Local Development Framework

Health Impact Assessment of the Core Strategy and North Kensington Plan

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Executive Summary

Consideration of Health within the Borough should be at the heart of Council policy. In order to appraise the Core Strategy planning policies against health factors a Health Impact Assessment (HIA) will measure the impacts of the polices upon the health of the Borough.

A Health Impact Assessment (HIA) is an approach which offers a route to understanding the potential health risks and benefits entailed in the Core Strategy and North Kensington Plan policies.

The Health Impact Assessment touches five key criteria areas;

- Work towards sustainable development
- Aim for fairness and equality for all
- Target disadvantaged and marginalised groups
- Encourage the full participation of those to be affected by the policy, programme or project.
- Make use of qualitative as well as quantitative evidence.

These criteria will help in providing an accurate and in depth understanding of the Core Strategy and North Kensington planning policies with relation to health and the health services provided by the Council. Furthermore it will address any negative impacts in which the planning polices have on health in the Borough.

The core findings from this health impact assessment were of a positive nature, as the major negative health issues identified through corresponding documents and initiatives, have all been addressed in the Core Strategy and North Kensington planning policies.

Through a systematic monitoring and review process similar to the Equality Impact Assessment, the HIA will be appraised in the same way to maintain the high health standard that the Council provides to the Borough.

1. Introduction

- 1.1 This Health Impact Assessment (HIA) report has identified the prospective health impacts of the policies contained within the Core Strategy and North Kensington Plan. There is no statutory duty to undertake an HIA but it is considered best practice and shows the Council's commitment to improving health in the borough.
- 1.2 The Core Strategy and North Kensington Plan sets out the 20 year spatial vision for the borough, setting out the broad locations for delivering the housing and other strategic development needs such as employment, retail, leisure, community, essential public service and transport development.
- 1.3 Improving health is not only a borough issue but is one of the critical issues at a local, national and international level. Every opportunity must be taken to improve the health of our community. Planning has a role play in achieving a healthier borough.
- 1.4 There is an important link between planning and health in terms of how places are planned and develop and how that impacts on the health of the communities who live in them. Therefore, the Core Strategy and North Kensington Plan is an important document which can have an impact on health as the plan goes beyond matters of pure land use, how development
- 1.5 It looks at the 'where' of things. It also brings together policy initiatives across a range of services of the Council and partner organisations in relation to a single place and sees if and how they relate, such as the NHS.
- 1.6 The purpose of an HIA is to ensure that the policies in the Core Strategy and North Kensington Plan, where possible, actively promote health gain for the local population, reduce health inequalities and do not actively damage health.
- 1.7 The report helps to identify and respond to health inequalities, particularly targeting disadvantaged and marginalised groups encourage the full participation of those likely to be affected by the policy and promote partnership working with other health focused agencies within the borough.

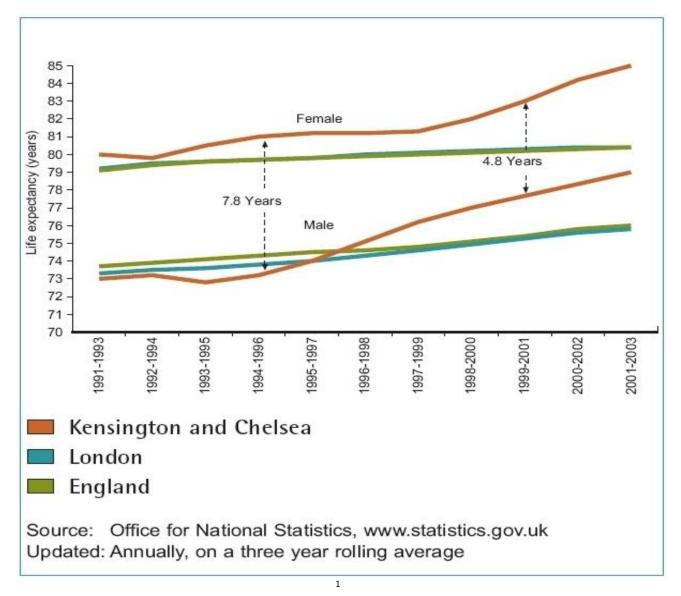
2.0 Health Impact Assessment (HIA) Method

- 2.1 There is no fixed way of to conduct a health impact assessment. The methods of this report have been collated from the following documents:
 - A short Guide to Health Impact Assessments, NHS London
 - Health Impact Assessment in Practice NHS Health Scotland
 - Health Issues in Planning Best Practice Guidance, Mayor for London
 - Improving Health and Reducing Inequalities A practical guide to health impact assessment, Cardiff Institute of Society, Health and Ethics
- 2.2 From the above documents, there is consensus that there are five sequential core steps in HIA, as follows:
 - 1. Screening: deciding whether a health impact assessment is necessary
 - 2. Scoping: determining the focus, methods and work plan
 - 3. Appraisal of the potential health effects/impacts
 - Profiling the affected population
 - Characterising potential health impacts
 - Making recommendations to avoid, remedy or mitigate the effects
 - 4. Reporting:
 - 5. Monitoring and evaluation.
- 2.3 **Step 1 Screening:** is relatively straight forward. If a policy or development is considered to have a potential impact on health, then a HIA should be carried out. The Council considers that the Core Strategy and North Kensington Plan is an important document that can influence health and therefore it is essential that a HIA is carried out to maximise the benefit to health that planning can provide.
- 2.4 **Step 2 Scoping:** Given that a number of public consultation events have been carried out throughout the development of the Core Strategy and North Kensington Plan policies, where interested parties could comment on all aspects of the document, including its health impacts, it was decided that a steering group was not necessary. The Council is working in partnership with the PCT throughout the development of the document. The planning policy team has assessed the perimeters of the HIA. There are two types of appraisal. A "Rapid" appraisal and a "Detailed" or "In-depth" appraisal. A Rapid appraisal has been identified as the most appropriate given the short time-scale available. In most cases, a Rapid assessment is the most suitable and feasible option given limited resources.
- 2.5 **Step 3 Appraisal:** This is the key stage of health impact assessment. It gathers information about the potential nature of the policy's impacts. It also provides an opportunity to suggest possible ways of maximising the health benefits and minimising the risks, particularly to the least healthy or most disadvantaged population groups.
- 2.6 **Step 4 Reporting:** There are many ways to display the findings of the report from a simple list or matrix, to a more comprehensive report. The format and style of this report needs to take account wider audience that may read this report, from the general public to an Inspector. Therefore, a matrix style has been chosen as it is a quick and effective way of digesting a large amount of information.
- 2.7 **Step 5 Monitoring and evaluation**: As the aim of a health impact assessment is to inform decision-making, it is useful to evaluate how the information was used and whether or not it influenced decision-making of the policies and whether recommendation were taken into consideration. Our colleagues at the PCT will review this report from an independent health provider perspective.

