

Land at Tollgate Road, Colney Heath

Health Impact Assessment

On behalf of Vistry Group

Project Ref: 332510999 | Final | Date: December 2022

Registered Office: Buckingham Court Kingsmead Business Park, London Road, High Wycombe, Buckinghamshire, HP11 1JU Office Address: Office Address: 3rd Floor, Capital Square, 58 Morrison Street, Edinburgh, EH3 8BP T: +44 (0)131 335 4200 E: info.edinburgh@stantec.com



Document Control Sheet

Project Name: Land at Tollgate Road, Colney Heath

Project Ref: 332510999

Report Title: Health Impact Assessment

Doc Ref: Final

Date: December 2022

	Name	Position	Signature	Date	
Prepared by:	Nyla Miah Kathleen Morrison	Health and Social Value Consultant Health Consultant	NM KM	12/12/2022	
Reviewed by:	Juliet Clark	Senior Associate Health and Social Value	JC	15/12/2022	
Approved by:	Elaine Richmond	Environmental Director	ER	19/12/2022	
For and on behalf of Stantec UK Limited					

R	evision	sion Date Description		Prepared	Reviewed	Approved

This report has been prepared by Stantec UK Limited ('Stantec') on behalf of its client to whom this report is addressed ('Client') in connection with the project described in this report and takes into account the Client's particular instructions and requirements. This report was prepared in accordance with the professional services appointment under which Stantec was appointed by its Client. This report is not intended for and should not be relied on by any third party (i.e. parties other than the Client). Stantec accepts no duty or responsibility (including in negligence) to any party other than the Client and disclaims all liability of any nature whatsoever to any such party in respect of this report.



Contents

1	Intro	duction	1
	1.1	Background	1
	1.2	Report Structure	1
	1.3	Other Documents	1
2	Prop	osed Development and Site Context	3
	2.1	The Proposed Development	3
	2.2	The Site	3
	2.3	The Surrounding Context	4
3	HIA A	Approach and Methodology	5
	3.1	Introduction	5
	3.2	Approach	5
	3.3	Defining Health and Health Determinants	5
	3.4	Assessment Methodology	6
	3.5	Involving People in the HIA	11
4	Polic	y Context	12
	4.1	Introduction	12
	4.2	National Legislation and Planning Policy	12
	4.3	Local Planning Policy and Guidance	12
5	Base	line – Population, Human Health And Wider Determinants of Health	15
	5.1	Introduction	15
	5.2	Population	15
	5.3	Health Overview	17
	5.4	Wider Determinants of Health	19
	5.5	Health Profile Summary	24
	5.6	Assessment Receptors and Vulnerable Groups	25
6	Healt	h Assessment	26
	6.1	Introduction	26
7	Sum	mary and Conclusion	42

Figures

Figure 1. Site Location Plan (from the Design and Access Statement).	4
Figure 2. The Health Map - determinants of health and wellbeing (Barton and Grant, 2006 - adapted	
from Dahlgren and Whitehead, 1991)	6
Figure 3. Population pyramid by age and sex for Combined Districts vs England, 2021	
Figure 4. Disease prevalence (%) for common conditions amongst registered patients in selected	
medical practices within 3 miles of LSA vs England	19
Figure 5. Vulnerable/Disadvantaged Groups Checklist (WHIASU, Health Impact Assessment: A	
Practical Guide)	46



Tables

Table 1. Defined study areas for site location and codes	7
Table 2. Domains and topics scoped in and out of assessment, based on WHIASU Health and	
Wellbeing Checklist in Appendix B	8
Table 3. Description of Impacts (adapted from WHIASU - Health Impact Assessment: Practical Gui	ide
and Green et al., 2021)	. 10
Table 4. Population projections by decade for districts, combined districts, and England	. 17
Table 5. Household projections by decade for St Albans and England.	. 17
Table 6. Educational facilities nearest to the Site,	
Table 7. Information on nearest GPs to the Site. ¹³	. 23
Table 8. Other medical and health facilities nearest to the Site. ¹³	. 23
Table 9. Local and public amenities nearest to the Proposed Development (adapted from Table 1 o	of
the Planning Statement ⁴³ and Table 2.1 of the Travel Plan)	. 23
Table 10. Lifestyle Factors	. 27
Table 11. Social and Community Influences on Health	. 28
Table 12. Living / Environmental Conditions Affecting Health	. 30
Table 13. Access and Quality of Services Affecting Health	. 39
Table 14. Macro-Economic, Environmental and Sustainability Factors Affecting Health	. 43
Table 15. WHIASU Determinants of Health Checklist	. 45

Appendices

Appendix A	Site Location Plan and Parameter Plans
Appendix B	WHIASU Health Determinants Checklist
Appendix C	Vulnerable/Disadvantaged Groups Checklist



this page is intertionally blank



1 Introduction

1.1 Background

- **1.1.1** This Health Impact Assessment (HIA) has been prepared by Stantec UK on behalf of Vistry Group ('the Applicant'), in support of an outline planning application submitted for the construction of up to 150 dwellings (the 'Proposed Development') on land at 42-100 Tollgate Road, Colney Heath, St. Albans, Hertfordshire (the 'Site').
- **1.1.2** The Local Planning Authority is St Albans City and District Council. Hertfordshire County Council's position statement¹ on HIAs sets out indicative requirements for the preparation of a HIA to promote health and wellbeing, address adverse health impacts and reduce health inequalities. The requirement for a HIA has been identified as the Proposed Development meets a housing threshold of 100 or more residential units.
- 1.1.3 This HIA seeks to identify the potential beneficial and adverse effects of the Proposed Development on the wider determinants of human health and demonstrate how the Proposed Development will enhance beneficial effects through its design and delivery, in a manner proportionate to the size and characteristics of the Proposed Development.

1.2 Report Structure

- 1.2.1 The HIA is structured as follows:
 - Section 2: Proposed Development and Site Context description of the site and development
 - Section 3: HIA Approach and Methodology outline of assessment methodology
 - Section 4: Policy Context summary of relevant planning policy
 - **Section 5**: Local Health Characteristics description of baseline health conditions
 - Section 6: Health Impact Assessment assessment of health impacts in relation to the Proposed Development
 - Section 7: Summary and Conclusions overview of the assessment recommendations and concluding remarks.

1.3 Other Documents

- 1.3.1 Other reports and statements have been prepared to support the planning application, which relate to impacts on the wider determinant of health, including technical assessments on air quality, contamination, and transport. This report cross-references those documents as they provide greater detail on the assessment of impacts, clarification on the Proposed Development and proposed mitigation. Documents referred to include:
 - Design and Access Statement²: provides an explanation of how a Proposed Development design responds to the site and setting, and demonstrate that it can be adequately accessed by prospective users;

¹ Hertfordshire County Council (2019). Position Statement. Health Impact Assessments (HIAs). (hertfordshire.gov.uk)

² Design and Access Statement (June 2022). Vistry Group.



- Statement of Community Involvement ³: details the consultation undertaken with stakeholders and the local community;
- Transport Assessment⁴: contained within the planning submission, covering connectivity and measures for encouraging walking and cycling;
- Air Quality Assessment⁵: contained within the planning application, this assessment describes existing local air quality, considers the suitability of the Site for the proposed end-use and assesses the impact of the construction and operation of the Proposed Development on air quality in the local area;
- Noise Impact Assessment⁶: contained within the planning application, this assessment sets out the existing sound climate, assesses the suitability of the Site for residential development with respect to noise;
- Flood Risk Assessment⁷: assesses risk of flooding on Site and sets out a strategy for surface water management;
- Landscape Plan⁸: provides detail on the outdoor area for the Proposed Development and landscape proposals including planting and seating.
- **Utilities Appraisal**⁹: assess utility issues in relation to the proposed sites
- Ecological Impact Assessment¹⁰: assess the ecological conditions of the site and impacts associated with the proposed development

³ Statement of Community Involvement (June 2022). becg.

⁴ Transport Assessment (November 2022). RPS Group.

⁵ Air Quality Assessment (June 2022). Stantec.

⁶ Noise Impact Assessment (June 2022). Stantec.

⁷ Flood Risk Assessment and Drainage Strategy (June 2022). Stantec.

⁸ Landscape and Visual Impact Assessment (June 2022). CSA Environmental.

⁹ Utilities Appraisal (June 2022). Stantec.

¹⁰ Ecological Impact Assessment (July 2022). CSA Environmental.



2 Proposed Development and Site Context

2.1 The Proposed Development

- 2.1.1 The development proposals are as follows:
- 2.1.2 "A development for up to 150 new homes (including 35% affordable and up to 10 custom built homes); new public open space (including a children's play area, a new picnic/seating area, recreational footways, with 'Play on the Way' stations, and a potential new pedestrian link connecting the Site to Public Footpath 033); retention and enhancement of Colney Heath Farm Meadows Local Wildlife Site; and demolition of No. 42 Tollgate Road, to provide vehicular access off Tollgate Road."
- 2.1.3 The parameter plans are provided in **Appendix A**.

2.2 The Site

- 2.2.1 The Site is located on land at Tollgate Road, Colney Heath within the administrative boundary of St Albans City and District Council, Hertfordshire. The Site measures approximately 7.82 hectares (ha) and comprises an irregular shaped field located on the south eastern edge of Colney Heath, adjacent to Tollgate Road.
- 2.2.2 The site comprises two fields of horse grazing as well as the Colney Heath Farm Meadows Local Wildlife Site (LWS). The existing settlement at Colney Heath extends northwards and eastwards from the Site, with woodland and agricultural land extending to the south and west.
- 2.2.3 The site is bound by the wooded course of the River Colne to the south west; a paddock for horse grazing to the north west; Tollgate Road to the north east, and the rear gardens of the linear development further south along the road to the east; and further paddocks to the south and south east. The farmyard at Colney Heath Farm, including the Grade II Listed farmhouse and associated Listed barn, are located within 180m of the north western site boundary.

Stantec



Figure 1. Site Location Plan (from the Design and Access Statement).

2.3 The Surrounding Context

2.3.1 The University town of Hatfield is located approximately 2.2 miles (3.5km) to the east of Colney Heath, with the centre of St Albans located approximately 3 miles (4.9km) to the north west. The larger towns of Hemel Hempstead, Watford and Welwyn Garden City are all within 10 miles (16km) of Colney Heath, offering opportunities for employment, travel, and education. The nearest train stations are located at Hatfield and Welham Green which provide services to London Kings Cross, Cambridge and beyond.



