Former Holloway Prison Health Impact Assessment







Peabody Construction Ltd

HOLLOWAY PRISON REDEVELOPMENT

Health Impact Assessment

OCTOBER 2021 PUBLIC



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Health Impact Assessment

TYPE OF DOCUMENT (VERSION) PUBLIC

PROJECT NO. 70073454

DATE: OCTOBER 2021

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QUALITY CONTROL

Issue/revision	First issue	Revision 1
Remarks	Draft	Final
Date	15 October 2021	27 October 2021
Prepared by	GB	GB
Signature	6.5~	6.5~
Checked by	AP	AP
Signature		
Authorised by		
Signature		
Project number	700769959-002	700769959-002
Report number	DRAFT	FINAL



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APPENDIX B

MAPS OF LOCAL HEALTHCARE INFRASTRUCTURE

1

INTRODUCTION





1 INTRODUCTION

- 1.1.1. This Health Impact Assessment (HIA) has been prepared by WSP on behalf of Peabody Construction Limited, in connection with the proposed redevelopment of the former Holloway Prison site, Islington, London.
- 1.1.2. The description of development is as follows:

'Phased comprehensive redevelopment including demolition of existing structures; site preparation and enabling works; and the construction of 985 residential homes including 60 extra care homes (Use Class C3), a Women's Building (Use Class F.2) and flexible commercial floorspace (Use Class E) in buildings of up to 14 storeys in height; highways/access works; landscaping; pedestrian and cycle connections, publicly accessible park; car (blue badge) and cycle parking; and other associated works.'

- 1.1.3. A more detailed explanation of the proposed development is outlined in the Design and Access Statement, prepared by Alford Hall Monaghan Morris, which accompanies the planning application.
- 1.1.4. The HIA structure is as follows:
 - Section 2 describes the methodology employed to assess health impacts, including the data and reference sources used to support the HIA;
 - Section 3 assesses the baseline health conditions in the local area;
 - Section 4 provides an audit of selected healthcare infrastructure near the site;
 - Section 5 evaluates the health impacts of the development proposals, including both
 temporary health impacts during the construction phase and permanent health impacts; and
 - Section 6 highlights the overall conclusions from the health impact assessment.
- 1.1.5. The HIA includes the following appendices:
 - Appendix A London Healthy Urban Development Unit Rapid Health Impact Assessment Tool (Fourth Edition, October 2019); and
 - Appendix B Maps of local healthcare infrastructure.

2

SCOPE AND METHODOLOGY





2 SCOPE AND METHODOLOGY

APPROACH TO THE HIA

- 2.1.1. Policy DM6.1 of the London Borough of Islington (LBI) Development Management Policies document (2013) states that developments are required to provide healthy environments, reduce environmental stresses, facilitate physical activity and promote mental well-being. Large developments of over 200 dwellings or 10,000sqm are required to submit a HIA in line with the Council's guidance, to enhance health benefits and mitigate any identified impacts on the wider determinants of health.
- 2.1.2. Islington Council's Health Impact Assessments for Major Applications: Guidance and Screening document states that all major applications should be subject to HIA screening, whilst the London Healthy Urban Development Unit (HUDU) Rapid HIA Tool should be used to assess the potential health impacts of development proposals over 200 dwellings or 10,000sqm of floorspace.
- 2.1.3. Similarly, Draft Local Plan Policy SC3 states that all major developments, and developments where potential health issues are likely to arise, must complete a screening assessment to determine whether a full HIA is required. Where required, HIAs should be completed as early as possible in the development process and must be proportionate to the scale of the development. The scope of any HIA should be agreed with the Council's Public Health department and be informed by relevant Council guidance.
- 2.1.4. The Environmental Impact Assessment (EIA) Scoping Opinion (dated 20 July 2020) provided by AECOM on behalf of LBI in relation to the proposed development, states that the HIA should follow the London HUDU Rapid HIA methodology and will need to be a standalone report that can also be appended to the Environmental Statement (ES).
- 2.1.5. The HUDU Rapid Health Impact Assessment Tool (Fourth Edition, October 2019)² has therefore been employed to assess the health impacts of the proposed development. The Rapid HIA Tool includes a total of 51 questions relating to the potential health impacts of a development proposal and is included at **Appendix A**.
- 2.1.6. Reference has been made to other relevant documents which support the planning application throughout this HIA to indicate where further details of the proposed development can be found. This approach has sought to minimise repetition across the various supporting documents.
- 2.1.7. This HIA includes a high-level assessment of the baseline health conditions experienced by LBI residents and by those communities living closest to the development site. A local impact area, as defined by the boundary of St George's ward, has been used for the baseline assessment.
- 2.1.8. The HIA is also supported by a desktop audit undertaken by WSP of the existing healthcare facilities within a 1.5km radius of the development site.

SCOPING

2.1.9. The scope of this HIA is in accordance with the EIA Scoping Opinion (dated 20 July 2020) provided by AECOM on behalf of LBI in relation to the proposed development.



2.1.10. WSP discussed and agreed the approach to the HIA with the Public Health team at LBI on 3 November 2020, prior to commencing the assessment. In addition, WSP consulted with the North Central London Care Commissioning Group (CCG) and the NHS London HUDU in September 2021.

EVIDENCE AND ANALYSIS

2.1.11. The evidence used to inform this HIA has been obtained through completing the HUDU Rapid Health Impact Assessment Tool (Fourth Edition, October 2019) with the input of the wider project team where relevant. This evidence has then been used to consider the potential health impacts of the proposed development.

STUDY AREA

2.1.12. It is considered that the health impacts of the proposed development are likely to be greatest for future residents and employees at the site and those who live and work in the area surrounding the site. While the proposed development has the potential to have health impacts on the population outside of the area directly affected, is it anticipated that these will be less than those impacts felt by the future residents and the site surrounding community. This HIA therefore focuses on St George's ward and the LBI administrative area.

VULNERABLE GROUPS

- 2.1.13. The main vulnerable groups considered in this HIA, which have been identified through the assessment of baseline conditions, are:
 - People of low income;
 - People who lack access to housing; and
 - Disabled people.

INFORMATION SOURCES

- 2.1.14. In undertaking this health impact assessment, WSP has drawn on advice and guidance provided by the following sources:
 - Rapid Health Impact Assessment Tool London Healthy Urban Development Unit, Fourth Edition October 2019; and
 - Health Impact Assessments for Major Applications: Guidance and Screening Islington Council.
- 2.1.15. WSP has gathered data from the following sources:
 - National Online Manpower Information Service 2020:
 - 2011 ONS Census (various datasets) 2011;
 - English Indices of Deprivation 2019; and
 - Patients Registered at a GP Practice and full-time GP staff per practice NHS Digital, 31 July 2021.

LIMITATIONS

2.1.16. The latest published data available has been used throughout this HIA, however the majority of sources pre-date the COVID-19 pandemic and some of the most up to date data at ward level is from the 2011 Census. This baseline data may therefore not provide an entirely accurate representation of the local population in 2021. However, more recent data has been used wherever possible, such as the English Indices of Deprivation (2019) and the health profiles published by



Public Health England which provides ward level data as recent as 2019/20. In addition, out-of-work benefits data from April 2021 is provided at ward level.

3

BASELINE HEALTH CONDITIONS





3 BASELINE HEALTH CONDITIONS

INTRODUCTION

3.1.1. This section assesses the baseline conditions of residents in the local area, across different spatial scales ranging from borough-level to neighbourhood-level. The baseline considers local life expectancies, mortality rates and deprivation, as well as general adult and child health profiles.

POPULATION AND DEMOGRAPHIC CHANGE

AGE DISTRIBUTION1

- 3.1.2. As of 2019, the working age population in St George's ward (aged 16 to 64) was estimated to be 9,373 (72% of the population). This is in line with LBI's population (75%) but higher than the figure for the UK (62%).
- 3.1.3. A slightly higher proportion of St George's ward's population are children (17%) than across LBI (16%), but both the ward and borough proportions are lower than the UK average of 19%. The share of St George's population who are of retirement age (11%) is again similar to the equivalent figures for Islington (9%) but significantly lower than the proportion across the UK as a whole (19%).
- 3.1.4. Taken together it can be inferred that the St George and Islington populations are characterised by younger working age residents.

ECONOMIC ACTIVITY

RATES OF ECONOMIC ACTIVITY

- 3.1.5. As of the 2011 Census, the percentage of the working age population (aged 16 to 64) of St George's ward who were economically active was 74.7%; slightly above the average for LBI (74.3%) but below the rate across England and Wales (76.8%)².
- 3.1.6. More recent data for LBI shows that in 2020 LBI's economic activity rate had increased to 79.1%, marginally below the London rate (80.1%), but the same as Great Britain³.

ONS National and subnational mid-year population estimates (2021) Available from: https://www.ons.gov.uk/file?uri=%2fpeoplepopulationandcommunity%2fpopulationandmigration%2fpopulationestimates%2fdatasets%2fpopulationestimatesforukenglandandwalesscotlandandnorthernireland%2fmid 2019april2020localauthoritydistrictcodes/ukmidyearestimates20192020ladcodes.xls

² NOMIS (2021) Ward Labour Market Profile – St George's. Available from: https://www.nomisweb.co.uk/reports/lmp/ward2011/1140858095/report.aspx

³ NOMIS (2021) Labour Market Profile - Islington. Available from: https://www.nomisweb.co.uk/reports/lmp/la/1946157251/report.aspx



UNEMPLOYMENT

- 3.1.7. As of 2011, 9.2% of St George's working age population was unemployed, the same as the figure across LBI. Both are notably higher than the average across England and Wales of 7.6%².
- 3.1.8. More recent data for LBI shows that in 2020 LBI's unemployment rate was 6.7%, which was higher than the rates across London (5.9%) and Great Britain (4.6%). This is despite having a similar proportion of economically active people³.

DEPENDENCE ON OTHER BENEFITS

3.1.9. The most recent data regarding out-of-work benefits (dating to April 2021) shows that benefits were claimed by 9% of St George's working age population. This is notably higher than LBI's average of 7.7% and the average across Great Britain of 6.4%².

AVERAGE EARNINGS

3.1.10. As of 2020, the average weekly earnings across among LBI's residents was £842.90, which is 17.7% higher than the equivalent figure for London of £716.40 and over 43.6% above the Great Britain average of £587.10³.

EDUCATION AND SKILLS

- 3.1.11. As of the 2011 Census, the percentage of working age residents in St George's ward with no qualifications (12.4%) was very close to the average for LBI (12.3%), but markedly lower than the London (17.6%) and England and Wales averages (15%)².
- 3.1.12. At the same time, the share of the local working age population in St George's ward with Level 4 qualifications or above in 2011 (equivalent to a Certification of Higher Education, a degree or higher) stood at 50.9%. This was slightly lower than LBI (51.2%), but considerably higher than the London wide (37.3%) and England and Wales average (29.7%)².
- 3.1.13. More recent data for LBI shows that the proportion of working age residents within the borough who had no qualifications had fallen considerably by 2020, to just 5.5%. Concurrently the share of the working age population within LBI with Level 4 qualifications or above had risen to 62.1% in 2020, indicating that the skills profile in the borough has improved over the last 10 years³.

