



# ONE BATTERSEA BRIDGE

HEALTH IMPACT ASSESSMENT

October 2024

Revision 02

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October 2024



**ONE BATTERSEA BRIDGE  
HEALTH IMPACT ASSESSMENT  
REVISION 2**

**temple**

**Report for – Promontoria Battersea Limited**

One Battersea Bridge  
Health Impact Assessment (HIA)



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Document version control

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## 1.0 INTRODUCTION

### 1.1 Rapid Health Impact Assessment

1.1.1 This Rapid Health Impact Assessment (HIA) has been prepared by Temple Group Ltd (“Temple”). It is submitted in support of a planning application for a residential-led, mixed-use scheme (the ‘Proposed Development’) at One Battersea Bridge (the “Site”), on behalf of Promontoria Battersea Limited (the “Applicant”).

### 1.2 HIA and the Determinants of Health

- 1.2.1 Good health is defined by the World Health Organisation (WHO) as a “*state of complete physical, mental and social well-being and not merely the absence of disease or infirmity*”<sup>1</sup>. Health and wellbeing are heavily influenced by a wide range of factors relating to the places people live in, such as the physical environment of neighbourhoods, housing conditions, access to and quality of open and green spaces, the deprivation of neighbourhoods and the existence of a local community and social networks. These are known as “determinants of health” and can be defined as a “*personal, social, economic or environmental factor which determines the health status of individuals or populations*”<sup>2</sup>. An overview of the determinants of health is provided in **Figure 1-1**.
- 1.2.2 A HIA is a systematic approach to assessing the potential impacts of developments on the health and wellbeing of communities, with a particular focus on vulnerable and disadvantaged groups. Ensuring issues are considered at an early stage in developing planning proposals can help to improve health and wellbeing in accordance with the wider determinants of health.

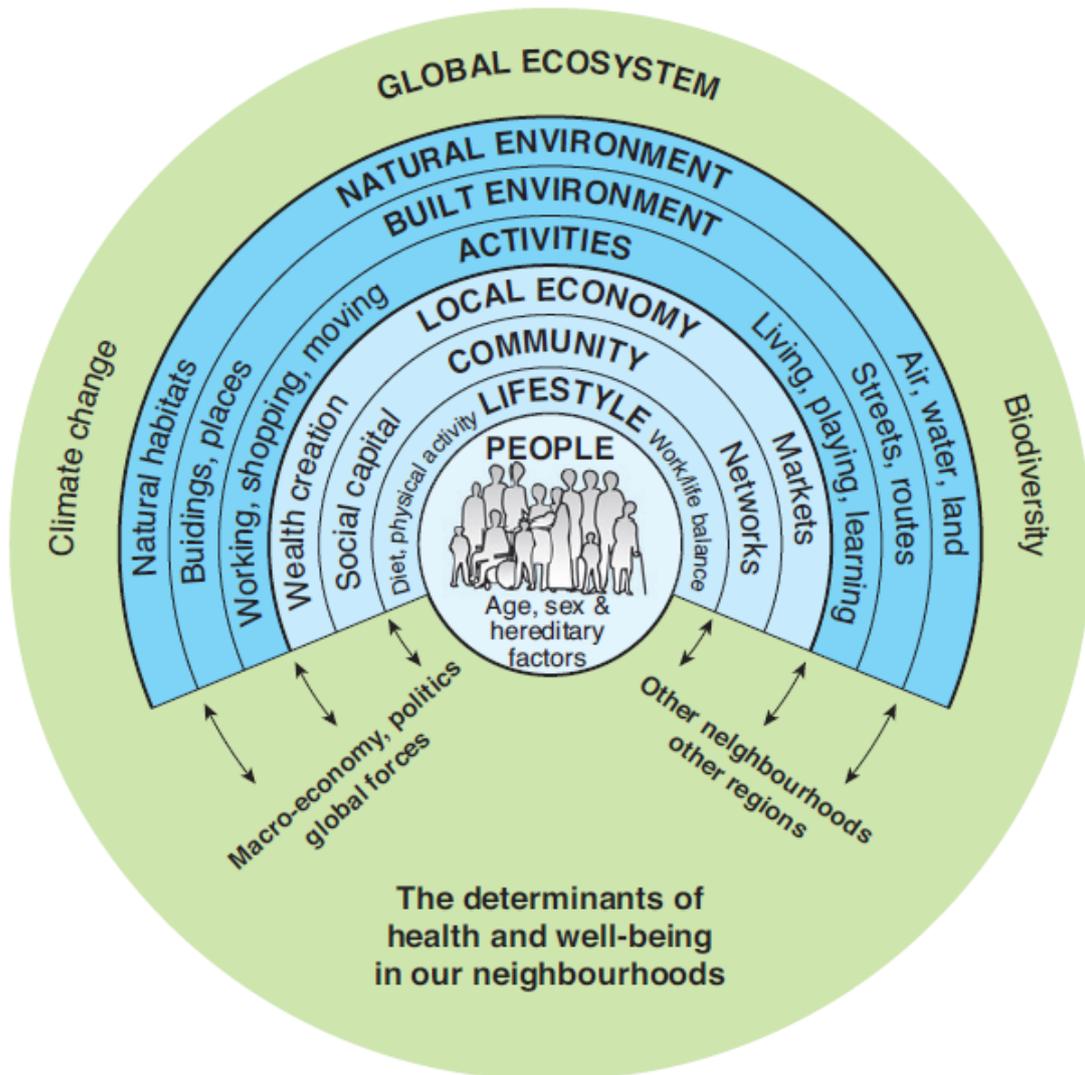
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<sup>1</sup> World Health Organisation (2022). Constitution. Available at:

<https://www.who.int/about/governance/constitution#:~:text=Health%20is%20a%20state%20of,belief%2C%20economic%20or%20social%20condition..>

<sup>2</sup> Cave, B. et al. (2019). Addressing Human Health in Environmental Impact Assessment.

Figure 1-1: The Social Determinants of Health



Source: Barton, H. & Grant, M. (2006), adapted from Whitehead & Dahlgren (1991)

## 2.0 PROPOSED DEVELOPMENT OVERVIEW

### 2.1 Site Description

- 2.1.1 The Proposed Development will comprise the redevelopment of the Site to include the demolition of existing buildings and erection of a part 10 storey, part 28 storey building (plus ground floor and basement levels) comprising residential use (Class C3), office use (Class E), community use (Class F2), and a restaurant (Class E), with associated car parking, cycle parking, public realm, landscaping, and other associated works.
- 2.1.2 The Site is approximately 0.13 hectares (ha). It is located in southwest London adjacent to Battersea Bridge at Ordnance Survey (OS) National Grid Reference (NGR) TQ 27095 77248. The Site is bound to the north by the River Thames, to the east by Thameswalk Apartments and commercial space, to the south by the Royal College of Art, and to the west by Battersea Bridge Road.
- 2.1.3 The Site is bounded by:
- The River Thames to the north, with public hardstanding along the river;
  - Thameswalk Apartments containing residential dwellings and a commercial building to the east, with the Albion Riverside Building beyond;
  - Hester Road and the Royal College of Art to the south; and
  - The A3220 to the west, with residential properties beyond.
- 2.1.4 The Site boundary is shown in **Figure 1.1**.
- 2.1.5 Comprehensive redevelopment of the Site to include demolition of existing building and erection of a part 10 storey, part 28 storey building (plus ground floor and basement levels) comprising residential use (Class C3), office use (Class E), community use (Class F2), and a restaurant (Class E), with associated car parking, cycle parking, public realm, landscaping and other associated works. The Site is located towards the south of the River Thames, adjacent to the A3220, within the St Mary's Park ward. The location of the Site in its wider geographical context is presented in **Figure 2.1**.
- 2.1.6 Imperial Wharf Station is located approximately 950 m toward the south-west of the Site. The station is serviced by the Overground Tube Station and Southern Railway which collectively provide services to Clapham Junction, Stratford, and Watford.
- 2.1.7 There are approximately four bus stops within a 200 m radius of the Site, providing services to routes 170, 19, 49, 319, 345, 728, 639, 670, N19, N28 and N31, serving locations such as Danebury Avenue, Victoria Station, Finsbury Park Interchange, Clapham Junction, White City, Peckham, the Natural History Museum, and others.

2.1.8 The entire Site is located within the Wandsworth Air Quality Management Area (AQMA), which has been designated for exceedances in nitrogen dioxide (NO<sub>2</sub>) and particulate matter (PM<sub>10</sub>).

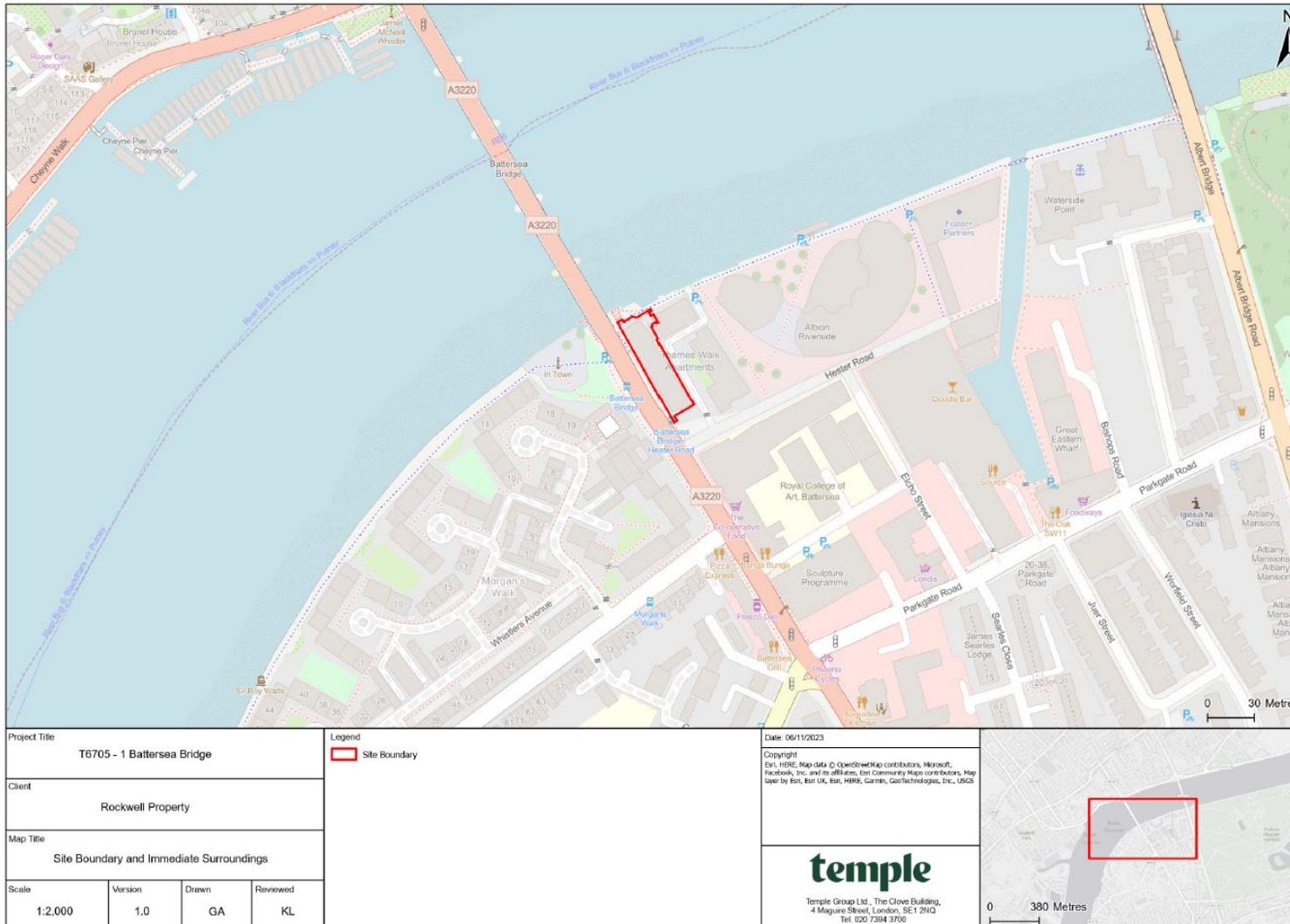
## **2.2 Study Area**

2.2.1 The Proposed Development is located to the east of Battersea Bridge Road (A3220), south of the River Thames, to the north of Hester Road and to the west of both existing commercial and residential properties, which is under the determining authority of Wandsworth.

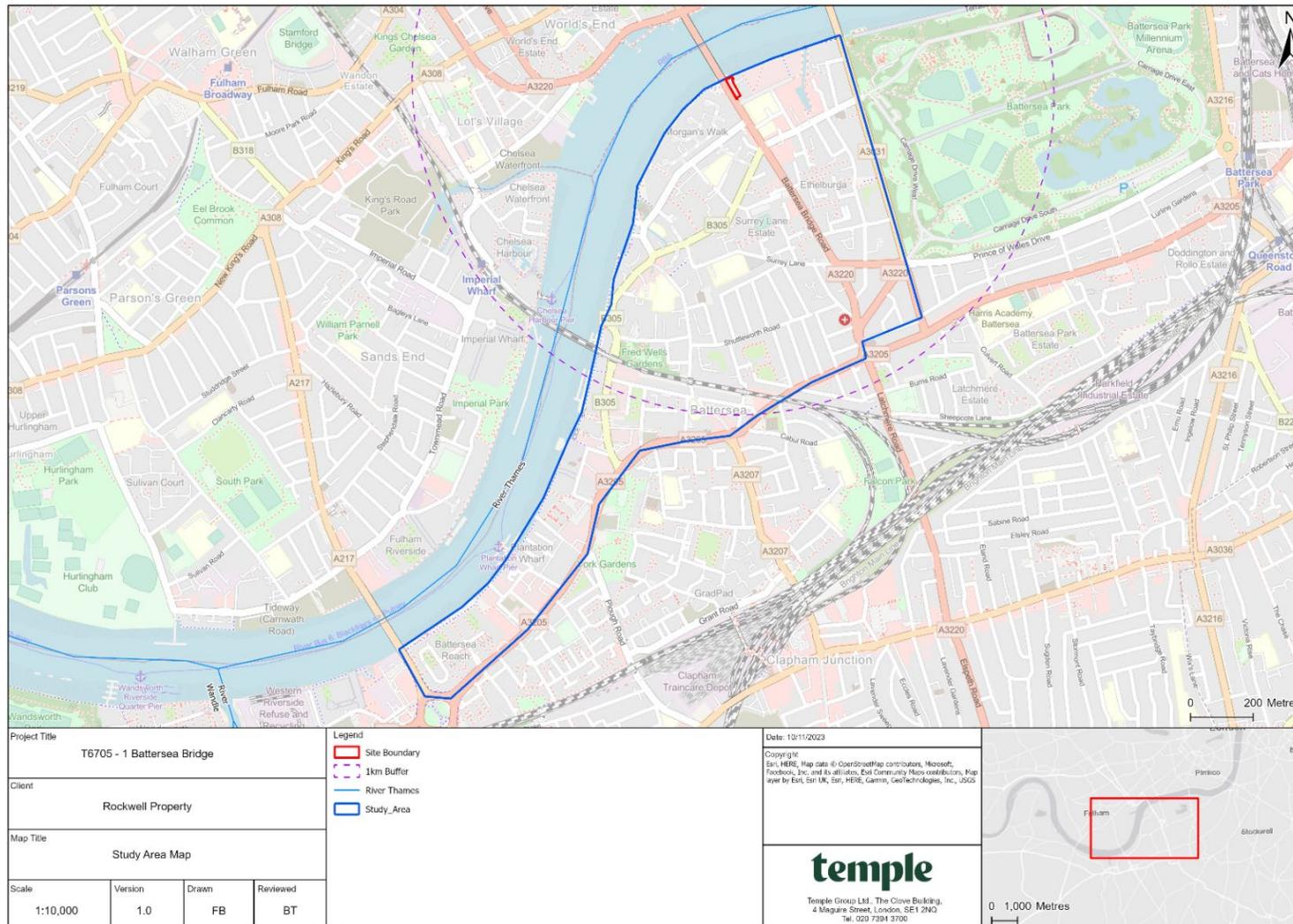
2.2.2 The Site is approximately 0.13 hectares (ha). It is located in southwest London adjacent to Battersea Bridge at Ordnance Survey (OS) National Grid Reference (NGR) TQ 27095 77248.

2.2.3 The Site sits within St Mary's Park ward, which will serve as the Study Area for this HIA. A map of the Site in relation to the Study Area is shown in **Figure 2-2**.

**Figure 2-1: Site Location**



**Figure 2-2: Study Area**



## 3.0 KEY LEGISLATION, POLICY AND GUIDANCE

### 3.1 National Legislation and Guidance

#### *The Health and Social Care Act (2012)*

3.1.1 The Health and Social Care Act<sup>3</sup> introduces a duty on local authorities to “take such steps as it considers appropriate for improving the health of the people in its area”.