3 HIA Approach and Methodology

3.1 Introduction

3.1.1 This chapter sets out the approach of this HIA, including the requirement for an HIA, how health is defined for the purposes of the HIA, and the methodology.

3.2 Approach

- 3.2.1 The objectives of HIA are as follows:
 - To identify the potential positive and negative health impacts associated with the construction and operation of the development;
 - To identify opportunities for improving health and promoting health equality; and
 - To identify opportunities to mitigate negative impacts on health and reduce health inequalities.
- 3.2.2 A requirement for HIA has been identified as the Proposed Developed exceeds a threshold of more than 100 dwellings as set out in the Hertfordshire County Council (HCC) position statement on HIAs¹.
- 3.2.3 The HIA follows nationally recognised methodology developed by the Welsh Health Impact Assessment Support Unit (WHIASU), HCC's preferred approach stated in the health impact assessment position statement.
- 3.2.4 This HIA details a prospective, desktop review of baseline health conditions undertaken to inform the HIA. The assessment methodology used is informed by the Welsh Health Impact Assessment Support Unit (WHIASU) Health Impact Assessment Practical Guide².

3.3 Defining Health and Health Determinants

- 3.3.1 The established definition of health from the World Health Organization (WHO) is that "*Health is a state of complete physical, social and mental wellbeing and not simply the absence of disease or infirmity.*"³ This assessment uses the WHO definition of health, recognising that a broader understanding of health and wellbeing, as well as illness and disease (mortality and morbidity), is useful.
- 3.3.2 This definition of health reflects the understanding that an individual's inherited traits interact with lifestyle, community, environmental, social, and economic factors as well as a much wider range of issues to determine their health outcomes, as shown in **Figure 2**. Some impacts may be direct, obvious, or intentional and others indirect, difficult to identify and unintentional. The purpose of the HIA is to anticipate and mitigate for these effects.

¹ Hertfordshire County Council (2019). Position Statement. Health Impact Assessments (HIAs). (hertfordshire.gov.uk)

² Welsh Health Impact Assessment Support Unit (WHIASU) <u>Health Impact Assessment: A Practical Guide (wales.nhs.uk)</u>.

³ World Health Organisation (1946, entered 1948) Preamble to the Constitution of the World Health Organization as adopted by the International Health Conference, New York.

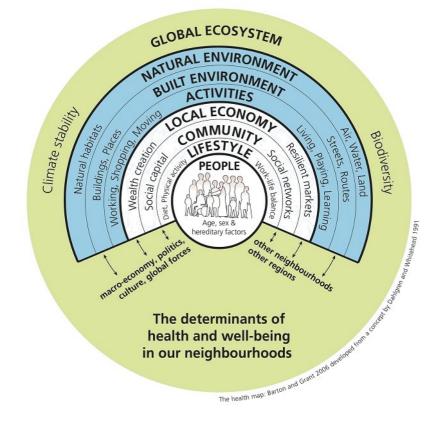


Figure 2. The Health Map - determinants of health and wellbeing (Barton and Grant, 2006 - adapted from Dahlgren and Whitehead, 1991)

3.4 Assessment Methodology

Baseline

Study Area

- 3.4.1 The study area for the baseline assessment includes the Middle Super Output Area (MSOA) within which the Site lies, known henceforth in this report as the 'Local Study Area' (LSA) and a district based local study area (See **Table 1**). MSOAs are used for the LSA as this is the smallest geographic area in which multiples sources of health data can be aggregated, enabling direct comparisons with a wide range of other data sets.
- 3.4.2 Health characteristics within the three districts of St Albans, Welwyn Hatfield, and Hertsmere is also considered. This provides an understanding of impacts for the consenting authority (St Albans DC) and then establishes local population health in the housing market area. The site is located in a sub-housing market consisting of St Albans District and Welwyn Hatfield Borough, as established in the most recent Strategic Housing Market Assessment (SHMA) Update from Welwyn Hatfield Borough Council (2017)⁴. In addition, Hertsmere District is included in the study area given its close proximity to the site.

⁴ Welwyn Hatfield Borough Council (2017). Strategic Housing Market Assessment (SHMA) Update. (welhat.gov.uk)



Table 1. Defined study areas for site location and codes

Defined area	Code		
Local study area (LSA)	MSOA E02007090: St Albans 021*		
St Albans District	LTLA E07000240: St Albans		
Welwyn Hatfield District	LTLA E07000241: Welwyn Hatfield		
Hertsmere District	LTLA E07000098: Hertsmere		
Combined Districts (CDs) (St Albans, Welwyn Hatfield, Hertsmere)	LTLA E07000240: St Albans , LTLA E07000241: Welwyn Hatfield , LTLA E07000098: Hertsmere		

*Formerly 015

- 3.4.3 For the wider determinants of health baseline, the LSA and the CD are the main study areas of focus. However, some determinants comprise of different study areas due to the nature of the determinant itself. The study area for education is based on the Place Planning Area (PPA) for Hertfordshire, to capture institutions which would accept pupils residing in the LSA. Open space and play area availability are mapped out based on guidelines set out within policy, such as walking catchment areas. Medical and health infrastructure are mapped out based on catchment areas as established by providers.
- 3.4.4 The methodology used in this HIA has been selected to be proportionate to the scale and nature of the Proposed Development. On the advice of HCC, the HIA is based on the methodology developed by the Welsh Health Impact Assessment Support Unit (WHIASU). The WHIASU HIA Toolkit is described as: "a process that considers how the health and wellbeing of a population may be affected by a proposed action, be it a policy, programme, plan, project or change to the organisational delivery of a particular public service".
- 3.4.5 The HIA Toolkit uses a five-step process, and steps three to five are addressed in this report:
 - Step 1 Screening: not required in this case as the need for HIA has been identified.
 - Step 2 Scoping
 - Step 3 Appraisal of evidence
 - Step 4 Report and recommendations
 - Step 5 Monitoring and evaluations

Health Determinants

- 3.4.6 The HIA Toolkit provides a Health and Wellbeing Determinant Checklist, based on six themes as outlined below and in Appendix B:
 - Lifestyles;
 - Social and community influences on health;
 - Living/environmental conditions affecting health;
 - Economic conditions affecting health;
 - Access and quality of services and

- Macro-economic, environmental and sustainability factors.
- 3.4.7 These have been used as a guide to identify and assess the determinants of health that are likely to be influenced by the proposed development. Selection of appropriate health determinants has also taken into consideration evidence relating to planning policy, health policy and priorities, population and health data, and the technical work of consultants listed in section 1.3.

Scope

3.4.8 **Table 2** below sets out the determinants of health scoped in and out of this assessment. Note that some topics have been incorporated into other domains due to overlap. Topics were scoped out if the land uses in the Proposed Development were not relevant to the topics and where insufficient detail is provided at outline application stage to merit assessment.

Table 2. Domains and topics scoped in and out of assessment, based on WHIASU Health and Wellbeing Checklist in Appendix B.

Scoped In	Scoped Out				
1. Behaviours affecting health	1. Behaviours affecting health				
Physical activity, active travel, and play	Diet Risk-taking activity Sexual activity Use and misuse of alcohol, cigarettes, and non- prescribed drugs				
2. Social and community influences on healt	h				
Citizen power and influence Social isolation/loneliness Sense of belonging Citizen power and influence Social isolation/loneliness Sense of belonging Cultural and spiritual ethos Parenting and infant attachment Third sector and volunteering					
3. Living and environmental conditions affect	ting health				
Built environment Neighbourhood design Housing Access and quality of green space Quality and safety of play areas Air quality and odour Noise and vibration Waste disposal Water quality Community safety					
4. Economic conditions affecting health					
None.	Unemployment / income Economic inactivity Type of employment Working conditions				
5. Access and quality of services					



Healthcare Services Transport Education and training Medial and health services Local amenities, services and information technology (internet access only)	Careers advice Othering caring services	
6. Macro-economic, environmental and sustainability factors		
Government policies Climate change Biological diversity	Gross domestic product Economic development	

Appraisal of Evidence

3.4.9 Evidence has been collected using desk top methods, plus consultation with the technical team and other planning application documents. This includes planning policy and guidance, health policies, priorities, and a range of baseline data sources. The sources used are listed below:

a. Planning Policy and Guidance

- National Planning Policy Framework⁵
- National Planning Practice Guidance⁶
- City and District of St Albans District Local Plan Review (adopted 1994)⁷

b. Health Policy and Priorities

- South West Hertfordshire Joint Strategic Plan8
- St Albans City and District Health and Wellbeing Strategy 2018 2021 (Revised 2020)9
- Hertfordshire Public Health Strategy 2022-202710
- Hertfordshire Health and Wellbeing Strategy 2016 2020¹¹

c. Technical work by consultants (see Section 1.3)

d. Baseline Data Sources

Office for National Statistics – Census Data 2011 and 2021 (NOMIS)¹²; Crime¹³;

⁵ HM Government (2012, updated 2021). <u>National Planning Policy Framework - GOV.UK (www.gov.uk)</u>

⁶ HM Government (2016, updated 2021). <u>Planning practice guidance - GOV.UK (www.gov.uk)</u>

⁷ St Albans City & District Council (1994). <u>District Local Plan Review 1994.pdf (stalbans.gov.uk)</u>

⁸ South West Hertfordshire Joint Strategic Local Plan. (In development) <u>SW Herts Joint Strategic Plan (swhertsplan.com)</u>

⁹ St Albans City & District Council (Revised 2020). <u>Health & Wellbeing Strategy 2018-2021.pdf</u>

¹⁰ Hertfordshire County Council (2022) <u>public-health-strategy-2022-2027.pdf (hertfordshire.gov.uk)</u>

¹¹ Health and Wellbeing Board Hertfordshire (2016). <u>Hertfordshire Health and Wellbeing Strategy 2016 – 2020 (hertshealthevidence.org)</u>

¹² Office for National Statistics (ONS). NOMIS. Nomis - Official Census and Labour Market Statistics (nomisweb.co.uk)

¹³ ONS. <u>Crime in England and Wales Statistical bulletins (ons.gov.uk)</u>

- Public Health England Fingertips14
- Office for Health Inequalities and Disparities (OHID) Local Health Profiles 15
- National Health Service (NHS) Service Locator16
- NHS Digital Quality and Outcomes Framework17
- Sport England 18
- Colney Heath Parish Council 19
- St Albans City & District Council²⁰

Baseline Conditions and Health Profile

3.4.10 Consideration has been given to the local health characteristics of the communities surrounding the Proposed Development when assessing health determinants and health impacts. This allows particular health and wellbeing issues in the local area to be identified, as well as any vulnerable groups that may be inequitably affected by health impacts. The health baseline is contained in Section 5 of this report.