HOUSING

- 3.1.14. As of the 2011 Census, there were a total of 5,627 household spaces across St George's ward, compared to 98,196 across LBI and 3,387,255 across Greater London⁴.
- 3.1.15. The previous London Plan (March 2016) set an annual target for LBI of 1,264 net new homes per year (12,641 across the 10-year period 2015 2025). This target is over 100 dwellings higher than that set out in LBI's Local Plan of an additional 1,160 homes per annum (17,400 over the period 2010/11-2024/25).

⁴ Greater London Authority (2021) London Ward Profiles. Available from: https://londondatastore-upload.s3.amazonaws.com/instant-atlas/ward-profiles-html/atlas.html



- 3.1.16. The London Plan (2021) sets an annual target of 775 new homes per annum between 2019/20 to 2028/29 for LBI (7,750 across the 10-year period), which is lower than the target in the previous London Plan and LBI's Core Strategy (2011). LBI's Draft Local Plan accords with the housing target set out in the London Plan (7,750 homes across the 10-year period).
- 3.1.17. In terms of affordable housing, as demonstrated by Islington's Housing Needs Study (May 2008) and Strategic Housing Market Assessment (2017), the need for affordable housing, and for social rented housing in particular, remains very high. A lack of affordable housing is, and will continue to be, a major issue in the borough for the foreseeable future. Consequently, Policy CS 12 of LBI's Core Strategy (2011) sets a target that 50% of additional housing should be affordable housing. Draft Local Plan Policy H3 Part D requires sites which are currently or have been in public sector ownership to provide 50% affordable housing without public subsidy and exhaust all potential options for maximising the delivery of on-site affordable housing in excess of 50%.
- 3.1.18. As set out in **Table 3-1**, the mix of tenures across households in St George's ward does not especially resemble that of LBI or Greater London as a whole.
- 3.1.19. A larger share of St George's population lives in properties which they own either outright or with a mortgage than the corresponding rate for LBI (33.6% compared to 28.4%). However, the proportion is lower than across Greater London (48.2%)⁴.
- 3.1.20. Conversely, a smaller share of the St George's ward population lives in properties which they socially rent than the average across Islington. As of 2011, 38% of St George's population socially rented, compared to 42.1% across Islington. Both were higher than the corresponding rate for Greater London however at 24.1%.
- 3.1.21. The share of residents living in privately rented accommodation across all three geographical areas are broadly in line, with 26.1% of St George's population privately renting, compared to 27% across LBI and 25.1% across Greater London as a whole.

Table 3-1 – Tenure of properties (2011 Census)⁴

Tenure	St George's ward	LBI	Greater London
% Privately owned (outright or with mortgage)	33.6	28.4	48.2
% Social rented	38.0	42.1	24.1
% Privately rented	26.1	27.0	25.1
% Other (shared ownership, living rent free)	2.3	2.5	2.6

HEALTH CONDITIONS IN ISLINGTON

LIFE EXPECTANCY AND MORTALITY

3.1.22. The life expectancy for both males and females in Islington is lower than the regional averages, as shown by Table 3-2 below. In 2017-2019, men in Islington had an average life expectancy of 79.7 years which was lower than the London average of 80.9 years and the England average of 79.8



years. At the same time, female life expectancy in 2017-2019 was 83.4 years in Islington, which was lower than the London average of 84.7 years, but the same as the national average.

Table 3-2 - Average life expectancy at birth (years) 2017-2019⁵

Gender	Islington	London	England
Male	79.7	80.9	79.8
Female	83.4	84.7	83.4

3.1.23. Notable life expectancy inequalities exist between the most and least deprived areas of London. Table 3-3 shows that for men there was a life expectancy gap of 7.7 years in 2012-2014. This was notably lower than the gap of 9.1 years in England. Meanwhile, the female life expectancy gap in London was 4.9 years, which was also lower than the England life expectancy gap which stood at seven years.

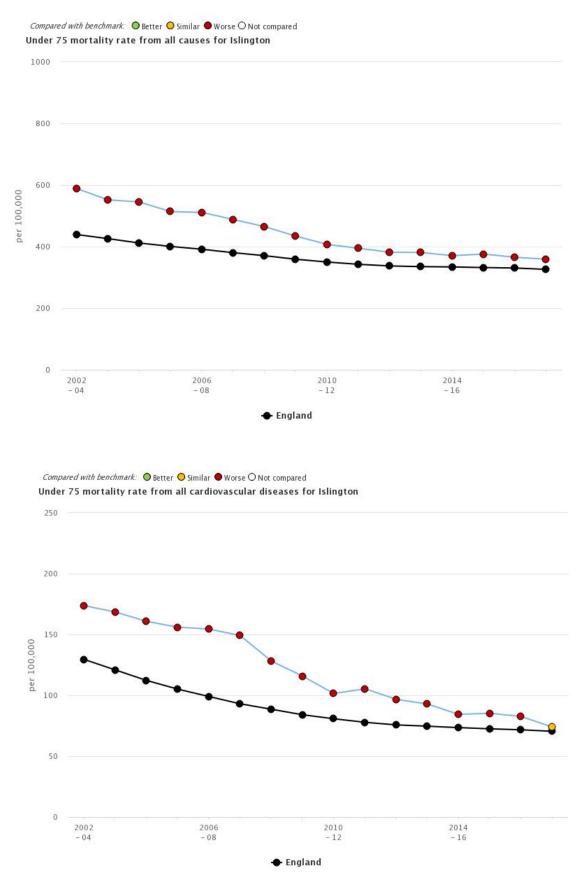
Table 3-3 - Inequalities in life expectancy between the most and least deprived deciles (years) 2012-2014¹

Gender	London life expectancy gap	England life expectancy gap
Male	7.7	9.1
Female	4.9	7

- 3.1.24. Islington had a higher than average mortality rate for under 75s, at 359 per 100,000 population in 2017-2019. This was higher than the London average of 299 and the England average of 326. This pattern can also be seen when considering the under 75s mortality narrowed to specific causes (cardiovascular disease and cancer).
- 3.1.25. Under 75 mortality rates from all causes has gradually decreased over the past 20 years both locally and across England. This decrease is most significant in cardiovascular-related mortality rates, as shown in Figure 3-1.

⁵ Public Heath England (2020). Local Authority Health Profiles. Available at: https://fingertips.phe.org.uk/profile/health-profiles







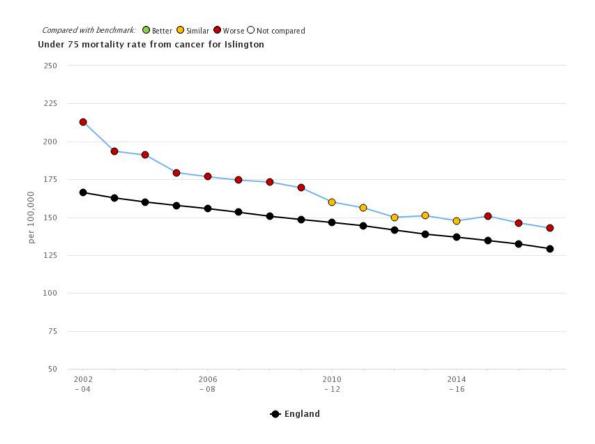


Figure 3-1 - Trends in mortality rates from all causes, cardiovascular diseases, and cancer¹

GENERAL HEALTH¹

- 3.1.26. A slightly lower-than-average proportion of the population (aged 18+) were classified as overweight or obese in 2018-2019 in Islington, standing at 55.8% compared to the London average of 55.9% and the national average of 62.3%.
- 3.1.27. There was a notably higher-than-average proportion of the population who were physically active between 2018-2019 in Islington (75.3%), compared to the regional average of 66.6% and the national average of 67.2%.
- 3.1.28. In 2016-2018, there was a total of 49.2 per 100,000 people killed or seriously injured on the roads in Islington. This is notably higher than the London average of 39.5 and the national average of 42.6 during the same period.
- 3.1.29. The estimated diabetes diagnosis rate was substantially lower in Islington (63.7%) than London (71.4%) and England as a whole (78%) in 2018. Concurrently, in 2020, the estimated dementia diagnosis rate (aged 65+) was much higher in Islington (84.6%) than London (71.3%) and the England average of 67.4%.
- 3.1.30. In 2018-2019 the local population was more likely to be admitted to hospital for alcohol-related conditions (692 per 100,000 people) compared to the regional (556) and national (664) averages.
- 3.1.31. Suicide rates during the period 2017-2019 were higher in Islington than across than across both London and England, with the rates standing at 10.4, 8.2 and 10.1 per 100,000 people respectively.



CHILD HEALTH 1

- 3.1.32. The prevalence of child obesity among children in Year 6 was higher in Islington at 25% in 2019-2020 compared to the London average (23.7%) and the England average as a whole (21%).
- 3.1.33. The proportion of the population who smoked at the time of delivery between 2019-2020 was slightly higher in Islington (5.5%) than the London average of 4.8%. However, this was notably below the national average of 10.4%.
- 3.1.34. In terms of infant mortality rates (per 100,000), in 2017-2019, Islington had a rate of 3. This was lower than the London average of 3.4 and the England average of 3.9.

HEALTH CONDITIONS IN ST GEORGE'S WARD⁶

- 3.1.35. Life expectancy at birth for males in St George's ward (in which the site is located) in 2013-2017 was 80.1 years, which is above the Islington average of 79.3 years and the England average of 79.5 years. Meanwhile, female life expectancy in St George's ward was 85.3 years, above the Islington average of 83.2 years and the England average of 83.1 years.
- 3.1.36. Regarding causes of mortality for under 75s, the ward had a standardised mortality ratio of 100 which was the same as the national index of 100 in 2013-2017. This was below the borough average of 108. In this context, 100 is the national average rate and therefore anything above this is worse than the national average. Narrowing down to specific causes of death, the most concerning aspect in the period 2013-17 was circulatory disease (125.1) which was significantly above the national index of 100.
- 3.1.37. The standardised admission ratio to hospital for emergency reasons for St George's ward between 2013/14-2017/18 was 98.7, higher than the Islington average of 95.7, but lower than the national benchmark of 100. This trend varied across all emergency hospital admissions, for example hospital admissions for coronary heart disease between 2013/14-2017/18 in St George's ward was 78.3 and Islington was 84.8 against the national benchmark of 100. Whereas hospital admissions for stroke was 129.2 in St George's ward and 124 in Islington, both of which were above the national benchmark.
- 3.1.38. St George's ward had a higher proportion of people (16.2%) who reported having a limiting long-term illness or disability in 2011 compared to Islington as a whole (15.7%). However, these figures were lower than the England average of 17.6%. At the same time, amongst the older residents in St George's ward, 37.7% of over 65s lived alone which was lower than the Islington average of 42.1%, but higher than the England avergae of 31.5%.
- 3.1.39. Child obesity levels in St George's ward vary considerably across different age groups. The three-year average of obesity among children in Reception year in 2015/16-2017/18 was 10%, which was lower than the Islington average of 10.5%, but higher than the England average of 9.5%. In the

⁶ Public Health England (2020) Local Health. Available at: https://fingertips.phe.org.uk/profile/local-health/data#page/0/gid/1938133180/pat/201/par/E09000019/ati/8/are/E05000378/cid/4/page-options/ovw-do-0



same period, the obesity rate among Year 6 children was 18.6% which as lower than the Islington average of 23.6% and the England average of 20%.