3. Current health position profile and General Attributes of Kensington and Chelsea

3.1 Life expectancy

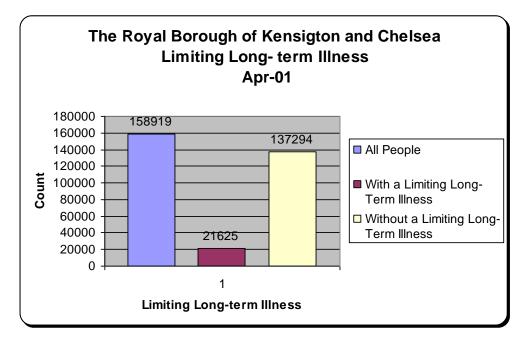
3.2 Life expectancy in Kensington & Chelsea is the highest in the country for females and third highest for males, at 87.20 and 83.10 respectively. This represents an average life expectancy of nearly 6 years more than the national average (Census, 2001).

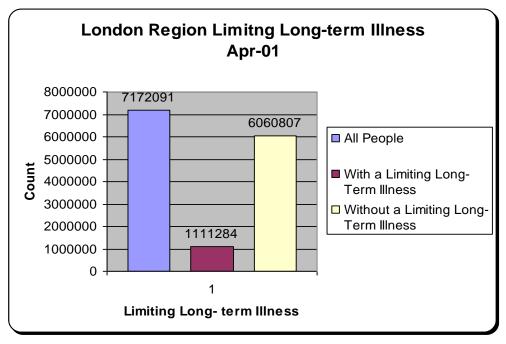


¹ 2001 Census Data, Life Expectancy in the Royal Borough of Kensington and Chelsea

3.3 Long-term illness

3.4 In spite of high life expectancy in the borough, there are significant disparities across the borough. Only 2% to 10% of residents in the central part of the borough suffer from a limiting long-term illness. This percentage increases in the north, notably in Kensal, Silchester and Lancaster West, with nearly a quarter of all residents living with a limiting long-term illness. This figure is undoubtedly linked to age, as nearly 24-66% of residents in these are aged 65 or over.





Data Source: National Statistics 2001 Census Data

3.4 *General attributes of the population*

3.5 Size/Density

Kensington and Chelsea is a very highly densely populated borough, according to 2001 Census data the population was 158,919 people living in the borough. This translate to 131, 02 people per one hectare. The size of the borough equates to;-

3.6 *Age*

The Resident age profile 2006 indicates that the 30-44 age range is the most common within the borough, and according to 2001 census data the average age of a person living in Kensington and Chelsea is 37 years.

3.7 Gender

Men and women living in Kensington and Chelsea experience different outcomes in some aspects of life, including employment and health. According to the 2001 census data, on average women are likely to live five years longer than men. Women are less likely to be employed in senior positions than men - in 2001; the proportion of women aged 16-74 and in employments who were working in higher grade occupations was 10% lower than for men²

3.8 Income

Kensington & Chelsea is one of the wealthiest boroughs in the country. This does, however, hide the significant disparities within the borough. Figure B6 shows economic inactivity for people aged 18-74 (Census, 2001). Across the centre and south of the borough, economic inactivity remains under 31% (not excluding students or the retired); however around World's End and North Kensington, this figure rises sharply, particularly in some areas to the north of the Westway where economic inactivity rises to between 42% and 56%.

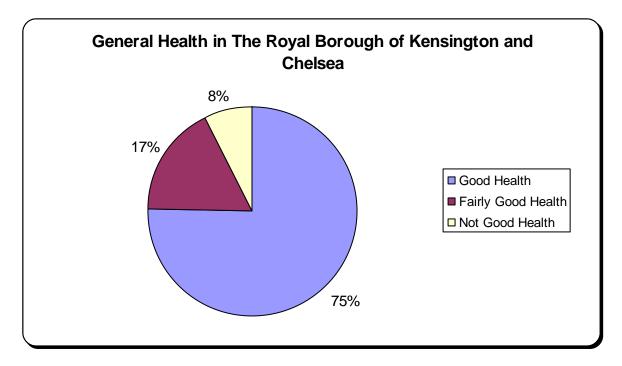
3.9 Employment.

3.10 The numbers of semi-skilled or unskilled workers broadly reflects the spatial distribution of the economically inactive. The census shows that there are higher proportions of the semi or unskilled in the north, particularly around Kensal, Lancaster West and Wornington. Figures B8 and B9 show Income and Employment Deprivation (2004) in the borough. While the majority of southern and central areas appear in the best 20% of the 'super output areas' in England of both categories, much of the north of the borough is in the worst 20%. The area around the borough's western boundary in Earl's Court, Warwick Road and Holland Road also sees both income and employment deprivation fall within the worst 40% in England.

² Those in higher grade occupations are working as managers and senior officials, or in professional occupations and associate professional and technical occupations.