Assessment of Health Impacts

- 3.4.11 A HIA matrix was used which outlines criteria associated with the wider determinants of health and wellbeing, against which the Proposed Development has been assessed to identify impacts. For each theme, an assessment has been completed to establish the baseline of the existing situation, an evidence base around health impacts associated with a health priority, and identification of likely effects.
- 3.4.12 Potential health impacts are described using the criteria outlined in Table 3.
- 3.4.13 Recommendations for mitigation and monitoring have also been made. The assessment is found in Chapter 6 of this report.

Domain	Description	Definition
Nature of the impact	How will the proposal affect health, and will the impact be <i>positive,</i> <i>negative, neutral,</i> or <i>uncertain</i> ?	Positive: impacts that are considered to improve health status or provide an opportunity to do so. Negative: impacts that are considered to diminish health status. Neutral: impacts that an unlikely to have any beneficial or adverse effect on health status.

Table 3. Description of Impacts (adapted from WHIASU – Health Impact Assessment: Practical Guide and Green et al., 2021)

¹⁴ Public Health England. Public Health Outcomes Framework - OHID (phe.org.uk)

¹⁵ Office for Health Improvement and Disparities. Local Health - Reports

¹⁶ National Health Service (NHS). Find services near you. (www.nhs.uk)

¹⁷ NHS Digital. <u>Quality and Outcomes Framework (QOF).</u>

¹⁸ Sport England. Active Lives. <u>Data | Sport England</u>.

¹⁹ Colney Heath Parish Council. <u>https://www.colneyheathparishcouncil.gov.uk/</u>

²⁰ St Albans City & District Council. https://www.stalbans.gov.uk/



		Uncertain: impacts cannot be established due to limited detail or evidence.
Likelihood of the impact	Is the likelihood of the impact of the proposal <i>possible, probable,</i> or <i>confirmed</i> ?	Possible: May or may not happen. Plausible, but with limited evidence to support.
		Probable: More likely to happen than not. Direct evidence but from limited sources.
		Confirmed: Strong evidence (e.g., from a wide range of sources) that an impact has already happened or will happen.
Scale and significance of the impact	What proportion of the population is likely to be affected? How severe or beneficial will the impact be?	Minimal: Of minimum amount, quality, or degree, negligible.
		Moderate: Average in intensity, quality, or degree.
		Major: Significant in intensity, quality, or extent. Significant or important enough to be worth of attention, noteworthy.
Timing of the impact	Will the impact be in weeks, months, years? Note: In some	Short-term: Impact seen in 0-1 years
impact	instances, the short-term risks to health may be outweighed by the	Medium-term: Impact seen in 1-5 years
	long-term benefits. Also, it is recognised in the assessment (where appropriate) that high intensity short duration effects can be as impactful as long term low intensity impacts.	Long-term: Impact seen in over 5 years
Distribution of the effects	Will the proposal affect different groups of people in different ways?	Identification of receptor groups and vulnerable groups (see Appendix C).

3.5 Involving People in the HIA

- 3.5.1 The development proposals have considered the views of local residents and stakeholders, as described in the Statement of Community involvement (SCI) submitted with the planning application. Public consultation specific to the HIA process has not been possible prior to completion of this assessment due to a limited timeframe. However, residents and stakeholders have been given the opportunity to provide feedback on the proposal and scheme design through a variety of channels, including a website, freephone information line, a project-specific email address and a two-week virtual exhibition.
- 3.5.2 Consultation with the local planning officer has been sought prior to completion of this HIA to provide an opportunity for feedback. Ongoing liaison will continue to inform the development proposals going forward.

4 Policy Context

4.1 Introduction

4.1.1 The Proposed Development is situated within the administration boundaries of St Albans City and District Council and Hertfordshire Council. Policy relevant to these administrative areas are set out below.

4.2 National Legislation and Planning Policy

Health and Social Care Act

4.2.1 The Health and Social Care Act (2012)¹ introduced a duty upon local authorities to "take such steps as it considers appropriate for improving the health of the people in its area". This can include requiring a Health Impact Assessment (HIA) for policies, plans and projects.

National Planning Policy Framework (NPPF)

- 4.2.2 The NPPF, revised in July 2021, identifies the key principles in relation to health that local planning authorities should consider. In particular, Chapter 8 'Promoting healthy and safe communities' states that decisions should aim to achieve the following key features to a healthy and safe community:
 - a. "Promote social interaction, including opportunities for meetings between people who might not otherwise come into contact with each other for example through mixed-use developments, strong neighbourhood centres, street layouts that allow for easy pedestrian and cycle connections within and between neighbourhoods, and active street frontages;
 - b. Are safe and accessible, so that crime and disorder, and the fear of crime, do not undermine the quality of life or community cohesion for example through the use of attractive, well-designed, clear, and legible pedestrian and cycle routes, and high-quality public space, which encourage the active and continual use of public areas; and
 - c. Enable and support healthy lifestyles, especially where this would address identified local health and well-being needs for example through the provision of safe and accessible green infrastructure, sports facilities, local shops, access to healthier food, allotments and layouts that encourage walking and cycling."

National Planning Practice Guidance

4.2.3 The national Planning Practice Guidance (PPG, live document) supports the NPPF health and wellbeing objectives. It states that health, wellbeing, and health infrastructure should be considered in plan making and decision making, recognising the causal relationship between health and wellbeing and the built and natural environment.

4.3 Local Planning Policy and Guidance

City and District of St Albans – District Local Plan Review (1994)

- 4.3.1 The City and District of St Albans Local Plan was adopted in 1994 and contains saved policies that are relevant to this HIA pending the preparation of a new Local Plan, these are listed below:
 - **Policy 7A Affordable Housing:** on sites of over 0.4 ha and on sites under this size where 15 or more dwellings are proposed, the council will seek to negotiate a proportion of affordable housing based on local housing need.

¹ Department for Health, HM Government. (2012). Health and Social Care Act. (legislation.gov.uk)



Policy 8 – Affordable Housing in the Metropolitan Green Belt: evidence is required to show that there is a demonstrable need for low-cost housing which cannot be met in a non-Green Belt location.

Policy 39 – Parking Standards, General Requirements

Policy 40 – Residential Developments Parking Standards

- **Policy 69 General Design and Layout**: requires are new development to be of a high standard of design which responds to the local context in terms of height, size, and scale.
- **Policy 70 Design and Layout of New Housing:** is concerned with the design and layout of new housing areas and requires proposals to incorporate a range of dwelling types and sizes and open space, including play area.
- Policy 74 Landscaping and Tree Preservation: healthy trees and other important landscape features such as hedgerows, ponds and watercourses should be retained unless it can be shown that retention is incompatible with design quality or economic use of the site.

South West Hertfordshire Joint Strategic Plan

- 4.3.2 The Joint Strategic Plan (JSP) is being prepared by Hertfordshire Council together with the five councils of St Albans City & District Council, Dacorum Borough Council, Hertsmere Borough Council, Three Rivers District Council and Watford Borough Council.
- 4.3.3 The JSP will provide a strategic vision for the area to 2050 and will consider issues that cross council boundaries. It will set out high level policies on topics such as climate change, infrastructure, environmental protection, employment, and housing to guide future plans and strategies. The key aim of the Plan will be to ensure that infrastructure such as transport, schools, health, and utilities is well coordinated and delivered together with new homes and jobs.

St Albans City and District Health and Wellbeing Strategy 2018 – 2021 (Revised 2020)

4.3.4 This strategy sets out two key priorities for the District and aims to ensure that everyone lives a healthy and fulfilling life. These include:

Improving physical health and wellbeing, and

Improving mental health and wellbeing.

Hertfordshire Public Health Strategy 2022-2027

- 4.3.5 The Strategy identifies that the planning system has a key role and increasing importance in shaping the environment so that living a healthier lifestyle can be an easier choice. It aims to:
 - Working with planners in local authorities to design sustainable neighbourhoods which support health and wellbeing, using its health and wellbeing planning guidance and other tools.
 - Work with district councils to improve housing conditions and prevent ill-health associated with poor housing.
 - Support the development of a joined-up quality communities' agenda, enabling local action to deliver clean air for all and other outcomes to protect human health.

Hertfordshire Health and Wellbeing Strategy 2016 – 2020

4.3.6 Using a wider determinants of health model, the Health and Wellbeing strategy sets objective for Hertfordshire across four significant life stages: starting well; developing well; living and working well; and ageing well. Relevant objectives include:



Aiming to keep people safe and reduce inequalities in health, attainment, and wellbeing outcomes.

Enabling people to live in their own homes for as long as possible and reducing social isolation in people aged over 65 years, ensuring good support and access to services.

Seeking to tackle homelessness and housing issues as well as their underlying causes.

Seeking to increase the proportion of children and adults who are getting the recommended level of physical activity and reduce levels of overweight and obesity.

5 Baseline – Population, Human Health and Wider Determinants of Health

5.1 Introduction

5.1.1 This section outlines the population and health characteristics of the communities around the Proposed Development site, relevant to the assessment topics. The purpose is to gain an understanding of the overall health of the population, identify sensitivities that could be affected by the Proposed Development, identify receptors within the local area that may be affected by the Proposed Development, and in particular any vulnerable groups that may be inequitably affected by the development.

5.2 Population

5.2.1 The resident population in 2021 in the LSA is 6,266, in St Albans it is 148,167, and in the CD it is 375,900¹. At the time of the 2021 Census, average household size in St Albans district is 2.49 and slightly more in the LSA at 2.59.

Age structure – Local Study Area

5.2.2 The LSA population age structure is similar to that of the CDs and England¹ which can be found in **Figure 3**. Both the LSA and CD have a slightly higher proportion of adults aged 40-54 years, but a lower proportion of over 60s, compared to England. Approximately 1 in 5 of the population are in the school age group, 5-19 years.

