within local GP surgeries (within 1km) in line with Healthy Urban Development Unit (HUDU) guidance. The Outline Proposals include provision for a health centre (minimum of 1,000 sqm GIA) which could accommodate up to 11 full time GPs. Therefore, the Proposed Development would deliver new infrastructure to support the population accommodated within the proposed residential floorspace (estimated to equate to around 1,800 homes) and serve the local area.</p> <p><u>Access to Healthcare Services (Positive (+))</u></p>

	Potential Health Related Impacts
	<p>The Applicant has engaged with the NHS regarding provision and requirements of this floorspace. The applicant has been engaging with local healthcare providers and has included, in line with planning policy, capacity for a health centre within the Proposed Development. A centre of this size could accommodate up to 11 FTE GPs. As shown in the baseline assessment, there is some capacity in local provision and it is not certain that additional capacity on this scale will be required: that will be a decision for the NHS. However, if the centre is taken up this would meet the demand arising from the Proposed Development (two FTE GPs) and provide new capacity for the surrounding community.</p> <p>The detailed design of the health centre would be set out in future Reserved Matters Applications (RMAs) and would be subject to a consultation process and agreement with NHS. Initial discussions had to date suggest this could also act as a multi-disciplinary healthcare centre providing out-patient facilities for the Camden and Islington NHS trust.</p> <p><u>Access to Education (Neutral (0))</u></p> <p>ES Volume 1: Chapter 15, Socio-economics models and assesses the likely effect of the Proposed Development on primary and secondary education. The modelling has been undertaken using the GLA Population Yield Calculator²⁷ and assessed against the baseline informed latest Annual School Census data²⁸. For further detail regarding the methodology please refer to ES Volume 1: Chapter 15, Socio-economics.</p> <p>The modelling concludes that an estimated 317 children of school age would be accommodated by the Proposed Development – 200 at primary age and 117 at secondary age. There is currently surplus capacity within primary schools locally and limited capacity across borough secondary schools. School roll projections reviewed by LBC anticipate increasing capacity at both primary and secondary level over the next ten years. Accordingly, the effect of the Proposed Development would be adverse but not significant for primary schools at the local level and for secondary schools at the borough level.</p> <p>Any adverse effects would be mitigated via financial contributions, if required, secured through Community Infrastructure Levy (CIL) in line with LBC’s adopted Developer Contributions Supplementary Planning Document.</p> <p>For full details please refer to the ES Volume 1: Chapter 15, Socio-economics.</p>

²⁷ GLA, (2019). GLA Population Yield Calculator v3.2

²⁸ Department for Education, 2021. Schools, Pupils and their Characteristics. (Annual School Census Data, 2020)

	Potential Health Related Impacts
	The Detailed Proposals include delivery of a community centre (270 sqm GIA). As part of the Detailed Proposals this community facility would be delivered in the first phase of the scheme. The proposed floorspace will include ancillary spaces including an office area, meeting room, sanitary accommodation and a kitchenette.
Additional Mitigation and Recommendations	Financial contributions, if required, secured through Community Infrastructure Levy (CIL) in line with LBC's adopted Developer Contributions Supplementary Planning Document.

Access to Open Space and Nature

Potential Health Pathways

- 5.30 Numerous studies point to the direct benefits of green space to both physical and mental health. Green space has been associated with a decrease in health complaints, improved mental health, reduced stress levels and the perception of better general health. The provision of open space also has indirect benefits by encouraging social interaction and providing space for physical activities, improving air quality.
- 5.31 Accessible amenity space has been linked with environments that are more walkable, with aesthetics and street connectivity influencing patterns of use. Physical activity, which is more likely to be undertaken if open space or improved linkages are provided, plays a key role in the prevention of specific diseases / health issues that include cardio-vascular disease, depression, and obesity.
- 5.32 As set out within Section 3 of this document, access to open space and nature is closely linked to the health priority of 'healthy lifestyles', due to its multiple functions in providing, among other things, space for recreation, tranquillity, relaxation etc. which can impact upon people's ability to adopt healthier habits, including exercise.

Health Impact Assessment

- 5.33 This Site does not currently comprise of any open space encompassing of the O2 Centre and associated car park, Homepage store, car showrooms and a Builder's Merchant. A full baseline assessment of existing open spaces is provided within **ES Volume 1: Chapter 15: Socio-Economics**. This notes that the Site falls within an area of open space deficiency (as set out in LBC's Open Space, Sport and Recreation Study (2014)²⁹). Therefore, the comprehensive redevelopment of the Site provides an opportunity to deliver significant open space of benefit to site users and the local community.
- 5.34 The Proposed Development will provide a minimum of 1.65 ha (16,511 sqm) of new parks, square and playspace – 0.61 ha within the Detailed Proposals. By its nature there is no detailed

²⁹ LBC, June 2014. Camden Open Space, Sport and Recreation Study

design for open space for the Outline Proposals, at this stage, however, a minimum of 1.03 ha is proposed.

5.35 Within this space, the Proposed Development includes delivery of 6,010 sqm of playspace – 2,100 sqm within the Detailed Proposals and 3,910 sqm within the Outline Proposals. By its nature there is no detailed design for this playspace for the Outline Proposals and the detailed design would be considered at Reserved Matters Application (RMA) stage.

5.36 These spaces would provide new open space in the local area for new and existing residents to enjoy, improving the public realm and accessibility across the Proposed Development. Therefore, the Proposed Development is expected to have an overall positive effect in relation to access to open and natural space – an assessment is provided in Table 5.3.

5.37 This section responds to the following questions outlined in HUDU’s Planning for Health Rapid HIA Toolkit that are relevant to this application:

- Does the proposal retain and enhance existing open and natural spaces?
- In areas of deficiency, does the proposal provide new open or natural space, or improve access to existing spaces?
- Does the proposal provide a range of play spaces for children and young people?
- Does the proposal provide links between open and natural spaces and the public realm?
- Are the open and natural spaces welcoming and safe and accessible for all?
- Does the proposal set out how new open space will be managed and maintained?

5.38 Potential health impacts of the Proposed Development in relation to access to open space and nature are anticipated to be positive as shown in Table 5.3.