#### *The Care Act (2014)*

3.1.2 The Care Act 2014<sup>4</sup> requires local authorities to provide information on access to care and support services and the availability of funding to support these services in the administrative area of the Council. The Act requires local authorities to consider the following matters:

- The type of care and support available;
- The range of care and support available;
- The process people are required to use to access the care and support;
- Where people can find independent advice on care and support; and
- How people can raise concerns about the safety and wellbeing of someone who has care and support needs.

#### *Fair Society, Healthy Lives: The Marmot Review (2012)*

3.1.3 The Marmot Review<sup>5</sup>, the conclusions of which have been incorporated into the Healthy Lives, Healthy People White Paper, found that the health of individuals is partly determined by a range of factors such as education, income, local environmental quality and employment. These are the ‘social determinants of health’. For this reason, design and environmental factors, accessibility, local employment opportunities and other elements of the Proposed Development could all have an impact on the health of the community.

#### *The Equality Act (2010)*

3.1.4 The Equality Act<sup>6</sup> legally protects people from discrimination in the workplace and in wider society. Section 149 of the Act requires public bodies to fulfil a public sector

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<sup>3</sup> Her Majesty’s Stationery Office (HMSO) (2012). Health and Social Care Act.

<sup>4</sup> Her Majesty’s Stationery Office (HMSO) (2014). Care Act.

<sup>5</sup> Marmot, M (2010). Fair Society, Healthy Lives: The Marmot Review.

<sup>6</sup> Her Majesty’s Stationery Office (HMSO) (2010). Equality Act 2010.

equality duty (PSED). In fulfilling the PSED public bodies must, in the exercise of their functions, have due regard to the need to:

- Eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Act;
- Advance equality of opportunity between people who share a protected characteristic and those who do not; and
- Foster good relations between people who share a protected characteristic and those who do not.

3.1.5 The Act identifies groups with protected characteristics, as follows:

- **Age:** A person of a particular age or persons of a particular range of ages, for example, children (0-17); younger people (aged 18-24); older people (aged 60 and over).
- **Disability:** A person with physical or mental impairment which has a substantial and long-term adverse effect on that person's ability to carry out normal day-to-day activities, i.e., disabled people.
- **Gender reassignment:** A person proposing to undergo, is undergoing or has undergone a process (or part of a process) for the purpose of reassigning the person's sex by changing physiological or other attributes of sex.
- **Marriage & civil partnership:** A person in a civil partnership or marriage between the same sex or opposite sex.
- **Pregnancy & maternity:** A person who is pregnant or expecting a baby and a person who has recently given birth.
- **Race:** A person defined by their colour, nationality, ethnic or national origins, for example, Black, Asian and minority ethnic (BAME) groups.
- **Religion & belief:** A person with any religious or philosophical belief including a lack of belief<sup>7</sup>.
- **Sex:** A man or a woman, recognising that women are more frequently disadvantaged.
- **Sexual orientation:** A person's sexual orientation towards persons of the same sex, persons of the opposite sex or persons of either sex.

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<sup>7</sup> Religion means any religion and a reference to religion includes a reference to a lack of religion. Belief means any religious or philosophical belief and a reference to belief includes a reference to a lack of belief.

## 3.2 National Policy

### *National Planning Policy Framework (updated December 2023)*

- 3.2.1 The National Planning Policy Framework (NPPF)<sup>8</sup> is a material consideration for planning decisions by Local Planning Authorities (LPAs), and for the preparation of local and neighbourhood plans.
- 3.2.2 One of the three main objectives of NPPF is to *“support strong, vibrant and healthy communities”*. The NPPF states that planning policies and decisions should ensure that developments:

*“ensuring that a sufficient number and range of homes can be provided to meet the needs of present and future generations; and by fostering well-designed, beautiful, and safe places, with accessible services and open spaces that reflect current and future needs and support communities’ health, social and cultural well-being;”*

- 3.2.3 The NPPF advocates an integrated approach to planning so that the location of housing, economic uses and community facilities and services are considered together.

- 3.2.4 Chapter 8 paragraph 96 of the NPPF, which was updated in February 2024, states:

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

- 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 beautiful, 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.*

- 3.2.5 A draft consultation for proposed reforms to the NPPF was released on 30<sup>th</sup> July 2024 and a version of this is expected to be adopted in November 2024. Proposed changes

<sup>8</sup> Ministry of Housing, Communities and Local Government (2021). National Planning Policy Framework. 2021 Update.

seek to provide greater emphasis on social rent within the affordable housing provisions and 50% affordable housing targets. While it is not considered that the proposed changes to the framework would alter the methodology set out within this assessment, the Proposed Development does align with the aims and objectives of the draft NPPF by providing 50% affordable housing, all of which will be social rented tenure.

### ***Planning Practice Guidance (updated 2024)***

- 3.2.6 The national Planning Practice Guidance (PPG) on ‘Healthy and safe communities’<sup>9</sup>, first published in 2014 and most recently updated in 2024 provides a resource in support of the NPPF. The PPG recognises the importance of HIAs as a tool that helps to identify significant impacts on health and wellbeing, as well as any mitigation measures necessary to make a development acceptable in planning terms.

## **3.3 Regional Policy**

### ***The London Plan 2021 (2021)***

- 3.3.1 The London Plan 2021<sup>10</sup> sets out the Spatial Development Strategy for Greater London and the Mayor of London’s vision for ‘Good Growth’. There are six Good Growth objectives in the Plan including Policy GG3 Creating a Healthy City, which aims *“to improve Londoners’ health and reduce health inequalities”*.
- 3.3.2 The London Plan notes that the mental and physical health of Londoners is largely determined by the environment in which they live, and that many of these determinants of health can be shaped by the planning system. Local authorities are accordingly responsible for planning and therefore public health.
- 3.3.3 Health inequalities, within The London Plan, are defined as:
- “Systematic, avoidable, and unfair differences in mental and/or physical health between groups of people. These differences affect how long people live in good health and are mostly a result of differences in people’s homes, education and childhood experiences, their environments, their income, jobs and employment prospects, their access to good public services and their everyday opportunities to live healthier lives”*.
- 3.3.4 To achieve its goal of improving health and reducing associated inequalities, The London Plan underwent an Integrated Impact Assessment (IIA) which included a HIA. The Plan also recommends other development plans and proposals undergo this assessment to *“mitigate any potential negative impacts, maximise potential positive impacts, and help reduce health inequalities”*.

<sup>9</sup> Ministry of Housing, Communities and Local Government (2019). National Planning Policy Framework. 2019 Update.

<sup>10</sup> The Greater London Authority (2021). The London Plan 2021. Available at: [https://www.london.gov.uk/Sites/default/files/the\\_london\\_plan\\_2021.pdf](https://www.london.gov.uk/Sites/default/files/the_london_plan_2021.pdf).

3.3.5 To meet these aims, those involved in planning and development must follow Policy GG3, which states:

*“To improve Londoners’ health and reduce health inequalities, those involved in planning and development must:*

- a. Ensure that the wider determinants of health are addressed in an integrated and coordinated way, taking a systematic approach to improving the mental and physical health of all Londoners and reducing health inequalities;*
- b. Promote more active and healthy lives for all Londoners and enable them to make healthy choices;*
- c. Use the Healthy Streets Approach to prioritise health in all planning decisions;*
- d. Assess the potential impacts of development proposals and development plans on the mental and physical health and wellbeing of communities, in order to mitigate any potential negative impacts, maximise potential positive impacts, and help reduce health inequalities, for example through the use of Health Impact Assessments;*
- e. Plan for appropriate health and care infrastructure to address the needs of London’s changing and growing population;*
- f. Seek to improve London’s air quality, reduce public exposure to poor air quality and minimise inequalities in levels of exposure to air pollution;*
- g. Plan for improved access to and quality of green spaces, and the provision of new green infrastructure, and spaces for play, recreation and sports;*
- h. Ensure that new buildings are well-insulated and sufficiently ventilated to avoid the health problems associated with damp, heat and cold; and*
- i. Seek to create a healthy food environment, increasing the availability of healthy food and restricting unhealthy options.”*

***The London Health Inequalities Strategy (progress report 2021)***

3.3.6 London’s Health Inequalities Strategy<sup>11</sup> introduces London-wide health aims, which are organised into five main themes:

- Healthy Children;
- Healthy Minds;
- Healthy Places;

<sup>11</sup> Mayor of London (2018). The London Health Inequalities Strategy: Implementation Plan 2018-2020. Available at: [https://www.london.gov.uk/Sites/default/files/his\\_implementation\\_plan\\_fa.pdf](https://www.london.gov.uk/Sites/default/files/his_implementation_plan_fa.pdf).

- Healthy Communities; and
- Healthy Living.

3.3.7 These themes are supported by more specific socio-economic and health objectives including reducing barriers to employment, improving London’s housing, turning neighbourhoods and public spaces into healthy places, ensuring equitable access to high quality health and social care services, tackling obesity and poor diet, and improving provisions for mental health services. All of these are in turn underpinned by the need to decrease health inequalities.

### **3.4 Local Policy**

#### ***New Wandsworth Local Plan (2023-2038)***

3.4.1 Wandsworth’s Local Plan<sup>12</sup> sets out the framework for Wandsworth’s spatial vision for the borough from 2023-2038, guided by strategic objectives and policies to:

- *Enhance local services to increase opportunities for social interaction and ensure residents will have a strong sense of community and inclusiveness.*
- *Make significant progress towards achieving carbon neutrality and respond to the climate crisis through climate change avoidance and mitigation in new development, regeneration, and existing buildings.*
- *Support greater social mobility and enable all boroughs residents to achieve their potential, fostering reduced existing barriers and spatial inequalities.*
- *Create vibrant and mixed-use quarters, and regeneration and the revitalisation of necessary social infrastructure, optimising regeneration opportunities.*
- *Respond to the housing, environmental, service and infrastructure needs of Wandsworth residents, ensuring the public transport system and interchanges are enhanced.*
- *Providing a range and choice of employment opportunities to support local businesses and encourage entrepreneurship, ensuring all residents benefit from local training and employment opportunities that regeneration may create.*
- *Be the best digitally connected borough, enabling businesses and hybrid workers to respond to the needs of customers to provide a competitive economy.*
- *Invest significantly in public services to enhance social, health, education, digital, transportation and public realm infrastructure.*

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<sup>12</sup> Wandsworth Council (2023) New Local Plan 2023 – 2038. Available at: [Adopted Local Plan \(wandsworth.gov.uk\)](https://www.wandsworth.gov.uk/adopted-local-plan)

- 3.4.2 As outlined in the Plan, Wandsworth council seeks to build on the creation of safer, connected and community focused neighbourhoods through the delivery of new homes. Regarding health, active travel will play a key role in creating a healthier and happier community, secured by fulfilling the infrastructure needs of residents.
- 3.4.3 More broadly, all policies and proposals in the Local Plan conform with priorities for sustainable development in all senses. Key objectives for the delivery of these policies can be divided into Environmental, Social and Economic.
- 3.4.4 Environmental Objectives aim to:
- *Secure sustainable development and area improvement by avoiding or mitigating the effects of climate change; improving air quality and ensuring developments are resilient to the future impacts of climate change.*
  - *Protect and enhance open space and the natural environment to support people's health and wellbeing.*
  - *Secure the provision of low or zero carbon development.*
  - *Protect and enhance the boroughs-built environment, including heritage assets and public realm.*
  - *Ensuring the environmental impacts of developments are not detrimental to health, safety, and amenity of users.*
  - *Ensuring sustainable waste management.*
  - *Reduction in the need to travel, reinforced by digital infrastructure.*
- 3.4.5 Social Objectives aim to:
- *Ensure new homes meet the demands of existing and future residents, with sufficient facilities and services.*
  - *Reducing poverty and social exclusion, supporting social mobility and ensure residents achieve their potential.*
  - *Reviewing poorly performing buildings.*
  - *Putting placemaking at the heart of the Council's work.*
  - *Ensure the provision of community and social facilities that are important for the quality of life of residents and support an ageing foundation.*
  - *Promote equality of opportunity and ensure that new development is accessible for all, including those with disabilities.*

- *Respond to the future demands created for leisure, entertainment, sport, and cultural activity.*
- *Facilitate the diversification our town centres, high streets, and local parades.*

#### 3.4.6 Economic Objectives aim to:

- *Maximise the economic potential of the borough by safeguarding land and buildings for business and industrial use.*
- *Secure the provision of flexible business space, including affordable and open workspace to meet the needs of the boroughs significant number of SMEs and to provide successful businesses with opportunities to grow and expand.*
- *Ensure the scale of development is related to the areas infrastructural and environmental capacity including public transportation and active travel infrastructure.*
- *Increase the viability and vitality of the town and local centres to create a network of resilient places that successfully and demonstrably meet the employment, community, shopping, leisure, and accommodation needs of the borough.*
- *Support development proposals which contribute to a safe, green space, accessible and integrated transport system and which contribute to the efficient operation of London's overall transport system.*

### **Joint Strategic Needs Assessment for the Borough of Wandsworth (JSNA) 2021**

3.4.7 The Wandsworth Joint Strategic Needs Assessment (JSNA)<sup>13</sup> identifies the area's key health and wellbeing challenges and informs local strategic plans. The JSNA highlights the multiple challenges Wandsworth faces and identifies priority areas for implementation via the Joint Health and Wellbeing Strategy (JHWS).

3.4.8 The key priorities for Wandsworth, as outlined in the JSNA, include:

- *Start Well (Contraception, pregnancy, birth, Schools, Vaccinations, Youth mental health, vulnerable children and young people, morbidity and mortality causes and risk factors);*
- *Live Well (Lifestyle inc. healthy eating and physical activity, Alcohol consumption, smoking, Cardiovascular Disease, STI's, abortion, contraception, mental health, cancer screening and drug use, Musculoskeletal conditions, learning disability, morbidity and mortality causes and risk factors); and*

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<sup>13</sup> Wandsworth Council (2021) JSNA Overview 2021 Available at:  
[https://www.wandsworth.gov.uk/media/9890/wandsworth\\_jsna\\_overview.pdf](https://www.wandsworth.gov.uk/media/9890/wandsworth_jsna_overview.pdf)

- *Age Well (Dementia, Vaccination, sight loss, winter season, falls and hip fractures, diseases, end of life care and causes of morbidity and mortality).*

3.4.9 The borough's population is expected to increase to more than 355,000 by 2031, a 6% increase from 2021. This will make Wandsworth the second largest population in inner London, and one of the youngest populations in the country, with a median age of 33.7. The profile of this population is largely young, educated and economically active; 71% of the population are aged 18-64. Wandsworth has a higher proportion of people aged 25-39 than the London average, in particular, females aged between 25-34.

3.4.10 Life expectancy at birth has steadily increased over years. Currently, female life expectancy is 84.1 years, which is the same as the London average, and the overall trend is rising.

3.4.11 Male life expectancy is 80.1 years, lower than the London average, although this trend is rising.

#### ***The Wandsworth Health and Care Plan (2022-2024)***

3.4.12 Wandsworth's Health and Care Plan (2022-2024)<sup>14</sup> outlines the vision, priorities and actions to meet the health and care needs of local people and deliver improvements in their health and wellbeing.

3.4.13 The Health and Care Plans vision ensures that everyone has a chance to:

- *'Have the same life chances, regardless of where they are born or live';*
- *'Live healthy, independent, fulfilling lives';*
- *'Be part of dynamic, thriving and supportive communities';*
- *'Have equal access to health and social care services'.*

3.4.14 The main challenges faced in Wandsworth are:

- *'Reducing childhood obesity';*
- *'Improving the mental health and wellbeing of children and young people by making it easier for young people to access support, and reducing waiting times';*
- *'Supporting more people living with long term conditions in community settings, enabling them to be supported closer to home';*

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<sup>14</sup> Wandsworth Council (2022) Wandsworth Health and Care Plan. Available at: [Wandsworth-Health-and-Care-Plan-2022-to-2024.pdf](https://southwestlondonics.org.uk/Wandsworth-Health-and-Care-Plan-2022-to-2024.pdf) ([southwestlondonics.org.uk](https://southwestlondonics.org.uk))

- *'Improving the support, we provide to the frailest older people in care homes at the end of their lives';*
- *'Improving access to mental health and wellbeing';*
- *'Addressing and reducing health inequalities'.*

### ***Air Quality Action Plan (2023-2028)***

3.4.15 Wandsworth's Air Quality Action Plan (AQAP) was produced to comply with policy supporting London Local Air Quality Management (LLAQM) and outlines the borough's plans to improve air quality in Wandsworth over a five-year period.

3.4.16 Air quality is of major concern within the borough, and across London more broadly, with high rates of pollution and particulates contributing to higher mortality rates and higher healthcare costs. Wandsworth have developed the following themes:

- Leading by example;
- Raising awareness, enabling protection;
- Improving transport;
- Walking and cycling;
- Supporting our businesses;
- Protecting, improving and growing our green spaces;
- Protecting our children and the most vulnerable; and
- Improving our homes and buildings.