Stantec

¹ Extracted and calculated from: Office for National Statistics (ONS). NOMIS. Query Data. Census 2021. (nomisweb.co.uk)



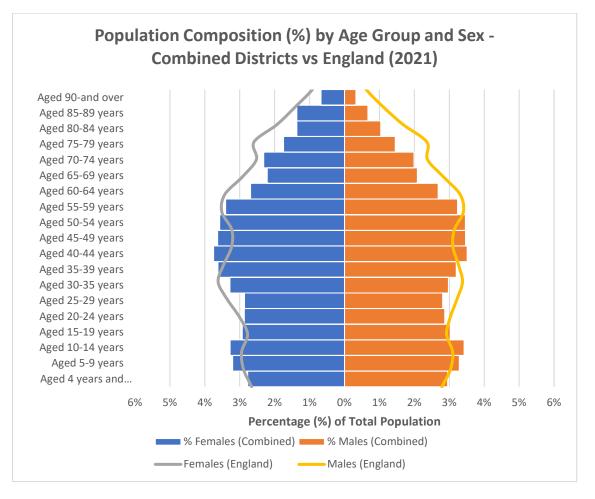


Figure 3. Population pyramid by age and sex for Combined Districts vs England, 2021

Population growth

5.2.3 The projected population growth for the CDs is shown in **Table 4** below. The projections show 3% growth in the CD between 2021-31, and 1% between 2031-41, which is slightly lower than projected growth for England (4%, and 3% respectively)1. However, it should be noted that this data comprises of ONS' recent addition of the Census 2021 data, whilst the most recent update for population projection data for future decades, was in 2020. Therefore, it may be expected for the 2031 and 2041 projections to be re-adjusted at a future date.



Table 4. Population projections by decade for districts, combined districts, and England.

Year	Hertsmere	St Albans	Welwyn Hatfield	Combined districts	England	Growth (% change per decade) for CDs	Growth (% change per decade) England
2021	107,800	148,200	119,900	375,900	56,989,572		
2031	106,764	147,953	131,103	385,820	59,389,107	+3	+4
2041	108,345	148,808	134,014	391,167	61,353,966	+1	+3

5.2.4 As a supplementary to the previous point, the projected household growth for St Albans (as the authority of the Proposed Development) indicates a growing population in future decades. Household growth in St Albans, compared to England, is shown in **Table 5** below. These are taken from the government's 2014-2039 projections². The projections show a consistent household growth of 10% in the district between 2019-29, and 2029-39 which is slightly higher than projected growth for England (9%, and 7% respectively).

Table 5. Household projections by decade for St Albans and England.

Year	St Albans	St Albans % growth	England	England % growth
2019	61		23,927	
2029	67	10%	26,083	9%
2039	74	10%	28,004	7%

Ethnicity

- 5.2.5 The LSA has a significant White identifying population (84.6%) which is higher than the CD and national averages (80% and 81% respectively). Within the White group, White British is the most populous (75.4% in the LSA vs 69% CD level and 73.5% in England), followed by White Irish (1.8% in the LSA vs 2% CD level and 0.9% in England).¹
- 5.2.6 The remaining population in the LSA is largely made up of those from Asian groups (6.9%) and mixed groups (5.6%). The African-Caribbean population makes up 1.1% of the LSA.¹Error! Bookmark not defined.

5.3 Health Overview

Life Expectancy

5.3.1 Average Life Expectancy (LE) at birth in the LSA is 84 years for females, and 81.4 years for males, which is similar to St Albans district and England.³

² Ministry of Housing, Communities and Government (2016). <u>Live tables on household projections - GOV.UK</u> (www.gov.uk)

³ Office for Health Improvement and Disparities (OHID). 2021. Local Health Profiles. <u>Reports.</u>



5.3.2 Healthy life expectancy (HLE)⁴ in Hertfordshire is 65 years for females and 66.1 years for males, whilst disability-free life expectancy (DFLE)⁵ is slightly higher at 66.2 for males and 66.7 for females. Both measures are above England averages.⁶

Mortality

Data covering the period 2016-20 shows that in the LSA, deaths from all causes across all age groups, as well as deaths from common conditions (stroke, circulatory disease, cancer, respiratory disease) are generally similar to that at national level.³

Disease prevalence

Whilst long-term illnesses and disabilities are prevalent in the LSA at 12.4% of the population, it is similar to the district (12.9%) and lower than national average (17.6%).³

- 5.3.3 **Figure 4** shows the prevalence of the top health indicators affecting health and wellbeing outcomes amongst registered patients in GP practices whose patient catchment includes the Site, all of which are currently accepting new patients⁷.
- 5.3.4 Across all included conditions, the population experiences lower or similar prevalence of disease compared to England. Chronic kidney disease is the most prevalent of all conditions amongst registered patients (11.2%) followed by chronic obstructive pulmonary disease (COPD) (10%)⁸.

⁴ Healthy Life Expectancy (HLE) is a measure of the average number of years a person would expect to live in good health based on contemporary mortality rates and prevalence of self-reported good health.

⁵ Disability free life expectancy (DFLE) is a measure of the average number of years a person would expect to live without a long lasting physical or mental health condition or disability that limits daily activities.

⁶ ONS (2019). Health state life expectancy at birth and at age 65 years by local areas, UK. (ons.gov.uk)

⁷ NHS. Find a Service. (www.nhs.uk)

⁸ NHS Digital (2022). <u>Quality and Outcomes Framework (QOF) - NHS Digital</u>.

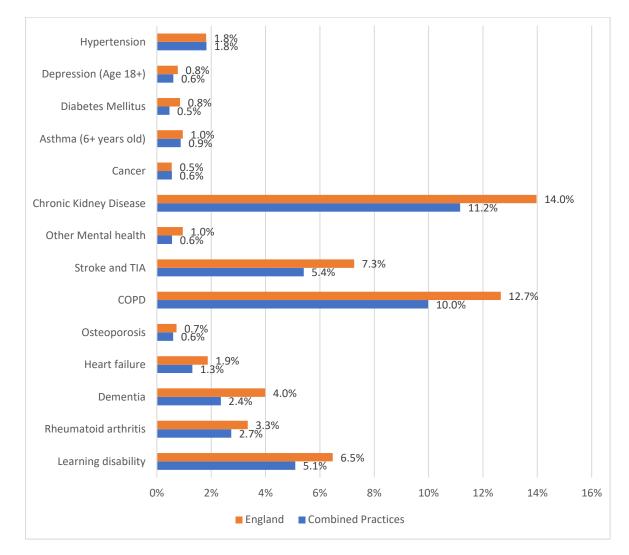


Figure 4. Disease prevalence (%) for common conditions amongst registered patients in selected medical practices within 3 miles of LSA vs England

Mental health and wellbeing

- 5.3.5 The prevalence of common mental health disorders in the combined population (aged 16+ years) is lower than the national level (14% vs 16.9%)⁹.
- 5.3.6 Population wellbeing at CD level is similar to that of national level. The estimated mean scores for both life satisfaction, and happiness, (out of 10 with 10 being completely satisfied and happy) at CD level was 7.4 for April 2021-March 2022¹⁰.

5.4 Wider Determinants of Health

Physical Activity and Active Travel

5.4.1 Data extracted from Sport England – Active Lives Survey¹¹ shows that the proportion of adults (aged 16+ years) at CD level engaging in active travel, sports and physical activity is similar to

Stantec

⁹ Extracted and calculated from: PHE. (2018). Fingertips | Public Health Data. Mental Health and Wellbeing JSNA, estimated prevalence of common mental disorders. (phe.org.uk)

¹⁰ Extracted and calculated from: ONS (2022). Annual personal wellbeing estimates. (ons.gov.uk)

¹¹ Sport England (2021). Active Lives. (sportengland.org)



that at national level. Between November 2020-21, almost a quarter (24.2%) of the population were recorded to have participated in active travel (measured as participation at least twice within 28 days). Just over three-quarters (77%) of the population participated at least twice in any type of sport or physical activity within 28 days.

- 5.4.2 When considering year-on-year comparisons, the proportion of the CD population engaging in active travel, sports, and physical activities, has decreased since November 2019-2021¹¹. Active travel has decreased by 5.8% and sports and physical activity engagement has decreased by 5%, whereas at national level they have remained relatively similar.
- 5.4.3 Participation from school age children in active play, informal activity and active travel at CD level are generally similar to national levels. At least half of all school age children in the CD engaged in active play and informal activity (56.6%) and active travel (54.7%) at least once a week within the academic year 2020-21¹¹. Conversely, approximately half of children have an unhealthy lifestyle and are not regularly engaged in active play and travel.

Living and environmental conditions

Air quality

5.4.4 An Air Quality Assessment was conducted by Stantec in June 2022¹², which states that to date, three Air Quality Management Areas (AQMA) have been declared in St Albans district due to exceedances in annual mean NO₂ objectives. The Proposed Development Site is not located within an AQMA and is approximately 6km from the nearest one.

Community safety

- 5.4.5 At CD level, the average rate of crime is 64 per 1,000 population. The most commonly recorded crimes are violence and theft¹³. The crime rate is lower than the average crime rate in England (77 per 1,000 population)¹⁴.
- 5.4.6 In the latest recorded crime statistics (covering a one-month period of October 2022), 26 crimes were recorded in Colney Heath, 12 of which were anti-social behaviour, the most commonly occurring offence. Nine crimes took place close to Tollgate Road. The Colney Heath area has a lower prevalence of crime compared to the rest of catchment area for policing.¹⁵

Access and quality of green and open space

- 5.4.7 Colney Heath has a children's play area (Roestock Park) 0.3km from the site. It provides a small local equipped area of play suitable for under 8s with metal play equipment, a multiuse games area and pitch. The village also hosts a football club and large area of informal open space, Colney Common, alongside the River Colne, 300m from the site.¹⁶
- 5.4.8 Larger areas of natural green open space are more limited relative to the Site. According to a Detailed Local Plan Technical Report on Green Spaces by St Albans City & District Council, "much of Colney Heath is outside the walking threshold for natural green space" (p.46)¹⁷. The St Albans District Green Infrastructure Plan further states that there is a deficit of green

¹² Air Quality Assessment (June 2022). Stantec.

¹³ Extracted and calculated from: ONS (2022). Recorded crime data by Community Safety Partnership area. (ons.gov.uk)

¹⁴ Crimerate. UK Crime Rates 2021-22. <u>UK Crime and Safety Statistics | CrimeRate</u>

¹⁵ Hertfordshire Constabulary (2022). <u>London Colney, St Stephens and St Albans East | Your area | Hertfordshire | (herts.police.uk)</u>

¹⁶ Google Earth (2022). <u>Google Earth</u>.

¹⁷ St Albans City & District Council (2016). Detailed Local Plan Technical Report: Green Spaces. (<u>stalbans.gov.uk</u>)



infrastructure in Colney Heath and that there are no high quality or high value non-Green Belt green spaces in this area¹⁸.

- 5.4.9 The Green Spaces Technical Report highlights that 75% of properties in Colney Heath are outside the accessibility threshold for non-strategic play areas for younger children, and 66% for older children¹⁷¹⁷.
- 5.4.10 Play facilities for older children (9-16 years) are located within 4.5km of the proposed development, which are beyond Fields in Trust benchmark walking guidelines for formal outdoor space.