Table 5.3: Access to Open Space and Nature – Health Impact Assessment

	Potential Health Related Impacts
Access to Open Space and Nature	Details/Evidence
Response	<p>Neutral (0) – Positive (+)</p> <p>The existing site is approximately 5.7 ha in size and does not currently comprise any open space being occupied by the O2 Centre; hard-standing, (used as a car-park), a Homebase store, and two purpose-built car showrooms and a builder’s merchant.</p> <p>As set out in Section 4, LBC’s Open Space, Sport and Recreation Study (2014) identifies the Site as being in an area of open space deficiency. Furthermore, access to open space and green spaces was a key concern raised in public consultation and pre-application discussions with the Council. Therefore, layout of proposals evolved through design of the comprehensive Proposed Development to increase the open space provision across the Site. The Proposed Development will provide a minimum of 1.65 ha (16,511 sqm) of new parks, square and playspace</p>

	Potential Health Related Impacts
	<p>The new open space Across the Proposed Development would comprise a range of spaces including:</p> <ul style="list-style-type: none"> • The Community Gardens: offering circa 3,000 sqm of garden space • The Linear Park: offering circa 5,300 sqm along the southern edge of the site in an east west direction. • A new public square (Finchley Square): offering circa 3,000 sqm off Finchley Road providing a generous gathering space for the local community away from vehicular traffic. <p>It should be noted that ES Volume 1: Chapter 15: Socio-Economics carries out the assessment on open space and playspace in line with local and regional policy – LBC Policy A2 Open Space and London Plan (2021) Policy S4: Play and Informal Recreation. The LBC policy applies a standard of 9 sqm per occupant for residential schemes and 0.74 sqm per employee for commercial developments. Against this policy the Proposed Development results in a deficit - any measures or proposed mitigation, if required, regarding open space provision would be secured via Planning Obligations in the Section 106 Agreement.</p> <p>London Plan policy applies a standard of 10 sqm of playspace per child which is met within the Detailed Proposals and against the illustrative Outline Proposals.</p> <p>As outlined above, a number of these spaces are designed to improve connectivity and permeability through the site – encouraging users to move safely with pedestrian priority through the site.</p> <p>All public realm, pedestrian areas and landscaped spaces are designed for comfortable use by site users, with step-free access to all amenity areas. Furthermore, safe spaces and routes are provided across the site for pedestrians and cyclists, segregated from vehicle traffic. For full detail please refer to the Design and Access Statement.</p> <p>The Applicant will be both owners and operators of the proposals once completed and therefore will be responsible for maintaining the new public spaces across the Proposed Development. As operators, the Applicant will ensure spaces are clean, safe and well-maintained.</p>
Additional Mitigation and Recommendations	Any measures or proposed mitigation, if required, regarding open space provision would be secured via Planning Obligations in the Section 106 Agreement

Air Quality, Noise and Neighbourhood Amenity

Potential Health Pathways

- 5.39 Air quality is a key influence in the quality of the environment in which a population lives, with implications for long-term health. Dust and emissions from transport and construction processes are the main potential source of pollutants. Poor air quality is associated with negative health outcomes, such as chronic lung disease, heart conditions and asthma, particularly among children.
- 5.40 Planning and development influence land use and, therefore, may influence the quantity and types of emissions produced – either reducing or increasing them. Mitigation measures, including the design of open spaces to act as green lungs for a community and the use of technology to reduce and capture emissions, may be used where appropriate.
- 5.41 The UK government has put a range of air quality standards and objectives in place to protect human health, which are the basis of the Air Quality Assessment submitted as part of **ES Volume 1: Chapter 7: Air Quality**. The Site is within the LBC Air Quality Management Area (AQMA), with the closest automatic monitoring station at Swiss Cottage. In 2019, the NO₂ annual mean Air Quality Objective (AQO) was exceeded while the PM₁₀ and PM_{2.5} annual mean AQOs were not surpassed.
- 5.42 There are also two Air Quality Focus Areas (AQFA) within 1km of the Site, which are locations that exceed the EU annual mean limit value for NO₂ and have high levels of human exposure. Further detail is set out in the air quality baseline in **ES Volume 1, Chapter 7: Air Quality**.
- 5.43 An Air Quality Positive statement has also been submitted which outlines how the Air Quality Positive approach has influenced the design process for the Proposed Development. This approach looks to maximise the benefits to local air quality in and around the Site, aiming to minimise exposure to existing sources of poor air quality. This document notes that the main constraints to air quality on Site are road traffic emissions produced from vehicles on nearby major roads.
- 5.44 Noise and vibration also have tangible links to the health of a population, particularly in places where people live or work in close proximity to sources of noise and vibrations. Excessive noise and vibrations may lead to mental health issues, stress-related illness and disturbances in sleep.
- 5.45 The full baseline and technical assessment of the effects of the Proposed Development in connection with noise and vibration is presented in **ES Volume 1, Chapter 6: Noise and Vibration**.

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- 5.46 The potential effects on air quality, noise and neighbourhood amenity arising from the construction and operation of the Proposed Development have been assessed in detail across the ES and supplementary documents.
- 5.47 The Proposed Development would put in place recommendations and mitigation measures to minimise impacts on air quality, noise and vibration arising from demolition and construction

works and the completed development – this includes adoption of a Construction Management Plan (CMP) and a Construction Logistics Plan (CLP).

- 5.48 The existing site comprises of the O2 centre, Homebase, Builders merchants' and car showrooms and supporting car-parking (offering 520 spaces). The Proposed Development removes the car park as part of the redevelopment – reducing vehicular movements in end-use. Furthermore, the Proposed Development design incorporates renewable energy and zero-emission technologies reducing likely emissions arising from the Proposed Development.
- 5.49 The Proposed Development will have a neutral impact on health in relation to air quality, noise and neighbourhood amenity during construction and a positive impact on health in relation to air quality, noise and neighbourhood amenity in end-use – an assessment is provided in Table 5.4.
- 5.50 This section responds to the following questions outlined in HUDU's Planning for Health Rapid HIA Toolkit that are relevant to this application:
- Does the proposal minimise construction impacts such as dust, noise, vibration, and odours?
 - Does the proposal minimise air pollution caused by traffic and energy facilities?
 - Does the proposal minimise noise pollution caused by traffic and commercial uses?