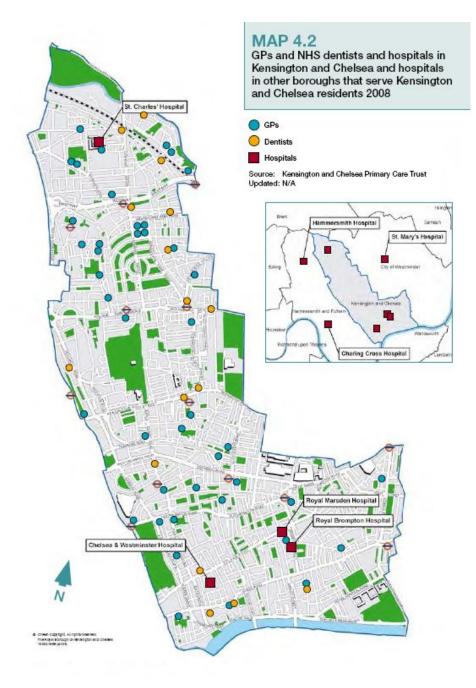
3.11 Health status

The general health status of the population for Kensington and Chelsea shows that 75% of the people in the borough are in "Good Health", with only a small proportion of 8% in "Not Good Health". The pie chart below gives a clearer illustration of the general health of the borough.



Data Source: National Statistics

- 3.12 *Quality of life indicators*.
- 3.13 There is generally a good supply of doctor's surgeries in the borough with 41 NHS general practices currently operating. However, there are only two practices serving residents in the south west of the borough. Figure B25 also identifies the location of hospitals and health centres in the borough. These are generally well spread throughout the borough. However, there is only one accident and emergency department in the borough, at the Chelsea and Westminster Hospital on Fulham Road.



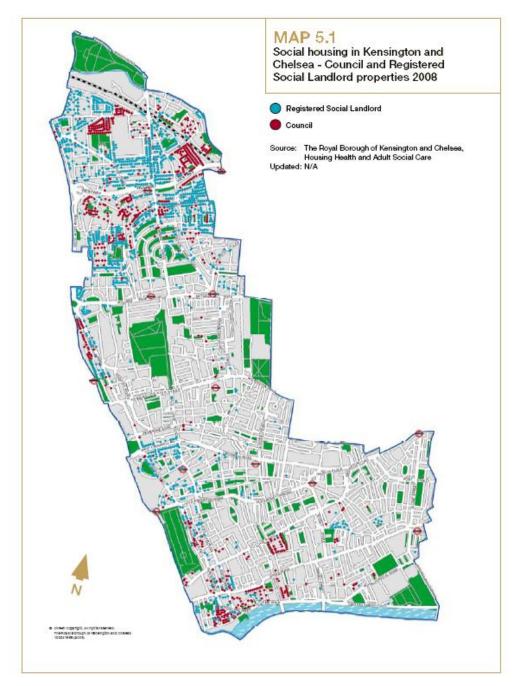
3.14 Open space.

- 3.14 In a borough as densely populated as Kensington & Chelsea, open space is at a premium. Whilst there are large areas of public open space within the borough (as well as open spaces in neighbouring boroughs), much of the borough does suffer from a "deficiency in public open space". This deficiency can be seen through the distance between public open spaces.
- 3.15 Holland Park plays a vital role in the centre of the borough providing the largest open space in the borough. Additionally there are a number of small scale public open spaces in the north of the borough. This deficiency will be addressed to a degree by over a hundred private garden squares scattered across the borough.



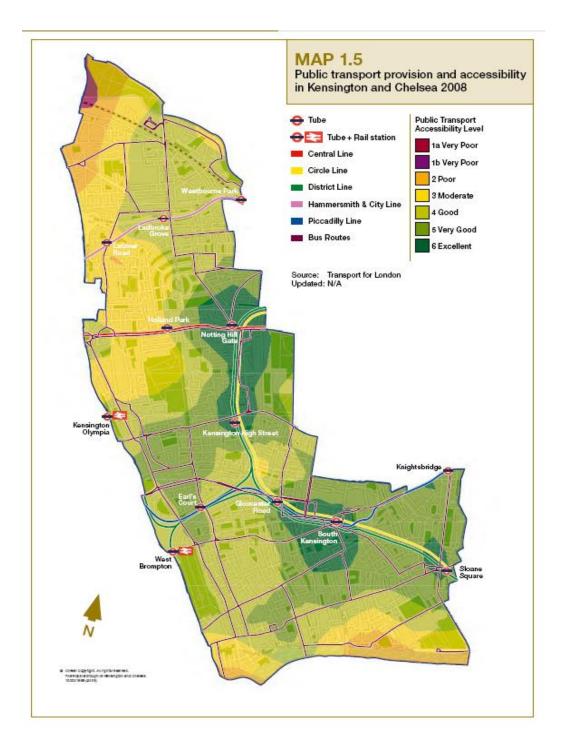
3.16 Housing

3.17 In 2006, it was estimated that the population had risen to approximately 178,000 and that the borough had the highest population density of all local authorities in England and Wales. The density in the north of the borough is generally lower than that in other areas, in particular Earl's Court, Stanley and Cremorne wards.



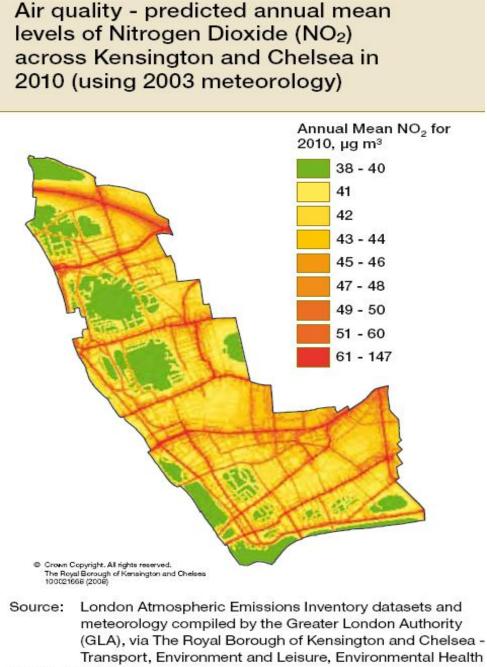
3.18 Transport

3.19 Public Transport Accessibility Level plan gives the strategic picture with regard to public transport accessibility. It shows that public transport accessibility is best around Notting Hill Gate, Kensington Church Street and Kensington High Street; and around South Kensington.