Housing

- 5.4.11 St Albans District housing need is 893 dwellings per annum, contributing to a total need in the SW Herts area of 4.43 dwellings per annum (Comprises Dacorum, Hertsmere, St Albans, Three Rivers, and Watford). Affordable housing need is noted as 443 in St Albans between 2020-2036, although the needs assessment concludes, "Such is the scale of affordable housing need that the local authorities should seek to deliver as much affordable housing to rent as viability allows."¹⁹
- 5.4.12 Median house prices at CD level are almost twice that of national level and was £510,000 in the year ending September 2021 (vs £285,000 in England). The ratio of median house price to median earnings was also 50% higher compared to national level (13.6 vs 9.1)¹.

Water supply

5.4.13 A Utilities Appraisal was conducted by Stantec in June 2022²⁰. The Appraisal identified no gas or water infrastructure on site, and a need for diversions to accommodate these. Power networks, telecoms and oil pipelines exist around the Site, and where necessary, diversions are required for supply.

Economic conditions

5.4.14 The LSA is less deprived compared to CD level and national average, scoring 12.8 on the Index of Multiple Deprivation (IMD). Income deprivation is lower than national average (8.5% of the population compared to 12.9% nationally). The proportion of residents experiencing fuel poverty, living in large households (five or more people), and older people living alone are also lower than the proportion recorded at England level.¹

Access and quality of services

Education

- 5.4.15 Under 5s provisions in Colney Heath is in the Colney Heath preschool and school, and a range of private suppliers operate in the village and neighbouring towns and cities.
- 5.4.16 The site is located in the Colney Health Primary School Place Planning Area, comprising one school Colney Heath Junior, Mixed Infant and Nursery School (JMI). It has places for 210 children (a one form entry school with a reception intake of 30 pupils) and in 2021 had 187 pupils on roll.²¹

 ¹⁸ St Albans City & District Council (2011). St Albans District Green Infrastructure Plan. <u>www.stalbans.gov.uk</u>.
 ¹⁹ GL Hearn (2020) SW Hertsforshire Local Housing Needs Assessment <u>General Report Template</u> (stalbans.gov.uk)

²⁰ Utilities Appraisal (June 2022). Stantec.

²¹ Department for Education School Capacity Open Data. <u>GOV.UK</u>



- 5.4.17 The current (2022-23) 6.7% surplus of reception year places is anticipated to become a 10% shortage of places by 2024-25.²²
- 5.4.18 The site is in St Albans Secondary School Place Planning area (9190013) comprising six schools with a total capacity for 7,816 pupils.²³ In 2022 there were 7,616 pupils on roll, leaving 220 surplus places. Nicholas Breakspear Catholic School is the closest school to the site (3.4km) and currently has 165 unfilled places.²¹
- 5.4.19 Hertfordshire's place forecasting shows a shortage of Year 7 places (between 2.8% and 10.2%) for 2021-2027/28. However, actual demand pressure is recognised to be lower than the recent forecasts due to increases in school capacity in the place planning area and surroundings nearby schools. Future demand pressures will be provided for by an increase of one form entry (240) pupils at St Albans Girls' School.²⁴
- 5.4.20 Sixth form capacity is determined by the individual schools, and it is usual for schools to keep pace with the secondary schools demand and their own secondary public admissions number. It is likely that place capacity reflects that of secondary schools.
- *5.4.21* The SEND Strategy reports "Around 36,000 children and young people in Hertfordshire have an identified SEND need. This is equivalent to around 13.3% of pupils in Hertfordshire schools". Demand for SEND provision is increasing. Priorities include meeting demand locally.²⁵
- 5.4.22 The nearest educational facilities to the Site are detailed in **Table 6** below.

Level	Name	Distance (km / walk time)	Additional notes
Pre-school	Treasure Tots	1 km/ 12 minutes	Includes SEND provision
Primary (and nursery)	Colney Heath JMI	1.1 km/ 14 minutes	Includes SEND provision
Secondary (and post-16)	Nicholas Breakspear Catholic School	4.2 / 51 minutes	DAS notes connection from Site via bus route 355. Includes SEND provision

Table 6. Educational facilities nearest to the Site²⁶,²⁷

Transport (active travel, public transport, parking)

5.4.23 The site is within walking distance of bus stops situated along Tollgate Road, and opposite the Site of Roestock Lane. There are five bus services which can take residents to a number of locations including Colney Health village and Welham Green. Bus services connect to

²² Hertfordshire County Council(2018/19). Demand for School Places: Primary <u>summer-22-23-primary-school-forecast.xlsx</u>

²³ Department for Education School Capacity Open Data. (explore-education-statistics.service.gov.uk)

²⁴ Hertfordshire County Council(2018/19) Demand for School Places : Secondary. <u>Meeting the rising demand for</u> <u>school places (hertfordshire.gov.uk)</u>

²⁵ Hertfordshire County Council (2022) SEND Strategy 2022-2025. <u>send-strategy-2022-25-pdf-415kb.pdf</u> (hertfordshire.gov.uk)

²⁶ Extracted from: Hertfordshire County Council (2022). School planning. <u>hertfordshire.gov.uk</u>

²⁷ Design and Access Statement (June 2022). Vistry Group.



nearby railway stations which provide access to London. Welham Green Railway Station is 3.6km from the Site and can be accessed by bicycle in 12 minutes²⁸.

Health and medical services

5.4.24 **Tables 7 and** 8 below list the nearest health and medical services to the Site. Dental surgeries are listed as the nearest ones currently accepting new patients.

Table 7. Information on nearest GPs to the Site.⁷

NHS GP code	Practice Name	Distance (km)
E82002	Wrafton House Surgery	2.6
E82058	Potterells Medical Centre	2.9
E82023	Burvill House Surgery	4.5
E82014	Highfield Surgery (Lodge Health Partnership)	5.5
E82113	Colney Medical Centre (Verulam Medical Group)	6.3

Table 8. Other medical and health facilities nearest to the Site.⁷

Туре	Name	Distance (km)	Accepting patients? *
Dentist	Welham Green Dental Surgery	1.9	Yes (limited)
Dentist	Hilltop Dental Surgery	4	Yes
Pharmacy	Kean Pharmacy	1.9	N/A
Pharmacy	Jhoots Pharmacy	2.4	N/A
Opticians	Boots London Colney	3.4	N/A

*Nearest dental surgeries accepting patients listed in this table only

Local and public amenities (retail, shops, leisure, and community facilities)

^{5.4.25} The Site's nearest facilities can be found in Colney Heath village center which is 2.3km away. The facilities are listed in **Table 9 and mapped in the DAS.**²⁷

Table 9. Local and public amenities nearest to the Proposed Development (adapted from Table 1 of the Planning Statement²⁸ and Table 2.1 of the Travel Plan²⁹)

Туре	Facility	Distance to Site (km)
Retail	Colney Health Post Office	0.6
Retail	Colney Heath News	0.4
Retail	Sainsbury's	4.4
Health	Jhoots Pharmacy	4.6
Leisure	Colney Heath Football Club	1.1
Community	Village Hall	0.9

²⁸ Planning Statement. (June 2022). DLA Town Planning.

²⁹ Residential Travel Plan (November 2022). RPS.



Retail	Café	0.5

Macro-economic, environmental and sustainability factors

Climate change

- 5.4.26 The majority of the Site lies within Flood Zone 1³⁰, denoting the lowest scale of flood risk of less than 0.1% chance of flooding in any year. The western part of the Site, located adjacent to the River Colne lies within Flood Zones 2 and 3³⁰. Zone 2 has a 0.1% 1% chance of flooding from rivers in any year (between 1:1000 and 1:100 chance) or between 0.1% 0.5% chance of flooding from the sea in any year (between 1:1000 and 1:200 chance). Zone 3 has a 1% or greater probability of flooding from rivers or 0.5% or greater probability of flooding from the sea. Development in Zone 3 is subject to restrictions.
- 5.4.27 St Albans City & District Council declared a Climate Emergency in June 2019 with a net zero target by 2030. The plan includes actions to reduce emissions across buildings and operations in the District.³¹

Biodiversity

5.4.28 An Ecological Impact Assessment was conducted by CSA Environmental in July 2022³². The Assessment identified a baseline of 19 hedgerow units (ecological score 2) and 17 grassland units (ecological score 4). The Site is currently under active management. The remaining habitats on Site are residential property. There are four ecological features which are subject to legislative protection: badgers, water voles, otters, and nesting birds.

5.5 Health Profile Summary

- 5.5.1 The age profile in the LSA broadly reflects that in the CD and England. There is a higher proportion of working middle-aged residents and a school-age population. This presents an opportunity to cater to the needs of children and young people's health and development in the area, including education and play as well as families during the life course.
- 5.5.2 Life expectancies and health outcomes (indicated by the prevalence of common diseases) in the LSA and across the three neighbouring districts (St Albans, Hertsmere, Welwyn Hatfield) are generally better than national level. The most prevalent diseases at CD level are chronic kidney disease and COPD; there may be opportunity for the Development to support the prevention and day-to-day lifestyle management of these conditions for the future population.
- 5.5.3 When considering the wider determinants, the LSA generally experiences lower levels of deprivation. However, the baseline position relating to cost of living and economic inequality is sensitive, due to housing affordability pressures.
- 5.5.4 The LSA and district has open space deficiencies, with most residents experiencing limited access to open, natural green space as well as play areas. Which is likely to be in part associated with relatively low levels of sport and active travel participation amongst adults across the three districts.
- 5.5.5 The Site has good access to medical, health, community, and commercial facilities. There are several GPs which include the Site in its catchment area and are accepting new patients. There is also a range of key amenities in Colney Heath village centre (including PO, Pub

³⁰ Flood Risk Assessment and Drainage Strategy (June 2022). Stantec.

³¹ St Albans City & District Council. Climate change. <u>stalbans.gov.uk</u>

³² Ecological Impact Assessment (July 2022). CSA Environmental.



church and convenience shop), with larger facilities available in nearby towns. All of which offer opportunities for social interaction and meet some everyday needs.

5.5.6 Education provision for all ages is available locally, but capacity pressures exist and are expected to persist in the next five years.

5.6 Assessment Receptors and Vulnerable Groups

- 5.6.1 The following receptors have been identified
 - Future residents and visitors of the Proposed Development.
- 5.6.2 Identified vulnerable groups from the baseline are:

Future older populations;

Children and young people;

Disabled people;

People with or at risk of, pre-existing health conditions, including overweight and obesity, cardiovascular and respiratory disease, and alcohol attributable conditions.