Table 5.4: Air Quality, Noise and Neighbourhood Amenity – Health Impact Assessment

Air Quality, Noise and Neighbourhood Amenity	Potential Health Related Impacts Details/Evidence
Response	<p>Neutral (0) at construction/ Positive (+) in end-use</p> <p>ES Volume 1: Chapter 7: Air Quality assesses the effects of construction on air quality including dust emissions and emissions from construction vehicle emissions.</p> <p>The assessment finds the predicted magnitude of dust emissions produced during the construction phase, before mitigation, to be large. The Proposed Development would implement a Construction Management Plan (CMP) outlining necessary mitigation measures to minimise dust emissions produced during construction activities. The CMP would be informed by the GLA Dust Guidance and will include mitigation measures for minimising effects from dust and particulate emissions. Following mitigation, the effects dust emissions on air quality are not projected to be significant.</p> <p>The assessment notes that throughout construction there are no exceedances predicted in the relevant AQALs for NO₂ or PM₁₀. However, PM_{2.5} is expected to exceed annual mean concentrations therefore mitigation to reduce PM_{2.5} should be incorporated. This includes mechanical ventilation with ISO Epm_{2.5} filtration of</p>

	Potential Health Related Impacts
	<p>over 50% at all air intakes for the Proposed Development. This is to reduce PM_{2.5} concentrations to below the WHO guideline. For plots that will be included in the Detailed Proposals, this mitigation will be embedded within the design.</p> <p>The construction programme would result in an increase in heavy duty vehicle (HDV) movements to and from the site. These vehicle movements would be associated with an increase in traffic emissions. However, the baseline notes a high level of vehicle movements due to the uses on-site (including car park). Therefore, the increase in emissions from HDV movements is outweighed by the reduction in emissions from other vehicle movements.</p> <p>ES Volume 1: Chapter 6: Noise and Vibration assesses the effects of construction on noise and vibration including construction traffic. Standard measures will be taken to minimise noise from construction traffic including electric and electro-hydraulic plant and equipment, plant to be operated at low speed, construction traffic to be parked away from sensitive uses and works to be limited to between 07:00-19:00 on weekdays and 07:00-13:00 on Saturdays. Vibration impacts from the construction process will be reduced through the use of non-percussive tools, rotary bore piling, regularly serviced plant and on-site vibration loggers to monitor noise levels.</p> <p>The mitigation measures identified for managing noise and vibration effects from construction of the Proposed Development are the best practical measures (BPM) that can be implemented.</p> <p>Furthermore, a Construction Logistics Plan (CLP) will be agreed with the LBC and implemented to noise contributions of construction traffic. The assessment of road traffic arising from the construction of the Proposed Development suggests that traffic noise levels will be unchanged or reduced and will not have a significant effect on high sensitivity receptors.</p> <p>Once operational, the Proposed Development would generate less traffic than the existing site uses due to the removal of the car park. Once operational, the Proposed Development would generate significantly less traffic than the existing site uses due to the removal of the car park (over 75% reduction in two-way vehicle flow during peak hours)</p> <p>The proposed energy strategy for the Proposed Development is all-electric, utilising zero-emission technologies. As no combustion sources are proposed, the impacts of emissions from the energy plant will not give rise to significant effects.</p> <p>The Proposed Development will also minimise pollution levels through the use of air sourced heat pump technology, enhanced with PV panels on roof tops. The Detailed Proposals of the Proposed Development will result in an approximate 66.3% reduction in CO₂ emissions through the use of air sourced heat pump</p>

	Potential Health Related Impacts
	technology as part of the Be Lean, Be Clean, and Be Green approach. The Energy Strategy sets out these proposals in detail.
Additional Mitigation and Recommendations	Implementation of a CMP and CLP to manage and mitigate dust and traffic effects during construction. Additionally, implementation of mechanical ventilation with ISO Epm _{2.5} filtration to reduce concentrations of PM _{2.5} .

Accessibility and Active Travel

Potential Health Pathways

- 5.51 Traffic or transport impacts may have positive or negative effects on health. Planning and development may result in effects that improve or reduce access to services, including health services, and to employment. It may provide or remove access to public transport, walking and cycling routes that support active lifestyles.
- 5.52 Increased traffic from large vehicles associated with demolition and construction may also pose indirect health effects through fear and intimidation to pedestrians and cyclists. Fear would impact on health by increasing stress, while intimidation may dissuade individuals from walking or cycling and thus making healthy lifestyle choices.
- 5.53 Accidents and road safety directly impact health, where traffic volumes could potentially have a detrimental effect on highway safety through increased opportunities for conflict.
- 5.54 Promoting active travel is important to deliver a ‘modal shift’, with less reliance on cars, and cycling, walking and other forms of active travel can be considered to have the ability to tackle multiple health considerations – including pollution, obesity, congestion and road accidents – all at once.
- 5.55 A traffic and transport environmental impact assessment is provided in **ES Volume 1: Chapter 8: Traffic and Transport**. A full transport baseline is also set out in the **Transport Assessment (TA)** submitted with the Application.
- 5.56 The Site is well served by public transport. There are stations nearby – three to the west and two to the east. Finchley Road station which is served by the Jubilee, Metropolitan and London Overground lines is to the south-east of the Site and Finchley Road and Frognal underground station (served by the London Overground line) is to the north-east of the Site. Both stations are within approximately 250m of the eastern boundary of the Site. West Hampstead Underground Station is within 500m of the Site to the west. West Hampstead Station is approximately 400m west of the site and provides an overground. West Hampstead Thameslink station within approximately 500m of the Site. According to TfL’s WebCAT tool, the Site has a PTAL ranging from 2-6b but a manual assessment shows the PTAL to 6a-6b in reality.

Health Impact Assessment

- 5.57 The proposals include a range of measures which support active travel, accessibility and connectivity and improved public realm. The public realm will improve permeability in the local area providing opportunities for users to move between Finchley Road in the east and West Hampstead to the west.
- 5.58 The Proposed Development will transform the Site into one focussed around people and place, with reduced car dominance and significantly enhanced provision for pedestrians and cyclists.
- 5.59 Potential health impacts of the Proposed Development in relation to accessibility and active travel are anticipated to be positive as shown in Table 5.5.
- 5.60 This section responds to the following questions outlined in HUDU’s Planning for Health Rapid HIA Toolkit that are relevant to this application:
- Does the proposal address the ten Healthy Streets indicators?
 - Does the proposal prioritise and encourage walking (for example through the use of shared spaces)?
 - Does the proposal prioritise and encourage cycling, for example by providing secure cycle parking, showers and cycle lanes?
 - Does the proposal connect public realm and internal routes to local and strategic cycle and walking networks?
 - Does the proposal include traffic management and calming measures to help reduce and minimise road injuries?
 - Is the proposal well connected to public transport, local services and facilities?
 - 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?
 - Does the proposal allow people with mobility problems or a disability to access buildings and places?
- 5.61 Potential health impacts of the Proposed Development in relation to accessibility and active travel are overall positive as set out in Table 5.5.