3.20 Air Quality

3.21 Linked to both traffic emissions and diesel powered trains running across the north of the borough. Higher levels of air pollution are found in proximity to the main roads. The Council has declared the entire borough as Air Quality Management Area, but there are particular areas such as our town centres, and areas of regeneration, where we need to give this issue particular attention.



Updated: Annually

4. Stage 1 Screening: Limitations of the Study

- 4.1 Although planning can have an impact on health, there are many determinate of health of the communities, of which planning can only provide opportunities for health improvements, rather than directly influence health.
- 4.2 The wider determinants of health and how planning policies can have a long-term impact on health and well-being are identified by the Mayor of London as:
 - Good quality and affordable housing
 - Transport issues
 - Employment and skills training
 - Education and early life
 - Access to service
 - Community safety
 - Liveability, open space and public realm
 - Air, water and noise quality
 - Access to fresh food
 - Climate change.
- 4.4 The Matrix below shows how the Core Strategy planning policies relate to the determinates set out by the Mayor of London.

Equality Group	Spatial Planning Themes						
	Keeping Life Local	Fostering Vitality	Better Travel Choices	An Engaging Public Realm	Renewing the Legacy	Diversity of Housing	Respecting Environmental Limits
	Policy CK 1: Social and Community Uses: The Council will require social and community uses to be protected and enhance within the Borough.	Policy CF 1: Successful Town		Policy CR 1: Street Network: The Council will require a well connected and legible network of streets to be maintained and enhanced. In areas of regeneration and large scale redevelopment established, they should be inspired by the Borough's historic street pattern.	Policy CL 1: Context and Character: The Council will require development to respect existing context and character, taking all opportunities available to improve the character and quality of the area and the way it functions, including being accessible for all.	Housing Targets	Policy CE 1: Climate Change: The Council recognises DEFRAs targets to reduce carbon dioxide emissions by 26% against
Strategic Policy		Centres: The Council will secure the success and vitality of our town centres by protecting and promoting shops and ensuring the centres contain a diverse and varied mix of uses.				Policy CH 1: Housing Targets: The Council will make provision	1990 levels by 2020 and will require development to make significant contributions the need to reduce carbon dioxide emissions by 26% against 1990 levels by 2020(49), and will take an ambitious, yet pragmatic, approach to achieving the highest standards of environmental, sustainability.
		Policy CF 2: Retail Development within Town Centres: The Council will require the scale and nature of development within a town centre to reflect the position of the centre within the hierarchy and to assist in the implementation of the vision for that centre as set out within the <i>Places</i> section.	Policy CT 1: Improving alternative to car use: The Council will require improvements to the alternatives to car use and restrict parking in order to increase the proportion of journeys in the Borough that are undertaken on public transport or by walking or cycling.	Policy CR 2: Street Form: The Council will require that where new streets are proposed, or where developments could make a significant change to the form of the existing streets the resultant street form and character must draw from the traditional qualities and form of our existing high quality streets.		for a minimum of 3,500 net additional housing units to be provided between 2007/8 and 2016/7 (350 units per year). This target will be rolled forward to 2026, until its is replaced.	Policy CE 2: Flooding: The Council will require development to adapt to fluvial flooding and to mitigate the effects of and adapt to surface water and sewer flooding.
		Policy CF 3: New Town Centres: The Council will; Direct new large scale retail development to existing higher order town centres. Support new town centre uses in sites adjoining Knightsbridge, Kings Road (East and West), and South Kensington where no suitable sites can be identified within these centres. Support the new retail floor space in other areas where applicants can demonstrate need; where the development would meet the requirements of the sequential test and where it will have an unacceptable impact on existing centres; or where new floor space would be central to underpinning the Councils regeneration objectives and where the vitality of any existing centre will not be harmed.		Policy CR 3: Street Life: The Council will requires opportunities to be taken within the street environments to create 'places' that support the full array of outdoor life, adding to their attractiveness and vitality.	Policy CL 2: New Buildings, Extensions and Modifications to existing buildings: The Council will only permit new buildings of the highest architectural and urban design quality.	Policy CH 2: Housing Diversity: The Council will ensure new housing development is provided so as to further refine the grain of the mix of housing across the Borough.	Policy CE 3: Waste: The Council will meet the waste apportiment figure as set out in the London Plan and will ensure that waste is managed in accordance with the waste hierarchy, which is to reduce, reuse or recycle waste as close as possible to where it is produced.