DEPRIVATION7

- 3.1.40. The English Indices of Deprivation (EID 2019) enables comparisons to be made for a range of deprivation indicators at the small area level. The small areas, or neighbourhoods, are known as lower level super output areas (LSOAs) which on average contain around 1,500 people. There are 32,844 of these neighbourhoods across England as a whole.
- 3.1.41. The EID 2019 provides an overall index of multiple deprivation which is based on seven separate deprivation domains. Each deprivation domain is weighted, as shown below:
 - Income deprivation with a weighting of 22.5%;
 - Employment deprivation with a weighting of 22.5%;
 - Education, skills and training deprivation with a weighting of 13.5%;
 - Health deprivation and disability with a weighting of 13.5%;
 - Crime with a weighting of 9.3%;
 - Barriers to housing and services with a weighting of 9.3%; and
 - Living environment deprivation with a weighting of 9.3%.
- 3.1.42. The Site is located within Islington 010E, an LSOA which forms part of the St George's ward. **Table 3-4** below provides data for the local neighbourhood across all of the deprivation domains. It is evident from Table 3-3 that the local area experiences relatively high levels of deprivation, especially when considering the health deprivation and disability and living environment domains.

Table 3-4 – Deprivation in the local neighbourhood of Islington 010E

Domain of Deprivation	Islington 010E (Rank out of 32,844 where 1 is most deprived)
Overall IMD Rank	7,051
IMD % Decile	22% most deprived
Income Rank	7,695
Income % Decile	24% most deprived
Employment Rank	9,478
Employment % Decile	30% most deprived
Education, Skills and Training Rank	19,484

⁷ Department for Communities and Local Government, (2019) English Indices of Deprivation [online] Available from: https://dclgapps.communities.gov.uk/imd/iod_index.html



Education % Decile	50% least deprived
Health Deprivation and Disability Rank	4,241
Health % Decile	13% most deprived
Crime Rank	6,494
Crime % Decile	20% most deprived
Barriers to Housing and Services Rank	6,028
Barriers to Housing % Decile	20% most deprived
Living Environment Rank	4,738
Living Environment % Decile	15% most deprived

- 3.1.43. When considering overall deprivation, Islington 010E is ranked 7,051 out of 32,844 LSOAs in the country, which places it among the 22% most deprived.
- 3.1.44. The local neighbourhood performs poorly in the health deprivation and disability domain, ranking 4,241 out of 32,844 LSOAs. It is therefore within the 13% most deprived neighbourhoods nationally.
- 3.1.45. Similarly, the LSOA is also deprived in other domains. It has a high crime deprivation ranking of 6,9494, placing it among the 20% most deprived neighbourhoods in the country. In the living environment domain, it ranks 4,738 which means it is also within the 15% most deprived neighbourhoods in England.
 - SELF ASSESSMENT OF HEALTH⁸
- 3.1.46. The 2011 Census asked residents to self-assess their level of health, with possible responses ranging from 'very bad' to 'very good'. It is a useful, but subjective, measure of health levels within the local area. Table 3-5 indicates how residents perceive their health conditions across different spatial levels, from ward level to national level.
- 3.1.47. At the time of the 2011 Census, 82% of residents in St George's ward rated their own health as good or very good, which was similar to the proportion across Islington (82.3%) and slightly higher than the England average of 81.2%.
- 3.1.48. Concurrently, 6.3% of St George's ward residents rated their health as bad or very bad, marginally lower than the proportion within Islington (6.4%), but higher than the national average of 5.6%.

⁸ NOMIS (2011) General Health, QS302EW Available from: https://www.nomisweb.co.uk/census/2011/gs302ew



Table 3-5 - Self-Assessment of Health

Self-assessment	St George's (%)	LB Islington (%)	England (%)
Very good health	49.5	51.6	47.1
Good health	32.5	30.7	34.1
Fair health	11.7	11.2	13.2
Bad health	4.6	4.7	4.3
Very bad health	1.7	1.7	1.3

SUMMARY

- 3.1.49. The life expectancy of male residents in Islington was lower than the London and national average in 2017-2019, whilst women in Islington had the same life expectancy as the national average, but lower than the London average. However, men and women within St George's ward were expected to live longer than those living across Islington and England in the period 2013-2017.
- 3.1.50. Mortality rates amongst those aged under 75 in Islington between 2017-2019 were higher than the London and England. Under 75 mortality rates from all causes has gradually decreased over the past 20 years both locally and across England.
- 3.1.51. Residents in Islington were less likely to be obese than those in London and England as a whole, whilst the estimated diabetes diagnosis rate was substantially lower in Islington than the London and England averages. However, child obesity rates at the ward level were more mixed, with obesity levels among children in Reception marginally higher than the national average, those this rate falls below the Islington and national average among children in Year 6.
- 3.1.52. The local neighbourhood (Islington 010E) experiences relatively high levels of deprivation and is within the 22% most deprived LSOAs in England. The local neighbourhood has particularly high levels of deprivation when considering the health deprivation and disability domain and living environment domain, for which the local LSOA is among the 13% and 15% most deprived neighbourhoods in England.

4

HEALTHCARE INFRASTRUCTURE





4 HEALTHCARE INFRASTRUCTURE

INTRODUCTION

- 4.1.1. In preparing this HIA, WSP has undertaken a desktop audit of the healthcare facilities within a 1.5km radius of the site, which is considered to be a reasonable walking distance.
- 4.1.2. The following healthcare facilities are located within a 1.5km radius of the site:
 - 13 GP surgeries;
 - 13 dental practice; and
 - 21 pharmacies.
- 4.1.3. The location of the GPs and dentists are shown in **Appendix 2**.

GP SURGERIES

- 4.1.4. There are 13 GP surgeries within a 1.5km radius of the site, with a total of 123,171 patients currently registered across them (based on NHS data from July 2021).
- 4.1.5. The 123,171 patients are served by a total of 77 full-time equivalent (FTE) GPs, which equates to an overall GP to patient ratio of one GP for every 1,600 patients. This is below the HUDU recommended threshold of one GP for every 1,800 patients.
- 4.1.6. As illustrated in **Table 4-1**, patient to GP ratios vary considerably at the individual practice level. The highest patient to GP ratio belongs to the Archway Medical Centre (1: 5,651), which is more than three times above the recommended ratio, while the Sobell Medical Centre and the Junction Medical Practice are also both well above the recommended ratio. In contrast, the Partnership Medical Practice had a GP to patient ratio of 1: 660, and the Andover Medical Centre had a GP to patient ratio of 1: 994, both well below the HUDU recommendation. Overall of the 13 GP practices assessed, eight were within the recommended ratio, four were above, and data for one practice (Dr Simon Edoman Practice) was not available.
- 4.1.7. All 13 GP practices are currently accepting new patients, as of October 2021. Taken together this suggests there is some capacity across the existing GP practices within 1.5km to take on new patients.



Table 4-1 – GP practices within a 1.5km radius of the site⁹

GP Surgery	Accepting New NHS Patients?	Total Patients	Total GPs	Ratio of GPs to Patients
Archway Medical Centre	Yes	16,952	3	1: 5,651
The Goodinge Group Practice	Yes	12,024	10	1: 1,202
Caversham Group Practice	Yes	16,262	13	1: 1,251
James Wigg Group Practice	Yes	22,019	16	1: 1,376
The Family Practice	Yes	5,132	3	1: 1,711
The Junction Medical Practice	Yes	9,551	2	1: 4,776
The Parliament Hill Medical Practice	Yes	7,833	6	1: 1,306
The Northern Medical Centre	Yes	9,134	6	1: 1,522
The Village Practice	Yes	10,084	5	1: 2,017
Andover Medical Centre.	Yes	5,963	6	1: 994
Dr Simon Edoman Practice	Yes	Data unavailable	Data unavailable	N/a
Sobell Medical Centre	Yes	4,282	1	1: 4,258
Partnership Primary Care Centre	Yes	3,959	6	1: 660
Total		123,171	77	1: 1,600

- 4.1.8. WSP consulted with the North Central London CCG and NHS London HUDU during the preparation of the HIA. The HUDU suggested that it may be more appropriate to consider GP practices within 1km of the site, given LBI has a high population density and the site is within an inner London location. However, it is widely accepted that 1.5km is a suitable radius when considering GP capacity in London, as it is a 15 to 20-minute walk.
- 4.1.9. A 1.5km radius has been used in this assessment of GP capacity, as the site is in a highly accessible location, with a Public Transport Accessibility Rating (PTAL) of 6a, indicating it has very good accessibility to public transport. In addition, the proposed development will significantly

⁹ NHS Digital (2021) General Practice Workforce July 2021. Available from: https://digital.nhs.uk/data-and-information/publications/statistical/general-and-personal-medical-services/31-july-2021



improve the permeability of the site, opening up the former prison site and providing pedestrian routes through it, allowing easier access to local amenities. It is therefore reasonable to assume that future residents at the site would be willing to travel over 1km to a GP practice, and certainly up to 1.5km.

- 4.1.10. From WSP's research, the key messages on GP provision are as follows:
 - There are 13 GP surgeries within 1.5km of the site;
 - There is a total of 123,171 registered patients and 77 FTE GPs across 13 of the practices within 1.5km of the site:
 - The average GP: patient ratio is 1: 1,600, which is below the HUDU recommendation of 1: 1,800;
 and
 - All 13 of the GP surgeries are accepting new NHS patients.

DENTISTS

- 4.1.11. There are 13 dentists within 1.5km of the site, which are outlined in Table 4-2 below.
- 4.1.12. Dentists are not required to publish data in the same way as GPs, as they are privately operated services but governed under NHS regulations. As such, data is limited, but where possible information on whether dental practices are taking on new patients was obtained during a telephone survey in October 2021.

Table 4-2 – Dentists located within 1.5km radius of the site

Name of Practice	Distance from site (km)	Accepting patients?
N7 Dental Care	0.3	No
Holloway Dental Centre	0.5	No
Whittington Health NHS Oral Surgery Service (Islington)	0.6	Only by referral
Gentle Dental Care	0.6	No
Brecknock Dental	0.8	No
Aspire Dental Clinic	1.1	No
The Dental Surgery	1.1	No
Torrance Dental Surgery	1.1	Only by referral
AG Dentistry	1.3	No
Ace Dental	1.4	No
Family Dental Care	1.4	No
Smilecare Dental Centre	1.4	No
Hornsey Dental Care	1.4	Yes



- 4.1.13. Of the 13 local dentists, only one is currently accepting new NHS patients. However, two other practices are accepting new NHS patients when referred for specific treatments. Several practices stated that their position of not currently accepting new patients is due to a current backlog of patients waiting for treatments resulting from the COVID-19 pandemic and the relevant national and regional restrictions that have been in place during this period. As such, it is considered that the low number of practices accepting NHS patients will only be temporary.
- 4.1.14. In any case, future residents will be able to access dental care beyond a 1.5km radius as practice places are not based on home locations. It is also possible that future residents would already be registered with a local dental practice, which they could retain after they relocate to live within the development.