Table 5.5: Accessibility and Active Travel – Health Impact Assessment

	Potential Health Related Impacts
Accessibility and Active Travel	Details/Evidence
Response	<p>Positive (+)</p> <p>The Transport Assessment outlines compliance with the ten Healthy Streets indicators and how the Proposed Development aligns with TfL’s core principles of healthy streets and active travel. The design of transport for the Proposed Development focuses on people - improving footpaths and landscaping, reducing vehicle flows and activating the street at all times of day to creating a safe and accessible place for users.</p>

Potential Health Related Impacts

The **Transport Assessment** provides a detailed assessment of the Proposed Development against the Healthy Streets Designer's Check (**Appendix G**). The Proposed Development improves the score under each of the ten indicators outlined across the Site including Finchley Road, Blackburn Road and the leisure route through the Site.

The Proposed Development prioritises and encourages cycling with paths and parking proposed across the Proposed Development. The proposals will increase permeability for cyclists while enhancing east-west connectivity, which will in turn reduce vehicle dominance across the Site. The Proposed Development will provide a choice of east-west cycle routes, with the primary cycle route situated along Blackburn Road at the northern boundary of the Site. In addition to this, long-stay cycle parking will be provided across the Proposed Development and short-stay cycle parking will be provided within the proposed public realm.

Cycle parking provision has been calculated using the London Plan (2021) methodology. The Proposed Development is set to provide 1,064 number of long stay and 100 short stay cycle spaces across the Detailed Proposals. Cycle provision in the Outline Proposals shall accord with the London Plan standards (March 2021).

Vehicular access will be principally taken from Blackburn Road and Finchley Road, with a north-south route between Plots N2 and N3 to be provided to enable access to Plot S1, which includes disabled car parking, residential space and a commercial service yard. The reduced vehicle movement will create an opportunity to develop Blackburn Road into a low speed, low traffic environment that focuses on pedestrians and cyclists.

Feedback from public consultation, as set out in the **Statement of Community Involvement (SCI)**, noted the need to improve pedestrian experience, particularly along Finchley Road. The Proposed Development therefore proposed to widen the pavements setting back the buildings by around 10 metres to create a welcoming pedestrian entrance to the Site improving pedestrian experience while encouraging users to utilise new walking routes.

The Proposed Development will be "car-free", except for disabled parking, in accordance with London Plan (2021). Within the Detailed Proposals there will be a total of 18 disabled parking spaces. Disabled car parking provision will also be provided within the Outline Proposals (35 spaces). In addition, approximately three disabled places are provided to support the commercial floorspace - as the majority of the commercial floorspace falls within Outline Proposals, the disabled parking is located within the Outline element.

Potential Health Related Impacts	
	<p>The Site is well-connected to the wider public transport network with rail connections to the London Overground and Underground and Thameslink services. There are currently two bus services currently start and terminate within the Site. There are also a number of additional bus services accessible within the local area along Finchley Road, Broadhurst Gardens and West End Lanes. As stated above, the Site currently has a PTAL rating ranging from 6a to 6b, representing the highest level of transport accessibility. It is therefore an ideal location for intensification of development and the provision of new homes, due to its sustainable location, as reflected in planning policy.</p> <p>Access and approaches to building entrances across the Proposed Development will be designed to ensure access for all. All entrances will be level or gently sloping with suitable non-slip surfaces. All walking surfaces will be slip-resistant, paths well-lit and any gradients meeting or exceeding the requirements of Approved Document M.</p> <p>Further details are provided within the Transport Assessment, Statement of Community Involvement (SCI) and Design and Access Statement (DAS).</p>
Additional Mitigation and Recommendations:	No mitigation required

Crime Reduction and Community Safety

Potential Health Pathways

- 5.62 Crime-related injury is a significant public health problem. In addition, perception and fear of crime reduces social solidarity and can have a negative psychological impact. This can lead to mental health issues and subsequent physical illness associated with a lack of access to services and facilities, a lack of social interaction, and a sedentary lifestyle.
- 5.63 Construction sites can present particular opportunities for crime such as vandalism, theft of building materials, and increase fear of crime due to poor lighting and lack of animation out of work-hours.

Health Impact Assessment

- 5.64 The Proposed Development aims to create a safe and secure environment through the application of international best practice security design principles. Advice was sought from the Design Out Crime Officer (DOCO) of the Metropolitan Police to inform design to help prevent crime and create safer places.
- 5.65 Furthermore, a **Crime Impact Assessment** has been undertaken by Hoare Lea in line with the NPPF and London Plan guidance of creating a safe and secure environment. This

assessment outlines the security design approach of the Proposed Development to provide appropriate and proportionate security risk mitigation to allow users to feel safe and secure.

5.66 As set out above, extensive public engagement has been undertaken to understand local concerns and shape the proposals.

5.67 The Proposed Development will have a positive impact on health in relation to crime reduction and community safety – an assessment is provided in Table 5.6.

5.68 This section responds to the following questions outlined in HUDU’s Planning for Health Rapid HIA Toolkit that are relevant to this application:

- Does the proposal incorporate elements to help design out crime?
- Does the proposal incorporate design techniques to help people feel secure and avoid creating ‘gated communities’?
- Does the proposal include attractive, multi-use public spaces and buildings?
- Has engagement and consultation been carried out with the local community and voluntary sector?

Table 5.6: Crime Reduction and Community Safety – Health Impact Assessment

Crime Reduction & Community Safety	Potential Health Related Impacts
Response	Details/Evidence
Response	<p>Positive (+)</p> <p>The Proposed Development has been developed with key principles of the London Plan, Crime Prevention Through Environmental Design (CPTED) and the Police Service’s Secured By Design initiative (noting that a Secure By Design Application will be submitted for this development). Safety and security is an integral part of the design process and has been considered from the outset.</p> <p>Each phase of the Outline Proposals will come forward a Reserved Matters Application (RMA) to approve the detailed design – each RMA will be subject to a consultation process allowing an opportunity to comment on each new application.</p> <p>A formal security risk assessment (SRA) was undertaken to identify the security risks posed to the Proposed Development to inform the design process.</p> <p>The design of the Proposed Development has evolved to ensure all vehicular and pedestrian routes are visually open, direct well used and do not undermine the defensible space of neighbourhoods. Key design measures include public access and movement through the site linking Finchley Road and West End Lane and building entrances being subject to controls and permissible access for clearly defined user groups (where necessary enforced via electronic or physical security points).</p>