3.4.17 These actions' themes support the AQAP's key priorities, which illustrate a comprehensive and far-reaching desire to limit activities which produce emissions and to promote behavioural change which will limit individuals' exposure. The key AQAP priorities are:

- Take a leading approach on London's air quality using the WHO Guidelines.
- Ensure everyone in Wandsworth understands how they can reduce air pollution and climate change and how to protect themselves and their families.
- Reduce air pollutant and greenhouse gas emissions from our operations.
- Reduce greenhouse gas and air pollutant emissions from our schools and ensure that our schools are some of the lowest air pollution areas.
- Reduce greenhouse gases and air pollution from Council buildings and estates.
- Reduce greenhouse gases and air pollution from the operation of our parks.

- Become the leader in London on reducing emissions from construction.
- Ensure all residents of Wandsworth understand how best to protect themselves from air pollution and the things they can do to reduce their own contributions.
- Demonstrate the tangible benefits of air pollution reduction, to incentivise behaviour change.
- Involve the community in the action taken and ensure we are accountable to them.
- Zero tailpipe emissions from Transport for London buses on every bus route in Wandsworth.
- Continue to have the best EV charging network in London.
- Ensure we have a public transport system that is attractive for people to use and better integrates different transport services.
- By 2030, ensure 60% of residents live within 400m of the strategic cycle network.
- By 2030 install 1,390 spaces across 232 bike hangars with 20% on council estates.
- Provide and improve quiet routes for walking and cycling by improving local connections, signage, traffic calming, and maintenance of roads and footpaths.
- Improve connections between neighbourhoods identified in the Cycle Network Review.
- Remove the Wandsworth gyratory.
- Make cargo e-bikes a routine option for cyclists who need to move larger loads.
- Train 1-in-10 Wandsworth adults and children in cycling safely.
- Ensure children can get to school without being exposed to high pollution levels.
- Ensure primary schools have School Streets, where this is practical.
- Reduce risks to the elderly and those with health conditions vulnerable to air pollution.

## 4.0 METHODOLOGY

### 4.1 Overview of the HIA Process

4.1.1 The scope of a HIA is based around an assessment of the determinants of health, namely those factors that influence health and wellbeing. This is considered a best practice approach as recommended by the WHO, due to the difficulties in predicting actual health outcomes which have complex causal pathways. Determinants of health include:

- Socio-economic factors, such as access to employment opportunities or healthcare;
- Environmental factors, such as exposure to air pollution or access to open space; and
- Lifestyle factors that can be influenced by the physical environment, such as levels of physical activity or access to healthy food.

4.1.2 Our approach to this HIA reflects the approach set out in the **Healthy Urban Development Unit (HUDU)** Guidance. This involves the following main stages:

- Conducting an evidence review to establish a baseline and identify vulnerable groups;
- Identifying and assessing the significance of likely effects, with special consideration given to those key challenges and vulnerable groups established in the baseline; and
- Identifying relevant mitigation, enhancement, management and monitoring strategies.

4.1.3 It will address the following topics listed in the HUDU HIA Tool:

- Housing quality and design
- Access to healthcare services and other social infrastructure
- Access to open space and nature
- Air quality, noise and neighbourhood amenity
- Accessibility and active travel
- Crime reduction and community safety
- Access to healthy food
- Access to work and training

- Social cohesion and lifetime neighbourhoods
- Minimising the use of resources
- Climate change.

## **4.2 Determination of Baseline**

4.2.1 A profile of the local community, including demographic data, health and wellbeing needs and assets, and information on vulnerable groups has been prepared to enable an assessment of health and wellbeing themes that aligns with the Study Area's priorities and needs. This has been supplemented with a review of the relevant UK, London and Wandsworth policies to identify key health related issues relevant to both the locality and the Proposed Development.

## **4.3 Assessing Effects**

4.3.1 This HIA will follow HUDU assessment guidance.

4.3.2 These topics will be assessed according to local priorities and needs based on local policy and the established baseline data. These topics will also be considered in relation to the Proposed Development's construction and operational phases and in relation to its short- and long-term effects. Special consideration will be given to the Proposed Development's impact on vulnerable groups, key health issues and inequalities.

4.3.3 The HIA has drawn on a range of technical documents submitted as part of the planning application to provide an evidence base for the assessment. These include:

- Design and Access Statement (DAS);
- Construction Environmental Management Plan (CEMP);
- Air Quality Assessment;
- Noise Impact Assessment;
- Circular Economy Statement;
- Preliminary Ecological Appraisal Assessment; and
- Social and Infrastructure Study.

## **4.4 Mitigation, Enhancement, Management and Monitoring**

4.4.1 Where adverse effects have been identified, measures to prevent, reduce and remedy these impacts have been suggested, where feasible. Where beneficial effects have been identified, measures to optimise these impacts have been suggested, where feasible.

## **4.5 Assumptions and Limitations**

- 4.5.1 Wherever possible, the baseline year used in this assessment is 2024, the latest year for which at least some of the baseline information is available. When information for the year 2024 is not available, the assessment refers to the latest available information, such as the 2021 Census.
- 4.5.2 Where data for the Study Area is unavailable, particularly for some health data, data for the next smallest geographic area has been used to supplement the evidence base, most often Wandsworth.
- 4.5.3 During the construction and operational phases, suggested mitigation measures will be appropriate to the Proposed Development's potential impact and be based on details available at the time of preparing the HIA.

## 5.0 BASELINE CONDITIONS

### 5.1 Demographic Profile

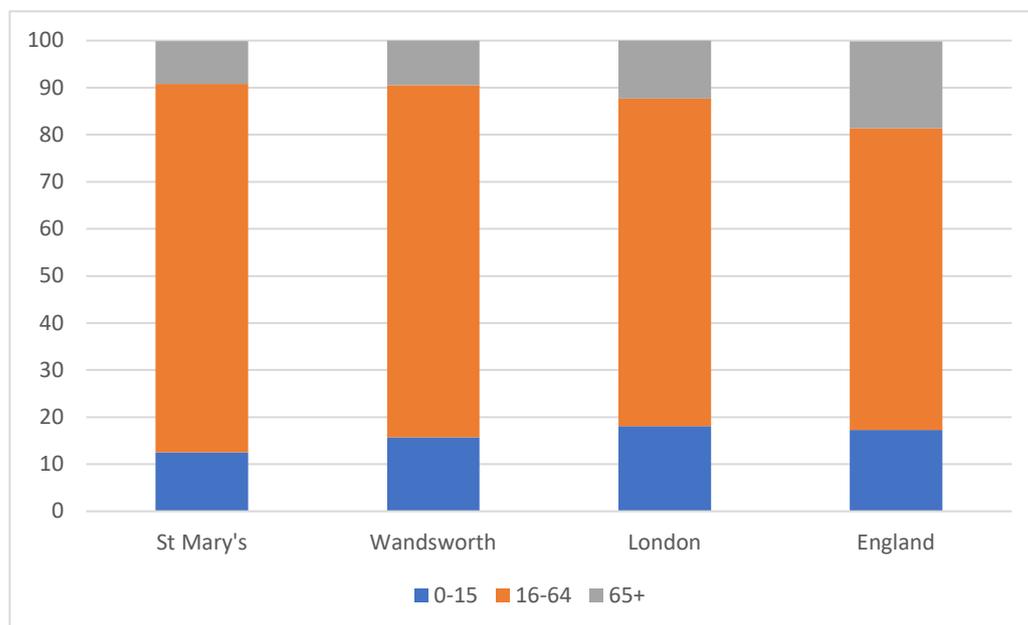
#### *Population*

5.1.1 According to the most recent population statistics in 2021, the population of the Study Area, St. Mary’s Park ward, is approximately 14,200, which is about 4% of Wandsworth total residents (approximately 327,500)<sup>15</sup>. The gender split in St Mary’s Park ward is approximately 6,802 males (47.9%) and 7,398 women (52.1%).

#### *Age*

5.1.2 In 2021, the proportion of people aged 65 or over in St Mary’s Park ward (9.1%) was lower than the England average of 18.4%, and higher than in Wandsworth (9.5%)<sup>16</sup>. In terms of the working age population (16 – 64 years), this was 78.5%, which is similar to the borough (74.8%), both being higher than England (64.1%). The proportion of children and young people (0 – 15 years) is 12.5%. **Figure 5-1** shows the population of these areas in each of these age brackets.

**Figure 5-1: Population of Study Area and comparative areas by age group, 2021**



Source: Office for National Statistics (2021)

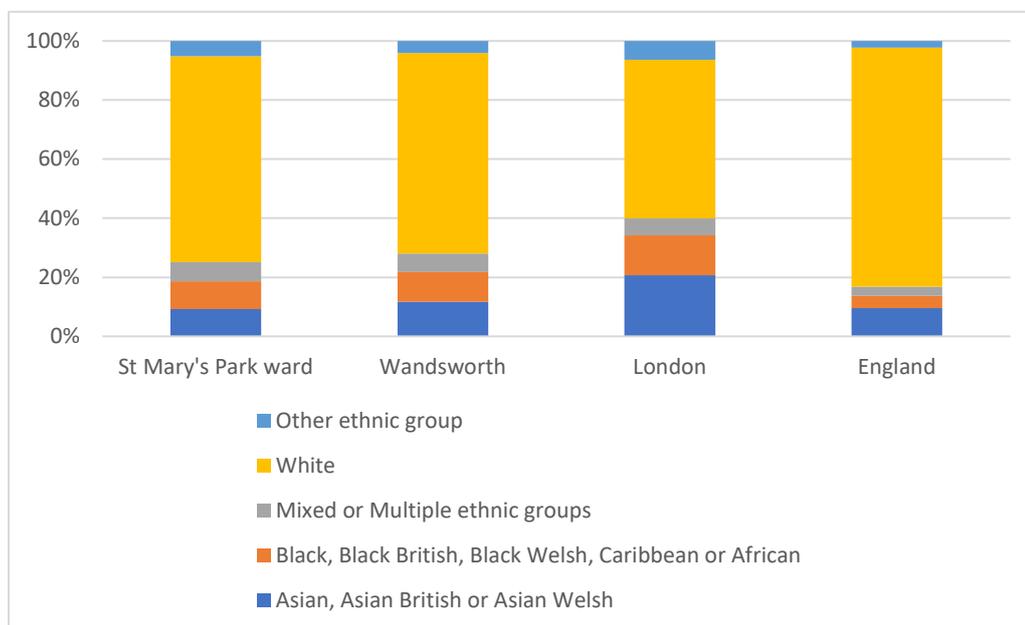
<sup>15</sup> ONS (2021). Mid-2020 Population Estimates for 2020 Wards and 2021 LAs in England and Wales – Table SAPE23DT8a.

<sup>16</sup> Public Health England (2021). Fingertips Tool: Local Health.

## Ethnicity

5.1.3 Based on the most recent available data, **Figure 5-2** shows that around 70% of the population in the study area identify as White. The Study Areas White population was slightly larger than across Wandsworth (69%) and the London region (57%), but smaller than England (81%). In the study area, those who identify as either Asian, Asian British or Asian Welsh is 9.3% of the population, lower than across Wandsworth (12%) and London as a whole (18%). Those identifying as Black, Black British, Black Welsh, Caribbean or African across the borough also 9.3%, lower than across Wandsworth (10.1%) and London (13.5%).

**Figure 5-2: Ethnic background of the Study Area, 2021**



Source: Office for National Statistics (2021)

5.1.4 Regarding language proficiency, in 2021 only 1.5% of St Mary's Park ward residents could not speak English well or at all<sup>17</sup>. By comparison, 2.3% of Wandsworth could not speak English well or at all, and 1.9% of England could not speak English well or at all. This is consistent with the above data regarding race and ethnicity, indicating that the Study Area is not particularly ethnically diverse.

<sup>17</sup> Public Health England (2021). Fingertips Tool: Local Health.

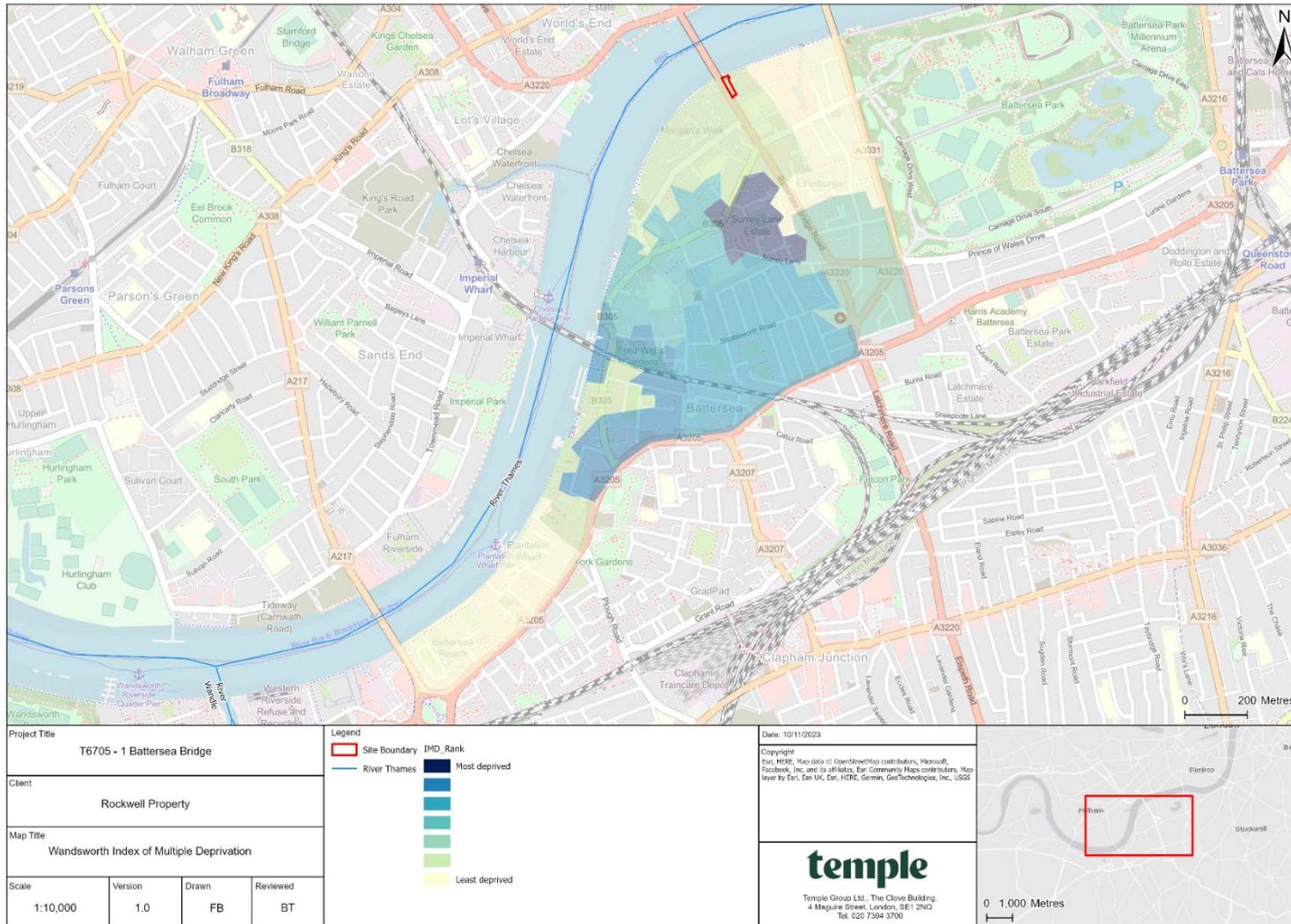
## 5.2 Deprivation

- 5.2.1 The English Indices of Deprivation 2019<sup>18</sup> (EID) is the official measure of relative deprivation in England. It is based on seven distinct domains of deprivation including income, employment, education and skills training, health deprivation and disability, crime, barriers to housing and services and living environment. These domains are combined and weighted to form the overall index.
- 5.2.2 The Study Area has 10 Lower Super Output Areas (LSOAs), which are the smallest geographical areas assessed in the EID 2019. These include Wandsworth 003C, Wandsworth 004B, Wandsworth 004C, Wandsworth 001C, Wandsworth 001D, Wandsworth 003D, Wandsworth 004E, Wandsworth 004D, Wandsworth 004G and Wandsworth 004F. A map of these 10 LSOAs in relation to the Site is provided in **Figure 5-3**.

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<sup>18</sup> Ministry of Housing, Communities & Local Government (2019). English Indices of Deprivation 2019. Available at: <https://www.gov.uk/government/statistics/english-indices-of-deprivation-2019>.

**Figure 5-3: Indices of Multiple Deprivation (2019) within the Study Area (Map)**

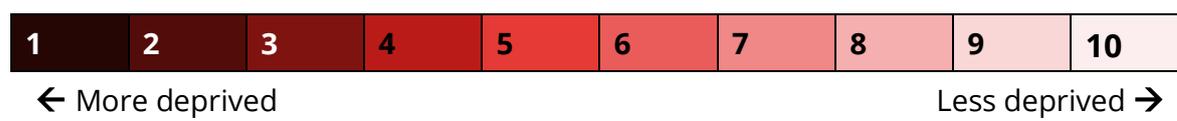


Source: Ministry of Housing, Communities & Local Government (2019)

5.2.3 More information on each of the LSOAs and their individual rankings in each domain can be found in **Table 5-1**. The lower the score, the worse off the LSOA is in that domain. For example, a score of 1 indicates a ranking in the first decile, or 10% most deprived LSOAs<sup>19</sup>.