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	Policy CF 4: New Town Centres: The Council will support the creation of new centres in the Latimer and Kensal areas to address identified retail deficiency.		Policy CR 4: Streetscape: The Council will require improvements to the visual and functional quality of our streets, ensuring they are designed and maintained to a very high standard.			Policy CE 4: Biodiversity: The Council will enhance and improve the biodiversity value of the Borough
	Business	Policy CT 2: New and enhanced rail infrastructure: The Council will require improved access to the existing and planned new rail infrastructure in the borough.	Policy CR 5: Parks, Gardens, Open Spaces and Waterways: The Council will	Policy CL 3: Small-scale Alterations		
Policy CK 2: Local Shopping Facilities: The Council will protect local shopping facilities and individual shops through the provision of new facilities particularly in areas f deficiency to ensure that 77%	Policy CF 5: Location of Business Uses: The Council will consolidate large scale business uses in areas of high public transport accessibility.		valerways. The Council will protect enhance and make the most of existing parks, gardens and open spaces, and create new high quality outdoor spaces where possible.	and Additions: The Council will permit alterations and additions where they do not harm the existing quality and character of the building and its context.	Policy CH 3: Residential Amenity: The Council will require that existing residential amenity is protected and that new housing achieves high standards of residential amenity including optimising the provision of external space.	
deficiency to ensure that 77% of the borough is within 5 minutes (400m or 440 yard) walk of these facilities during the lifetime of this strategy. Policy CK 3: Walkable Neighbourhoods and Neighbourhoods and Neighbourhood facilities: The Council will seek to maintain the current percentage of access to neighbourhood facilities and work towards increasing these where appropriate opportunities arise. These percentages are: a) General Practitioners. 85% of the borough within an 800m/875 yard walk. b) Primary Schools- 95% of the borough within an 800m/875 yard walk	Policy CF 6: Employment Zones: The Council will protect the Lots Road, Freston/Latimer Road and Kensal Employment Zones for light industrial uses, for workshops, for small and medium scale offices, for the creative and cultural industry and for other uses which support the function of the zones. The Council will not support the creation of new large scale offices within the Employment Zones.		Policy CR 6: Trees and landscape: The Council will require development to provide tree planting and landscaping that compliments the existing high quality greenery to deliver amenity and biodiversity benefits.	Policy CL 4: Historic Environment: The Council will require development to preserve the historic places, spaces and townscape and take opportunities to enhance the character and appearance of conservation areas.		Policy CE 5: Air Quality: The Council will require that development proposals do not make local air quality worse, including the consideration of pollution from vehicles, construction and the heating of buildings, and where possible improves local air quality.
	Policy CF 7: Creative and Cultural Businesses: The Council will promote and protect the work-spaces needed to support the creative and cultural industry across the Borough					
	Policy CF 8: Arts and Culture Uses: The Council supports the Boroughs role in world class culture, will welcome new cultural institutions in appropriate locations across the borough and nurture and encourage those which already exist. In particular the council will support proposals which enhance the cultural draw of the South Kensington Museums' complex, the King's Road/ Sloane Square area, the Notting hill Gate and Portobello Road area and Kensington High Street.		Policy CR 7: Servicing: The Council will require servicing facilities to be well-designed, built to accommodate the demands of new development and sensitively integrated into the development and the surrounding townscape. In particular servicing activities should not give rise to traffic congestion, conflict with pedestrians or be detrimental to residential amenity.	Policy CL 5: Historic Assets: The Council will permit proposals that preserve or enhance the special architectural or historic interest of listed buildings or scheduled ancient monument and their settings and will conserve and protect sites of archaeology interest and their settings.		Policy CE 6: Noise: The Council will carefully control the impact of noise generating sources likely to affect residential amenity. The Council will also require new noise sensitive development to mitigate and protect occupiers agains existing ambient noise or any existing specific sources of noise.

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		Policy CF 9: The South Kensington Strategic Cultural Area: The Council will protect and enhance arts and cultural uses in the South Kensington Strategic Cultural Area.					
Good quality	No Impact Identified					Policy CH 2: Will improve living conditions to people who require larger homes/ disabled friendly homes, and the elderly which will improve their health.	Policy CE 1: Will require new residential housing to be built in line with the Code for
affordable housing		No Impact Identified No Impact Identified	No Impact Identified	No Impact Identified No Im	No Impact Identified	No Impact Identified	Policy CH 3: promotes the amenity space in housing units be it roof gardens, balconies or even large open spaces, Through having amenity spaces improves ones health
Transport Issues	No Impact Identified	No Impact Identified	Policy CT 1: Will help promote healthy living through using other modes of transport like bicycles instead of cars, this will improve health and benefit the environment.	No Impact Identified	No Impact Identified	No Impact Identified	Policy CE 1: works alongside Policy CT 1 & 2: Through reducing the effect that private cars has upon the environment.
Employment	Through Policy CK 1 By protecting the local shopping facilities this will sustain employment and the ability to provide for ones needs.	Policy CF 1: Will help boost the level of employment in the borough by protecting the successful town centres.					
and skills Training		Policy CF 6: The Employment Zones Set up in these particular areas where unemployment is very high and an areas which have the highest bad health, will help combat unemployment and will, translate into better living conditions.	No Impact Identified	No Impact Identified	No Impact Identified	No Impact Identified	No Impact Identified

Education and early life	Policy CK 1: Will aid education through providing, schools, other school facilities and libraries. Additionally for early life, the policy provides, youth facilities, hospitals and care facilities which will be beneficial.	Policy CF 7: Will foster the creativity of the youth of the borough through providing work areas, for creative business.	Policy CT 1: Will promote the use of alternative to cars and through promoting cycling to school, will improve the health of young members of the borough.	Policy CF 8 & 9: Will promote a Borough and will provide art ucational facilities to Borough and will provide art ucational facilities to Policy CT 1: Will promote through promoting cycling to school, will improve the health of young members of the borough.	Policy CR 5: Protects gardens and open space which will allow for space for recreational and leisure facilities which will improve	No Impact Identified	No Impact Identified	All policy relating to Respecting environmental limits, will benefit health through the reducing Air, Noise, Waste and Flood pollution in the borough	
	Policy CK 2: Will promote young members walking to near by schools instead of travelling by car or public transport, which will increase exercise and reduce child hood obesity figures.	Policy CF 8 & 9: Will promote the arts and cultural facilities in the Borough and will provide art educational facilities to harness the artistic and cultural nature of the borough.			health from an early age.				
Access to	Through Policy CK 2: The introduction of further social and community facilities like doctors, dentist, hospitals and other health facilities will allow for a greater access to health and social services in the borough	No Impact Identified	No Impact Identified	tuction of further social community facilities like cors, dentist, hospitals ther health facilities will for a greater access to n and social services in	Policy CT 2: by having a new and enhance rail service, this will allow for people who do not live				
health and social services	Policy CK 3: Will allow for greater access to health facilities when they located few minutes walk within a neighbourhood. This will benefit the general health of the community.			near a health facility to gain access to ones by using public transport.	No Impact Identified	No Impact Identified	No Impact Identified	No Impact Identified	
Community safety	Policy CK 1 Includes social and community facilities include Metropolitan Police facilities, which will provide a sense of safety within the communities in the borough. (For further information refer to the Equalities Impact Assessment (EqIA))	Refer to Equalities Impact Assessment (EqIA)	Refer to Equalities Impact Assessment (EqIA)	Refer to Equalities Impact Assessment (EqIA)	Refer to Equalities Impact Assessment (EqIA)	Refer to Equalities Impact Assessment (EqIA)	Refer to Equalities Impact Assessment (EqIA)		
Liveability, open space and public realm	Policy CK 1: Provides more social and community uses, such as community centres, meeting halls, sport facilities and youth facilities will provide liveability and open space facilities.	No Impact Identified	No Impact Identified	Policy CR 5 & 6: Provide provisions for liveability, open space and public realm through protecting parks, gardens and open space and ensuring that new developments have to provide tree planting and landscape design.	No Impact Identified	Policy CH 2: By providing a diverse housing in the borough, this will promote a mixture of living standards.	All policy relating to Respecting environmental limits, will benefit health through the reducing Air, Noise, Waste and Flood pollution in the borough Policy CE 4: By promoting biodiversity in open spaces and the public realm this will improve the general health of the borough		