PHARMACIES

- 4.1.15. There are 21 pharmacies within a 1.5km radius of the site. The nearest pharmacy is the Superdrug pharmacy located at 5, 7 and 9 Seven Sisters Road, which is approximately 550 metres from the site. The pharmacies surrounded the site are as follows:
 - Apteka Chemist;
 - Arkle Pharmacy;
 - Atkins Pharmacy;
 - Aura Pharmacy;
 - Boots (Holloway Road);
 - Boots (Kentish Town Road);
 - Caledonian Pharmacy;
 - Carters Chemist:
 - Chemitex Pharmacy;
 - Day Lewis Pharmacy
 - Devs Chemist:
 - DH Roberts Chemists;
 - Egerton Chemist;
 - Eico Pharmacy;
 - Greenfields Pharmacy;
 - Hornsey Road Pharmacy;
 - Islington Pharmacy;
 - Shivo Chemists;
 - Superdrug;
 - Well Highgate Junction Road;
 - Wellcare Pharmacy; and
 - York Pharmacy.

HOSPITALS

4.1.16. The nearest NHS hospital to the site is Whittington Health NHS Trust in Archway, which is approximately 3.4km from the site. This Hospital offers a wide range of services, including a 24-hour emergency department (A&E) and maternity services.

KEY MESSAGES

4.1.17. The key messages from the audit of local health and education facilities are as follows:



- There are 13 GP surgeries within 1.5km of the site, with an average GP to patient ratio of 1: 1,600, which is below the HUDU recommendation of 1: 1,800;
- There are 13 dentists within 1.5km of the site, one of which is accepting new patients, which
 appears to be due to a backlog of treatments resulting from the COVID-19 pandemic among the
 other surgeries;
- There are 21 pharmacies within 1.5km of the site, the nearest of which is 550 metres away; and
- The closest NHS hospital to the site is the Whittington Health NHS Trust, which is approximately 3.4km away.

5

ASSESSMENT OF HEALTH IMPACTS





5 ASSESSMENT OF HEALTH IMPACTS

- 5.1.1. In this section of the HIA we set out both the temporary and permanent health impacts of the development proposals for the site.
- 5.1.2. In evaluating the health impacts of the scheme, the HIA follows the guidance of the HUDU Rapid HIA Tool. As such, the HIA addresses potential health impacts under the following thematic areas:
 - Housing design and affordability (Table 5-1);
 - Access to health and social care services and other social infrastructure (Table 5-2);
 - Access to open space and nature (Table 5-3);
 - Air quality, noise and neighbourhood amenity (Table 5-4);
 - Accessibility and active travel (Table 5-5);
 - Crime reduction and community safety (Table 5-6);
 - Access to healthy food (Table 5-7);
 - Access to work and training (Table 5-8);
 - Social cohesion and inclusive design (Table 5-9);
 - Minimising the use of resources (Table 5-10); and
 - Climate change (Table 5-11).
- 5.1.3. This section also considers how the health of the identified vulnerable groups would be impacted by the proposed development.



Table 5-1 - Housing design and affordability

Assessment criteria	Relevant?	Details/evidence	Potential health impact?	Recommended mitigation or enhancement actions
Does the proposal seek to meet all 16 design criteria of the Lifetime Homes Standard or meet Building Regulation requirement M4 (2)?	Yes	All dwellings have been designed to meet the Building Regulation requirement M4(2), whilst 12% of dwellings meet the M4(3) standards (further details of which are outlined below). The optional Building Regulations standard M4(2) replaced the Lifetime Homes Standard in 2015.	Positive	No further measures are considered necessary.
Does the proposal address the housing needs of older people, ie extra care housing, sheltered housing, lifetime homes and wheelchair accessible homes?	Yes	The proposed development includes the provision of 60 'social rent' extra care homes, providing accommodation for elderly people. There will also be 120 wheelchair homes across the development across a range of tenures, as follows: 89 are social rent and will be delivered as M4(3)(2)(b) 'wheelchair accessible units'; 11 are London Shared Ownership and will be delivered as M4(3)(2)(a) 'wheelchair adaptable unit'; and 20 are market and will be delivered as M4(3)(2)(a) 'wheelchair adaptable unit'. The assessment of baseline conditions identified that 16.2% of the St George's ward population and 15.7% of the LBI population had a limiting long-term illness or disability in 2011. These wheelchair homes will increase the housing options for local disabled people, providing accommodation which meets their specialist needs.	Positive	No further measures are considered necessary.
Does the proposal include homes that can be adapted to support independent living for older and disabled people?	Yes	As noted above, the proposal includes 120 wheelchair homes, including 89 wheelchair accessible units and 31 wheelchair adaptable units. The proposal also includes 60 extra care homes (all of which are wheelchair accessible homes), which will support independent living for older people.	Positive	No further measures are considered necessary.
Does the proposal promote good design through layout and orientation, meeting internal space standards?	Yes	The proposed development will provide high-quality homes which all meet or exceed the minimum space standards set out in the London Plan. All homes also have built-in storage in accordance with these standards. in addition, the development meets the following standards: Every unit has a floor to ceiling height of at least 2.6m; Dual aspect has been maximised across the scheme (this was a key requirement for the proposal and has driven the design towards smaller buildings with more corners); Every unit has dedicated private amenity space in the form of a garden, terrace or balcony which meet or exceed the minimum size standards; 12% of homes will be designed as wheelchair homes across all tenures and types; and All units to upper floors are served by at least two lifts. Alongside these requirements, Peabody has a Design Guide that sets out the further standard requirements for every home to ensure quality and consistency for all Peabody's new homes. Further details are provided in the Design and Access Statement, prepared by Alford Hall Monaghan Morris (AHMM), which accompanies the planning application.	Positive	No further measures are considered necessary.



Does the proposal include a range of housing types and sizes, including affordable housing responding to local housing needs?	Yes	The proposed dever including 60 extra or component of the proposed development of the proposed also	care homes proposals, we rent (415 use he affordab ts. provides 40 sizes are p	The provision of a control of a	sion of affor all residenti ng the 60 e ill be 'Londo g housing (dable hous al units affo xtra care ur on Shared (392 dwelling	ing is a key rdable, 70% onits). The Dwnership',	of	No further measures are considered necessary.
Does the proposal contain homes that are highly energy efficient (eg a high SAP rating)?	Yes	The planning application is accompanied by a Sustainable Design and Construction Statement, prepared by Hoare Lea. This report includes an Energy Strategy, which outlines that new, high efficiency servicing equipment and efficient façades will minimise the energy usage of the building. The Strategy concludes that the proposed development will result in a highly efficient, low-carbon scheme.				s report inc ncy servicin of the buildi	Positive	No further measures are considered necessary.	

Table 5-2 - Access to health and social care services and other social infrastructure

Assessment criteria	Relevant?	Details/evidence	Potential health impact?	Recommended mitigation or enhancement actions
Does the proposal retain or re-provide existing social infrastructure?	Yes	The development comprises the demolition of the existing buildings which make up the former Holloway Prison and garages to the west which lead onto Trecastle Way. While operational, the Prison provided ancillary services on-site for the occupants of the prison. These ancillary services ceased on-site upon the Prison being made vacant and no further social or community uses have taken place. The Holloway Prison Site SPD (2018) refers to the prison as social infrastructure. The Development Management Policies DPD defines social infrastructure as community spaces/facilities, emergency services and education facilities, noting it includes facilities defined as community and social facilities. This definition is carried forward in the Draft Local Plan. The Holloway Prison Site SPD seeks a Women's Building as part of the redevelopment of the Site that incorporates safe space to support women in the criminal justice system and services for women. This is carried forward into the emerging allocation for the Site in the Draft Local Plan. Neither the SPD nor Draft Local Plan specify a minimum or maximum required size for the facility. LBI published a draft Women's Building Development Brief in June 2020 which sought a facility of between 800sqm to 1,200sqm.	Positive	No further measures are considered necessary.



		The development exceeds the range set out in the draft Women's Building Development Brief (June 2020) and includes the provision a 1,489sqm Women's Building located to Plot C. The facility incorporates safe space to support women in the criminal justice system and services for women. Internally, the Women's Building has been designed flexibly to enable the space to meet the needs of future operators. Indicative internal layouts are shown in the Design and Access Statement, which accompanies this application submission. The Women's Building is served by a dedicated and secure garden. In addition, the development provides 10,480sqm of public open space which will be publicly accessible for future occupants of the development and the wider community.		
Does the proposal assess the impact on health and social care services and has the local NHS been contacted?	Yes	The Socio-economic chapter of the ES (Chapter 7), prepared by WSP, assesses the effect of the proposed development on GP practices surrounding the site. As noted in the health infrastructure audit in Section 4 of this HIA, there are 13 GPs within 1.5km of the site, which have an aggregated GP: patient ratio of 1: 1,600, which is under the HUDU recommendation of 1: 1,800. All 13 of the GPs are accepting new patients. This indicates that there is additional capacity within the GPs surrounding the site. Moreover, it is unrealistic to assume all the new population will need to be enrolled at local GPs, as a proportion are likely to be already enrolled with local surgeries. The effect of the proposed development on local GP services is therefore considered to be insignificant. WSP has engaged with the LBI Public Health Team and the North Central London CCG regarding the scope of this HIA prior to its preparation, as noted in Section 2 (Approach and Methodology) and Section 4 (Healthcare	Neutral	No measures are considered necessary.
Does the proposal include the provision, or replacement of a healthcare facility and does the facility meet NHS requirements?	No	Infrastructure) of this HIA. The application site does not currently contain any health facilities, nor are any proposed. The proposal will therefore not result in the loss of any healthcare facilities.	Neutral	No measures are considered necessary.
Does the proposal assess the capacity, location and accessibility of other social infrastructure, eg schools and community facilities?	Yes	The Socio-economic chapter of the ES (Chapter 7), prepared by WSP, assesses the effect of the proposed development on primary and secondary schools surrounding the site. The assessment indicates that the proposed development is estimated to yield a requirement for 174 primary school places and 119 secondary school places. There are seven state funded primary schools within 1km of the site. As such, in a worst-case scenario in which none of the new child residents are currently enrolled at local primary schools, there would be a marginal deficit of two primary school pupil places. However, the effect on local schools is considered to be insignificant as it is highly unlikely that all of the new child population within the development will require new school places at local schools, as in reality a large proportion are likely to already be enrolled in a local school. There are nine state funded secondary schools within 2km of the site, which have a total surplus of 1,184 pupil places. As such, there is currently capacity across the secondary schools surrounding the site to comfortably accommodate the additional demand for 119 pupil places generated by the development. There will remain a surplus of 1,075 secondary school places. As a result, the effect on demand for secondary schools is considered to be insignificant.	Neutral	No measures are considered necessary.
Does the proposal explore opportunities for shared community use and co-location of services?	Yes	The proposals provides 10,480sqm of public open space, providing space for the local community to enjoy (both future residents at the site and the surrounding population).	Positive	No further measures are considered necessary.



A community use is also provided through the proposed Women's Building, which seeks to provide local women with a range of services, as previously noted.