**Table 5-1: Indices of Multiple Deprivation (2019) within the Study Area (by Decile)**

	English Indices of Deprivation	Income	Employment	Education and Skills	Health Deprivation and Disability	Crime	Barriers to Housing and Services	Living Environment
<b>St Mary's Park ward</b>								
<u>Wandsworth 003C</u>	6	6	9	10	6	5	3	2
<u>Wandsworth 004B</u>	5	5	6	10	7	4	4	2
<u>Wandsworth 004C</u>	5	5	8	10	4	3	3	2
<u>Wandsworth 001C</u>	8	8	9	9	10	9	4	2
<u>Wandsworth 001D</u>	7	6	8	10	7	5	4	3
<u>Wandsworth 003D</u>	3	1	3	5	4	8	1	5
<u>Wandsworth 004E</u>	5	4	7	9	8	4	1	2
<u>Wandsworth 004D</u>	6	5	7	8	8	7	3	2
<u>Wandsworth 004G</u>	7	7	10	10	9	7	2	2
<u>Wandsworth 004F</u>	9	8	10	10	10	7	6	2



Source: Ministry of Housing, Communities & Local Government (2019)

<sup>19</sup> Ministry of Housing, Communities & Local Government (2019). File 2: Domains of Deprivation.

- 5.2.4 In terms of rankings across the individual domains of deprivation, the scores are varied.
- 5.2.5 Generally, the area scores most poorly in terms of living environment, with 8 out of 10 LSOAs scoring amongst the top 20% most deprived areas in the whole of England. The Study area also scores poorly in terms of barriers to housing and services, with 2 LSOAs in the top 10% most deprived in the country.
- 5.2.6 In terms of rankings across the individual domains of deprivation, the most deprived LSOAs, is Wandsworth 003D, scoring in the first decile for income and barriers to housing and services. In this area, employment, and health deprivation and disability are also a particular concern.
- 5.2.7 Across the other 9 LSOAs, crime and income are major challenges for residents, with 3 LSOAs in the top 30-40% most deprived for crime, 4 LSOAs in the top 40% and 1 in the first most deprived decile for income.

### 5.3 Health Profile and Health Inequalities

#### *Life Expectancy*

- 5.3.1 In St Mary’s Park ward, the life expectancy at birth for women (82.1years) is slightly lower than across Wandsworth (84.1), and it is lower than across England (83.2)<sup>20</sup>. The life expectancy at birth for men (80.2 years) is slightly higher than across Wandsworth (80.1), and higher than across England (79.5).

**Table 5-2: Life Expectancy Across the Study Area and Geographic Comparators**

Indicator	St Mary’s Park ward	Wandsworth	England
Life expectancy at birth for females (2016-2020)	82.1	84.1	83.2
Life expectancy at birth for males (2016-2020)	80.2	80.1	79.5

Source: Public Health England, Fingertips (2022) and Office for National Statistics (2011)

#### *Physical Health*

- 5.3.2 Overall, disease-related health indicators within St Marys Park ward illustrate a pattern of ill-health in the Study Area, with St Mary’s Park ward holding higher standardised mortality ratios (SMR) (113.7) compared to the English baseline (100.0). Of note, this trend includes deaths from circulatory disease in the Study Area (128.0), which is significantly higher than across Wandsworth (97.3) and England (100.0).

<sup>20</sup> Public Health England (2021). Fingertips Tool: Local Health.

**Table 5-3: Physical Health Indicators Across the Study Area and Geographic Comparators**

Indicator	St Mary's Park ward	Wandsworth	England
Deaths from all causes, standardised mortality ratio (SMR) (2016-2020)	113.7	92.9	100
Deaths from cancer, SMR (2016-2020)	87.7	93.6	100
Deaths from circulatory disease, SMR (2016-2020)	128.0	97.3	100
Deaths from coronary heart disease, SMR (2016-2020)	96.7	87.3	100
Deaths from respiratory disease, SMR (2016-2020)	94.5	84.4	100
Deaths from all causes considered preventable, under 75 years, SMR (2016-2020)	93.4	88.5	100
Percentage of children in Year 6 classed as obese (2019/20-21/22)	21.2*	20.5*	21.6

Source: Public Health England, Fingertips (2023)

\* Value suppressed for disclosure control due to small amount or not available

- 5.3.3 Of particular concern in this profile are death due to circulatory disease likely due to smoking, physical inactivity, diet, and substance abuse.
- 5.3.4 Obesity in turn is largely caused by a combination of poor nutrition and inadequate physical activity.
- 5.3.5 Poor nutrition is compounded by the effects of food deserts, or areas with limited access to affordable and nutritious food, of which St Mary's Park Ward and Wandsworth have many<sup>21</sup>. They tend to be inhabited by residents in lower income brackets with poor access to transportation or digital tools, which make them less desirable to major supermarket chains that would supply fresh, whole foods. This lack of supermarkets can result in an overabundance of fast-food takeaways and other convenience foods, which in turn contribute to poor health outcomes such as unhealthy weight gain and diabetes.

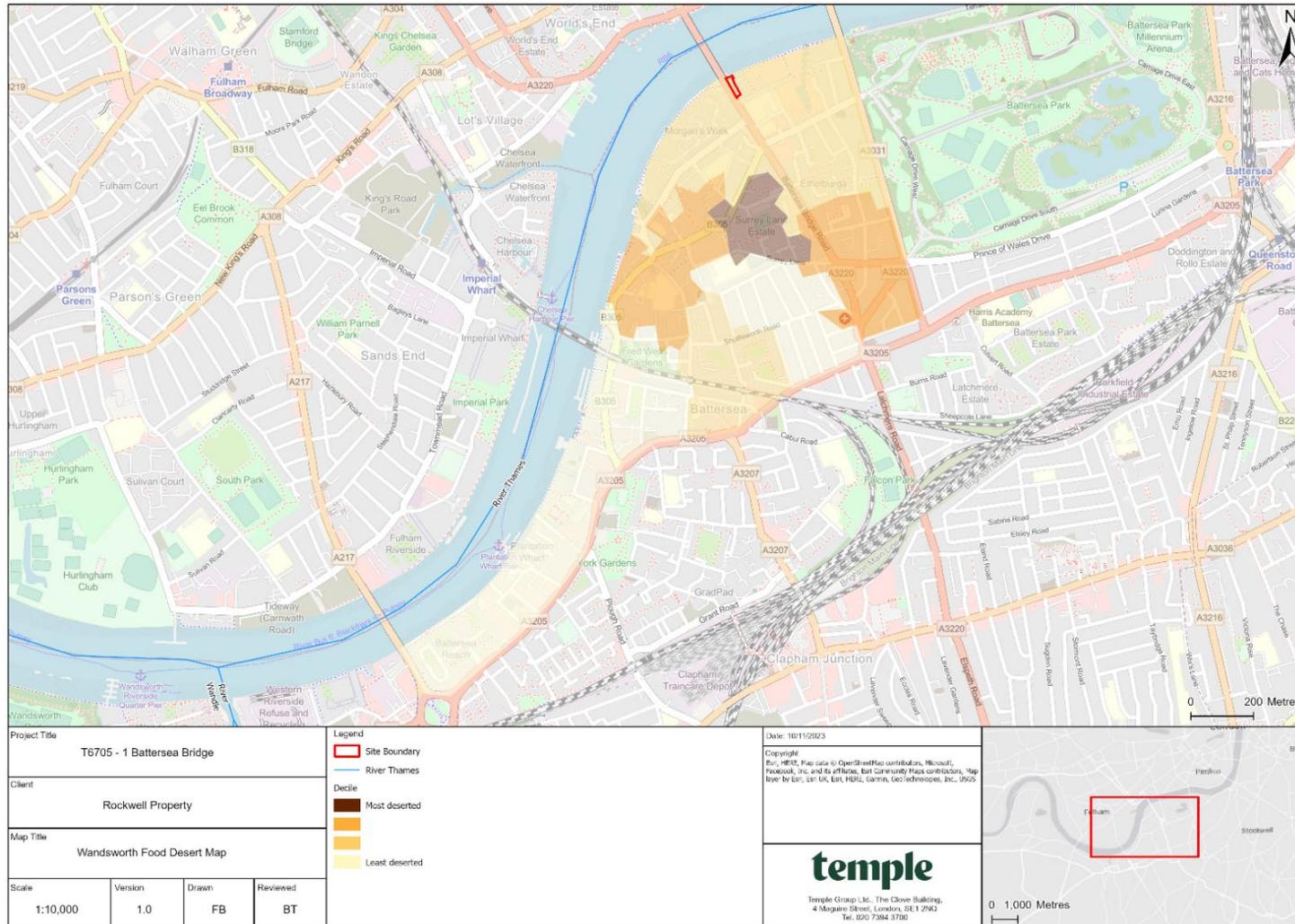
<sup>21</sup> Burgoine, T. et al. (2017). Interplay of Socioeconomic Status and Supermarket Distance is Associated with Excess Obesity Risk: A UK Cross-Sectional Study. International Journal of Environmental Research and Public Health. 14(11): 1290. Available at: <https://doi.org/10.3390/ijerph14111290>.

5.3.6 Likewise, inadequate physical activity is compounded by poor access to open and natural areas, as well as modes of active travel, which make it more difficult for people in more deprived areas to easily fit physical movement into their day<sup>22</sup>.

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<sup>22</sup> Local Government Association (2013). Healthy people, healthy places briefing – Obesity and the environment: increasing physical activity and active travel. Available at: [https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/256796/Briefing\\_Obesity\\_and\\_active\\_travel\\_final.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/256796/Briefing_Obesity_and_active_travel_final.pdf).

**Figure 5-4: Food Deserts within the Study Area**



Source: Consumer Data Research Centre (2022)

### Mental Health

- 5.3.7 The standardised admission ratio (SAR) for all hospital stays in St Mary’s Park ward (78.4) is lower than across Wandsworth (90.6), and England (100.0). In addition, the SAR for emergency hospital admissions for self-harm (29.) which is lower than across Wandsworth (39.7) and England overall (100.0).
- 5.3.8 St Mary’s Park ward has higher rates of children in poverty (18.6), higher than across Wandsworth (15.4), and England (17.1) – a worrying factor as low income and employment deprivation can lead young children into poverty.
- 5.3.9 In addition, the Study Area has a high rate of people over 65 living alone (36.1), although lower than across Wandsworth (38.6), which are both higher than across the country (31.5) – a concerning factor as social isolation is a negative contributor to mental wellbeing<sup>23</sup>.

**Table 5-4: Mental Health Indicators Across the Study Area and Geographic Comparators**

Indicator	St Mary’s Park ward	Wandsworth	England
Emergency hospital admissions for all causes, standardised admission ratio (SAR) (2016/17-2020/21)	78.4	90.6	100
Emergency hospital admissions for self-harm, SAR (2016/17-20/21)	29.0	39.7	100
Children in poverty, Income Deprivation Affecting Children Index (IDACI) (2019)	18.6	15.4	17.1
Older people in poverty, Income Deprivation Affecting Older People Index (IDAOPI) (2019)	19.9	21.0	14.2
Percentage of people 65 years and over living alone (2011)	36.1	38.6	31.5

Source: Public Health England, Fingertips (2023) and Office for National Statistics (2011)

### Long-term Illness and Disability

- 5.3.10 In terms of continuing conditions, 11.4 of St Mary’s Park ward residents report having a limiting long-term illness or disability. This is somewhat lower than across England (17.6), but higher than across Wandsworth (11.2), which is still lower than the national rate in this domain.

<sup>23</sup> Novotney, M. (2019). The risks of social isolation. *American Psychological Association*. 50(5): 32. Available at: <https://www.apa.org/monitor/2019/05/ce-corner-isolation>.

**Table 5-5: Long-term Illness and Disability Across the Study Area and Geographic Comparators**

Indicator	St Mary's Park ward	Wandsworth	England
Percentage of people who reported having a limiting long-term illness or disability (2011)	11.4	11.2	17.6

Source: Public Health England, Fingertips (2022) and Office for National Statistics (2011)

## 5.4 Healthcare Provision

5.4.1 Healthcare services in the Study Area are provided by NHS Southwest London ICB.

### *Hospitals*

5.4.2 The closest hospital with an Accident and Emergency (A&E) department to the Site is Chelsea and Westminster Hospital, which is approximately 0.8 miles (6 minutes' driving distance) away.

### *General Practitioners (GP)*

5.4.3 The nearest GP surgery to the Site is Bridge Lane Group Practice which is 0.4 miles away (11 minutes' walking distance) away<sup>24</sup>. Also nearby are Falcon Road Medical Centre (approximately 0.8 miles away and 22 minutes' walking distance away) and Battersea Fields Practice] (approximately 0.8 miles away and 22 minutes' walking distance away).

5.4.4 HUDU recommends that GP practices maintain a ratio of one GP, or full time equivalent (FTE), for 1,800 patients, as a high ratio of patients to GPs can lead to longer wait times to see a medical professional and potentially receiving treatment. Of the three nearest GP practices to the Proposed Development, all of which are within 2km of the Site, two practices exceed this ratio. However, their GP to patient ratios is such that they may have capacity to accommodate new patients.

5.4.5 More information on GP to patient ratios at these practices is provided in **Table 5-6**.

<sup>24</sup> NHS Choices, available at: <https://www.nhs.uk/service-search/find-a-GP>.

**Table 5-6: GP Surgeries within 2km of the Site**

Name	Travel distance, time, and method	Registered patients	GP to Patient Ratio (Simplified)	Currently accepting new patients?
Bridge Lane Group Practice (0.4 miles away)	(0.4 miles, 11 minutes walking distance)	14,851	1:2,123	Yes
Falcon Road Medical Centre (0.8) miles away)	(0.8 miles, 22 minutes walking distance)	9,654	1:1,045	Yes
Battersea Fields Practice (0.8 miles away)	(0.8 miles, 22 minutes walking distance)	13,503	1:965	Yes
Junction Health Centre (1mile away)	(1 mile, 29 mins walking distance)	8,339	1:4,170	Yes
Lavender Hill Group Practice	(1.1 miles, 29 minutes walking distance)	14,775	1: 1,642	Yes
<b>Total</b>		<b>61,122</b>	<b>1:1989</b>	

Source: NHS Digital (2023)

### ***Dentists***

5.4.6 The nearest dental facilities to the Site include:

- Battersea Bridge Dental Clinic (approximately 0.1 miles, 2 minutes’ walking distance);
- Dental Beauty Battersea (0.6 miles, 6 minutes driving distance);
- Chelsea Dental Practice (0.4 miles, 14 minutes’ walking distance).

## **5.5 Local Facilities**

### ***Open Space***

- 5.5.1 The Site is situated near various open green space, the most substantial include Battersea Park (approximately 0.3 miles, 7 minutes' walking distance away) which has extensive walking space, a large boating lake, a sports ground and arena, various tropical and English Gardens and a children's zoo.
- 5.5.2 Other nearby open green space includes Falcon Park, a large open, flat green space, with football pitches (0.9 miles away, 19-minute walk). Ropers Gardens is a small, open green space with various benches and scenery overlooking the river Thames (0.2 miles, 6-minute walk).

### ***Community Centres***

- 5.5.3 The nearest community centre to the Site is Ethelburga Community Centre, (approximately 0.2 miles, 4 minutes' walking distance or 1 minutes' driving distance away) and includes a large meeting room and kitchen facilities).
- 5.5.4 Other nearby community centres include Dimson Lodge, (0.3 miles, 7-minute walking distance) and includes a spacious hall and meeting space, and Katherine Low Settlement (0.7 miles), 15 minutes walking distance), which includes an art room (for training, meetings, and parties), a kitchen, a chapel room, snooker room and various meeting and creche spaces.

### ***Sports and Leisure Facilities***

- 5.5.5 Stars Gym, a private gym, is a well-equipped sports and leisure facility (approximately 0.2 miles, 3 minutes' walking distance from the Site). The gym features a range of modern amenities and services including personal training and weekly fitness classes, including martial arts, yoga, and cardio.
- 5.5.6 Other nearby facilities include Guts and Glory Fitness, a private gym, which is a sports and leisure facility offering a wide range of classes and amenities such as a fitness studio. Battersea Sports Centre is a local community gym, offering a fully equipped fitness facility, exercise classes, and an astro turf pitch.

### ***Libraries***

- 5.5.7 The nearest library to the Site is Battersea Park Library (approximately 1.1 miles, 22 minutes' walking distance away).

## **5.6 Transport Infrastructure**

- 5.6.1 The Site is located near to several transport options. The Site is connected to public transport via routes including the London overground, underground and bus routes.

The nearest overground station is Battersea Park (1.3 miles and a 29-minute walk), or Clapham Junction (1.3 miles and a 29-minute walk). The nearest bus stop is Battersea Bridge Bus Stop, stop BL or BD, which is a 1-minute walk away, and is served by 7 bus routes, including 19, 49, 170, 319, 345, N19 and N31.

5.6.2 The Site is located near various cycle routes and quieter roads.

## **5.7 Vulnerable Groups**

5.7.1 A review of the health baseline highlights the needs of several groups which are currently more susceptible to poor health or may be particularly vulnerable to the adverse effects of construction and development.