	Potential Health Related Impacts
	<p>Natural surveillance across the landscape is a core feature within the design with building footprints shifted to increase surveillance over the linear park during the masterplan evolution and ground floor uses (including cafes and retail outlets) offering passive surveillance. Additionally positioning of windows and balconies has been considered to improve natural surveillance over children’s play areas. The main movement networks across the proposals have been designed with clear visibility, lighting and good sight lines alongside the creation of active spaces.</p> <p>Furthermore, video surveillance systems and CCTV will be installed to mitigate anti-social behaviour and provide a deterrent to crime.</p> <p>For further details please refer to the Crime Impact Assessment.</p> <p>Designing for community safety has been an integral aspect of the Proposed Development with specific concerns for the safety and security of residents, visitors, workers raised in public consultation. The security of the Proposed Development will benefit from continuous public presence in well-lit, monitored, non-threatening spaces and the provision of a high-quality, well-maintained environment which people respect and in which people behave appropriately.</p> <p>The Proposed Development includes delivery of a variety of multi-use and attractive public spaces including the new town square. This square will provide a focus for dining, leisure and shopping in keeping with the urban character of the adjacent Finchley Road. Furthermore, the community pavilion proposed within the Detailed Proposals provides a space to meet within the liner park and is designed to host a range of uses throughout the day.</p> <p>For further details please refer to the Design and Access Statement.</p> <p>As outlined previously, several phases of formal community consultation have taken place from June 2019 to November 2021 to inform the design of the Proposed Development. Top concerns raised by the public of relevance to this assessment include public space and green space; public realm; homes; safety and security; mix of uses and social infrastructure. Provision of community spaces and a mix of uses was raised throughout consultation with the proposals adding in provision of a community hall in early phases. Please refer to the Statement of Community Involvement (SCI) for further details.</p>
Additional Mitigation and Recommendations:	None required

Access to Healthy Food

Potential Health Pathways

- 5.69 A diet including ample fresh fruit and vegetables is highly beneficial to personal health, providing essential vitamins that protect the human body from infection, boost the immune system and reduce the risks associated with a high-fat, high-sugar diet; for example, obesity and heart disease linked to high cholesterol. However, it is noted that inequalities exist with regard to access to healthy food.
- 5.70 The Site currently provides a Sainsburys within the O2 Centre. Beyond the Site the nearest fresh food supermarkets are Waitrose approximately 200 metres south of the Site.
- 5.71 Access to healthy food to help tackle obesity is identified within Section 3 as having links to the health priority of healthy lifestyles.

Health Impact Assessment

- 5.72 The potential health of the those living and working within the Proposed Development in relation to access to healthy food is uncertain due to it being largely dependent on resident and worker's choices.
- 5.73 The Proposed Development includes provision of retail floorspace alongside a mix of uses and food growing opportunities within the Outline Proposals landscape plans facilitating the supply of local food for the community.
- 5.74 This section responds to the following questions outlined in HUDU's Planning for Health Rapid HIA Toolkit that are relevant to this application:
- Does the proposal facilitate the supply of local food, for example allotments, community farms and farmers' markets?
 - Is there a range of retail uses, including food stores and smaller affordable shops for social enterprises?
 - Does the proposal avoid contributing towards an over-concentration of hot food takeaways in the local area?

Table 5.7: Access to Healthy Food – Health Impact Assessment

	Potential Health Related Impacts
Access to Healthy Food	Details/Evidence
Response	<p>Positive (+)</p> <p>The Proposed Development includes food growing opportunities within the community areas of the landscape design within the Outline Proposals for the eastern edge of the Site. This provision facilitates the supply of local food for the community.</p>

	Potential Health Related Impacts
	<p>The Proposed Development proposes delivery of a variety of retail (Class E(a) and Class E(b)), service (Class E(c)) and community floorspace (including a health centre and community floorspace). The design goals of the Proposed Development include creating frontages to the buildings with a welcoming and symbiotic relationship between built form, functions and activities and landscape.</p> <p>For further detail please refer to the Design and Access Statement and Sustainability Statement.</p> <p>The proposed Class E(a) floorspace would allow for delivery of retail floorspace which could include supermarket uses. The Site currently accommodates a Sainsburys. The Applicant is in positive and proactive discussions with Sainsbury's about the re-provision of a new store to serve the current and new population. The removal of car parking from the site under existing planning policy will ultimately result in a smaller format but it is still envisioned to be a comprehensive neighbourhood offer.</p> <p>The proposed Class E(b) floorspace would allow for the sale of food and drink. This floorspace has not yet been allocated.</p> <p>Under the Town and Country Planning (Use Classes) (Amendment) (England) Regulations 2020 hot food takeaways now falls within the 'Sui Generis' class. While Sui Generis floorspace is proposed across the Proposed Development it is currently not intended for this use.</p>
Additional Mitigation and Recommendations	None required

Access to Work and Training

Potential Health Pathways

- 5.75 Access to employment can be a significant contributing factor to increased health. Being in work can make it easier to pursue a healthy lifestyle, with income being one of the most significant influences on health and the prevalence of disease in public health research.
- 5.76 Unemployment is often related to an increased risk of poor physical and mental health, and premature death. There are three core ways in which unemployment affects levels of morbidity and mortality:
- Financial problems due to unemployment can result in lower living standards, which may in turn reduce social integration and lower self-esteem;
 - Unemployment can trigger distress, anxiety and depression; and

- Unemployment can affect health behaviours via increased smoking and alcohol consumption, and reduced levels of physical exercise.

5.77 The baseline above sets out some economic baseline data, however a detailed economic profile including unemployment and economic activity can be found in **ES Volume 1, Chapter 15: Socio-Economics**.

5.78 This data highlights that the Local Area has the lowest unemployment rate at 5% when compared to LBC and London (both at 7%). More recent data (Claimant Count) from July 2021 notes the Local Area to have a claimant rate of 4.2% compared to 5.1% in LBC and 7.3% across London

Health Impact Assessment

5.79 The Proposed Development will generate employment opportunities during both the construction and end use phases which is anticipated to have a positive impact on health in terms of access to employment.

5.80 Table 5.8 below provides an assessment of the potential health impacts of the Proposed Development in relation to access to work and training.

5.81 This section responds to the following questions outlined in HUDU’s Planning for Health Rapid HIA Toolkit that are relevant to this application:

- Does the proposal provide access to local employment and training opportunities, including temporary construction and permanent ‘end-use’ jobs?
- Does the proposal provide childcare facilities?
- Does the proposal include managed and affordable workspace for local businesses?
- Does the proposal include opportunities for work for local people via local procurement arrangements?