Single parent families;

Ethnic minorities.



6 Health Assessment

6.1 Introduction

- 6.1.1 The tables below set out the potential health and wellbeing impacts associated with the development during its construction and operational phases. As set out in the Assessment Methodology section in Chapter 3, the tables have been adapted from the WHIASU Health Impact Assessment Toolkit.
- 6.1.2 The completed assessment for each theme is provided in **Tables 10 to 14** below, along with any mitigation and enhancement measures that have been identified



1. Lifestyle

Table 10. Lifestyle Factors

Health determinant	Details/evidence	Assessment of Impact	Recommended mitigations or enhancement actions
Lifestyle			
Physical Activity			
1. Access to outdoor play areas and teenage facilities	 A Local Area of Play (LAP) (for under 8s) is provided on site, offering facilities within a reasonable walking distance of all new homes. This will help meet the need for play areas in Colney Heath No formal play provision is made on site for children over the age of 8 but the site is within recommended walking catchments (Fields In Trust) for older children and teenage play. Quality of play opportunity is limited at Roestock Park. The local football club is within walking distance of the site. The DAS principles include quality landscaping and furniture to create an attractive destination for the surrounding community. The onsite informal POS with seating and picnicking will provide an area for people of all ages to gather. 	For young children: Positive, minimal, long-term, probable. For older children: Neutral, minimal, long-term, probable Receptor Groups: children and young people Vulnerable Groups: children and young people with access and mobility issues	Recommend: If practicable, LAP to be located within the POS to enable children of all ages to play in the same locality which enables single person supervision. Recommend: If practicable, link LAP with recreational routes (e.g., public footpaths) to maximise accessibility and safe access. Recommend: Discussion with LA regarding S106 contributions to enhance off site provision for older children (8 years and older).
2. High quality walking and cycling routes	Pedestrian and cycle access between the Site and Tollgate Road comprises a 2m footway either side of the vehicular access road, with bicycles sharing the road. Details of internal roads to be provided in RMAs reflecting guidance in the DAS. It describes the design criteria for the main road around the site (Spine Road) and secondary streets: <i>"Will accommodate safe movement for</i> <i>vehicles, cyclists, and pedestrians. Differing</i> <i>surface materials will, therefore, help to passively</i>	Positive, major, long-term, confirmed. Receptor Groups: All new and existing residents Vulnerable Groups:	Recommend: new connection between the site and Public Footpath 033 to promote walking.



Health determinant	Details/evidence	Assessment of Impact	Recommended mitigations or enhancement actions
	control traffic speeds at key locations along the street." (p47)	People with accessibility and mobility issues	
3. Provision of sports facilities and outdoor pitches	No onsite provision is made, reflecting the small scale of the site. Nearest provision is a football pitch within Colney Heath village Recreation Grounds, located 1.2 km from the Site. A broader range of facilities are available in Hatfield, Welwyn, St Albans, and Potters Bar.	Negative, minininor, long- term, probable. Receptor Groups: Incoming residents, across all age-groups Vulnerable Groups: Children and young people	Recommend: Discussion with LA regarding S106 contributions to neighbouring facilities.

2. Social and Community Influences on Health

Table 11. Social and Community Influences on Health

Health determinant	Details/evidence	Assessment of Impact	Recommended mitigations or enhancement actions
Social and Community Influ	ences on Health		
Citizen power and influence			
4. Involvement in design process	Statutory consultation has been carried out including a Virtual Public Exhibition, providing information on the design process, and inviting consultee responses.	Positive, minimal, short- term, possible. Receptor Groups:	Recommend: ongoing engagement and consultation with members of the public during detailed design stage.
	Residents and stakeholders were given the opportunity to give feedback regarding the proposals and scheme design via different	Future and existing neighbouring residents	
	channels including a website, freephone	Vulnerable groups: None identified	



Health determinant	Details/evidence	Assessment of Impact	Recommended mitigations or enhancement actions
	information line, a project specific email address and a two-week virtual exhibition.		
5. Involvement in the operation of the development	As a residential development in private ownership there is limited scope for community involvement once the site is occupied. There is limited evidence to support community involvement in operation of the development, however ongoing consultation is being sought by the developer.	Uncertain, minimal, short- term, possible. Receptor Groups: Future residents Vulnerable groups: None identified	Recommend: If practicable, consultation with incoming residents to support opportunities for involvement in the management and operation of the site.
Sense of belonging			
6. Design and amenities that encourages participation by people with Equality Act protected characteristics	 The DAS states that a new pedestrian route between the Site and Colney Heath village may be implemented which can enable safe access for all people to nearby surroundings and amenities. The proposed development will include distinct but aligned character areas, helping to create a sense of place and identity. See also No 18 on housing accessibility and adaptability. 	Uncertain, major, long-term, probable. Receptor Groups: Future and existing neighbouring residents Vulnerable groups: People with protected equality characteristics	Recommend: Incorporation of commitment to design for inclusion and equality in the DAS, or Condition: Reserved Matters Applications (RMA) to ensure protected characteristics of the Equalities Act are not disadvantaged. This would result in a positive post mitigation impact.
7. Layout and movement	The proposed development will be publicly	Neutral, moderate, long-term	None
which avoids physical severance	Access to the PROW running along the northwest boundary will be unaffected by the proposed development and the development itself does not seek to cut off any rights of way.	Receptor Groups: Future residents and site users	
		Vulnerable groups:	



Health determinant	Details/evidence	Assessment of Impact	Recommended mitigations or enhancement actions
		People with mobility or accessibility issues	
8.Design layout that encourages planned and unplanned social interaction	The LAP and open space provision around the site perimeter offers space for formal and informal interaction, facilitating individual and community wellbeing, therefore reducing the risk of social isolation or loneliness. Open space will be accessible to residents outside the proposed development, helping create connections between new and existing populations.	Positive, moderate, long- term, possible. Receptor Groups: future residents and site users Vulnerable Groups: people with mobility issues and/or neurodiverse people	Condition: Provision of seating suitable for all abilities and ages to support dwell time in the POS, supporting mental and physical health. This would enhance the positive benefit. Recommend: RMAs to include footpath suitable for wheelchairs through the POS to enable access and enjoyment by all.

3. Living/Environmental Conditions Affecting Health

Table 12. Living / Environmental Conditions Affecting Health

Health determinant	Details/evidence	Assessment of Impact	Recommended mitigations or enhancement actions
Living/Environmental Conditi	ons Affecting Health		
Built Environment			
9. Spaces and buildings accessible by people with mobility problems	Details to be provide in RMAs.	Uncertain, major, long-term, probable. Receptor Groups: All Vulnerable Groups:	Condition: Wheelchair and immobility to be addressed in RMA. This will provide associated health benefits to a range of receptor groups, and result in a post mitigation positive impact.



Health determinant	Details/evidence	Assessment of Impact	Recommended mitigations or enhancement actions
		People living with physical disabilities or mobility issues; parents with small children in prams/buggies	
10. Multi-use public space and buildings	There are no public buildings on site. Road spaces in the lowest end of the hierarchy will be designed for shared use, including informal outdoor play area.	Neutral, moderate, long- term, probable. Receptor Groups: Future residents and site users Vulnerable groups: Children and young people	None
11. High quality urban architecture	Details are not available at outline application stage, but the principles are established in the DAS, section 7.10. The DAS supports "the creation of a high quality, sustainable neighbourhood" (p37).	Uncertain, major, long-term, probable. Receptor Groups: Future residents Vulnerable groups: None identified	Recommend: High quality architecture appropriate to its setting within RMAs, to support strong sense of place, legibility, and healthy living, in line with principles in the DAS.
Neighbourhood Design			
12. Connections with existing communities	Tollgate Road provides the main link between the Site and Colney Heath village, enabling and supporting shared use of village amenities and services. See also Q8.	Positive, moderate, long- term, probable. Receptor Groups: Future residents	None
		Vulnerable Groups:	



Health determinant	Details/evidence	Assessment of Impact	Recommended mitigations or enhancement actions
		People at risk of isolation; people without access to transport; people with mobility or access issues	
13. Access to amenities and services	The proposed development has a range of amenities and services within walking distance in Colney Heath, including convenience top up shopping, a pub, church, and post office. A wider range of amenities are provided in nearby towns, as shown in Fig 5.3 of the DAS. Walking and cycling distances are provided in the Framework Residential Travel Plan (RPS).	Positive, moderate, long- term, confirmed. Education: Negative: moderate, long term, confirmed Receptor Groups: Future residents Vulnerable Groups: People without access to transport; people with mobility or accessibility issues.	Recommend: If possible, consultation with Parish Council regarding capacity of the village hall and facility pressures that could be worsened by the increase in population
14. Legible layout	The DAS provides the principles for a clear hierarchy of streets, defined by architecture and street hierarchy and character areas.	Positive, moderate, long- term impact, probable Receptor Groups: Future residents Vulnerable Groups: Children and young people, older people	None
15. Street Connectivity	To be determined at RMA. However, the most efficient use of site has been set out in the Illustrative masterplan which demonstrates well connected streets, good permeability, and connections to the POS.	Uncertain. Receptor Groups: Future residents and site users.	Recommend: to be addressed at RMA.



Health determinant	Details/evidence	Assessment of Impact	Recommended mitigations or enhancement actions
		Vulnerable groups: Children and young people, older people, pedestrians, and cyclists	
Housing		I	
16. Range of housing types and sizes	The DAS outlines a commitment to provide a range of house types, sizes, and tenures to meet local needs and create a broad-based community. Details regarding size, mix and tenure will be determined at Reserved Matters stage.	Uncertain Receptor Groups: All future residents Vulnerable groups: People on low income, people who are unemployed, families, older people	Condition: Provision of a range of housing types, sizes, and tenures to meet local need. To be determined at RMA in consultation with local authority. This will provide housing associated health benefits to a range of receptor groups, and result in a post mitigation positive impact.
17. Housing for older people	The proposal does not include any accommodation specifications that are targeted towards older people. Up to 10 homes will be custom built options which could provide opportunities for future residents to customise internal layouts to accommodate their needs.	Neutral, medium, long-term impact, probable. Receptor Groups: Future residents / older people Vulnerable Groups: Older people, people living with disabilities or mobility issues	Condition: at least 10% of units to meet Building Regulations requirement M4(2) 'accessible and adaptable dwellings'. ¹ Condition: a proportion of units within the development should meet Building Regulations M4(3) 'wheelchair accessible dwellings'. This will enable those disabled and immobile to benefit from the proposed development and result in a post mitigation positive impact.