The proposals also include 1,822sqm of commercial floorspace under Use Class E. This will allow flexible commercial units to be co-located next to the proposed residential units.

Table 5-3 - Access to open space and nature

Assessment criteria	Relevant?	Details/evidence	Potential health impact?	Recommended mitigation or enhancement actions
Does the proposal retain and enhance existing open and natural spaces?	Yes	The existing site does not contain any publicly accessible open spaces and, by its nature as a former prison, is closed off from the public. In contrast, the proposals include 10,480sqm of public open space, which will be open to all. The majority of the public open space is formed of the central Public Garden (public park) and is envisioned as an open and accessible park which provides an area for the community to gather, whilst also allowing pop-up activities such as food trucks and markets. The park includes a destination play area, encompassing a feature play tower with elevated play areas, bridges, climbing nets and a slide, along with eco-play trails under existing retained trees. Further details of the landscape proposals are included in the Open Space Recreation Assessment and Landscape Design Strategy, prepared by Exterior Architecture, which supports the planning application.	Positive	No further measures are considered necessary.
In areas of deficiency, does the proposal provide new open or natural space, or improve access to existing spaces?	Yes	While LBI benefits from a range of open spaces including parks and gardens, natural green spaces and community gardens, LBI is the most densely populated local authority in the country with one of the lowest amounts of greenspace per person. This results in intensive use of open spaces and areas of open space deficiency across the borough, as noted in the Core Strategy (2011). Adopted and draft planning policy suggests a standard of open space of 5.21sqm per resident and 2.6sqm per employee should be provided. The Socio-economic chapter of the ES (Chapter 7), prepared by WSP, includes an assessment of the proposed development on open space in the surrounding area and found that the proposal will provide 10,480sqm of public open space, which equates to 86% to 90% of the suggested standard taking into account the quantum of residents and the minimum and maximum estimated job creation. The provision therefore narrowly misses LBI's suggested standard. However, it is considered the open spaces in close proximity to the site including Caledonian Park and Paradise Park, would more than cater for the remaining marginal quantum. It is therefore concluded that the effect on demand for open space provision would be insignificant. In addition, the development provides further open space which will be publicly accessible along the Camden/Parkhurst Road frontage. This area comprises 1,463 sqm.	Neutral	No further measures are considered necessary.



Does the proposal provide a range of play spaces for children and young people?	Yes	As previously noted, the proposals include a range of play spaces, including a destination play area in the centre of the site. The Socio-economic chapter of the ES (Chapter 7), prepared by WSP, includes an assessment of the proposed development on play space against the Greater London Authority's (GLA) targets outlined in the Shaping Neighbourhoods: Play and Information Recreation SPD (2012). The assessment identifies that the proposal includes 5,292sqm of play space, compared to a requirement of 5,226sqm, based on the estimated child yield of the proposed development. The dedicated play space proposed therefore represents 101% of the GLA's requirement and it is concluded that the proposal will have a beneficial effect on play space provision. Child obesity rates are relatively high both within St George's ward and LBI more widely, as identified in the assessment of baseline conditions. The provision of a new public garden and play space will help to encourage children to be more active, both those living at the site and within the surrounding area, with the potential to reduce rates of child obesity. Further details of the play space provision are provided in the Open Space Recreation Assessment and Landscape Design Strategy, prepared by Exterior Architects.	Positive	No further measures are considered necessary.
Does the proposal provide links between open and natural spaces and the public realm?	Yes	The proposed development comprises 15 buildings which have been positioned to form a variety of public, communal and private spaces. The positioning of the buildings forms clear routes through the site, linking the public garden in the centre of the site with the surrounding areas and allowing easy pedestrian access throughout the site.	Positive	No further measures are considered necessary.
Are the open and natural spaces welcoming and safe and accessible for all?	Yes	The proposed development has been sensitively designed to ensure that it can be easily navigated by all people, including those with mobility problems or a disability. All aspects of the pedestrian routes through the site, including ramps, stairs and slopes, are designed with dimensions and gradients that meet the criteria of Building Regulations Approved Document M, Volume 2, Category 3A, and the relevant parts of BS 8300-1:2018 relating to features in external areas. The landscaped areas will be afforded natural surveillance from the future resident population at the site and positioning of dwellings throughout the site. Pedestrian routes have been designed to ensure that they are visually open, direct and well-used to increase the sense of safety and security.	Positive	No further measures are considered necessary.
Does the proposal set out how new open space will be managed and maintained?	Yes	Exterior Architecture has prepared a Landscape Management Plan (LMP) which accompanies the planning application. The LMP has been developed to ensure the long-term management of the landscaped setting while enabling it to contribute positively to the visual amenities of the area and create usable and valued spaces for the residents to enjoy. The details of the LMP are included in the Open Space Recreation Assessment and Landscape Design Strategy, prepared by Exterior Architecture.	Positive	No further measures are considered necessary.



Table 5-4 - Air quality, noise and neighbourhood amenity

Assessment criteria	Relevant?	Details/evidence	Potential health impact?	Recommended mitigation or enhancement actions
Does the proposal minimise construction impacts such as dust, noise, vibration and odours?	Yes	The application is accompanied by a Construction Environmental Management Plan (CEMP), prepared by London Square, which outlines a series of strategies, standards, best practice techniques and procedures that will be observed during the construction progress. The CEMP includes measures for minimising construction impacts, including dust, noise, vibration and pollution.	Neutral	No further measures are considered necessary.
Does the proposal minimise air pollution caused by traffic and energy facilities?	Yes	The Air Quality chapter of the ES (Chapter 8), prepared by AQ Consultants, assesses the impacts of the construction and operation of the proposed development on local air quality. The assessment outlines suitable mitigation measures to control dust pollution during the construction phase, whilst identifying that the impacts from construction vehicles is anticipated to be negligible. Impacts of traffic associated with the operational development will be insignificant and the proposal does not include any centralised combustion plant, as the energy strategy relies on air-source heat pumps. The assessment identifies that the proposed development will be air quality neutral. In addition, an air quality positive statement has been prepared, which sets out design and operational measures to reduce exposure to air pollution and maximise air quality benefits.	Neutral	No further measures are considered necessary.
Does the proposal minimise noise pollution caused by traffic and commercial uses?	Yes	The proposals include a range of measures to minimise noise pollution caused by traffic on the surrounding roads. To achieve the internal ambient noise level requirements in residential rooms, the following measures will be implemented: Mechanical ventilation and heat recovery systems providing "whole dwelling" ventilation (i.e. with closed windows); Acoustically rated glazing, specified as necessary; and Masonry wall constructions. Measures will also be implemented to ensure the residential properties above non-residential uses experience minimal noise pollution. Separating walls and floors between non-residential and residential uses are to be designed to be sufficiently robust to meet the requirements of the LBI Draft Local Plan (2019). Full details of the proposed noise mitigation measures are detailed in the Noise Impact Assessment, prepared by Max Fordham, which accompanies the planning application.	Neutral	No further measures are considered necessary.



Table 5-5 - Accessibility and active travel

Assessment criteria	Relevant?	Details/evidence	Potential health impact?	Recommended mitigation or enhancement actions
Does the proposal address the ten Healthy Streets indicators?	Yes	The principles of the ten Healthy Street indicators have been applied in the proposed development, as detailed in the Open Space Recreation Assessment and Landscape Design Strategy, prepared by Exterior Architecture. The planning application is supported by a Transport Assessment, prepared by Velocity, which has been prepared in accordance with Transport for London's (TfL) Healthy Streets Transport Assessment Guidance, including an Active Travel Zone assessment of routes to key travel destinations in the local area. In addition, a Healthy Street Check for designers has been completed for the proposed pedestrian crossing on Camden Road and section of Camden Road fronting the development and is included in the Transport Assessment that accompanies the planning application.	Positive	No further measures are considered necessary.
Does the proposal prioritise and encourage walking, for example through the use of shared spaces?	Yes	The proposed development will provide a high-quality environment with enhanced space for walking and cycling. The car-free nature of the development will help to encourage walking, whilst the proposals include attractive and welcoming walkways throughout the site, which are lined with trees and planting. The vehicular route through the site has a pedestrian priority zone towards the centre of the site, whilst there are several shared cycle and pedestrian routes across the site.	Positive	No further measures are considered necessary.
Does the proposal prioritise and encourage cycling, for example by providing secure cycle parking, showers and cycle lanes?	Yes	The proposed development is car-free, with the exception of Blue Badge disabled parking spaces for residential use only. This will therefore encourage residents to use active travel modes and public transport over the private car. The landscape design includes shared cycle and pedestrian routes across the site, allowing easy throughout the site. The development will provide cycle parking in accordance with the London Plan (2021) requirements, as follows: 1,855 long-stay and 62 short-stay spaces for the proposed dwellings; 4 long-stay and 6 short-stay spaces for the residents' facilities including concierge which is located to Plot D; and 38 long-stay and 44 short-stay spaces for the non-residential element of the proposals. With respect to the spaces for the residential units, accessible cycle parking is provided (20% of total spaces), for people with non-standard bicycles and those that struggle to use two-tier systems. These spaces will comprise 75% as Sheffield stands and 25% as Sheffield stands with increased space (for cargo bikes, hand-cranked bikes, trailers, buggies, tandems, tricycles which can be up to 2.5m long and need additional space). Long-stay cycle parking will be secure and covered. Short-stay cycle parking will be provided within the landscape as Sheffield stands. In addition, a shower will be provided for employees of the commercial uses in Plot B. The proposal includes the provision of three cycle connections to the site: two form Camden Road/Parkhurst Road and one to and from Trecastle Way.	Positive	No further measures are considered necessary.



Does the proposal connect public realm and internal routes to local and strategic cycle and walking networks?	Yes	The proposal connects to surrounding pedestrian routes in three places, with shared cycle/pedestrian routes connecting onto Camden Road/Parkhurst Road (two connections) and Trecastle Way. The proposals also include replacing the existing staggered crossing on Camden Road with a straight crossing, which will help to improve the pedestrian environment and safety at this junction. Improvements to the footway fronting the site on Camden/Parkhurst Road are also proposed, with the provision of new street trees and large ecological planting areas. These features will significantly enhance the public realm in this area and help to integrate and connect the site with the surrounding area.	Positive	No further measures are considered necessary.
Does the proposal include traffic management and calming measures to help reduce and minimise road injuries?	No	The proposed vehicular route through the site has been designed with a pedestrian priority zone towards the centre of the site, encouraging drivers to reduce speeds and create a safer pedestrian environment. In addition, the proposed improvements to the pedestrian crossing on Camden Road should lead to safety improvements by providing a signal crossing that responds to pedestrian desire lines. This intervention should reduce the number of pedestrians that cross the road away from the crossing.	Positive	No further measures are considered necessary.
Is the proposal well connected to public transport, local services and facilities?	Yes	The site has a PTAL rating of 6a, indicating that it is very well connected to public transport. There are several stations within walking distance of the site, including Caledonian Road Station (10-minute walk to the south east of the site), Tufnell Park Station (16-minute walk north west of the site) and Kentish Town Station (18-minute walk from the site). Furthermore, the site is a short walk from Holloway Road which has a wide range of services and facilities.	Positive	No further measures are considered necessary.
Does the proposal seek to reduce car use by reducing car parking provision, supported by controlled parking zones, car clubs and travel plans measures?	Yes	The proposed development is car-free, with the exception of 30 Blue Badge disabled parking spaces for residential use only. This will therefore encourage residents to use active travel modes and public transport over the private car. The site is located within a controlled parking zone (CPZ) which is already in operation. Future residents will not be permitted to apply for parking permits, which will further reduce car use. In addition, the proposal does not include car club spaces. This approach was agreed with Transport for London, to further reduce car use by future residents. During the construction phase, a staff Travel Plan will be prepared by the contractor as part of a detailed Construction Logistics Plan, to encourage the use of sustainable modes. No construction staff car parking will be provided on site, but cycle parking facilities will be provided to encourage the use of active travel.	Positive	No further measures are considered necessary.
Does the proposal allow people with mobility problems or a disability to access buildings and places?	Yes	The proposed development has been sensitively designed to ensure that it can be easily navigated by all people, including those with mobility problems or a disability. All aspects of the pedestrian routes through the site, including ramps, stairs and slopes, are designed with dimensions and gradients that meet the criteria of Building Regulations Approved Document M, Volume 2, Category 3A, and the relevant parts of BS 8300-1:2018 relating to features in external areas. Pedestrian routes are a minimum of two metres wide, so that two mobility scooter / wheelchair users can pass each other comfortably. All dwellings are served by at least two lifts, allowing people with mobility issues to easily access their homes.	Positive	No further measures are considered necessary.