5.7.2 These key vulnerable groups include children and young people, older people, people with long-term health problems or disabilities, people suffering from poor mental health, and people experiencing deprivation.

## **5.8 Future Baseline Conditions**

5.8.1 The Proposed Development is expected to be fully built out and operational in 2029. In the absence of the Proposed Development, the baseline conditions described above are not expected to have significantly changed by the opening year. Therefore, for the purpose of this assessment, the current baseline is considered as representative of the future baseline data.

## 6.0 ASSESSMENT

6.1.1 **Table 6-1** to **Table 6-10** below provide an assessment against questions provided in the NHS Healthy Urban Development Unit (2019) Rapid Health Impact Assessment Tool. The assessment includes questions relating to those key health determinants included in the tool and covers both the construction and operational phases of the Proposed Development.

**Table 6-1: Housing Design and Affordability**

Assessment criteria	Relevant?	Details / evidence	Potential health impact	Recommended mitigation or enhancement actions
<b>Does the proposal seek to meet all 16 design criteria of the Lifetime Homes Standard<sup>25</sup> or meet Building Regulation requirement M4(2)<sup>26</sup>?</b>	Yes	<b>Relevance to health and wellbeing</b> It is estimated that about 20% of the UK housing stock does not meet the standards of a decent home <sup>27</sup> . Yet, the quality of houses has a significant impact on residents' health and wellbeing. Improvements in housing conditions have been shown to have numerous positive impacts on health, including lower injury and mortality rates, improved mental health and less contact with GPs <sup>28</sup> . Following the Government's 2015 'housing standards review' Lifetime Homes standards were replaced by the optional building regulations standard M4(2) entitled 'accessible and adaptable dwellings' <sup>29</sup> .	Moderate benefit	State what percentage of units will meet M4(2) and M4(3).

<sup>25</sup> Habinteg (2019) The Lifetime Homes Standard (from 5 July 2010). Available at: <http://www.lifetimehomes.org.uk/pages/reviced-design-criteria.html>.

<sup>26</sup> Ministry of Housing, Communities & Local Government (2016) Access to and use of buildings: Approved Document M. Available at: <https://www.gov.uk/government/publications/access-to-and-use-of-buildings-approved-document-m>.

<sup>27</sup> Public Health England (2017) Spatial Planning for Health. An evidence resource for planning and designing healthier places.

<sup>28</sup> Marmot, M. et al. (2010) Fair Society, Healthy Lives. The Marmot Review.

<sup>29</sup> Mayor of London (2017) Lifetime Homes (MQT on 2017-03-22). Available at: <https://www.london.gov.uk/questions/2017/1915>.

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One Battersea Bridge  
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Assessment criteria	Relevant?	Details / evidence	Potential health impact	Recommended mitigation or enhancement actions
		<p><b>Evidence</b></p> <p>90% of dwellings be designed to meet Building Regulation M4(2) Accessible and Adaptable dwellings and 10% of the dwellings will be designed to meet Building Regulation M4(3) Wheelchair user dwellings.</p>		
<p><b>Does the proposal address the housing needs of older people, i.e. extra care housing, sheltered housing, lifetime homes and wheelchair accessible homes?</b></p>	Yes	<p><b>Relevance to health and wellbeing</b></p> <p>The UK's aging population reinforces the need to create housing that is suitable for all ages. Decisions on the layout of space should be informed by the consideration of particularly vulnerable population groups, such as elderly or disabled people. While unsuitable housing can lead to poorer mental health outcomes, careful planning can contribute to helping people live independently for longer, feel more connected to their communities and give them greater choice and control over their lives<sup>30</sup>.</p> <p><b>Evidence</b></p> <p>As described above, the Proposed Development will be compliant with both M4(2) and M4(3).</p>	Moderate benefit	
<p><b>Does the proposal include homes that can be adapted to support independent living for older and disabled people?</b></p>	Yes	<p><b>Relevance to health and wellbeing</b></p> <p>Demographic ageing in the UK reinforces the need to create housing that is suitable for all ages. Decisions on the layout of space should be informed by the consideration of particularly vulnerable population groups, such as elderly or disabled people. While unsuitable housing can lead to poorer mental health outcomes, careful planning can contribute to helping people live independently for longer, feel more</p>	Moderate benefit	

<sup>30</sup> Ministry of Housing, Communities and Local Government (2019). Housing for older and disabled people. Available at: <https://www.gov.uk/guidance/housing-for-older-and-disabled-people>.

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Health Impact Assessment (HIA)

Assessment criteria	Relevant?	Details / evidence	Potential health impact	Recommended mitigation or enhancement actions
		<p>connected to their communities and give them greater choice and control over their lives<sup>31</sup>.</p> <p><b>Evidence</b> As described above, the Proposed Development will be compliant with M4(2) standards and therefore adaptable to support independent living for older and disabled people. 90% of dwellings will meet M4(2) standard, and the other 10% will meeting M4(3).</p>		
<b>Does the proposal promote good design through layout and orientation, meeting internal space standards?</b>	Yes	<p><b>Relevance to health and wellbeing</b> The quality of design, including internal sound insulation, daylighting and provision of private space can influence the health and wellbeing of occupiers<sup>32</sup>.</p> <p><b>Evidence</b> Although further details are expected at the detailed design stage, based on information provided in the DAS, it is expected that the client will meet or exceed all relevant internal space standards and follow accepted good design practice.</p>	Minor benefit	None required.
<b>Does the proposal include a range of housing types and sizes, including affordable housing responding to local housing needs?</b>	Yes	<p><b>Relevance to health and wellbeing</b> As well as increasing levels of stress and anxiety, a lack of affordable housing within communities may compromise the</p>	Minor benefit	None required.

<sup>31</sup> Ministry of Housing, Communities and Local Government (2019) Housing for older and disabled people. Available at: <https://www.gov.uk/guidance/housing-for-older-and-disabled-people>.

<sup>32</sup> NHS Healthy Urban Development Unit (2019) Rapid Health Impact Assessment Tool. Available at: <https://www.healthyrbandevelopment.nhs.uk/wp-content/uploads/2019/10/HUDU-Rapid-HIA-Tool-October-2019.pdf>.

**Report for – Promontoria Battersea Limited**

One Battersea Bridge  
Health Impact Assessment (HIA)

Assessment criteria	Relevant?	Details / evidence	Potential health impact	Recommended mitigation or enhancement actions
		<p>health of low-income residents as they are likely to spend more on housing costs and less on other health needs<sup>33</sup>.</p> <p><b>Evidence</b></p> <p>The Proposed Development includes a mix of housing types and sizes at a variety of rates, which will help to address the needs of different tenants and homeowners. Of the units on Site, there is a proposed total of 4 1-bedroom, 1 person units, 9 1-bedroom, 2 persons units, 15 2-bedroom, 3 persons units, 29 2-bedroom, 4 persons units, 9 3-bedroom, 4 persons units, 34 3-bedroom, 5 persons unit, and 10 4-bedroom, 5 persons units.</p> <p>These are split across 56 private properties and 54 social rent properties.</p> <p>In addition, the housing mix has been informed by a Housing Needs Assessment.</p>		
<b>Does the proposal contain homes that are highly energy efficient (e.g. a high SAP rating)?</b>	Yes	<p><b>Relevance to health and wellbeing</b></p> <p>19.4% of households living in privately rented accommodation in England are fuel poor, with single parent households being most significantly affected<sup>34</sup>. Living in cold conditions poses a serious risk for health and wellbeing: fuel poverty was shown to be associated with excess winter deaths, increased prevalence of chronic conditions and poorer mental health outcomes<sup>35</sup>. One way for planning to</p>	Moderate benefit	None required.

<sup>33</sup> NHS Healthy Urban Development Unit (2019) Rapid Health Impact Assessment Tool. Available at: <https://www.healthyurbandevelopment.nhs.uk/wp-content/uploads/2019/10/HUDU-Rapid-HIA-Tool-October-2019.pdf>.

<sup>34</sup> Department for Business, Energy & Industrial Strategy (2019) Fuel poverty statistics. Available at: <https://www.gov.uk/government/collections/fuel-poverty-statistics>

<sup>35</sup> Friends of the Earth (2011) The Health Impacts of Cold Homes and Fuel Poverty.

Assessment criteria	Relevant?	Details / evidence	Potential health impact	Recommended mitigation or enhancement actions
		<p>address this issue is by aiming to maximise energy efficiency of new developments.</p> <p><b>Evidence</b> According to the Energy Statement and Sustainability Statement, the Proposed Development will follow the principles 'Be Lean, Be Clean, Be Green and Be Seen', as set out in the London Plan 2021 energy hierarchy (Policy SI 2), to reduce energy use and minimise emissions wherever possible<sup>36</sup>.</p> <p>The Proposed Development will include Air Source Heat Pumps that will provide heating and hot water to the residential units.</p>		
<b>Overall assessment</b>		<p>Overall, the Proposed Development addresses key issues related to access to housing design and affordability by providing a range of unit sizes at a variety of price points which will comply with relevant guidelines and best practice. This is especially relevant to ward as every LSOA in the ward scores in the first decile, or amongst the top 10% most deprived, in terms of barriers to housing and services, and the community would benefit from more affordable, quality housing.</p> <p>The Proposed Development will have a <b>moderate beneficial impact</b> on this category of health determinants for future users and for the local community.</p>		

**Table 6-2: Access to Health and Social Care Services and Other Social Infrastructure**

Assessment criteria	Relevant?	Details / evidence	Potential health impact	Recommended mitigation or enhancement actions
<b>Does the proposal retain or re-provide existing social infrastructure?</b>	No	<p><b>Relevance to health and wellbeing</b> Social infrastructure, such as libraries, sports facilities as well as specific community uses, such as community halls or youth centres are key for the creation of sustainable,</p>	Minor benefit	Provide further detail on the use of the community space.

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Assessment criteria	Relevant?	Details / evidence	Potential health impact	Recommended mitigation or enhancement actions
		<p>healthy communities. Failing to plan for the social infrastructure needs in an area can exacerbate pressure of existing services and worsen health outcomes and inequalities<sup>37</sup>.</p> <p><b>Evidence</b> The current Site does not include any social infrastructure, so the Proposed Development does not retain anything. However, the Proposed Development will include community use space (F2), but the scale of this and what this will include has not yet been fixed. The proposed community space is to be made available to the public.</p>		
<p><b>Does the proposal assess the impact on health and social care services and have local NHS organisations been contacted regarding existing and planned healthcare capacity?</b></p>	Yes	<p><b>Relevance to health and wellbeing</b> The under-provision of key services, besides obvious adverse effects on health and wellbeing in terms of lack of access to care, can contribute towards unnecessary extra travel, which can damage the environment and undermine social cohesion. The planning system can help modernise facilities and improve the quality of services. Developer contributions can help provide and fund new facilities<sup>38</sup>.</p> <p><b>Evidence</b></p>	Minor negative	Continue to monitor GP capacity and mitigate any major adverse effects through suitable Section 106 agreements and/or Community Infrastructure Levies (CIL).

<sup>37</sup> NHS Healthy Urban Development Unit (2019) Rapid Health Impact Assessment Tool. Available at: <https://www.healthyrbandevelopment.nhs.uk/wp-content/uploads/2019/10/HUDU-Rapid-HIA-Tool-October-2019.pdf>.

<sup>38</sup> NHS Healthy Urban Development Unit (2019) Rapid Health Impact Assessment Tool. Available at: <https://www.healthyrbandevelopment.nhs.uk/wp-content/uploads/2019/10/HUDU-Rapid-HIA-Tool-October-2019.pdf>.

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Assessment criteria	Relevant?	Details / evidence	Potential health impact	Recommended mitigation or enhancement actions
		<p>Across the five GP surgeries, there is a total of 31 GPs. The average ratio of 1,989 patients per GP is above the NHS HUDU's benchmark of 1,800 patients per GP, however all six of the surgeries are currently accepting new patients.</p> <p>There would be a minor negative (temporary) effect. The effect is temporary due to primary healthcare provided by the NHS being funded by tax revenue, and the funding is provided based on, among other things, as payment per person per GP list size. If a list size increases, the monthly payments to the PCN go up accordingly. The list size assumption on which the revenue funding allocation is based is updated every year, so at most there should be a one-year lag time between new residents registering with the GP and that GP receiving its increase.</p>		
<p><b>Does the proposal include the provision, or replacement of a healthcare facility and does the facility meet NHS requirements?</b></p>	No	<p><b>Relevance to health and wellbeing</b></p> <p>The under-provision of key services, besides obvious adverse effects on health and wellbeing in terms of lack of access to care, can contribute towards unnecessary extra travel, which can damage the environment and social cohesion. The planning system can help modernise facilities and improve the quality of services. Developer contributions can help provide and fund new facilities<sup>39</sup>.</p> <p><b>Evidence</b></p> <p>The Proposed Development does not include the provision or replacement of a healthcare facility.</p>	Not applicable.	None required.

<sup>39</sup> NHS Healthy Urban Development Unit (2019) Rapid Health Impact Assessment Tool. Available at: <https://www.healthyurbandevelopment.nhs.uk/wp-content/uploads/2019/10/HUDU-Rapid-HIA-Tool-October-2019.pdf>

Assessment criteria	Relevant?	Details / evidence	Potential health impact	Recommended mitigation or enhancement actions
Does the proposal assess the capacity, location, and accessibility of other social infrastructure, e.g. primary, secondary and post 19 education needs and community facilities?	Yes	<p><b>Relevance to health and wellbeing</b></p> <p>Social infrastructure, including community facilities and spaces and opportunities for (continued) education are an essential component of the sustainability, health, and cohesion of communities. Access to education at different levels improves self-esteem, job opportunities and earning capability, with associated effects on physical and mental health<sup>40</sup>.</p> <p><b>Evidence</b></p> <p>The Proposed Development’s impact on social infrastructure and educational facilities has been assessed in this HIA. Primary schools within 800m of the Site have 292 surplus places, and secondary schools have a surplus of 207 places. The 110 new units are estimated to create a total of 32 new primary school aged children, and 18 new secondary school aged children, which will be accommodated by the existing surplus.</p>	Negligible	None required.
Does the proposal explore opportunities for shared community use and co-location of services?	Yes	<p><b>Relevance to health and wellbeing</b></p> <p>The co-location of services can support a shift to active forms of travel, such as cycling and walking, with associated benefits for mental and physical health. The increased accessibility of services is particularly important for those with mobility problems, including older people and people without access to a car or unable to afford public transport. Co-location</p>	Negligible	None required

<sup>40</sup> NHS Healthy Urban Development Unit (2019) Rapid Health Impact Assessment Tool. Available at: <https://www.healthyurbandevelopment.nhs.uk/wp-content/uploads/2019/10/HUDU-Rapid-HIA-Tool-October-2019.pdf>.

Assessment criteria	Relevant?	Details / evidence	Potential health impact	Recommended mitigation or enhancement actions
		furthermore facilitates social interaction and can contribute to strengthening community networks <sup>41</sup> . <b>Evidence</b> The Proposed Development will deliver up to 268m <sup>2</sup> of community floor space. However, this will only be available to residents.		
<b>Overall assessment</b>		Overall, the Proposed Development does not offer anything new or retain anything existing on the Site in terms of social infrastructure and health facilities. The Proposed Development will have a <b>negligible impact</b> on this category of health determinants for future users and for the local community.		

Table 6-3: Access to Open Space and Nature

Assessment criteria	Relevant?	Details / evidence	Potential health impact	Recommended mitigation or enhancement actions
<b>Does the proposal retain and enhance existing open and natural spaces?</b>	No	<b>Relevance to health and wellbeing</b> Access to open and green space encourages outdoors physical activity and reduce levels of heart disease, strokes and other ill health problems that are associated with both sedentary occupations and stressful lives <sup>42</sup> . Open and green spaces can also facilitate social interaction, a sense of place and community interaction, which benefits mental and physical health. <b>Evidence</b>	Negligible	None required.

<sup>41</sup> Public Health England (2017) Spatial Planning for Health. An evidence resource for planning and designing healthier places; Marmot, M. et al. (2010) Fair Society, Healthy Lives. The Marmot Review.

<sup>42</sup> NHS Healthy Urban Development Unit (2019) Rapid Health Impact Assessment Tool. Available at: <https://www.healthyrbandevelopment.nhs.uk/wp-content/uploads/2019/10/HUDU-Rapid-HIA-Tool-October-2019.pdf>

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Assessment criteria	Relevant?	Details / evidence	Potential health impact	Recommended mitigation or enhancement actions
		The Proposed Development neither retains or enhances existing open and natural spaces, as the Site currently does not currently have either. Further, the Proposed Development is offering outdoor amenity space for residents, this is not open or natural space.		
<b>In areas of deficiency, does the proposal provide new open or natural space, or improve access to existing spaces?</b>	No	<p><b>Relevance to health and wellbeing</b> People living in the most deprived areas are much less likely to live near good quality green and open space and thus have less opportunities to benefit from them<sup>43</sup>.</p> <p><b>Evidence</b> Given the Site’s proximity to open, natural, and recreational Sites including Battersea Park and Falcon Park, it is not considered to be in an area of deficiency and therefore the provision of new open or natural space does not outweigh the need for additional housing. That said, the Proposed Development incorporates a variety of landscaped and natural features, including play areas and sheltered pockets of seating.</p>	Minor benefit	None required.
<b>Does the proposal provide a range of play spaces for children and young people?</b>	Yes	<p><b>Relevance to health and wellbeing</b> The provision of publicly accessible green spaces and play spaces can encourage physical activity and improve mental health. This is particularly important as the patterns of physical activity established in childhood are</p>	Minor benefit	State the size of the play space in relation to the number of children.