¹ The Building Regulations 2010. Approved Document M: Access to and use of buildings. https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/540330/BR_PDF_AD_M1_2015_with_2016_amendments_V3.pdf



Health determinant	Details/evidence	Assessment of Impact	Recommended mitigations or enhancement actions
18. Accessible/adaptable housing	Specification for accessible and adaptable dwellings in line with Building Regulations Part M will be determined at Reserved Matters stage.	Uncertain Receptor Groups: Future residents Vulnerable Groups: People living with disabilities, health conditions or mobility issues, including wheelchair users.	Condition: at least 10% of units to meet Building Regulations requirement M4(2) 'accessible and adaptable dwellings'. Condition: a proportion of units within the development should meet Building Regulations M4(3) 'wheelchair accessible dwellings'. This will enable disabled and immobile to benefits from the proposed development
19. Affordable housing	The development will provide 35% (up to 52) affordable homes and will be of a type and size that meets local need (to be determined at Reserved Matters stage). The housing will be tenure blind and fully integrated within the market housing stock onsite (See DAS).	Positive, moderate, long- term impact, probable. Receptor Groups: Future residents Vulnerable Groups: People on low income, or who are unemployed	None
Access and Quality of Green	Space		
20. Provision of children play areas and teenage spaces	See response to Physical Activity (Q1).		
21. Diverse range of new high-quality green space	 The site will deliver 3.93 ha of green infrastructure in total. This includes: 2.02 ha (25% of total site) of publicly accessible green infrastructure including the provision of new public open space, a play area (LAP), a seating/picnic area, and recreational routes. 1.19ha (15% of total site) retained Colney Heath Farm Meadows Local Wildlife Site. 	Positive, moderate, long- term impact, probable Receptor Groups: Future and existing residents Vulnerable Groups: People with limited access to high quality open space	None



Health determinant	Details/evidence	Assessment of Impact	Recommended mitigations or enhancement actions
	The total green space provision exceeds requirement set out in Policy 70 of the City and District of St Albans Local Plan Review 1993 and the Saved and Deleted Policies Version (2020). Full design details to be provided in RMAs.		
22. Connections to existing green infrastructure	As part of the proposal, Colney Heath Farm Meadows (1.19ha / 15%) is to be retained onsite and enhanced as a Local Wildlife Site. The local wildlife site is located to the rear of the residential development, running adjacent to the River Colne and in close proximity to Footpath 033. Mown recreational routes will provide connectivity from the residential area to the wildlife site. Footpath 033 adjacent to the site, provides access to the River Colne and green spaces beyond the site boundary.	Positive, moderate. long- term impact, probable. Receptor Groups: All future residents and users of the site. Vulnerable Groups: None identified	None
23. Landscaping management and maintenance strategy	The DAS sets the principle for future maintenance and management of the green space to be secured long-term via a planning obligation using an appropriate public body or private management company. The ownership and responsibility for external space will be clearly identified and the proposals will facilitate ease of maintenance and management. The Local Wildlife Site (Colney Heath Farm Meadows) will also be maintained and managed to support habitat creation and enhance biodiversity.	Positive: moderate, long- term impact, probable. Receptor Groups: All residents and users of the site. Vulnerable Groups: None identified	Condition: Landscape and Maintenance and Management Strategy to be in place prior to development commencement. Recommend: If practicable, explore opportunities for local residents to be involved in the maintenance and management of POS. Successful engagement provides sense of ownership and belonging, supporting wellbeing. Although it is noted that poor arrangements leading to neighbour disputes can have the opposite effect. Positive mitigation effect is positive.



Health determinant	Details/evidence	Assessment of Impact	Recommended mitigations or enhancement actions
Air Quality and Odour			
24. Construction and operational impacts on traffic and energy emissions	An Air Quality assessment (Stantec) has been conducted for the Proposed Development and is submitted with the planning application. It concludes: • construction works have the potential to create dust and elevate the risk of PM10 concentrations; and • operational traffic impacts are not significant. No onsite energy generation is anticipated at operational stage	Construction: Dust: Negative, minimal, short-term impact, probable. Receptor Groups: Construction workers; neighbouring residents Vulnerable Groups: Construction workers; children, older people and pregnant people residing nearby Operational: Traffic: Negligible, minimal, long term, probable. Receptor Groups: Future and existing neighbouring residents Vulnerable Groups: Children, older people, and pregnant people	Condition: adoption of mitigation measures as outlined in Air Quality Assessment for construction impacts in accordance with IAQM guidance. With mitigation in place, construction impacts are deemed to be not significant.



Health determinant	Details/evidence	Assessment of Impact	Recommended mitigations or enhancement actions
Noise and Vibration			
25. Construction impacts and operational noise impacts	A preliminary environmental sound survey (Stantec) concluded the Proposed Development site is suitable for residential development in accordance with requirements set out in planning policy, national and international standards, and guidance. The assessment concludes that a detailed noise assessment should be undertaken to confirm conclusions once detailed information on the development is available.	Uncertain Receptor Groups: Existing neighbouring residents; construction workers; future residents Vulnerable groups: All	Condition: Detailed Noise Impact Assessment to be conducted at detailed design stage.
26. Noise on occupation	A Noise Impact Assessment was conducted by Stantec in June 2022. It noted that on-site sound levels were dominated by vehicular movements on Tollgate Road. Secondary noise sources were from distant traffic, birds and farm animals. Daytime noise levels were 50-54 LAeq.16 hrs (07:00- 23:00) and nighttime noise levels between 57-62 LAFMax (23:00-07:00).	Neutral, moderate, long- term. Receptor Groups: Future residents and site users Vulnerable Groups: Children and young people, elderly people, hard or sensitive of hearing	None.
Safety			
27. Traffic management to reduce speed and car free travel routes	The Transport Assessment (RPS) notes that daily vehicle flows on Site are expected to be low. Design principles set out in the DAS using street paving materials and shared surfaces to passively control traffic speeds. The raised junction with Tollgate Road will support reduced traffic speeds,	Positive, major, long-term, probable. Receptor Groups: Future residents and site users	None



Health determinant	Details/evidence	Assessment of Impact	Recommended mitigations or enhancement actions
		Vulnerable groups: Children and young people; pedestrians and cyclists	
28. Natural surveillance of public spaces	A DAS design principle is for dwellings to face out onto streets and public realm. Surveillance in the POS will also be delivered by users on the recreational route.	Positive, moderate-major, long-term, probable. Receptor Groups: Future residents Vulnerable groups: Children and young people	None
Quality and Safety of Play Are	ea		
29. Diverse types of play spaces for all ages	Please see response and mitigation outlined in Q1.		
30. Quantity and location of provision in line with local population and walking catchment standards	See response and mitigation outlined in Q21.		
Waste Disposal			
31. Construction and operational waste strategy; reduce, reuse, repurpose, recycle	A waste strategy has not been outlined at this stage for construction or operational impacts.	Uncertain Receptor Groups: Construction workers; future residents Vulnerable Groups: None identified	Condition: detailed waste strategy for construction and operation to be provided at RMA.



Health determinant	Details/evidence	Assessment of Impact	Recommended mitigations or enhancement actions
Water Quality			
32. Connection to mains waters	The Utilities Appraisal (Stantec) states confirmation from Affinity Water that there is insufficient capacity within the local network to supply to Proposed Development site. New mains infrastructure to serve the development will be requisitioned from Affinity Water via section 41 of the Water Industry Act.	Neutral, major, long-term, confirmed. Receptor Groups: All future residents Vulnerable Groups: None identified	None
33. Foul water drainage	There are no foul sewers located within the site boundary. The Utilities Appraisal (Stantec) states confirmation from Thames Water that there is available capacity within the existing foul water sewer network to support the Proposed Development. Onsite draining will be constructed under a Section 104 agreement of the Water Industry Act.	Neutral, major, long-term, confirmed. Receptor Groups: All future residents Vulnerable Groups: None identified	None

4. Access and Quality of Services

Table 113. Access and Quality of Services Affecting Health

Health determinant	Details/evidence	Assessment of Impact	Recommended mitigations or enhancement actions		
Access and Quality of Services					
Healthcare Services					



35. Adequate provision or access to healthcare facilities	The site has good access to medical care. Several GP practices are accepting patients and the Site is included within their patient catchment areas indicating that the closest practice is within 3km. This indicates that there is adequate provision locally. Nearby towns have other health and medical facilities including pharmacies, opticians, and dentists.	Positive, major, long-term, confirmed. Receptor Groups: All Vulnerable Groups: All	Recommend: If possible, liaison with health and social care services to ascertain financial contributions to provide offsite primary health and social care provision.
Transport including parking			
36. Public transport provision and connections	The site has limited bus services, but reasonable access to train services to London.	Positive, moderate, long- term, probable.	Condition: Framework Residential Travel Plan.
	A Travel Plan is submitted with the application. Measures included to support use of public transport are bus tickets, rail vouchers and access to online tools for personalised travel plans, and public display of timetables. Incentives should be a minimum of £100 per house and £50 per flat. Other measures can encourage cycle ownership and cycle use to access public transport to create an environment for flexible active travel, appropriate to a rural location.	Receptor Groups: Future residents Vulnerable Groups: People who do not own a car; pedestrians and cyclists; people with mobility and access issues	
37. Adequate onsite car parking, including disabled access	Car parking to be provided on plot. Local authority vehicle parking standards to be applied and determined at Reserved Matters stage. Development plan aims to prevent domination of street scene, or inconvenience caused, by vehicles.	Positive, moderate, long- term, probable. Receptor Groups: Future residents and site users Vulnerable Groups: People living with a disability	None



38. Cycle parking	Cycle parking to be provided on plot in accordance with local plan policy, in RMAs. The DAS establishes the principle that where a garage is provided it would be of a suitable size to accommodate bicycles.	Positive, minimal, long-term, probable. Receptor Groups: Future residents and site users Vulnerable Groups: Cyclists; children and young people	Condition: Design of on plot parking and garages to enable access to cycles when cars are parked in these areas. To ensure access to cycles and encourage active travel.
Education and Training			
39. Adequate provision or access to education and training	Lack of capacity in the local primary school makes it uncertain where children living in the development will be able to attend school. 200 places are available at secondary level with planned expansion of St Albans Girls which could address some needs. Consultation with the education authority is advised to ascertain how provision can be made.	Nursery and primary school provision: negative, moderate, long-term, confirmed. Secondary school provision: Negative, moderate, long- term, confirmed. SEND provision: Negative, minimal, long- term, confirmed. Receptor Groups: Children and young people; people seeking training and education Vulnerable Groups: Children and young people with disabilities	Condition: S106 contributions to local educational facilities to support incoming population growth associated with the development.