Table 5-6 - Crime reduction and community safety

Assessment criteria	Relevant?	Details/evidence	Potential health impact?	Recommended mitigation or enhancement actions
Does the proposal incorporate elements to help design out crime?	Yes	The assessment of baseline conditions identified that the local neighbourhood (Islington 010E) is among the 20% most deprived neighbourhoods in England when considering crime. This measures the risk pf personal and material victimisation. It is therefore of great importance that the proposal is designed to minimise crime and create a feeling of safety and security. The masterplan has been designed to follow the principles of Secure by Design for Homes 2019 and Peabody's own secure homes design guide. Peabody own and manage its properties. There will be Peabody estates management on site with an estate management office located on site. Security of all residents is seen as a key part of the trusted brand that is Peabody and is taken extremely seriously. Should any particular concerns or repeated problems occur it will be brought to the attention of the management team who have the ability to implement security measures to prevent further disturbances. The design incorporates a range of measures to help minimise crime at the site, including: Vehicular and pedestrian routes have been designed to ensure that they are visually open, direct, well used; The communal and play space areas have been designed allow natural surveillance from nearby dwellings with safe and accessible routes for users to come and go; Dwelling frontages will be open to view, with walls, fences and hedges kept low and including combination of wall and railings; and CCTV will be installed to meet Peabody's own secure homes Design guide covering key areas and part of the Peabody's general security and management of the entire estate. In addition, the project team consulted with the Met Police during the design of the proposals to discuss security at the site. Further details of the proposed security measures are included in the Design and Access Statement, prepared by AHMM, which supports the planning application.	Positive	No further measures are considered necessary.
Does the proposal incorporate design techniques to help people feel secure and avoid creating 'gated communities'?	Yes	The proposed development involves the redevelopment of a former prison, which is gated from the public by its very nature. In contrast, the proposals include the provision of a public park at the centre of the site, with links and routes through to the surrounding neighbourhoods. The proposals will therefore open the site up to the public and avoid creating a gated community. In addition, the design of the proposal has incorporated a range of techniques and features to help future residents and users to feel safe and secure, as detailed in the above box regarding designing out crime.	Positive	No further measures are considered necessary.
Does the proposal include attractive, multi-use public spaces and buildings?	Yes	As previously noted, the proposals provide 10,480sqm of public open space, which will be open to all. The majority of the public open space is formed of the central Public Garden (public park) is envisioned as an open and accessible park which provides an area for the community to gather, whilst also allowing pop-up activities such as food trucks and markets. The flexible lawn area of the public garden provides an open space for events, such as outdoor cinemas and	Positive	No further measures are considered necessary.



		sports. The park also includes a destination play area, providing a community asset. The landscape design throughout the site will be of a very high-quality, further details of which are outlined in the Open Space Recreation Assessment and Landscape Design Strategy, prepared by Exterior Architecture. The proposals also include 1,822sqm of commercial floorspace (Use Class E), which has the potential to provide a range of flexible commercial uses, as well as		
		the dedicated Women's Building. The proposals have been subject to extensive public consultation, which has		
Has engagement and consultation been carried out with the local community and voluntary sector?	Yes	been carried out with input from LBI Councillors and Officers, along with community groups associated with the project. The consultation has included the following activities since March 2019: Site tours with local residents, groups, LBI Councillors, LBI Officers, former staff and inmates; Three public consultation events (face to face), up to March 2020; Briefings with local Councillors, activists, journalists, GLA officers and local residents; Virtual meetings with local activists; Publication of a project website (http://hollowayprisonconsultation.co.uk/) with scheme information, consultation materials and contact details for the consultation team; Three 'at a distance' consultations since March 2020 – held via the project website and by post; Flyers distributed to a large area around the site, comprising approximately 10,000 residential and business addresses; Social media adverts to advertise virtual consultation events, reaching a potential audience of 70,000; and Adverts in local newspapers promoting consultation events/'at a distance' consultations. Further details of the public consultation undertaken are outlined in the Statement of Community Involvement, prepared by Kanda Consulting, which supports the planning application.	Positive	No further measures are considered necessary.

Table 5-7 - Access to healthy food

Assessment criteria	Relevant?	Details/evidence	Potential health impact?	Recommended mitigation or enhancement actions
Does the proposal facilitate the supply of local food, ie allotments, community farms and farmers' markets?	Yes	The proposal includes 1,822sqm of flexible commercial uses (Use Class E), which could facilitate the supply of local food through either retail units or cafés/restaurants. In addition, the public garden in the centre of the site has the potential for pop-up activities, such as food trucks and markets, which could facilitate the supply of local food. The dedicated garden Women's Garden (adjacent to the Women's Building) includes an area of allotments, which will be managed by staff and patient volunteers. Similarly, the communal rooftop gardens include accessible community growing spaces, providing planting beds for residents to grow fruit, vegetables and herbs. In addition, the nature garden would include an area of children's productive garden plots, along with fruit trees and a meadow and orchard grove.	Positive	No further measures are considered necessary.



Is there a range of retail uses, including food stores and smaller affordable shops for social enterprises?	Yes	As noted above, the proposal includes 1,822sqm of flexible commercial uses (Use Class E), which could include a range of retail uses.	Positive	No further measures are considered necessary.
Does the proposal avoid contributing towards an over- concentration of hot food takeaways in the local area?	Yes	The proposal does not include the provision of any hot food takeaways and therefore avoids contributing to an over-concentration of hot food takeaways in the local area. Given the recent change to the Use Classes Order, hot food takeaways are now Class Sui Generis and therefore could not come forward within the Class E flexible commercial space delivered in the development without securing separate planning consent.	Positive	No further measures are considered necessary.

Table 5-8 - Access to work and training

Assessment criteria	Relevant?	Details/evidence	Potential health impact?	Recommended mitigation or enhancement actions
Does the proposal provide access to local employment and training opportunities, including temporary construction and permanent 'end-use' jobs?	Yes	The proposed development will generate both temporary employment through the construction period and permanent 'end-use' employment through the operation of the development. It is estimated that the construction of the proposed development will support approximately 1,660 net additional person years of employment. The complete and operational development would include a range of commercial uses that would generate employment at the site across various sectors. In addition, employment will be generated in the proposed extra care residential units, as well as concierge services supporting the residential uses. It is estimated that the proposed development would support between 53 to 309 net additional jobs across the region, of which between 28 to 166 would be located within LBI. Further details of the temporary and permanent employment associated with the proposed development are included in the Socio-economic chapter of the ES (Chapter 7), prepared by WSP.	Positive	No further measures are considered necessary.
Does the proposal provide childcare facilities?	Yes	The proposal includes the provision of 1,822sqm of flexible commercial uses (Use Class E), which could include a creche, day nursery or day centre.	Positive	No further measures are considered necessary.
Does the proposal include managed and affordable workspace for local businesses?	Yes	The development does not include the provision of dedicated affordable workspace. The proposal includes the provision of 1,822sqm of flexible commercial uses (Use Class E), which could include the provision of office space. However, consent is sought for flexible Class E floorspace and the breakdown of this space is not currently known. If office space is provided it could well be occupied by local businesses.	Neutral	No further measures are considered necessary.
Does the proposal include opportunities for work for local people via local procurement arrangements?	Yes	The construction of the proposal will generate employment and training opportunities for local people. Peabody has committed to the following measures: Construction apprenticeships Provision of 51 26-week apprenticeship placements; Target of 30% of apprenticeships to women;	Positive	No further measures are considered necessary.



 All apprentices at level 3 and above will be paid a London Living Wage; Provide a range of employment policies through supply chain to promote diversity and inclusion; continuous professional development; well-being; net zero (e.g. cycle to work); and flexible and part-time working where the role permits; and Work in partnership with Islington's employment brokerage service to advertise and promote all opportunities onsite.
<u>Procurement</u>
 Host 'Meet the Buyer' events with local businesses to discuss packages available; Provide procurement training to help local business be 'tender ready'; and List opportunities on CompeteFor.com, which is an inclusive local procurement platform.
Skills Centre
 Provision of on-site classroom cabin available throughout the construction period for green skills training, CSCS training and other potential training programmes.

Table 5-9 - Social cohesion and inclusive design

Assessment criteria	Relevant?	Details/evidence	Potential health impact?	Recommended mitigation or enhancement actions
Does the proposal consider health inequalities by addressing local needs through community engagement?	Yes	As previously noted, the proposals have been subject to extensive public consultation since March 2019, including six formal consultation events, 50 meetings with local community groups and a number of workshops with local residents. The consultation identified some key concerns of local residents, including a desire to maximise green space and affordable housing provision in the proposal. The proposed development will address these priorities trough delivering 985 new homes, 60% of which will be affordable, in an area which has high levels of deprivation relating to barriers to housing and services locally. The proposals will also provide 10,480sqm of public open space in a site which was previously shut off from the public. The applicant made a number of changes to the proposed development in response to feedback received during the public consultation, including: Removed play space from the roof areas, but retained resident access for amenity uses Reduced heights of the majority of buildings to under 30 meters; Improved the number of dual aspect homes throughout the masterplan evolution to reach 96%; Maximised the number of photovoltaic (PV) panels on rooftops; Included green and biodiverse roof spaces wherever possible; Provided a range of cycle storage spaces throughout the site; Increased the size of the Women's Building to 1,489sqm; Included 60 extra care units at social rent; Provided 1,330 sqm residents' facility, open to all residents; and Provide 51 apprenticeship placements during construction. Further details of the consultation undertaken and feedback received are outlined in the Statement of Community Involvement, prepared by Kanda Consulting.	Positive	No further measures are considered necessary.