Table 5.8: Access to Work and Training – Health Impact Assessment

	Potential Health Related Impacts
Access to Work and Training	Details/Evidence
Response	<p>Positive (+)</p> <p>The Proposed Development will provide temporary demolition and construction employment opportunities over the 15 year construction programme. It is estimated using the Construction Industry Training Board (CITB) Labour Forecasting Tool that there will be an average of 380 full time equivalent (FTEs) jobs over the duration of the 15-year construction period for this Proposed Development.</p> <p>In end-use the Proposed Development would accommodate 545 to 758 gross jobs as estimated by ES Volume 1: Chapter 15: Socio-Economics. Taking into consideration the existing employment on-site (estimated at 465 FTE employees) this would result in a net gain on-site of 80 to 221 net jobs.</p>

	Potential Health Related Impacts
	<p>These jobs will provide opportunities across a variety of industries across a broad spectrum of skills with a balance between entry level and higher skilled jobs to meet the varied needs of the local labour market. The Applicant will seek to work with businesses and local groups to ensure that local people are able to access these jobs.</p> <p>The Proposed Development will provide 250sqm sqm of affordable workspace for local businesses and start-ups.</p> <p>The Applicant has submitted an Employment, Skills and Supply Plan to maximise opportunities arising from the Proposed Development for the local community and measures in this regard will be secured via Planning Obligations in the Section 106 Agreement.</p> <p>The Outline Proposals include provision for delivery of a creche – 300 sqm (GIA). This floorspace would provide childcare facilities for the local community including employees accommodated on-site.</p>
Additional Mitigation and Recommendations	Employment and Training Strategy secured via Planning Obligations in the Section 106 Agreement

Social Cohesion and Inclusive Design

Potential Health Pathways

- 5.82 Social cohesion and social capital are challenging to define but broadly relate to social relations and community characteristics that have productive benefits, socially and economically, with indirect impacts on the mental and physical health of that community.
- 5.83 The productive and cohesive operating of a society, to all of its members' mutual benefit, can be undermined by poverty, deprivation, poor education and fragmentation of society along lines of age or race.
- 5.84 The **ES Volume 1, Chapter 15: Socio-Economics** considers these factors, and highlights that local policy identifies an open space deficit in the area around the Site, and that the Site borders a neighbourhood to the south that is within the top 20% most deprived in England for all indices of multiple deprivation.
- 5.85 Availability of community infrastructure is central to generating social cohesion within communities, providing opportunity for social interaction and involvement in community activities; this in turn can reduce social isolation and promote mental and physical wellbeing.
- 5.86 The design of new buildings and spaces can also help reinforce or enhance the character, legibility, permeability and accessibility of the neighbourhood. Development should also

maximise the opportunity for community diversity, inclusion and cohesion and enable people to live healthy, active lives.

5.87 Creating well-connected and accessible services delivers social value by ensuring the people are able to make the most efficient and safe use of the build environment. Well-connected places that support active travel and use of public transport have a value by reducing carbon emission and promote healthier lifestyles. Creating an environment where people feel safe, and delivering services in locations such as town centres has a value by supporting community cohesion, encouraging people to engage with public services, reduces risk of loneliness/isolation etc.

Health Impact Assessment

5.88 The Proposed Development’s comprehensive design has evolved with sustainability, cohesion and inclusivity in mind. The Proposed Development provides new public realm and improved pedestrian and cycle connectivity and legibility, for the benefit of residents, employees and the wider local community.

5.89 These measures will have overall positive impact on health in relation to social cohesion and inclusive design – an assessment is provided in Table 5.9.

5.90 This section responds to the following questions outlined in HUDU’s Planning for Health Rapid HIA Toolkit that are relevant to this application:

- Does the proposal consider health inequalities by addressing local needs through community engagement?
- 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?
- Does the proposal include a mix of uses and a range of community facilities?
- Does the proposal provide opportunities for the voluntary and community sectors?
- Does the proposal take into account issues and principles of inclusive and age-friendly design?

Table 5.9: Social Cohesion and Inclusive Design – Health Impact Assessment

	Potential Health Related Impacts
Social Cohesion and Inclusive Design	Details/Evidence
Response	<p>Positive (+)</p> <p>Community engagement has been a key focus of the planning process for the Proposed Development. Extensive public consultation has taken place to engage stakeholders and the community on the proposals for the redevelopment of the Site. Following each phase of consultation, the Applicant carefully analysed and considered feedback to shape future design.</p>

	Potential Health Related Impacts
	<p>The need for more public open space locally, particularly green space, was a key concern throughout consultation with 72% of Phase 1 respondents highlighting more green spaces as the key priority for improvement in the Finchley Road/West Hampstead area. Phase 2 consultation responses noted that a key priority for these spaces would be places to sit and socialise accounting for 15% of the votes.</p> <p>Provision of open space and public realm are key to the masterplan design with 50% of the Site being delivered as public realm helping to meet local priorities and address local deficiencies. For further detail please refer to the Statement of Community Involvement and Design and Access Statement.</p> <p>The Proposed Development will improve and enhance connections for the local areas through the creation of a network of public realm east-west links improving the permeability of the site and including pedestrian and cycle links. This includes a dedicated route along the southern ends of the site connecting the two existing communities at Finchley Road and West Hampstead. The proposals will therefore increase permeability for site users and enhance east-west connectivity integrating the scheme into the wider spatial network.</p> <p>The Proposed Development includes a mix of uses including residential and non-residential floorspace. The proposed non-residential floorspace provides a wide variety of spaces including community space, leisure, workspace, recreations spaces and retail. This mix of uses will provide opportunities for social interaction and spaces for people to meet and enjoy.</p> <p>The Detailed Proposals includes delivery of a community hall (270 sqm GIA) providing opportunities for the voluntary and community sectors.</p> <p>The Design and Access Statement describes how the Proposed Development has been progressed with consideration of the principles of inclusive design including residents, visitors, staff and the wider community. This includes legibility and wayfinding design to facilitate access for those who are blind or partially sighted; step-free or gently-sloped routes; accessible cycling parking; and clearly distinguished entrances with easy entry.</p> <p>Accessibility and inclusion form part of the Design Codes which will guide development for future Reserved Matters Applications (RMAs) for the Outline Proposals securing principles of inclusive design.</p> <p>For further detail please refer to the Design and Access Statement & Design Codes</p>
Additional Mitigation and Recommendations	None required

Minimising the Use of Resources

Potential Health Pathways

- 5.91 Use of resources and waste from development can create a number of environmental impacts – these include ecological impacts (e.g. stripping of materials, mining for minerals etc.) through excessive use of resources; increased vehicle movements associated with the removal, sorting and disposal of waste; and hazardous impacts associated with improper disposal of waste materials.
- 5.92 Reducing waste can, therefore, contribute to improved human health both directly and indirectly by minimising environmental impact. Planning and development can reduce waste at both construction and operational phases through both minimising use of resources and encouraging recycling.