<sup>43</sup> London Assembly (2017) Park life: ensuring green spaces remain a hit with Londoners.

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Assessment criteria	Relevant?	Details / evidence	Potential health impact	Recommended mitigation or enhancement actions
		usually a key determinant of adult behaviour and in the light of increasing child obesity <sup>44</sup> . <b>Evidence</b> The Proposed Development provides play space and such as a multi-purpose play area and balancing play area, as well as a family gathering area. Further, it is providing a range of play spaces, aimed at different aged children. London Plan Policy S4 that seeks at least 10 sqm of play space per child, which is advisable to meet.		
<b>Does the proposal provide links between open and natural spaces and the public realm?</b>	Yes	<b>Relevance to health and wellbeing</b> Improved connectivity between green spaces and the public realm can encourage active travel and physical activity, with associated benefits for mental and physical health <sup>45</sup> . <b>Evidence</b> The Proposed Development provides green corridors and pedestrian links from the Site to existing spaces and landscape assets, as well as local amenities and a variety of transport links.	Minor benefit	None required.
<b>Are the open and natural spaces welcoming and safe and accessible for all?</b>	Yes	<b>Relevance to health and wellbeing</b> Green spaces that are of poor quality, feel unsafe, or are inaccessible will discourage physical activity and social interaction. Planning should also consider varying needs of vulnerable population groups, such as old or disabled	Minor benefit	None required.

<sup>44</sup> NHS Healthy Urban Development Unit (2019) Rapid Health Impact Assessment Tool. Available at: <https://www.healthyurbandevelopment.nhs.uk/wp-content/uploads/2019/10/HUDU-Rapid-HIA-Tool-October-2019.pdf>.

<sup>45</sup> Public Health England (2017) Spatial Planning for Health. An evidence resource for planning and designing healthier places; Marmot, M. et al. (2010) Fair Society, Healthy Lives. The Marmot Review.

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Assessment criteria	Relevant?	Details / evidence	Potential health impact	Recommended mitigation or enhancement actions
		<p>people and young parents, and should include the provision of seating opportunities, water fountains, etc. to provide accessible open spaces<sup>46</sup>.</p> <p><b>Evidence</b> Open and natural spaces within and along the Proposed Development will feature benches and other seating, and inclusive play equipment. Furthermore, the Proposed Development is designed in accordance with Secured by Design: Placing design between crime and the community.</p>		
<b>Does the proposal set out how new open space will be managed and maintained?</b>	Yes	<p><b>Relevance to health and wellbeing</b> There is a strong correlation between the quality of open space and the frequency of use for physical activity, social interaction, or relaxation<sup>47</sup>. Management and maintenance are needed to ensure the long-term viability and uptake of open space.</p> <p><b>Evidence</b> Various elements of the natural and open space will be managed by private homeowners, the estate managed company to be appointed by Promontoria Battersea Limited, Wandsworth Borough Council parks' authority, Wandsworth Borough Council highways' department and Transport for London.</p>	Minor benefit	None required.

<sup>46</sup> Barton, H. et al. (2003) Shaping neighbourhoods. A guide for health, sustainability and vitality. London: Spon Press.

<sup>47</sup> Barton, H. et al. (2003) Shaping neighbourhoods. A guide for health, sustainability and vitality. London: Spon Press.

Assessment criteria	Relevant?	Details / evidence	Potential health impact	Recommended mitigation or enhancement actions
<b>Overall assessment</b>		Overall, the Proposed Development addresses key issues related to access to open space and nature providing such spaces onsite and striving to promote accessibility, safety, and a sense of community within them. The Proposed Development will have a <b>minor beneficial impact</b> on this category of health determinants for future users and for the local community.		

Table 6-4: Air Quality, Noise and Neighbourhood Amenity

Assessment criteria	Relevant?	Details / evidence	Potential health impact	Recommended mitigation or enhancement actions
<b>Does the proposal minimise construction impacts such as dust, noise, vibration, and odours?</b>	Yes	<p><b>Relevance to health and wellbeing</b></p> <p>Human health is affected by both poor air quality and noise pollution. Besides increasing the risk of mortality, poor air quality was linked to over 3,000 hospital admissions in 2010 in London alone<sup>48</sup>. Prolonged exposure to excessive noise, on the other hand, can cause various short- and long-term health problems, such as cardiovascular and physiological effects, mental health effects, hearing impairment, reduced performance and provoke annoyance responses and changes in social behaviour<sup>49</sup>.</p> <p><b>Evidence</b></p> <p>The Applicant will prepare a CEMP which will follow relevant policies and guidelines to minimise the potential negative impacts of construction related to vehicular congestion, community impacts, noise and vibration, dust and air quality, light pollution, water consumption and</p>	Minor negative	None required.

<sup>48</sup> Greater London Authority (2018) London Environment Strategy. Available at: [https://www.london.gov.uk/Sites/default/files/london\\_environment\\_strategy\\_0.pdf](https://www.london.gov.uk/Sites/default/files/london_environment_strategy_0.pdf).

<sup>49</sup> World Health Organisation (2019) Noise. Available at: <http://www.euro.who.int/en/health-topics/environment-and-health/noise>.

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		drainage, waste, and sustainability. While the CEMP will not actively improve community health and wellbeing, it will help to protect existing residents from the often-unavoidable impacts of construction during this phase of the project. An outline Construction Logistics Plan has been prepared.		
<b>Does the proposal minimise air pollution caused by traffic and energy facilities?</b>	Yes	<p><b>Relevance to health and wellbeing</b></p> <p>Besides increasing the risk of mortality, poor air quality was linked to over 3,000 hospital admissions in 2010 in London alone<sup>50</sup>. Increasing evidence furthermore points to the link between exposure to pollution and dementia<sup>51</sup> and depression and risk of suicide<sup>52</sup>.</p> <p><b>Evidence</b></p> <p>According to the Air Quality Assessment (AQA), the Proposed Development would not minimise air pollution caused by traffic. There will be a very minimal increase in pollutant concentrations, but this will have a negligible impact on air quality caused by traffic. Further, the Proposed Development incorporates Air Source Heat Pumps which do not have air pollutant emissions compared to existing energy facilities.</p>	Negligible	None required.
<b>Does the proposal minimise noise pollution</b>	Yes	<b>Relevance to health and wellbeing</b>	Minor benefit	None required.

<sup>50</sup> Greater London Authority (2018) London Environment Strategy. Available at: [https://www.london.gov.uk/Sites/default/files/london\\_environment\\_strategy\\_0.pdf](https://www.london.gov.uk/Sites/default/files/london_environment_strategy_0.pdf).

<sup>51</sup> Cacciottolo, Mafalda, et al. (2017) Particulate air pollutants, APOE alleles and their contributions to cognitive impairment in older women and to amyloidogenesis in experimental models.

<sup>52</sup> Braithwaite, I. et al. (2019) Air Pollution (Particulate Matter) Exposure and Associations with Depression, Anxiety, Bipolar, Psychosis and Suicide Risk: A Systematic Review and Meta-Analysis. Environmental Health Perspectives, 127(12). Available at: <https://ehp.niehs.nih.gov/doi/pdf/10.1289/EHP4595>.

Assessment criteria	Relevant?	Details / evidence	Potential health impact	Recommended mitigation or enhancement actions
caused by traffic and commercial uses?		<p>Prolonged exposure to excessive noise can cause various short - and long-term health problems, such as cardiovascular and physiological effects, mental health effects, hearing impairment, reduced performance and provoke annoyance responses and changes in social behaviour<sup>53</sup>. Some groups, such as children, older people, shift workers and people with caring responsibilities, who spend more time at home are more vulnerable to noise. In addition, people on lower incomes, who cannot afford to live in quiet residential areas or have inadequately insulated homes are likely to suffer disproportionately.<sup>54</sup></p> <p><b>Evidence</b></p> <p>As described in the Noise Impact Assessment, the Proposed Development will minimise noise pollution by reducing vehicular traffic and promoting active travel. The Applicant intends to remain under legal maximum noise levels and buildings and public spaces will meet the appropriate acoustic performance standards through proper insulation and screening.</p>		
<b>Overall assessment</b>		<p>Overall, the Proposed Development somewhat addresses key issues related to air quality, noise and neighbourhood amenity during the construction and operational phases of the project by complying with relevant policies and guidelines as outlined in the Air Quality Assessment and Noise Impact Assessment. While the CEMP will not actively improve community health and wellbeing, and some negative impacts from construction activity are unavoidable, this plan will help to protect locals from the often-unavoidable impacts of construction and prevent potentially exacerbating long-term health conditions associated with air and noise pollution. Likewise, embedded mitigation measures include in the Proposed Development, especially as they concern travel and transport, may help to reduce emissions in the immediate area. This is</p>		

<sup>53</sup> World Health Organisation (2019) Noise. Available at: <http://www.euro.who.int/en/health-topics/environment-and-health/noise>.

<sup>54</sup> Greater London Authority (2018) London Environment Strategy. Available at: [https://www.london.gov.uk/Sites/default/files/london\\_environment\\_strategy\\_0.pdf](https://www.london.gov.uk/Sites/default/files/london_environment_strategy_0.pdf).

Assessment criteria	Relevant?	Details / evidence	Potential health impact	Recommended mitigation or enhancement actions
		<p>particularly important as St Mary’s Park and Wandsworth more broadly suffer from poor air quality and its residents will be especially susceptible to any uptick in harmful emissions or other airborne pollutants.</p> <p>The Proposed Development will have a <b>negligible impact</b> on this category of health determinants for future users and for the local community, particularly once the Proposed Development is in operation.</p>		

Table 6-4: Accessibility and Active Travel

Assessment criteria	Relevant?	Details / evidence	Potential health impact	Recommended mitigation or enhancement actions
<p><b>Does the proposal address the ten Healthy Streets indicators<sup>55</sup>?</b></p>	Yes	<p><b>Relevance to health and wellbeing</b></p> <p>The Healthy Streets Approach is a system of policies and strategies to put people and their health at the heart of decision making. Its aim is to deliver a healthier, more inclusive city where people choose to walk, cycle, and use public transport<sup>56</sup>. Building spaces that are easily accessible and safe will encourage active travel among all groups of the population, including older people and people with a disability. Increased physical activity helps to prevent chronic diseases, reduce the risk of premature death, and improve mental health<sup>57</sup>.</p> <p><b>Evidence</b></p> <p>The Transport Strategy and Design of the Proposed Development has been developed following the TfL</p>	Minor benefit	None required.

<sup>55</sup> Transport for London (TfL). Healthy Streets. Available at: <https://tfl.gov.uk/corporate/about-tfl/how-we-work/planning-for-the-future/healthy-streets>.

<sup>56</sup> Transport for London (TfL). Healthy Streets Explained. A Guide to the Healthy Streets Approach & how to apply it. Available at: <http://content.tfl.gov.uk/healthy-streets-explained.pdf>.

<sup>57</sup> NHS Healthy Urban Development Unit (2019) Rapid Health Impact Assessment Tool. Available at: <https://www.healthyrbandevelopment.nhs.uk/wp-content/uploads/2019/10/HUDU-Rapid-HIA-Tool-October-2019.pdf>; Transport for London. Healthy Streets. Available at: <https://tfl.gov.uk/corporate/about-tfl/how-we-work/planning-for-the-future/healthy-streets>.

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Assessment criteria	Relevant?	Details / evidence	Potential health impact	Recommended mitigation or enhancement actions
		'Healthy Streets' approach by prioritising walking and cycling and minimising trips by motorised vehicles. In addition, the Transport Assessment includes a healthy street audit on the improvements to the public realm and active frontage.		
<b>Does the proposal prioritise and encourage walking, for example through the use of shared spaces?</b>	Yes	<p><b>Relevance to health and wellbeing</b></p> <p>Physical inactivity is the fourth largest cause of disease and disability in the UK. It can be linked to 1 in 6 deaths in the country with already vulnerable groups (i.e., low-income, BAME, older people) being particularly affected. Physical activity not only contributes to physical, but also to mental health. The provision of walking and cycling facilities have been shown to encourage and support active lifestyles and improve people's mobility, with associated benefits for mental and physical health<sup>58</sup>.</p> <p><b>Evidence</b></p> <p>The Proposed Development prioritises active travel by providing a high-quality pedestrian access along the Thames Path. In addition, the Site will have active frontages along Battersea Bridge Road.</p>	Minor benefit	None required.
<b>Does the proposal prioritise and encourage cycling, for example by providing secure cycle parking, showers, and cycle lanes?</b>	Yes	<p><b>Relevance to health and wellbeing</b></p> <p>Physical inactivity is the fourth largest cause of disease and disability in the UK. It can be linked to 1 in 6 deaths in the country with already vulnerable groups (i.e. low-income, BAME, older people) being particularly affected. Physical activity not only contributes to physical, but also</p>	Minor benefit	None required.

<sup>58</sup> Public Health England (2017) Spatial Planning for Health. An evidence resource for planning and designing healthier places.

Assessment criteria	Relevant?	Details / evidence	Potential health impact	Recommended mitigation or enhancement actions
		<p>to mental health. The provision of walking and cycling facilities have been shown to encourage and support active lifestyles and improve people’s mobility, with associated benefits for mental and physical health<sup>59</sup>.</p> <p><b>Evidence</b></p> <p>As described above, the Proposed Development prioritises active travel by providing a high-quality pedestrian environment, incorporating suitable crossing points and sufficient lighting, providing secure bicycle parking, and including a limited parking provision for private vehicles onsite.</p>		
<b>Does the proposal connect public realm and internal routes to local and strategic cycle and walking networks?</b>	Yes	<p><b>Relevance to health and wellbeing</b></p> <p>Improved connectivity between green spaces and the public realm can encourage active travel and physical activity, with associated benefits for mental and physical health<sup>60</sup>.</p> <p><b>Evidence</b></p> <p>The Site and its internal routes are well integrated into the existing urban fabric and transport networks facilitating pedestrian and cyclist movement across the surrounding area.</p>	Minor benefit	None required.
<b>Does the proposal include traffic management and calming measures to</b>	Yes	<p><b>Relevance to health and wellbeing</b></p>	Minor benefit	None required.

<sup>59</sup> Public Health England (2017) Spatial Planning for Health. An evidence resource for planning and designing healthier places.

<sup>60</sup> Public Health England (2017) Spatial Planning for Health. An evidence resource for planning and designing healthier places.

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Assessment criteria	Relevant?	Details / evidence	Potential health impact	Recommended mitigation or enhancement actions
<b>help reduce and minimise road injuries?</b>		<p>Greater traffic volumes and speeds have increased the risk of road traffic injuries, with pedestrians and cyclists being particularly vulnerable<sup>61</sup>.</p> <p><b>Evidence</b></p> <p>It is worth noting that many local roads have reduced, 20mph speed limits, speed bumps and raised pedestrian crossings, and the Proposed Development does not propose to alter these.</p>		
<b>Is the proposal well connected to public transport, local services, and facilities?</b>	Yes	<p><b>Relevance to health and wellbeing</b></p> <p>Supporting a shift away from private car use and towards public transport will not only contribute to decreasing air and noise pollution. Combining active travel and public transport options can also help people achieve recommended daily physical activity levels<sup>62</sup>.</p> <p><b>Evidence</b></p> <p>The Proposed Development is in an urban area and near a variety of public transport options, local services, and facilities, as described in the Baseline Assessment above. Of note, it is within Zone 2 of the Transport for London (TfL) network and very near to Battersea Park Rail Station, and aforementioned bus stops.</p>	Minor benefit	None required.
<b>Does the proposal seek to reduce car use by reducing car parking</b>	Yes	<p><b>Relevance to health and wellbeing</b></p> <p>Reduced levels of car parking and travel plans which encourage the use of public transport, cycling and</p>	Minor benefit	None required.

<sup>61</sup> NHS Healthy Urban Development Unit (2019) Rapid Health Impact Assessment Tool. Available at: <https://www.healthyurbandevelopment.nhs.uk/wp-content/uploads/2019/10/HUDU-Rapid-HIA-Tool-October-2019.pdf>.

<sup>62</sup> Barton, H. et al. (2003) Shaping neighbourhoods. A guide for health, sustainability and vitality. London: Spon Press.