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Air, water and noise quality	No Impact Identified	No Impact Identified	Policy CT 1 & 2: Will improve air quality through the promotion of alternative uses to car, for example cycling and use of public transport.	Policy CR 5: helps reduce the Air pollution in the borough trough the planting of trees.	See Climate Change below	See Good quality affordable housing	All policy relating to Respecting environmental limits, will benefit health through the reducing Air, Noise, Waste and Flood pollution in the borough
Access to fresh food	Policy CK 2: Will protect local shopping facilities, which will include such shop and butchers, grocers and local markets that provide fresh food to the local community.	No Impact Identified	No Impact Identified	No Impact Identified	No Impact Identified	No Impact Identified	No Impact Identified
Climate change	No Impact Identified	Policy CF 5: Will allow for a reduction in carbon emissions, as large scale business will be located near good transport links and this will discourage the need for private car use.	Policy CT 1 & 2: Will benefit the Climate change through alternative transport methods and a rail service, both will decrease the amount of air pollution and reduce the carbon n emissions.	Policy CR 5 and 6: Aids in preventing climate change in the borough trough protecting valuable green open spaces and the planting of trees.	Policy CL 2: New Buildings will have to meet the BREEAM standard of excellence. Which will aid reducing the carbon footprint?	Residential developments will have to ad heard to the Code for Sustainable Homes which will improve health and reduce the affects of climate change.	All policy relating to Respecting environmental limits, will benefit health through the reducing Air, Noise, Waste and Flood pollution in the borough

Matrix 1: Health Impact Assessment

5. Stage 2: Scoping/ Findings

5.1 The Health Impact Assessment (HIA) has not highlighted any major discriminates to health relating to the Core Strategy and North Kensington Plan planning policies. The diagram below illustrates how Health and Social issues relate to planning policies.



5.2 However there are a number of underlying health issues within the Borough in which the Cores strategy and North Kensington Plan can provide solutions to through the spatial planning themes and their planning policies.

³ Data from the Future of Our Community, the Royal Borough of Kensington and Chelsea, Community Strategy 2008-2018. Diagram relating the various links planning policies has with Health and Social Care

6. Analysis of current health issues in the Borough

- 6.1 In order to carryout a Health Impact Assessment, a review of the current health issues of the borough will have to be taken into account to see if the Core Strategy and North Kensington Plan planning policies will have a detrimental affect on peoples health.
- 6.2 The current health issues relating to health in the borough are;

Current Identified Health Issues.

- **a.** Many areas of North Kensington fall into the least healthy 20 per cent in London. People living in the northernmost wards have an average life expectancy more than ten years lower than those in the healthiest wards. Golborne, St Charles and Notting Barns wards consistently demonstrate high levels of poor health in comparison to London on a wide range of health in comparison to London on a wide range of health indicators, and evidence suggests that the gap between the healthiest and least healthy areas of the borough is growing.
- **b.** Poor health in the borough trends to concentrate in areas of social housing, where levels of self- reported poor health are three times higher than among people who own their homes. People with significant health needs are often the most likely to be allocated social housing, further increasing the concentration of people with poor health on social housing estates.
- **c.** Poor Health and illness are more prevalent in black and minority ethnic groups than among white people. In Kensington and Chelsea black ethnic groups report the highest rates of poor health and illness, in contrast to London as a whole, where Asian groups report the worst health. Disabled people, people with learning disabilities often have greater difficulty accessing the services they need and can suffer poorer health as a result.⁴
- 6.3 By identifying the main underlying health issues in the borough will allow for the Health Impact Assessment to aid the planning policies to have a positive affect on health in the Borough.

⁴ Data from the Future of Our Community, the Royal Borough of Kensington and Chelsea, Community Strategy 2008-2018. Health and Social Care

7. Stage 3: Core Strategy and North Kensington Plan policies which provide solutions to health issues within the Borough

- 7.1 By means of identifying the current health matters above and areas in the Borough, the Core Strategy and North Kensington Plan can use its policies in the spatial planning themes to help solve the current health issues and forecast further improvements to the overall health of the Borough.
- 7.2 The spatial planning themes that provide policies to resolve a number of the identified health issues are;
 - Keeping Life Local;
 - Fostering Vitality;
 - Better Travel Choices;
 - An Engaging Public Realm;
 - Renewing the Legacy;
 - Diversity of Housing; and
 - Respecting Environmental Limits.
- 7.3 By using the seven themes and their policies from the Core Strategy and North Kensington Plan will provide solutions to the health issues in the Borough, and furthermore shows the workings of a Health Impact Assessment.
- 7.4 A number of the spatial planning themes will have no direct link to improving or providing a health service, however will contribute to good health. An examples of this is "Fostering Vitality" policies, which relate to employment issues. They have no direct link to health, however through being employed and earning and income, will improve ones health as they will be able to afford the health care they require.