Health Impact Assessment

- 5.93 Sustainability and building performance is an integral part of good design and supporting the minimisation of use of resources. The scheme has evolved to ensure the best use of the opportunities presented by the Site and proposed redevelopment during construction (e.g. recycling of building materials) and in end-use including building design, water use, biodiversity and sustainable transport.
- 5.94 The Proposed Development is expected to have an overall positive impact on health in minimising resource use as set out in Table 5.10 below.
- 5.95 This section responds to the following questions outlined in HUDU’s Planning for Health Rapid HIA Toolkit that are relevant to this application:
- Does the proposal make the best use of existing land?
 - Does the proposal encourage recycling, including building materials?
 - Does the proposal incorporate sustainable design and construction techniques?

Table 5.10: Minimising the Use of Resources – Health Impact Assessment

	Potential Health Related Impacts
Minimising Use of Resources	Details/Evidence
Response	<p>Positive (+)</p> <p>Currently the Site comprises of the O2 Centre, Homebase, Car Showrooms and Builders Merchants alongside hardstanding. The Site is allocated within LBC’s adopted Site Allocations Development Plan Document (2013) for a housing-led re-development and revitalise the centre.</p> <p>The need for revitalisation is noted in current vacancy rates. According to the LBC’s Retail Survey (2018)³⁰ the O2 Centre has a vacancy rate of 5%. More</p>

³⁰ London Borough of Camden, 2018. Retail Survey

	Potential Health Related Impacts
	<p>recent data from Experian (May 2021) reports an increased vacancy rate of nearly 12%. As set out in the Regeneration & Town Centre Statement there is currently vacancy across retail floorspace (approximately 33% vacancy including former Habitat unit) and food and drink floorspace (approximately 76% vacancy by total sqm with eight vacant units).</p> <p>Therefore, the Proposed Development would meet the principles of this allocation providing much needed homes alongside community and commercial uses including re-provision of retail and leisure floorspace. Furthermore, the Site experiences a high PTAL rating (6a to 6b) - it is therefore an ideal location for intensification of development reflected in planning policy</p> <p>The Proposed Development aims to retain or reuse materials that accounts for 50% of the embodied carbon associated with the existing O2 Centre. This includes (inter alia) the retention of below ground elements (e.g. foundations, access ramps, retaining walls) and reuse of façade and above ground superstructure for repurposing the landscape areas or off site reuse.</p> <p>In end-use, the Proposed Development includes 140L mixed dry recycling space to encourage and maximise recycling by site uses.</p> <p>The central theme of the design strategy is to deliver a sustainable development as outlined by the Key Sustainability Measures set out in the Design and Access Statement. These include:</p> <ul style="list-style-type: none"> • Building design: a fabric first approach exploring passive design optimisations and energy efficiency measures, optimised solar photovoltaics, all-electric strategy, and BREEAM Certification New Construction 2018 to an 'Excellent' standard for commercial spaces; • Water use and Sustainable Urban Drainage: water efficient fittings, rainwater harvesting, and holistic storm water management strategy; • Biodiversity and landscape design: maximising daylight to public realm, 150% increase in biodiversity net gain; circular economy principles built into landscape design; and community gardens in public realm; • Sustainable transport: site-wide sustainable transport strategy, improved pedestrian and cycle transport routes. <p>For further information please refer to the Design and Access Statement and Sustainability Statement.</p>
Additional Mitigation and Recommendations	None required

Climate Change

Potential Health Pathways

- 5.96 The Marmot Review highlights a clear link between climate change and health, with climate change impacts likely to most effect those with the poorest health. This is reiterated in 'Marmot Review 10 Years On' with a further call to action to employ measures to reduce emissions and the potential impacts of climate change.
- 5.97 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, along with their impacts such as flooding.

Health Impact Assessment

- 5.98 The Proposed Development sets out a range of measures in relation to climate change, such as renewable energy, biodiversity net gain and sustainable urban drainage techniques as detailed in the **Sustainability Strategy, Energy Strategy and Design and Access Statement**.
- 5.99 These measures will have overall positive impact on health in relation to climate change – an assessment is provided in Table 5.11 below.
- 5.100 This section responds to the following questions outlined in HUDU's Planning for Health Rapid HIA Toolkit that are relevant to this application:
- Does the proposal incorporate renewable energy?
 - Does the proposal ensure that buildings and public spaces are designed to respond to winter and summer temperatures, for example ventilation, shading and landscaping?
 - Does the proposal maintain or enhance biodiversity?
 - Does the proposal incorporate sustainable urban drainage techniques?

Table 5.11: Climate Change – Health Impact Assessment

	Potential Health Related Impacts
Climate Change	Details/Evidence
Response	<p>Positive (+)</p> <p>The Proposed Development has been designed to incorporate renewable energy, with the Applicant committed to procuring 100% renewable energy for all areas under control. Renewables that are reliant on solar energy will also be placed on unshaded roof tops and air source heat pumps (ASHP) will be provided on-site as the primary heat generating technology. The use of this technology will act to minimise both running costs and carbon emissions.</p> <p>The Proposed Development is set to achieve a 6.8% reduction in regulated carbon from passive measures and a 67% site wide carbon reduction through addressing issues such as fuel poverty and maximising, where possible PV provision on the roofs of buildings.</p>