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Assessment criteria	Relevant?	Details / evidence	Potential health impact	Recommended mitigation or enhancement actions
<b>provision, supported by the controlled parking zones, car clubs and travel plans measures?</b>		walking will not only help reduce air and noise pollution but will also result in increased opportunities for active travel <sup>63</sup> . <b>Evidence</b> The Proposed Development incorporates measures to reduce car use by limiting car parking onsite to 18 parking spaces, with 5 accessible spaces included.		
<b>Does the proposal allow people with mobility problems or a disability to access buildings and places?</b>	Yes	<b>Relevance to health and wellbeing</b> Increased accessibility is particularly important for those with mobility problems, including older people, people with a disability and people without access to a car or unable to afford public transport <sup>64</sup> . <b>Evidence</b> The proposed development has been designed with consideration for people with mobility problems or a disability to access the building. This includes secure long-stay cycle parking, with dedicated space for larger bicycles, five disabled parking bays (3% provision) at lower ground level, and accessible lift throughout the Proposed Development.	Moderate benefit	None required.
<b>Overall assessment</b>	Overall, the Proposed Development addresses key issues related to active travel by prioritising walking and cycling over vehicular transport and linking up to existing pedestrian, cycle and public transport networks wherever possible. Although further detail should be provided at the detailed design stage regarding accessibility, the Landscape Design Statement indicates that the Applicant is taking all necessary steps to comply with relevant policies and guidelines. This is especially			

<sup>63</sup> Barton, H. et al. (2003) Shaping neighbourhoods. A guide for health, sustainability and vitality. London: Spon Press.

<sup>64</sup> Barton, H. et al. (2003) Shaping neighbourhoods. A guide for health, sustainability and vitality. London: Spon Press.

Assessment criteria	Relevant?	Details / evidence	Potential health impact	Recommended mitigation or enhancement actions
		important as accessibility is a key issue for older and disabled residents and is vital to ensuring an inclusive living and community environment. The Proposed Development will have a <b>minor beneficial impact</b> on this category of health determinants for future users and for the local community.		

**Table 6-5: Crime Reduction and Community Safety**

Assessment criteria	Relevant?	Details / evidence	Potential health impact	Recommended mitigation or enhancement actions
<b>Does the proposal incorporate elements to help design out crime?</b>	Yes	<b>Relevance to health and wellbeing</b> In addition to the impacts on physical health of victims of crime, fear of crime has been shown to have significant effects on resident’s mental wellbeing <sup>65</sup> . <b>Evidence</b> The Proposed Development mitigates against potential criminal and antisocial behaviour by ensuring public spaces are visible and/or overlooked by private residences and by incorporating appropriate lighting. The Proposed Development is designed in accordance with Secured by Design: Placing design between crime and the community.	Minor benefit	Ensure relevant Secured by Design measures are incorporated into final designs.
<b>Does the proposal incorporate design techniques to help people feel secure and avoid</b>	Yes	<b>Relevance to health and wellbeing</b> In addition to the impacts on physical health and wellbeing of victims of crime, fear of crime has been	Negligible	Ensure relevant Secured by Design measures are incorporated into final designs.

<sup>65</sup> Office for National Statistics (2015) Crime Statistics, Focus on Public Perceptions of Crime and the Police, and the Personal Well-being of Victims: 2013 to 2014.

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Assessment criteria	Relevant?	Details / evidence	Potential health impact	Recommended mitigation or enhancement actions
<b>creating 'gated communities'?</b>		shown to have significant effects on resident's mental wellbeing <sup>66</sup> . <b>Evidence</b> The shared amenity space on the rooftop will be regularly checked and managed by RSL. Further details on the procedures will be shared at reserved matters.		
<b>Does the proposal include attractive, multi-use public spaces and buildings?</b>	Yes	<b>Relevance to health and wellbeing</b> Under-used, isolated public spaces without natural surveillance can increase the potential for crime and lead to heightened fear of crime. This can be addressed by creating well-lit places that enable social interaction and avoid exclusion of certain, particularly vulnerable population groups <sup>67</sup> . <b>Evidence</b> The proposed development provides public realm to the north, which improves pedestrian access along the Thames Path, as well as communal natural space within the development. The Proposed Development does not offer any additional multi-use buildings at this stage in the scheme.	Negligible	None required.
<b>Has engagement and consultation been carried out with the local community and voluntary sector?</b>	Yes	<b>Relevance to health and wellbeing</b> Community engagement in development proposals can lessen fears and concerns. It can also help to foster a sense of ownership and empowerment and address the needs of different groups, such as the different needs of	Minor benefit	Continue to consult with the local community to ensure changing needs and priorities are met.

<sup>66</sup> Office for National Statistics (2015) Crime Statistics, Focus on Public Perceptions of Crime and the Police, and the Personal Well-being of Victims: 2013 to 2014.

<sup>67</sup> Barton, H. et al. (2003) Shaping neighbourhoods. A guide for health, sustainability and vitality. London: Spon Press.

Assessment criteria	Relevant?	Details / evidence	Potential health impact	Recommended mitigation or enhancement actions
		<p>young children compared to older adolescents, or the needs of adults compared to children. This can, in turn, contribute towards enhanced community safety<sup>68</sup>.</p> <p><b>Evidence</b></p> <p>The programme included extensive public consultation with opportunities to provide feedback, and understand the views of the local community, with stakeholder organisations such as local amenity groups and neighbouring residents, among others.</p>		
<b>Overall assessment</b>		<p>Overall, the Proposed Development somewhat addresses key issues related to crime reduction and community safety through design elements and consultation with the local community. Although further detail should be provided at the detailed design stage regarding crime-resilient measures, and community engagement should continue beyond initial design stages given the vulnerability of parts of St Mary's Park ward to high crime rates, Applicant appears to be taking all necessary steps to comply with relevant policies and guidelines.</p> <p>The Proposed Development will have a <b>negligible beneficial impact</b> on this category of health determinants for future users and for the local community.</p>		

**Table 6-6: Access to Healthy Food**

Assessment criteria	Relevant?	Details / evidence	Potential health impact	Recommended mitigation or enhancement actions
<b>Does the proposal facilitate the supply of local food, for example allotments, community</b>	Yes	<p><b>Relevance to health and wellbeing</b></p> <p>Poor diet is the biggest avoidable cause of ill health in England, associated with heart disease, stroke, cancers</p>	Negligible	Look to provide community growing spaces or fruit trees within the public realm.

<sup>68</sup> NHS Healthy Urban Development Unit (2019) Rapid Health Impact Assessment Tool. Available at: <https://www.healthyurbandevelopment.nhs.uk/wp-content/uploads/2019/10/HUDU-Rapid-HIA-Tool-October-2019.pdf>

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Assessment criteria	Relevant?	Details / evidence	Potential health impact	Recommended mitigation or enhancement actions
<b>farms and farmers' markets?</b>		<p>and type 2 diabetes<sup>69</sup>. Physical and monetary barriers mean that people on lower incomes are more likely to suffer and prematurely die from diet-related illnesses and members of vulnerable groups, in general, are less likely to achieve a healthy and balanced diet<sup>70</sup>. Local food provision and opportunities for local food growing do not only support healthier diets, but they also provide the opportunity for outside physical activity, with associated benefits for mental and physical health<sup>71</sup>.</p> <p><b>Evidence</b></p> <p>The Proposed Development does not include specific provisions which facilitate the supply of local food, such as allotments and farmers' markets. Further, there is no community space with growing areas. There is a restaurant within the ground floor of the Proposed Development, but the exact category of this has not yet been confirmed, there could be opportunities within this space to supply local food.</p>		
<b>Is there a range of retail uses, including food stores and smaller affordable shops for social enterprises?</b>	Yes	<p><b>Relevance to health and wellbeing</b></p> <p>People on lower incomes often live in areas where convenience stores – with a limited range of goods – or fast-food outlets predominate. Many people, especially in urban areas, struggle to find affordable and healthy food near to where they live – for many, the choices are</p>	Negligible	It is advisable that the Class E restaurant space should be affordable and healthy, and not a hot food take away or fast-food style restaurant.

<sup>69</sup> Town and Country Planning Association (TCPA) Healthy New Towns.

<sup>70</sup> Trust for London (2016) Beyond the Food Bank. London Food Poverty Profile.

<sup>71</sup> Public Health England (2017) Spatial Planning for Health. An evidence resource for planning and designing healthier places; Marmot, M. et al. (2010) Fair Society, Healthy Lives. The Marmot Review.

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Assessment criteria	Relevant?	Details / evidence	Potential health impact	Recommended mitigation or enhancement actions
		<p>limited, with food availability skewed towards less healthy options<sup>72</sup>.</p> <p><b>Evidence</b></p> <p>The Proposed Development provides 189m<sup>2</sup> in the form of a restaurant. The exact restaurant offered has not yet been confirmed, but it is advisable that the restaurant is affordable and provides healthy food options. It is important that this restaurant is not a hot food takeaway.</p>		
<b>Does the proposal avoid contributing towards an over-concentration of hot food takeaways in the local area?</b>	Yes	<p><b>Relevance to health and wellbeing</b></p> <p>Exposure to takeaway food outlets was shown to be associated with higher consumption of such food and higher chances of obesity and other associated health risks such as diabetes<sup>73</sup>.</p> <p><b>Evidence</b></p> <p>In Wandsworth, there are 1.7 takeaways per 1,000 residents, higher than the average local authority. The number of takeaways has risen by 6% in the last three years.</p> <p>The Proposed Development does not contribute to an over-concentration of hot food takeaways as it does not currently include any provisions for hot food takeaways.</p>	Minor Benefit dependent upon mitigation.	Ensure that the restaurant space is not occupied by a hot food takeaway.
<b>Overall assessment</b>	Overall, the Proposed Development offers a restaurant space, but it is not yet known what impact this will have on health of the local population as specifics of the type of restaurant and what it offers has not yet been stated. It is important that this			

<sup>72</sup> Wrigley, N. (2002) 'Food Deserts' in British Cities: Policy Context and Research Priorities. Urban Studies, 39(11), 2029-2040.

<sup>73</sup> Burgoine, T. et al (2014) Associations between exposure to takeaway food outlets, takeaway food consumption, and body weight in Cambridgeshire, BMJ 13(348).

Assessment criteria	Relevant?	Details / evidence	Potential health impact	Recommended mitigation or enhancement actions
		restaurant is not a 'fast food' style of establishment. This is especially important as St Mary's Park sees high rates of disease associated with a poor diet such as circulatory and coronary heart disease, as well as high rates of childhood obesity. The Proposed Development will have a <b>negligible impact</b> on this category of health determinants for future users and for the local community.		

Table 6-7: Access to Work and Training

Assessment criteria	Relevant?	Details / evidence	Potential health impact	Recommended mitigation or enhancement actions
<b>Does the proposal provide access to local employment and training opportunities, including temporary construction and permanent 'end-use' jobs?</b>	Yes	<b>Relevance to health and wellbeing</b> Access to employment is part of the wider determinants of health and wellbeing. A lack of access to employment can have a negative impact on health and wellbeing, with unemployment significantly linked to deprivation, health inequalities and poorer health outcomes. The creation of local working opportunities means that those wanting part time work, or those who, because of caring responsibilities or pre-existing medical conditions, are unable to take up full time work, as well as those unable to afford travel. Creating opportunities for local employment will allow some people to walk or cycle which, in addition to health benefits from active travel, may contribute to reducing emissions from vehicular traffic <sup>74</sup> . <b>Evidence</b> The Proposed Development is expected to create construction jobs during the demolition and construction	Minor benefit	Optimise the potential training and employment benefits of the Proposed Development through the provision of an Employment Strategy or other relevant plan.

<sup>74</sup> Barton, H. et al. (2003) Shaping neighbourhoods. A guide for health, sustainability and vitality. London: Spon Press.

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Assessment criteria	Relevant?	Details / evidence	Potential health impact	Recommended mitigation or enhancement actions
		<p>phase, although this impact is negligible. The Proposed Development will provide local employment opportunities during construction and operation, secured in Section 106 agreement.</p> <p>At this stage, there is not an employment strategy or detail shared on local employment opportunities.</p>		
<b>Does the proposal provide childcare facilities?</b>	No	<p><b>Relevance to health and wellbeing</b></p> <p>A lack of childcare facilities represents an obstacle for people with caring responsibilities, in particular women, to access employment. However, access to employment is part of the wider determinants of health and wellbeing. A lack of access to employment can have a negative impact on health and wellbeing, with unemployment significantly linked to deprivation, health inequalities and poorer health outcomes<sup>75</sup>.</p> <p><b>Evidence</b></p> <p>As this is a mostly residential-led scheme, there are no childcare facilities planned for the Proposed Development. However, there is an office space provided within the building, but the specifics of this are not yet fixed.</p>	Not applicable.	Not applicable.
<b>Does the proposal include managed and affordable workspace for local businesses?</b>	No	<p><b>Relevance to health and wellbeing</b></p> <p>Access to employment is part of the wider determinants of health and wellbeing. A lack of access to employment can have a negative impact on health and wellbeing, with unemployment significantly linked to deprivation, health</p>	Moderate benefit	

<sup>75</sup> Barton, H. et al. (2003) Shaping neighbourhoods. A guide for health, sustainability and vitality. London: Spon Press.

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Assessment criteria	Relevant?	Details / evidence	Potential health impact	Recommended mitigation or enhancement actions
		<p>inequalities and poorer health outcomes. The provision of affordable, local workspace increases the practicality and possibility of setting up new businesses, avoiding the need for time-consuming and polluting car trips to reach suitable accommodation<sup>76</sup>.</p> <p><b>Evidence</b> The Proposed Development does include office use (Class E), this proposed office space is 100 % affordable workspace, secured via Section 106.</p>		
<b>Does the proposal include opportunities for work for local people via local procurement arrangements?</b>	Yes	<p><b>Relevance to health and wellbeing</b> Access to employment is part of the wider determinants of health and wellbeing. A lack of access to employment can have a negative impact on health and wellbeing, with unemployment significantly linked to deprivation, health inequalities and poorer health outcomes. The creation of local working opportunities means that those wanting part time work, or those who, because of caring responsibilities or pre-existing medical conditions, are unable to take up full time work, as well as those unable to afford travel. Creating opportunities for local employment will allow some people to walk or cycle which, in addition to health benefits from active travel, may contribute to reducing emissions from vehicular traffic<sup>77</sup>.</p> <p><b>Evidence</b></p>	Minor benefit	Optimise the potential benefits of the Proposed Development by securing local procurement arrangements.

<sup>76</sup> Barton, H. et al. (2003) Shaping neighbourhoods. A guide for health, sustainability and vitality. London: Spon Press.

<sup>77</sup> Barton, H. et al. (2003) Shaping neighbourhoods. A guide for health, sustainability and vitality. London: Spon Press.

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Assessment criteria	Relevant?	Details / evidence	Potential health impact	Recommended mitigation or enhancement actions
		Although the Proposed Development will provide jobs which may be available to local people, details of local procurement arrangements are not currently available. However, the Proposed Development will offer local employment opportunities through Section 106 agreement.		
<b>Overall assessment</b>		<p>Overall, the Proposed Development addresses key issues related to access to work and training through the provision of employment opportunities during both the construction and operational phases of the project, secured by Section 106 agreement. However, these jobs and any workspaces onsite must be supported by a suitable Employment Strategy or equivalent, as well as local procurement arrangements, to ensure these spaces are effectively maintained and their potential health and wellbeing benefits maximised. This is especially important as St Mary's Park ward includes many LSOAs which score poorly on the EID generally and specifically in terms of income and employment.</p> <p>Further, the Proposed Development offers 100 % affordable work space, offering the wider community financially accessible spaces to work.</p> <p>The Proposed Development will have a <b>minor positive impact</b> on this category of health determinants for future users and for the local community.</p>		

**Table 6-8: Social Cohesion and Inclusive Design**

Assessment criteria	Relevant?	Details / evidence	Potential health impact	Recommended mitigation or enhancement actions
<b>Does the proposal consider health inequalities by addressing local needs through community engagement?</b>	Yes	<p><b>Relevance to health and wellbeing</b></p> <p>The engagement of local communities in planning and managing facilities and spaces is not only crucial to ensure buy-in for projects and to foster a sense of place. It is also necessary to determine which measures are (most) needed and to tailor their design to the local population's needs, ensuring the best outcome in terms of health and wellbeing. By specifically targeting less</p>	Minor benefit	Continue to consult with the local community to ensure changing needs and priorities are met.

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Assessment criteria	Relevant?	Details / evidence	Potential health impact	Recommended mitigation or enhancement actions
		<p>vocal segments of the population, such as young, socio-economically deprived, old, and disabled people, community engagement can play a crucial part in addressing and reducing health inequalities<sup>78</sup>.</p> <p><b>Evidence</b> The Applicant has undertaken a public consultation programme as outlined in the DAS and SCI. The programme included, public exhibitions with opportunities to provide feedback, informal events with local groups and meetings with stakeholder organisations such as the Battersea Society.</p>		
<p><b>Does the proposal connect with existing communities, i.e. layout and movement which avoids physical barriers and severance and land uses and spaces which encourage social interaction?</b></p>	Yes	<p><b>Relevance to health and wellbeing</b> The most powerful sources of stress include low social status and a lack of social networks. Low levels of social integration and loneliness have been shown to significantly increase mortality. Social networks and social participation appear to act as a protective factor against dementia or cognitive decline over the age of 65. and social networks are consistently and positively associated with reduced morbidity and mortality<sup>79</sup>.</p> <p><b>Evidence</b> The layout of the Proposed Development does not allow for the inclusion of public open and natural spaces, and there are no spaces for the wider community to use. There is shared amenity space for residents of the</p>	Negligible	Consider ways to promote co-use of spaces for the wider community.