Does the proposal connect with existing communities, ie layout and movement which avoids physical barriers and severance and land uses and spaces which encourage social interaction?	Yes	The proposed development will open up a currently walled prison site and create new routes through the sites into a central public garden, removing the existing barriers and increasing the permeability of the site. The new public garden will provide a space in which people of all ages can socialise and relax, with a large play area for children, picnic tables, hammocks beneath trees, and pedestrian trails through the landscaped areas. The public garden will also encourage people from the wider community to come into and use the site, helping to integrate the new development into its surroundings.	Positive	No further measures are considered necessary.
Does the proposal include a mix of uses and a range of community facilities?	Yes	The proposals include a mix of residential, commercial and community uses. Community facilities are provided through the new public garden and the aforementioned Women's Building. The proposal also includes 1,822sqm of commercial floorspace under Use Class E.	Positive	No further measures are considered necessary.
Does the proposal provide opportunities for the voluntary and community sectors?	Yes	The development provides a 1,489sqm Women's Building (Use Class F.2) split across the lower and upper ground floors of Plot C, fronting Parkhurst Road. Internally, the Women's Building has been designed flexibly to enable the space to meet the needs of future operators. Indicative internal layouts are shown in the Design and Access Statement, prepared by AHMM Architects which accompanies this application submission. The Women's Building is served by a dedicated and secure garden. The women's building incorporates safe space to support women in the criminal justice system and services for women.	Positive	No further measures are considered necessary.
Does the proposal take into account issues and principles of inclusive and age-friendly design?	Yes	The proposal includes the provision of an extra care centre with 60 apartments with associated facilities, providing accommodation for elderly people. In addition, all proposed dwellings have been designed to comply with at least M4(2) building standard (accessible and adaptable dwellings), whilst mobility scooter storage is provided within each of the plots in the site. Furthermore, the proposed development has been sensitively designed to ensure that it can be easily navigated by all people, including those with mobility problems or a disability.	Positive	No further measures are considered necessary.

Table 5-10 - Minimising the use of resources

Assessment criteria	Relevant?	Details/evidence	Potential health impact?	Recommended mitigation or enhancement actions
Does the proposal make best use of existing land?	Yes	The proposals involve the redevelopment of a vacant former prison site and the provision of 985 new homes, along with commercial floorspace and community use through the Women's Building. The proposals include a high proportion of affordable housing at 60% of the total dwellings proposed. The proposed development will therefore help to meet the demand for new housing in the LBI, as well as providing affordable homes for which there is a significant need.	Positive	No further measures are considered necessary.
Does the proposal encourage recycling, including building materials?	Yes	The proposals include the provision of recycling facilities for each of the plots across the site (the masterplan is broken down into plots A to E). The planning application is accompanied by a Circular Economy Statement, prepared by Hoare Lea, which includes a Pre-Demolition Audit at Appendix B,	Positive	No further measures are considered necessary.



		prepared by WPS Compliance Consulting. The Audit aims to improve the sustainable management of waste materials arising from the demolition of the former prison buildings and the surrounding external hard landscaped areas. The Audit identifies the following key findings: 99.55% of the building demolition waste is targeted for recycling and 0.45% is targeted for disposal; and 100% of the material from the external hard landscaped areas is targeted for disposal. Further details are outlined in the Pre-Demolition Audit, which accompanies the planning application.		
Does the proposal incorporate sustainable design and construction techniques?	Yes	A Net Zero Carbon Feasibility Study, prepared by Hoare Lea, supports the planning application. This study has been undertaken to consider the projects ability and options to be defined as Net Zero against the UK Green Building Council framework definition to help achieve Net Zero. The Net Zero Feasibility Study outlines the anticipated embodied and operational carbon results for Block C of the proposed development. In terms of embodied carbon, Block C does not meet the London Energy Transformation Initiative (LETI) or Royal Institute of British Architects (RIBA) 2030 targets but has made a positive step from the Business as Usual performance towards the 2030 targets. Additional work will be undertaken in the post-planning design stage to further reduce carbon emissions where feasible. The operational energy performance of the residential element of Block C has been reduced considerably through the improvement of the façade performance and system efficiencies. More detailed analysis will be undertaken as the design progresses and further information is understood about the usage of the spaces in the non-residential areas to help increase carbon reductions. Further details are outlined in the Net Zero Carbon Feasibility Study, which accompanies the planning application. The BREEAM assessment and the potential rating which can be achieved has been a key consideration for the team during the design of the proposals and a target of BREEAM 'Excellent' has been set for the non-residential components of the scheme.	Positive	No further measures are considered necessary.

Table 5-11 - Climate change

Assessment criteria	Relevant?	Details/evidence	Potential health impact?	Recommended mitigation or enhancement actions
Does the proposal incorporate renewable energy?	Yes	The proposed development will include approximately 1,500sqm of PV panels, with a total of approximately 220 kWp of energy. Air Source Heat Pumps (ASHP) will be implemented at the site to provide space heating, cooling and proportion of domestic hot water requirements. The ASHP with PV energy strategy is anticipated to result in carbon emission reductions of approximately 52.8% for the domestic elements and 38.1% for the non-domestic elements compared to a Part L 'gas boiler baseline'. Further details of the Energy Strategy are outlined in the Sustainable Design and Construction Statement, prepared by Hoare Lea, which accompanies the planning application.	Positive	No further measures are considered necessary.



Does the proposal ensure that buildings and public spaces are designed to respond to winter and summer temperatures, ie ventilation, shading and landscaping?	Yes	The proposed dwellings have been designed to respond to summer and winter temperatures. The layout of the dwellings, along with the arrangement of balconies and positioning of windows has been carefully considered through the design of the proposal, to maximise the effectiveness of passive measures. The planning application is accompanied by an Assessment of Overheating Risk, prepared by Hoare Lea, which indicates that the building design and building services design have maximised all available measures to minimise heat generation within the dwellings, to reduce the amount of heat entering the building, and to passively and mechanically ventilate the dwellings in line with the cooling hierarchy in Policy SI4 of the London Plan (2021) and Policy S6 of LBI's Draft Local Plan. The proposals include a comprehensive landscaping scheme, including the retention of existing trees where possible and the provision of new trees and planting across the site, providing shaded areas for residents at the site and the wider public.	Positive	No further measures are considered necessary.
Does the proposal maintain or enhance biodiversity?	Yes	The proposals include the creation of significant green infrastructure including tree planting and the creation of ecological areas to provide habitats for birds, bats as well as attractive, accessible green space for people. The Ecology chapter of the ES (Chapter 10), which accompanies the planning application, indicates that the site currently has relatively limited ecological value. There is anticipated to be minor beneficial residual effects in respect of change of habitats and provision for protected/notable species associated with the complete and operational development. Overall, the proposed development will provide a biodiversity net gain of 16.87%.	Positive	No further measures are considered necessary.
Does the proposal incorporate sustainable urban drainage techniques?	Yes	The proposals include a range of sustainable urban drainage techniques to ensure compliance with London Plan (2021) requirements for surface water runoff. The proposals include permeable paving, rain gardens and green roofs throughout the development. Further details of the proposed measures are outlined in the Flood Risk Assessment and Drainage Report Including Foul Drainage, prepared by Waterman Infrastructure and Environment, which accompanies the planning application.	Positive	No further measures are considered necessary.



CONSIDERATION OF VULNERABLE GROUPS

- 5.1.4. As noted in Section 2, the main vulnerable groups that have been considered in this HIA are:
 - People of low income;
 - People who lack access to housing; and
 - Disabled people.
- 5.1.5. We consider below how the proposed development could specifically impact the health of these vulnerable groups.
- 5.1.6. The planning application is supported by an Equalities Impact Assessment, prepared by WSP, which provides a detailed assessment of the proposed development on the protected groups identified by Section 149 of the Equality Act 2010.

PEOPLE OF LOW INCOME

- 5.1.7. The local profile in Section 3 of this HIA identified that the average earnings among LBI's residents is notably higher than both the London and national average. However, there is a high proportion of people claiming out-of-work benefits in St George's ward (9%) compared to the rate across LBI (7.7%), which are both higher than the Great Britain average of 6.4%. Similarly, there are high levels of income deprivation within the local neighbourhood, with Islington 010E among the 24% most deprived areas in England.
- 5.1.8. The issue of low income affects people's access to housing, with the housing affordability ratio in Islington in 2020¹⁰ standing at 13.26 (the ratio of median house price to median gross annual earnings). This indicates that the median house price in Islington is over 13 times the median gross annual income of LBI's residents.
- 5.1.9. The proposed development will help to tackle the issue of housing affordability, with 60% of the proposed dwellings being affordable homes (593 dwellings), for which there is a significant need locally. In addition, 70% of the affordable homes will be social rent (415 dwellings), providing homes for people on low incomes.
- 5.1.10. Furthermore, the proposed development will generate employment through its construction and operation. It is estimated that the construction of the proposal will generate 1,660 net additional person years of construction employment. The operation of the proposed development is estimated to support between approximately 53 to 308 net additional jobs regionally, of which between 28 and 165 will be located in LBI. These construction and operation jobs could be taken up by local people, with the potential to reduce unemployment locally, which is higher in St George's ward and Islington (9.2% of the population as of 2011) than across England and Wales (7.6% as of 2011).
- 5.1.11. It is therefore considered that the proposed development will have a positive impact on people of low income.

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¹⁰ ONS (2021) House price (existing dwellings) to residence-based earning ratio. Available at: https://www.ons.gov.uk/peoplepopulationandcommunity/housing/datasets/housepriceexistingdwellingstoreside ncebasedearningsratio



PEOPLE WHO LACK ACCESS TO HOUSING

- 5.1.12. There is a considerable need for housing in Islington. The London Plan (2021) sets LBI an annual housing target of 775 new homes between 2019/20 to 2028/29 (ie 7,750 over the 10-year period).
- 5.1.13. In addition, the assessment of baseline conditions identified that there are high levels of deprivation surrounding barriers to housing and services locally, with Islington 010E among the 20% most deprived neighbourhoods in England. The barriers to housing and services rank measures both 'geographical barriers', which relate to the physical proximity of local services, and 'wider barriers' which includes issues relating to access to housing such as affordability and homelessness. The issue of housing affordability is particularly evident when considering the aforementioned housing affordability ratio, with the median house price in Islington over 13 times the median gross annual income of LBI's residents.
- 5.1.14. The proposed development will deliver 985 new homes, 60% of which will be affordable, which is above LBI's requirement of 50% affordable housing outlined at Policy CS 12 of the Core Strategy (2011) and Draft Local Plan Policy H3. The proposal will therefore make a significant contribution to Islington's housing need and help to combat issues surrounding housing deprivation and a lack of affordable housing.
- 5.1.15. The proposal is therefore considered to have a positive impact on people who lack access to housing.