7.5 Keeping Life Local:

- 7.6 **Policy CK 1:** Social and Community Uses; This policy sees the introduction for further social and community uses range from doctors surgeries, schools to places of worship and youth facilities. This policy will improve the overall health of an area identified with low level poor health.
- 7.7 **Policy CK 2:** Walkable Neighbourhoods & Neighbourhoods Facilities; Will work alongside Policy CK 1, by providing health services which are near by to the communities that rely on them day-to-day. This will increase the health facility stock within the borough and provide a higher level of access to health service as well.

7.8 Fostering Vitality

7.9 **Policy CF 4:** New Town Centres; This policy will aid in providing new retail needs in North Kensington, which will signify new health provisions as well as retail. Latimer and Kensal are areas identified as having poor health and so through new town centres in this area will boost the overall health of North Kensington through the provision of further services.

7.10 Better Travel Choices

- 7.11 **Policy CT 1:** Improving alternatives to car use; these policies directly impacts on the health of the borough, by looking to reduce the amount of car journeys taken in the Borough which will reduce the amount of carbon emissions and im prove air quality.
- 7.12 Additionally by switching to alternative routes like walking and cycling will benefit people's general health and improve fitness. This will decrease the major diseases in which people die from within borough;⁵
 - Strokes
 - Heart Disease and,
 - Cancer

7.13 An Engaging Public Realm

- 7.14 **Policy CR 5:** Parks, Gardens, Open Spaces and Waterways; the green and open spaces in Kensington and Chelsea is significantly important as the borough is of a high urban density, with limiting open space. This police serve to protect these areas, which have large health benefits to the residents of the borough.
- 7.15 By protecting green spaces and parks, allows for recreational and leisure facilities to take place and through the planting of tress and green spaces, will help combat the issues of climate change, reduce the level of carbon emissions, and provide better air quality, for the borough as a whole.

7.16 *Renewing the Legacy*

7.17 **Policy CL 2:** New Buildings, Extensions and Modifications to existing buildings; Unlike other policies relating directly to health, this relates to the building process of new buildings and the steps taken to be sustainable from the construction to the finished building.

Section a. part v. "Sustainable- in the use of resources, construction and operation."

Data source: Core Strategy and North Kensington Plan; Renewing the Legacy

7.18 This policy will have a bearing on climate change issues within the borough. (*See Respecting Environmental Limits*)

⁵ Data from the Future of Our Community, the Royal Borough of Kensington and Chelsea, Community Strategy 2008-2018. Health and Social Care "Majority of deaths in the Borough have been caused, Strokes, Heart Disease and Cancer".

7.19 *Diversity of Housing*

7.20 A lot of the poor levels of health within the borough are situated in areas of social housing. Through **Policy CH 2:** Housing Diversity; provisions have been made to provide a grain of mix housing to incorporate the varying needs of the residents.

Section b "Require homes to be built to lifetime homes standards and a minimum of 10% should be 'wheelchair accessible"

Section c "Protect existing housing schemes and care homes for older people where they are viable and meet, or are capable of meeting, modern standards of care."

Section d "Encourage development proposals for extra care housing, particularly in the south of the Borough. The Council would not seek affordable housing from proposal of care homes or extra care housing schemes.

Data Source: Core Strategy and North Kensington Plan, Diversity of Housing.

7.21 Through building new residential units to the Lifetime Homes Standard. Will⁶ Improve the housing in the Borough will the general health of the residents.

7.21 Respecting Environmental Limits

- 7.22 All policy relating to Respecting Environmental Limits, will benefit health through the reducing the issues of Climate Change and Air, Noise, Waste and Flood pollution in the Borough.
- 7.23 **Policy CE 1:** Climate Change: responds directly to health through delivering new buildings according to the BREEAM -Code for Sustainable Homes. Which sets the standard for all new builds from residential to non-residential?

Section a "Require an assessment to demonstrate that a proportion of the energy supply is secured through energy efficient design, construction and materials; and decentralised, renewable and low-carbon energy sources as part of the Code for Sustainable Homes"

Sections d "develop mechanisms to allow s.106 contributions to be used to further reduce CO_2 emissions and mitigate or adapt to climate change."

Data Source: Core Strategy and North Kensington Plan, Respecting Environmental Limits.

⁶ The Lifetime Homes Standard is the result of careful study and research. The design Criteria forming the Standard relate to interior and exterior features of the home.

There are a total of 16 design Criteria. Each is valuable in itself, but to achieve the Lifetime Homes Standard a dwelling must incorporate all relevant Criteria

- 7.24 **Policy CE 2:** Flooding: Flooding within the Borough pose a problem due to surface water and sewer water flooding which harbours disease and waste.
- 7.25 The flooding policy puts in measures to prevent surface water, and sewer water flooding, which carries various diseases.

Section d "Require, in due course, developments known to be at risk of surface water and or sewer flooding to incorporate appropriate adaptation measures."

Data Source: Core Strategy and North Kensington Plan, Respecting Environmental Limits.

- 7.26 Through preventing surface water and sewer water flooding houses will stop the spread of harmful bacteria's and disease, and prevent poor health within the borough.
- 7.27 **Policy CE 3:** Waste: This policy impacts directly on health, and the Council recognises the importance of developing further waste disposal sites in the borough to manage treatment on site. This will additionally impact on climate change through promotion of anaerobic digestion and recycling facilities.

Section b "Require waste treatment facilities as part of development at Kensal and Earls Court so that waste treatment can be managed on site (this could include recycling facilities and anaerobic digestion)

Data Source: Core Strategy and North Kensington Plan, Respecting Environmental Limits.