<sup>78</sup> Barton, H. et al. (2003) Shaping neighbourhoods. A guide for health, sustainability and vitality. London: Spon Press.

<sup>79</sup> Marmot, M. et al. (2010) Fair Society, Healthy Lives. The Marmot Review.

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Assessment criteria	Relevant?	Details / evidence	Potential health impact	Recommended mitigation or enhancement actions
		<p>development that will aim to encourage social interaction, creating a positive community for residents, but the development does not improve the surrounding community fabric.</p> <p>The Site is well integrated into the existing urban fabric and transport networks facilitating pedestrian and cyclist movement across the surrounding area. The Site and is well integrated into the existing urban fabric and transport networks facilitating pedestrian and cyclist movement across the surrounding area.</p>		
<b>Does the proposal include a mix of uses and a range of community facilities?</b>	Yes	<p><b>Relevance to health and wellbeing</b></p> <p>Mixed-use developments with access to schools, recreational centres and social amenities can increase physical activity and community interaction, with associated effects on mental and physical health and wellbeing<sup>80</sup>.</p> <p><b>Evidence</b></p> <p>The Proposed Development is residential led, with restaurant space (Class E) and some community use space (Class F2), however, this community space is not publicly accessible, and the proposal does not include any new community facilities at this current stage.</p> <p>Further, the Proposed Development includes office space (Class E).</p>	Negligible	Ensure the proposal includes a mix of uses, and includes community facilities, where possible.
<b>Does the proposal provide opportunities for</b>	Yes	<p><b>Relevance to health and wellbeing</b></p>	Unknown.	If nothing is provided, a negligible impact will be

<sup>80</sup> Public Health England (2017) Spatial Planning for Health. An evidence resource for planning and designing healthier places.

Assessment criteria	Relevant?	Details / evidence	Potential health impact	Recommended mitigation or enhancement actions
<b>the voluntary and community sectors?</b>		<p>The most powerful sources of stress include low social status and a lack of social networks. Low levels of social integration and loneliness have been shown to significantly increase mortality. Social networks and social participation appear to act as a protective factor against dementia or cognitive decline over the age of 65 and social networks are consistently and positively associated with reduced morbidity and mortality<sup>81</sup>. Planning can provide opportunities for social interaction, by providing an enabling environment for voluntary or community organisations. This may contribute to improving social interaction and cohesion and reducing loneliness and related health and wellbeing effects.</p> <p><b>Evidence</b></p> <p>It is not known at this stage as to whether the Proposed Development will provide voluntary or community-based opportunities.</p>		required. Please state whether the proposal provides opportunities for voluntary and community sectors.
<b>Does the proposal take into account issues and principles of inclusive and age-friendly design?</b>	Yes	<p><b>Relevance to health and wellbeing</b></p> <p>Demographic ageing in the UK makes the need to plan for age friendly urban environments ever more pressing. New developments should provide age friendly environments, including large-enough sidewalks and walking infrastructure ensuring easy access to facilities and services, such as healthcare, shopping, leisure<sup>82</sup>.</p>	Negligible	Please state whether inclusive design measures have been incorporated into the design of the Proposed Development.

<sup>81</sup> Marmot, M. et al. (2010) Fair Society, Healthy Lives. The Marmot Review.

<sup>82</sup> World Health Organization (2007) Global age-friendly cities: a guide. Available at: [https://apps.who.int/iris/bitstream/handle/10665/43755/9789241547307\\_eng.pdf;jsessionid=58DDDE21968B4907F0E07F8FF6BD418?sequence=1](https://apps.who.int/iris/bitstream/handle/10665/43755/9789241547307_eng.pdf;jsessionid=58DDDE21968B4907F0E07F8FF6BD418?sequence=1).

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Assessment criteria	Relevant?	Details / evidence	Potential health impact	Recommended mitigation or enhancement actions
		<p><b>Evidence</b></p> <p>The Proposed Development has considered the requirements of all users, visitors, staff and wider community including people with mobility impairments, people with vision impairments, people with neuro-diverse requirements, deaf people, older people, and small children.</p>		
<b>Overall assessment</b>		<p>Overall, the Proposed Development somewhat addresses key issues related to social cohesion and inclusive design. Although further detail should be provided at the detailed design stage, it appears the Applicant is taking all necessary steps to comply with relevant policies and guidelines, providing much needed affordable and well-designed housing for the area. As a residential-led scheme the Proposed Development prioritises housing over the provision of other community services and facilities, but it does connect to existing infrastructure and residential amenity space for socialising and congregating. However, the Proposed Development does not appear at this stage to offer anything for the existing communities within the Wandsworth ward. This is especially important as includes many LSOAs which score very poorly on the EID generally and specifically in terms of living environment.</p> <p>The Proposed Development will have a <b>negligible impact</b> on this category of health determinants for future users and for the local community.</p>		

**Table 6-9: Minimising the Use of Resources**

Assessment criteria	Relevant?	Details / evidence	Potential health impact	Recommended mitigation or enhancement actions
<b>Does the proposal make best use of existing land?</b>	Yes	<p><b>Relevance to health and wellbeing</b></p> <p>Land use has a direct impact on public health and effective land use can contribute to limiting environmental risk factors for health and facilitating active lifestyles<sup>83</sup>. Redevelopment on brownfield Sites or</p>	Minor benefit	None required.

<sup>83</sup> Jackson, R. et al. (2002) Land use planning: Why public health must be involved. The Journal of Law, Medicine & Ethics, 30(3).

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Assessment criteria	Relevant?	Details / evidence	Potential health impact	Recommended mitigation or enhancement actions
		<p>derelict urban land also ensures that land is effectively used, recycled and enhanced<sup>84</sup>.</p> <p><b>Evidence</b></p> <p>The Proposed Development will replace existing brownfield Site, rather than occupying a new greenfield Site.</p>		
<b>Does the proposal encourage recycling, including building materials?</b>	Yes	<p><b>Relevance to health and wellbeing</b></p> <p>Reducing or minimising waste including disposal, processes for construction and encouraging recycling at all levels can improve human health directly and indirectly by minimising environmental impact, such as air pollution<sup>85</sup>.</p> <p><b>Evidence</b></p> <p>Circular Economy principles are embedded into the design, supporting the reuse and recycling of existing materials on Site. Further, the proposal prioritises materials with a lower carbon impact.</p> <p>Recycling stores will be placed within proximity of apartments and food waste bins will be provided across the buildings.</p> <p>Additionally, there will be a Waste Management Plan.</p>	Moderate benefit	None required.
<b>Does the proposal incorporate sustainable</b>	Yes	<p><b>Relevance to health and wellbeing</b></p>	Moderate benefit	None required.

<sup>84</sup> NHS Healthy Urban Development Unit (2019) Rapid Health Impact Assessment Tool. Available at: <https://www.healthyurbandevelopment.nhs.uk/wp-content/uploads/2019/10/HUDU-Rapid-HIA-Tool-October-2019.pdf>.

<sup>85</sup> NHS Healthy Urban Development Unit (2019) Rapid Health Impact Assessment Tool. Available at: <https://www.healthyurbandevelopment.nhs.uk/wp-content/uploads/2019/10/HUDU-Rapid-HIA-Tool-October-2019.pdf>.

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Assessment criteria	Relevant?	Details / evidence	Potential health impact	Recommended mitigation or enhancement actions
<b>design and construction techniques?</b>		<p>Reducing or minimising waste including disposal, processes for construction and encouraging recycling at all levels can improve human health directly and indirectly by minimising environmental impact, such as air pollution<sup>86</sup>.</p> <p><b>Evidence</b></p> <p>The Sustainability Statement and Circular Economy Statement promote sustainable design and construction techniques including the reuse and recycling of materials, using timber sources from sustainable forestry sources (e.g. PEFC and FSC). These and other efforts are intended to support the Proposed Development reaching a minimum target of a BREEAM 'Excellent' rating under the New Construction 2018 scheme. Further, the Proposed Development is aiming for zero carbon construction.</p>		
<b>Overall assessment</b>		<p>Overall, the Proposed Development makes significant efforts to address key issues related to minimising the use of resources by complying with relevant policies and guidelines as outlined in the Sustainability Statement, Energy Statement, Circular Economy Statement and CEMP. While the CEMP will not actively improve community health and wellbeing, it will help to minimise the ill effects of resource consumption including climate change, and these other relevant documents promote efficient use of resources throughout the larger lifecycle of the project.</p> <p>The Proposed Development will have a <b>moderate beneficial impact</b> on this category of health determinants for future users and for the local community.</p>		

<sup>86</sup> NHS Healthy Urban Development Unit (2019) Rapid Health Impact Assessment Tool. Available at: <https://www.healthyurbandevelopment.nhs.uk/wp-content/uploads/2019/10/HUDU-Rapid-HIA-Tool-October-2019.pdf>

Table 6-10: Climate Change

Assessment criteria	Relevant?	Details / evidence	Potential health impact	Recommended mitigation or enhancement actions
Does the proposal incorporate renewable energy?	Yes	<p><b>Relevance to health and wellbeing</b></p> <p>Climate and environmental systems change, fuelled by human interventions such as changes in land use, alters the capacity of ecosystems to provide their indispensable services, such as food, clean water, and air<sup>87</sup>. Urban development should contribute to reducing both health inequalities and mitigating climate change, because of the evidence that the poorest people will be hit hardest by the impacts of climate change. One way through which urban developments can contribute towards climate change mitigation is by facilitating a shift from fossil fuels towards renewable energy, during construction and operation of the new building(s)<sup>88</sup>.</p> <p><b>Evidence</b></p> <p>According to the Energy Statement, the Proposed Development will follow the London Plan 2021 principles ‘Be Lean, Be Clean, Be Green and Be Seen’ to reduce energy use and emissions wherever possible. This includes incorporating renewable energy sources like Air source heat pumps, which the Proposed Development is including. As mentioned above, the Proposed Development is aiming for zero carbon construction.</p>	Minor benefit	None required

<sup>87</sup> World Health Organisation (WHO) Ecosystem goods and services for health. Available at: <https://www.who.int/globalchange/ecosystems/en/>.

<sup>88</sup> NHS Healthy Urban Development Unit (2019) Rapid Health Impact Assessment Tool. Available at: <https://www.healthyurbandevelopment.nhs.uk/wp-content/uploads/2019/10/HUDU-Rapid-HIA-Tool-October-2019.pdf>.

Assessment criteria	Relevant?	Details / evidence	Potential health impact	Recommended mitigation or enhancement actions
Does the proposal ensure that buildings and public spaces are designed to respond to winter and summer temperatures, for example ventilation, shading and landscaping?	Yes	<p><b>Relevance to health and wellbeing</b></p> <p>Developments that take advantage of sunlight, tree planting and accessible green / brown roofs also have the potential to contribute towards the physical and mental wellbeing of residents, including by reducing and / or mitigating the urban heat island effect and increasing access to green spaces<sup>89</sup>. Besides increased mortality, exposure to heat has been proven to have several non-fatal effects on human health and wellbeing. This includes feelings of exhaustion and reduced psychometric and motor capacity if the body temperature exceeds 38°C, heat strokes and unconsciousness should body temperature exceed 39°C<sup>90</sup>. People that spend a lot of time at their homes, such as old people, children, diseased or disabled people, as well as people with caring responsibilities (likely to be women) are particularly sensitive to effects from indoor heat exposure<sup>91</sup>.</p> <p><b>Evidence</b></p> <p>According to the Energy Statement, the Proposed Development has been designed to be resilient to climate change, including resilience to extreme changes in</p>	Moderate benefit	None required.

<sup>89</sup> NHS Healthy Urban Development Unit (2019) Rapid Health Impact Assessment Tool. Available at: <https://www.healthyurbandevelopment.nhs.uk/wp-content/uploads/2019/10/HUDU-Rapid-HIA-Tool-October-2019.pdf>.

<sup>90</sup> Kjellstrom, T. (2009) Climate change, direct heat exposure, health and wellbeing in low and middle-income countries. Global Health Action, 2:10. Available at: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2780846/#!po=50.0000>.

<sup>91</sup> White-Newsome, J., et al. (2012) Climate change and health: Indoor heat exposure in vulnerable populations. Environmental Research, 112, 20 – 27. Available at: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4352572/#!po=5.55556>.

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Assessment criteria	Relevant?	Details / evidence	Potential health impact	Recommended mitigation or enhancement actions
		temperature, through the passive design measures which allow for natural ventilation and shading. For example, the window is carefully designed to maximise the opportunity for daylighting and natural ventilation while preventing excess solar gains in the summer. In addition, the inclusion of extensive landscaping and soft scaping, and the use of natural materials throughout the Site, will help to reduce the negative effects of urban heat islands.		
<b>Does the proposal maintain or enhance biodiversity?</b>	Yes	<p><b>Relevance to health and wellbeing</b></p> <p>Biodiversity describes the variety of species of wild plants, animals, fungi, and other organisms present in a specific place or location. Through ecosystem services, biodiversity plays an important role for human health and wellbeing<sup>92</sup>.</p> <p><b>Evidence</b></p> <p>The existing Site was compromised of buildings and hardstanding with no other habitats present.</p> <p>The Landscape Strategy and Preliminary Ecological Appraisal outlines that the Proposed Development should enhance biodiversity through varied and native planting throughout the Site including woodland/tree planting, flower planting, and green roofs.</p>	Minor benefit	Optimise the potential benefits of the Proposed Development’s ‘natural capital’ by providing a Landscape Management Plan or equivalent document.

<sup>92</sup> World Health Organisation (2019) Climate change and human health. Biodiversity. Available at: <https://www.who.int/globalchange/ecosystems/biodiversity/en/>.

**Report for – Promontoria Battersea Limited**

One Battersea Bridge  
Health Impact Assessment (HIA)

Assessment criteria	Relevant?	Details / evidence	Potential health impact	Recommended mitigation or enhancement actions
<b>Does the proposal incorporate sustainable urban drainage techniques?</b>	Yes	<p><b>Relevance to health and wellbeing</b></p> <p>Building in flood plain areas and / or a lack of local sustainable urban drainage methods increases flood risk<sup>93</sup>. Flooding can have obvious physical health and safety hazards, such as from drowning and contamination of water supplies and can also affect property prices and insurance costs. The fear of flooding can also cause significant levels of anxiety and mental health issues, particularly in more vulnerable groups.</p> <p><b>Evidence</b></p> <p>The Proposed development incorporates sustainable urban drainage techniques including the use of permeable materials, such as permeable paving.</p>	Moderate benefit	Non required.
<b>Overall assessment</b>	<p>Overall, the Proposed Development addresses key issues related to climate change through good design, sustainable practices, and the promotion of biodiversity. This is especially important as St Mary’s Park ward includes many LSOAs which score very poorly on the EID generally and specifically in terms of living environment. In addition, climate change is a growing threat to human health and Wandsworth’s drive to fight climate change is highlighted across its policies and guidelines.</p> <p>The Proposed Development will have a <b>minor beneficial impact</b> on this category of health determinants for future users and for the local community.</p>			

<sup>93</sup> NHS Healthy Urban Development Unit (2019) Rapid Health Impact Assessment Tool. Available at: <https://www.healthyurbandevelopment.nhs.uk/wp-content/uploads/2019/10/HUDU-Rapid-HIA-Tool-October-2019.pdf>

## 7.0 CONCLUSIONS

7.1.1 This HIA considers a variety of criteria, baseline data and public health evidence to establish the likely effects of the Proposed Development on local health. Overall, the Proposed Development will have a **minor benefit effect** on human health for future residents of, and visitors to, the Site, as well as on the existing community. A summary of the Proposed Development’s potential health impact on each of the HIA criteria is set out in **Table 7-1**.

**Table 7-1: HIA Summary**

No.	Assessment criteria	Potential health impact
1.	Housing Quality and Design	Moderate Benefit
2.	Access to Health and Social Care Services and Other Social Infrastructure	Negligible
3.	Air Quality, Noise and Neighbourhood Amenity	Negligible
4.	Accessibility and Active Travel	Minor Benefit
5.	Crime Reduction	Negligible
6.	Access to Healthy Food	Negligible
7.	Access to Work and Training	Minor Benefit
8.	Social Cohesion and Inclusive Design	Negligible
9.	Minimising the Use of Resources	Moderate Benefit
10.	Climate Change	Minor Benefit

7.1.2 A number of recommendations have been provided which may help improve potential health outcomes. These include, but are not limited to, the following:

- Continuing to consult with the local community to ensure changing needs and priorities are met;
- Ensure that the restaurant unit is not occupied by a ‘hot food takeaway’ style of establishment;
- Providing an Employment Strategy to optimise potential training and employment opportunities;
- Establishing local procurement strategies prior to construction commencing; and
- Providing a Landscape Management Plan to maintain natural facilities and promote biodiversity.

7.1.3 These recommendations should be considered at all stages of the project, including the detailed design, construction, and operational phases.