40. Childcare facilities	Treasure Tots pre-school located nearby in Colney Heath village, within walking, cycling, and public transport distance. It is currently unknown if they will have future capacity or any plans to increase capacity.	Uncertain, minimal, long- term, probable. Receptor Groups: Families with young children Vulnerable Groups: Parents/care givers of young children	Recommend: If possible, discussions with Treasure Tots to confirm if future capacity can support the Proposed Development.
Local Amenities, Services, an	d Information Technology		
41. Access to public amenities and services (e.g., community buildings, cultural and heritage assets, shops, leisure/sports	The DAS maps out nearby public amenities and services and the Travel Plan provides walking and cycling distances. The site has a good range of amenities and services within walking and	Positive, major, long-term, probable. Receptor Groups:	None
facilities etc.)	cycling distance and access to a wider range and higher order of services in nearby towns.	All future residents	
		Vulnerable Groups: All	
42. Provision of high-speed broadband	The Utilities Appraisal (Stantec) notes that high- speed fibre optic broadband is to be provided by BT Openreach.	Positive, major, long-term, confirmed	None
		Receptor Groups:	
		All future residents	
		Vulnerable Groups:	
		People at risk of digital exclusion; people who work / study from home	



5. Macro-Economic, Environmental and Sustainability Factors

Table 124. Macro-Economic, Environmental and Sustainability Factors Affecting Health

lealth determinant	Details/evidence	Assessment of Impact	Recommended mitigations or enhancement actions
Macro-Economic, Environm	ental and Sustainability Factors		
43. Government policies	 The Planning Statement provides full analysis of compliance with planning policy. It concludes the proposed development provides substantial benefits, principally through the delivery of up to 150 homes, 35% of which will be affordable housing, with up to 10 custom built plots. The Site will also deliver 10% biodiversity net gain. It is acknowledged that the Site is located in the Green Belt. The Planning Statement has determined that the scale of harm in relation to the Green Belt is limited when weighed against the positive aspects of the scheme. The Proposed Development is compliant with the National Planning Policy Framework (NPPF) in relation to Chapter 8 'Promoting health and safe communities'. The proposal also supports objectives outlined in local health and wellbeing policy, including the St Albans City and District Health and Wellbeing Strategy; and the Hertfordshire Public Health Strategy; and the Hertfordshire Health and Wellbeing Strategy. 	Neutral-Positive, major, long-term, probable. Receptor Groups: All future and existing neighbouring residents Vulnerable Groups: All	None.



44. Energy efficient housing	The DAS establishes the principle that new homes will be designed to meet national and local targets in respect to energy efficiency, reducing energy demand and carbon emissions. Further detail to be provided at the detailed design stage.	Uncertain, major, long-term, probable. Receptor Groups: All future residents Vulnerable Groups: All	Condition: Where possible, onsite renewable energy targets to be met.
45. Flood risk and Sustainable urban drainage systems (SuDS)	A Flood Risk Assessment (Stantec) has been undertaken which concludes: "The users of the proposed development will be safe from flooding and there will be no detrimental impact on third parties. The proposal complies with the NPPF and local planning policy with respect to flood risk and is an appropriate development at this location." (p46) SUDs are provided on site. Details are found in the Flood Risk Assessment, Surface Water and Foul Water Drainage Strategy (Stantec).	Neutral, major, long-term impact, confirmed. Receptor Groups: All future residents Vulnerable Groups: All	Condition: Mitigation to be undertaken as outlined in the Floor Risk Assessment, Surface Water and Foul Water Drainage Strategy (Stantec).
46. Renewable, zero and low carbon energy solutions used	The DAS establishes the principle that the new homes will be designed to meet local and national targets of energy and carbon emission reduction/efficiency (section 7.12).	Uncertain, major, long-term impact, probable. Receptor Groups: All future residents Vulnerable Groups: None identified	Condition: Energy statement to be provided in RMA to support national and local carbon reduction targets where practicable.
47. Travel Plan seeking to reduce emissions from private car use	A Framework Travel (RPS) is included in the submission seeking to create more sustainable travel patterns and reduce car use through carpooling and support for active travel.	Positive, minimal, medium- term, probable Receptor Groups: Future residents who travel by car	None.



 48. Minimising use of resources 49. Retention of existing vegetation and mature trees where possible 	No information on minimising use of resources at this stage.Approximately 40% (1.91ha of 4.95ha) of Colney Heath Farm Meadows LWS falls within the boundary of the Site, with the remaining LWS extending over and along the River Colne to the south-west, and additional fields to the north- west. The proposals include the retention and protection of the LWS with limited, controlled public access.The scheme would result in the direct loss of approximately 0.8km of hedgerow. Compensatory hedgerow and tree planting to strengthen boundary vegetation has been recommended following an Ecological Impact Assessment (CSA Environmental).The Ecological Impact Assessment concludes that without mitigation, the proposed development would have the potential to result in negative ecological effects significant up to the local level.	Vulnerable Groups: None identified Uncertain Negative, moderate, long- term, probable Receptor Groups: Future and existing neighbouring residents Vulnerable Groups: None identified	Recommend: Circular economy statement and design with RMA. Condition: Please refer to planning conditions set out in the Ecological Impact Assessment (CSA Environmental) Following implementation of mitigation, the Proposed Development is not anticipated to result in any significant residual negative effects on important ecological features.
Biological diversity			
50. Biodiversity net gain	A Biodiversity Impact Assessment Calculation has determined that the proposed development could secure a net gain of 185.84% with regard to hedgerow units but would result in loss of - 18.74% habitat units. The DAS in principle seeks to deliver a biodiversity net gain of 10% on site.	Neutral-Positive, minimal, long-term, probable.	Condition: Please refer to planning conditions set out in the Ecological Impact Assessment (CSA Environmental)



7 Summary and Conclusion

- 7.1.1 This HIA has reviewed the Proposed Development to identify potential health impacts, demonstrate how health considerations have been incorporated into the proposals, and to identify opportunities for securing measures that could bring health and wellbeing enhancements in the future delivery of development.
- 7.1.2 The method and scope of the HIA has been tailored to be proportionate to the scale and nature of the Proposed Development. The assessment framework has been developed using the WHIASU Health Impact Assessment Toolkit to identify health impacts, vulnerable groups who may be disproportionately affected, and any further mitigation required. Where appropriate, the completed assessment matrix also cross references other technical documents submitted with the planning application that are relevant to the HIA, and that contain greater detail on technical assessment and/or proposed mitigation.
- 7.1.3 A review of baseline population and health characteristics identified that the LSA has a high proportion of working age adults followed by school aged children. Life expectancies and health outcomes are generally better in the LSA compared with national averages. The area also experiences low levels of multiple deprivation however consideration should be given to cost of living and economic inequalities in terms of housing affordability.
- 7.1.4 The HIA found that Proposed Development will predominantly have positive or neutral health impacts. Potential positive health impacts were identified in relation to the following:
 - Access to outdoor play areas for young children and high qualities walking and cycling routes that promote physical activity.

Design layout that encourages planned and unplanned social interaction.

Neighbourhood design consideration such as connections with the existing communities, access to amenities and services and a legible layout.

The provision of 35% affordable housing and 10 custom build homes.

Provision of 3.93 ha of green infrastructure, including publicly accessible open space, a play area, seating/picnic area, recreational routes and retention of the Colney Heath Farm Meadows Local Wildlife Site. Combined, the green infrastructure comprises 40% of total site area and facilitates good connections to existing green infrastructure in local area.

Community safety consideration including traffic calming measures and natural surveillance of public spaces.

- 7.1.5 Potential negative effects were identified in relation to the provision and access to sports facilities and outdoor pitches. Recommended mitigation includes discussion with the local authority regarding S106 contribution to nearby facilities. Other negative impacts were identified only in relation to construction impacts arising from dust related air pollution. A detailed assessment of construction noise and vibration effects is not available at this stage, it is recommended that a detailed assessment is taken when detailed design is available. All construction related impacts should be controlled and minimised via appropriate mitigation and best practice measures included within a construction environmental management plan (CEMP).
- 7.1.6 Given the outline nature of the application, measures have been identified for consideration at the detailed design stage to help see that potential health benefits are realised (e.g., provision of adaptable and accessible housing).





Appendix A Site Location Plan and Parameter Plans





Appendix B WHIASU Health Determinants Checklist

Table 15. WHIASU Determinants of Health Checklist

1. Lifestyles

Diet Physical activity Use of alcohol, cigarettes, non-prescribed drugs Sexual activity Other risk-taking activity

2. Social and community influences on health

Family organisation and roles Citizen power and influence Social support and social networks Neighbourliness Sense of belonging Local pride Divisions in community Social isolation Peer pressure Community identity Cultural and spiritual ethos Racism Other social exclusion

3. Living/ environmental conditions affecting health

Built environment	Green space
Neighbourhood design	Community safety
Housing	Smell/odour
Indoor environment	Waste disposal
Noise	Road hazards
Air and water quality	Injury hazards
Attractiveness of area	Quality and safety of play areas

4. Economic conditions affecting health

Unemployment Income Economic inactivity Type of employment Workplace conditions

5. Access and quality of services

Medical services Other caring services Careers advice Shops and commercial services Public amenities Transport including parking Education and training Information technology

6. Macro-economic, environmental and sustainability factors

Government policies Gross Domestic Product Economic development Biological diversity Climate



Appendix C Vulnerable/Disadvantaged Groups Checklist

The below checklist provides a guide for vulnerable and disadvantaged groups that may be disproportionately affected by the Proposed Development.

Age related groups*

- · Children and young people
- Older people

Income related groups

- People on low income
- Economically inactive
- Unemployed/workless
- · People who are unable to work due to ill health

Groups who suffer discrimination or other social disadvantage

- · People with physical or learning disabilities/difficulties
- Refugee groups
- People seeking asylum
- Travellers
- Single parent families
- · Lesbian and gay and transgender people
- Black and minority ethnic groups**
- Religious groups**

Geographical groups

- · People living in areas known to exhibit poor economic and/or health indicators
- People living in isolated/over-populated areas
- People unable to access services and facilities

Figure 5. Vulnerable/Disadvantaged Groups Checklist (WHIASU, Health Impact Assessment: A Practical Guide)