- 7.28 By using methods of anaerobic digestion and recycling, will reduce the levels of waste produced in the borough and impact climate change issues through recycling, which will be beneficial in the long run through less production of materials in factories and a decrease in carbon emissions.
- 7.29 **Policy CE 5:** Air Quality: Air Quality is a very significant problem within Kensington and Chelsea, with the whole Borough being designated an Air Quality site. The policy recognises the issues faced by the borough which cause poor air quality and try to rectify them.

"The Council will require that development proposals do not make local air quality worse, including the consideration of pollution from vehicles, construction and the heating of buildings, and where possible improves local air quality."

Data Source: Core Strategy and North Kensington Plan, Respecting Environmental Limits.

8. Workshops/Other documents to help understand and improve equality within the Borough

- 8.1 In addition to workshop feedback and public meetings, their have been a number of documents produced to help combat the health issues faced within the Borough, such being;
 - **Choosing Good Health Together** This document sets out seven priorities for improving health and helping local people make healthier choices.
 - **The Joint Strategy Needs Assessment (JSNA)** Assess what local people's health is like now, what help is needed that people may not currently have access to, what peoples health might be like in the future and what help and services might be needed in five or ten years time.
- 8.1 These documents help local residents achieve healthier lifestyles through assisting in making healthier lifestyle choices. Furthermore these initiatives identify the changing needs of the residents and puts in place projections for the next five to ten years to appraise the access that residents have to health facilities.
- 8.2 The residents of Kensington and Chelsea have ever rising expectations of the health services available to them in the Borough;
 - Providers of services can no longer expect users to fit in with patterns of delivery that are convenient for the provider. Designing services with user and around their needs is likely to lead to better outcomes for them and more effective use of resources. The Council and the NHS are increasingly asking people about the services they deliver, and taking these views into account when developing and delivering these services.
 - Responding to the diversity of local needs and being really responsive to peoples choices will require a greater variety of service provision than has been the case in the past. The Council and PCT expect to work with the voluntary and independent sectors and local communities explore new and innovative ways to deliver services and to look at those services which are sensitive and need to be delivered accordingly.
- 8.3 The data from health documents and responses from the expectations of the residents have been taken into account. The Core Strategy and North Kensington Plan has addressed all the main underlying issues raised through providing planning policies which do not have an adverse impact on the health of the Borough but achieve added improvements.

9. Conclusion

- 9.1 The health impact assessment has aided the planning policies understand the effects that they have upon the health of the Borough. Through this five stage process of the HIA it has become evident that the Core Strategy policies do not hinder the health within the Borough but propose to improve the level health further.
- 9.2 A majority of the of the spatial planning themes, incorporate aspects which promote health within their policies. This allows for am improved quality of life for the residents of Kensington and Chelsea.
- 9.3 Furthermore the underlying issues which were evident from previous assessments like the Join Strategic Needs Assessment (JSNA) and the Future of Our Community partnership document, have been answered by way of the policy adapting to resolve those issues.
- 9.4 Along with the equalities impact assessment (EqIA) and health impact assessment (HIA) the Core Strategy and North Kensington planning policies have been assessed in order to reveal any detrimental impacts on equality groups and health issues relating to residents in the borough.
- 9.5 These two assessments will aid the improvement of the planning service that the Council provides to its residents, workers and visitors to the Borough on a day-to –day basis.

10. Stage 4: Reporting

- 10.1 The format and style of this report needs to take account wider audience that may read this report, from the general public to an Inspector. Therefore a, matrix style has been chosen as it is a quick and effective way of digesting a large amount of information.
- 10.2 For this health impact assessment the chosen display format, will a report and a matrix to demonstrate the clear links that the Core Strategy and North Kensington planning polices have with health within the Borough.
- 10.3 The report will set out the five main title headings systematically, with an explanation of the process and a relation to health and the Core Strategy and North Kensington Plan.
- 10.4 The report should highlight the findings of the health impact assessment clearly and correspond in conjunction with the Equalities Impact Assessment (EqIA), which touches upon similar data strands and topics.

11. Stage 5: Monitoring and evaluation.

- 11.1 The health impact assessment has addressed number of areas regarding health in the Borough. However the core strategy planning policies have adapted to meet the health needs of the communities in the Borough
- 11.2 To aid the implementation, monitoring and review process of the HIA, our colleague at the PCT will review this report from an independent provider perspective.
- 11.4 A monitoring, and review approach will offer clear channels, of how the planning policy team will maintain the standard of the Core Strategy and North Kensington Plan planning polices which relation to health. This method will aid in achieving the high standard of good general health in the Borough.

11.5 Responsibility

- 11.6 Abraham Laker, will be responsible for;
 - Monitoring including collection of data
 - Reporting and presentation of data
 - The production of monitoring information and reports
 - Show policies have bee reviewed and improved in relation to HIA
- 11.7 Planning
- 11.8 The planning policy team will obtain new data to assist in reviewing the emerging findings and help answer responses from public consultations.
- 11.9 Data Collection
- 11.10 Data will be collected and reports will be produced on a yearly basis within the Annual Monitoring Report (AMR) of the Local Development Framework (LDF), and additional progress reports, which will refer to the progress of the HIA.
- 11.11 Reporting
- 11.12 Reporting on the data will produce a clear view point of the Councils planning policies, to show the improvements being made to provide a service which does not hinder health in the borough.
- 11.13 Analysis and Review
- 11.14 Through extensive analysis and review of the data, the planning policy team, will systematically analyse the reliability of monitoring data, and progress against targets set, by the health impact assessment

Glossary

AMR	- Annual Monitoring Report
BME	- Black Minority Ethnic
CS	- Core Strategy
DDA	- Disability Discrimination Act
DPD	- Development Planning Document
DRC	- Disability Rights Commission
EqIA	- Equalities Impact Assessment
ESLG	- Equality Standard for Local Government
GED	- Gender Equality Duty
HIA	- Health Impact Assessment
JSNA	- The Joint Strategic Needs Assessment
LDF	- Local Development Framework
NHS	-National Health Service
RRA	- Race Relation Act
SCI	 Statement of Community Involvement
SDA	- Sex Discrimination Act