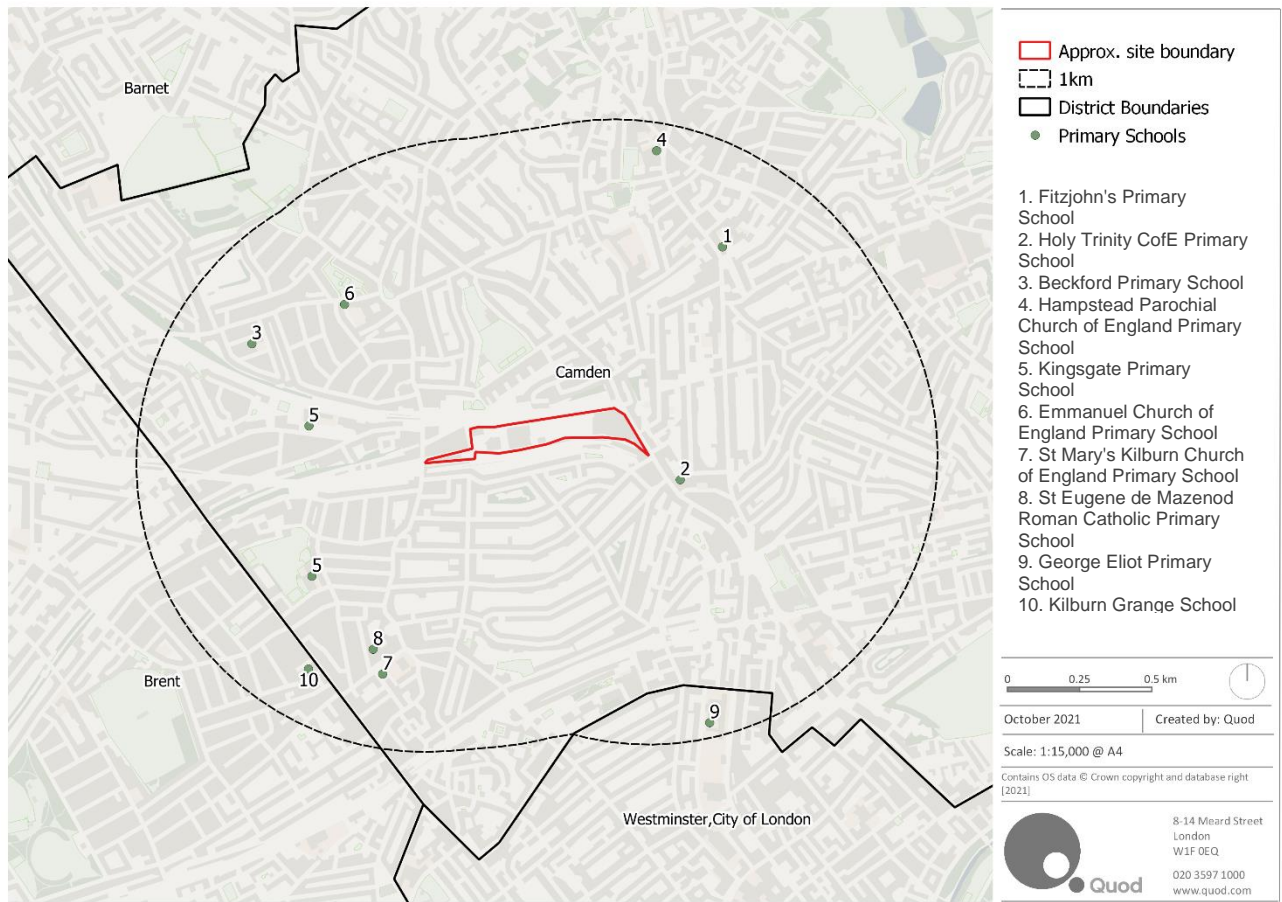
	Potential Health Related Impacts
	<p>The Proposed Development will aim to meet optimum indoor acoustic requirements across acoustics, ventilation and overheating. Massing will also allow for provision of dual aspect dwellings which will maximise daylight and passive ventilation opportunities. Across the Detailed Proposals 90% of social rented units, 38% of intermediate rent units and 50% of private units provided will be dual aspect.</p> <p>Approaches to improve pedestrian comfort and local microclimate temperatures by providing shading but allowing through winter sun through the use of deciduous trees.</p> <p>The Proposed Development would enhance biodiversity across the site through diverse planting and carefully established ecosystems across the new open spaces. The design of site massing has evolved to best enhance biodiversity and landscaping, with advice being provided from London Wildlife Trust to maximise biodiversity and Urban Greening wherever possible and maximising daylight to public realm, contributing to a 150% increase in biodiversity net gain on-site.</p> <p>The Proposed Development will implement a sustainable urban drainage strategy based on the installation of water efficient fittings to reduce internal water consumption, rainwater harvesting for irrigation to be considered into stormwater drainage system and holistic storm water management.</p> <p>For further details please refer to the Energy Strategy and Sustainability Statement.</p>
Additional Mitigation and Recommendations:	None required

6 Conclusions

- 6.1 The Proposed Development's potential health impact has been assessed based on the HUDU Planning for Health Rapid HIA Tool. The assessment has found that the Proposed Development is likely to have an overall positive impact on health.
- 6.2 The Proposed Development provides the opportunity for the comprehensive red-development optimising the potential of the Site through sustainable regenerate.
- 6.3 Positive health impacts relate to:
- The delivery of around 1,800 new high-quality homes in a range of sizes and tenures, responding to local needs;
 - Provision of affordable housing (Low Cost Rent and Intermediate Rent) across 35% of residential floorspace (GIA);
 - A car-free development contributing to healthier streets and extensive connectivity improvements through new cycle and pedestrian routes, facilitating active travel;
 - Strengthening east-west links between Finchley Road and West Hampstead;
 - Provision of high-quality open space and public realm (within area of deficiency) with inclusive design at heart and informed by public consultation;
 - Provision for a new health centre (minimum floorspace of 1,000 sqm GIA) which has the potential to accommodate 11 GPs. Initial discussions to date with the NHS have also suggested this could be developed as a multi-disciplinary healthcare centre. The detailed design of the health centre would be set out in future Reserved Matters Applications (RMAs) and would be subject to a consultation process and agreement with NHS.
 - Provision of new jobs associated with the non-residential uses on-site, supporting local employment thorough a diversity of jobs and roles;
 - Provision of community floorspace including community floorspace and a creche supporting the local community and promoting social cohesion;
 - Designing for community safety with principles of natural surveillance at heart and the promotion of community ownership;
 - A fabric first approach to design exploring passive design optimisations and energy efficiency measures contributing to sustainable design;
 - 150% increase in biodiversity net gain on-site; and
 - Encouraging the reuse and recycling of all possible materials and exploring opportunities to implement renewable energy technologies.
- 6.4 A number of recommendations/mitigation measures have been identified and considered to minimise potential negative health impacts identified and maximise positive health outcomes for occupants of the Site and surrounding area and are summarised below:
- If deemed necessary by the Council, CIL payments from the Proposed Development could be used to contribute towards social infrastructure including education provision;

- Implementation of a Construction Management Plan (CMP) and Construction Logistics Plan (CLP) to minimise any construction environmental effects including dust and traffic;
- Implementation of mechanical ventilation with ISO Epm_{2.5} filtration to reduce concentrations of PM_{2.5}.
- A Framework Travel Plan will set out the proposed modal shift objectives and targets to encourage increased use of public transport and active travel. The removal of the existing car parking and the delivery of a car free development (except for the required blue badge parking) will have associated health benefits; and
- Planning obligations will be secured within the Section 106 agreement to promote local employment opportunities (Employment and Training Strategy).

Appendix 1: Primary Schools



Appendix 2: Secondary Schools