DISABLED PEOPLE

- 5.1.16. As noted in the assessment of baseline conditions, the 2011 Census identified that 16.2% of people living in St George's ward had a limiting long-term illness or disability. This rate is higher than across LBI as a whole, which stood at 15.7%, however these figures are lower than the England average of 17.6%. There are also high levels of deprivation within the local neighbourhood when considering the health and disability domain, with Islington 010E ranked among the 13% most deprived areas in England.
- 5.1.17. The proposed development will provide 120 wheelchair homes, including 89 wheelchair accessible units and 31 wheelchair adaptable units. The wheelchair homes are across a range of tenures, including social rent, intermediate and market.
- 5.1.18. Furthermore, the proposal has been sensitively designed to ensure that it can be easily navigated by all people, including those with mobility problems or a disability. All aspects of the pedestrian routes through the site, including ramps, stairs and slopes, are designed with dimensions and gradients that meet the criteria of Building Regulations Approved Document M, Volume 2, Category 3A. These measures ensure that the proposed open spaces can be accessed by all, whilst accessible picnic benches are provided in the public garden. In addition, accessible play features are provided in the public garden at the centre of the site, allowing children with a disability or mobility issues to make use of this space.
- 5.1.19. The only car parking proposed on site is 30 Blue Badge disabled parking spaces. Accessible cycle parking is also provided (20% of total spaces) for people with non-standard bicycles and those that struggle to use two-tier systems. These spaces will comprise 75% as Sheffield stands and 25% as Sheffield stands with increased space (for cargo bikes, hand-cranked bikes, trailers, buggies, tandems, tricycles which can be up to 2.5m long and need additional space).
- 5.1.20. The proposal is therefore considered to have a positive impact on disabled people.



SUMMARY

- 5.1.21. The assessment of health impacts has identified that the vast majority of the anticipated health impacts will be positive. Across the 51 questions included in the HUDU Rapid HIA Tool, the proposed development is anticipated to have the following health impacts:
 - 43 positive impacts;
 - 8 neutral impacts; and
 - 0 negative impacts.

6

CONCLUSIONS





6 CONCLUSIONS

- 6.1.1. WSP has undertaken an HIA of the proposed development at the former Holloway Prison site.
- 6.1.2. In evaluating the health impacts of the scheme, the HIA has addressed the 51 questions raised by the London HUDU's Rapid Health Impact Assessment Tool, for each of the categories as listed below in **Table 6.1**.
- 6.1.3. This HIA has considered the socio-economic profile of the local area through examining different spatial scales, including the local neighbourhood (Islington 010E), the local ward of St George's and LBI, whilst drawing on national comparisons.
- 6.1.4. **Table 6.1** below summarises the effects of the scheme on a question by question basis. The table demonstrates that the proposed development will primarily have a positive health impact.
- 6.1.5. Across the 51 questions, the proposed development is anticipated to have the following health impacts:
 - 43 positive impacts;
 - 8 neutral impacts; and
 - 0 negative impacts.

Table 6.1 Summary table of assessed health impacts across all sub-categories

Theme	Positive Impact	Negative Impact	Neutral Impact	N/A	Total
Housing design and affordability	6	0	0	0	6
Access to health and social care services and other social infrastructure	2	0	3	0	5
Access to open space and nature	5	0	1	0	6
Air quality, noise and neighbourhood amenity	0	0	3	0	3
Accessibility and active travel	8	0	0	0	8
Crime reduction and community safety	4	0	0	0	4
Access to healthy food	3	0	0	0	3
Access to work and training	3	0	1	0	4
Social cohesion and inclusive design	5	0	0	0	5
Minimising the use of resources	3	0	0	0	3
Climate Change	4	0	0	0	4
Total	43	0	8	0	51

6.1.6. It can therefore be concluded that the proposed development will overall have a positive impact on the health and wellbeing of on the local population and future residents and employees at the site.

Appendix A

LONDON HEALTHY URBAN
DEVELOPMENT UNIT RAPID HEALTH
IMPACT ASSESSMENT TOOL
(FOURTH EDITION, OCTOBER 2019)





Appendix B

MAPS OF LOCAL HEALTHCARE INFRASTRUCTURE





Aldermary House 10-15 Queen Street London

wsp.com

Appendix A

LONDON HEALTHY URBAN
DEVELOPMENT UNIT RAPID HEALTH
IMPACT ASSESSMENT TOOL
(FOURTH EDITION, OCTOBER 2019)



1 Housing desig an affordabilit

Assessmen criteri	Relevant	Details/evidenc	Potentia healt impact	Recommende mitigatio o enhancemen action
Doe th proposa see t mee al 1 desig criteri o th Lifetim Home Standar o mee Buildin Regulatio requiremen M (2)	☐ Ye ☐ N ☐ N/		☐ Positiv ☐ Negativ ☐ Neutra ☐ Uncertai	
Doe th proposa addres th housin need o olde people i extr car housing sheltere housing lifetim home an wheelchai accessibl homes	☐ Ye ☐ N ☐ N/		☐ Positiv ☐ Negativ ☐ Neutra ☐ Uncertai	
Doe th proposa includ home tha ca b adapte t suppor independen livin fo olde an disable people	☐ Ye ☐ N ☐ N/		☐ Positiv ☐ Negativ ☐ Neutra ☐ Uncertai	
Doe th proposa promot goo desig throug layou an orientation meetin interna spac standards	☐ Ye ☐ N ☐ N/		☐ Positiv ☐ Negativ ☐ Neutra ☐ Uncertai	
Doe th proposa includ rang o housin type an sizes includin affordabl housin respondin t loca housin needs	☐ Ye ☐ N ☐ N/		☐ Positiv ☐ Negativ ☐ Neutra ☐ Uncertai	
Doe th proposa contai home tha ar highl energ efficien (e hig SA rating)	☐ Ye ☐ N ☐ N/		☐ Positiv ☐ Negativ ☐ Neutra ☐ Uncertai	

2 Access to health and social care services an othe socia infrastructur

Assessmen criteri	Relevant	Details/evidenc	Potentia healt impact	Recommende mitigatio o enhancemen action
Doe th proposa retai o re-provid existin socia infrastructure?	☐ Ye ☐ N ☐ N/		☐ Positiv ☐ Negativ ☐ Neutra ☐ Uncertai	
Doe th proposa asses th impac o healt an socia car service an ha th loca NH bee contacted	☐ Ye ☐ N ☐ N/		☐ Positiv ☐ Negativ ☐ Neutra ☐ Uncertai	
Doe th proposa includ th provision o replacemen o healthcar facilit an doe th facilit mee NH requirements?	☐ Ye ☐ N ☐ N/		☐ Positiv ☐ Negativ ☐ Neutra ☐ Uncertai	
Doe th proposa asses th capacity locatio an accessibilit o othe socia infrastructure e school an communit facilities	☐ Ye ☐ N ☐ N/		☐ Positiv ☐ Negativ ☐ Neutra ☐ Uncertai	
Doe th proposa explor opportunitie fo share communit use a d c - locati n f service	□ Y □ □ N		☐ Positi ☐ Negati ☐ Neutr ☐ Uncerta	

3 Access to open space and nature

Assessment criteria	Relevant?	Details/evidence	Potential health impact?	Recommended mitigation or enhancement actions
Does the proposal retain and enhance existing open and natural spaces?	☐ Yes ☐ No ☐ N/A		☐ Positive ☐ Negative ☐ Neutral ☐ Uncertain	
In areas of deficiency, does the proposal provide new open or natural space, or improve access to existing spaces?	☐ Yes ☐ No ☐ N/A		☐ Positive ☐ Negative ☐ Neutral ☐ Uncertain	
Does the proposal provide a range of play spaces for children and young people?	☐ Yes ☐ No ☐ N/A		☐ Positive ☐ Negative ☐ Neutral ☐ Uncertain	
Does the proposal provide links between open and natural spaces and the public realm?	☐ Yes ☐ No ☐ N/A		☐ Positive ☐ Negative ☐ Neutral ☐ Uncertain	
Are the open and natural spaces welcoming and safe and accessible for all?	☐ Yes ☐ No ☐ N/A		☐ Positive ☐ Negative ☐ Neutral ☐ Uncertain	
Does the proposal set out how new open space will be managed and maintained?	☐ Yes ☐ No ☐ N/A		☐ Positive ☐ Negative ☐ Neutral ☐ Uncertain	

4 Air quality, noise and neighbourhood amenity

Assessment criteria	Relevant?	Details/evidence	Potential health impact?	Recommended mitigation or enhancement actions
Does the proposal minimise construction impacts such as dust, noise, vibration and odours?	☐ Yes ☐ No ☐ N/A		☐ Positive ☐ Negative ☐ Neutral ☐ Uncertain	
Does the proposal minimise air pollution caused by traffic and energy facilities?	☐ Yes ☐ No ☐ N/A		☐ Positive ☐ Negative ☐ Neutral ☐ Uncertain	
Does the proposal minimise noise pollution caused by traffic and commercial uses?	☐ Yes ☐ No ☐ N/A		☐ Positive ☐ Negative ☐ Neutral ☐ Uncertain	

5 Accessibility and active travel

Assess ent crit ria	R lev nt	Details/evidence	Potential health impact?	Recommended mitigation or enhancement actions
oes the prop sal add ess the ten Hea thy Str ets indicat rs?	☐ Y s ☐ o ☐ N/A		☐ Positive ☐ Negative ☐ Neutral ☐ Uncertain	
oes the prop sal priori ise and encou age walk ng, for exa ple thr ugh the use of sh red spaces?	☐ Ye ☐ o ☐ /A		☐ Positive ☐ Negative ☐ Neutral ☐ Uncertain	
oes the prop sal priori ise and encou age cycl ng, for examp e by prov ding s cure cycle pa king, show rs an cycle lan s?	☐ Ye ☐ N ☐ N A		☐ Positive ☐ Negative ☐ Neutral ☐ Uncertain	
D es the p oposal onnect publi re lm and i ternal r utes o l cal and s rateg c c cle and walking netwo ks?	☐ Yes ☐ ☐ A		☐ Positive ☐ Negative ☐ Neutral ☐ Uncertain	
oes the roposal include traffic ma age ent and calming ea ures to hel re uce and inim se road i ju ies	☐ Yes ☐ □ □ N/A		☐ Posi ve ☐ Negat ☐ utral ☐ Uncertain	
Is the ropo al well c nn cted t public tr nspor, local ervices and facilities?	☐ Yes ☐ No ☐ N A		☐ P sitive ☐ Negative ☐ Neutral ☐ Uncertain	

Assessment criteria	Relevant?	Details/evidence	Potential health impact?	Recommended mitigation or enhancement actions
Does the proposal seek to reduce car use by reducing car parking provision, supported by controlled parking zones, car clubs and travel plans measures?	☐ Yes ☐ No ☐ N/A		☐ Positive ☐ Negative ☐ Neutral ☐ Uncertain	
Does the proposal allow people with mobility problems or a disability to access buildings a d place	□ Y □ □ N		☐ Positi ☐ Negati ☐ Neutr ☐ Uncerta	

6 Crime reduction and community safety

Assessment criteria	Relevant?	Details/evidence	Potential health impact?	Recommended mitigation or enhancement actions
Does th proposa incorporat element t hel desig ou crime?	☐ Yes ☐ No ☐ N/A		☐ Positive ☐ Negative ☐ Neutral ☐ Uncertain	
Doe th proposa incorporat desig technique t hel peopl fee secure a d avo d creati g 'gat d communities?	☐ Yes ☐ No ☐ N/A		☐ Positive ☐ Negative ☐ Neutral ☐ Uncertain	
Do st e propos l inclu e attractiv , multi-u e publ c spac s a d buildings?	☐ Yes ☐ No ☐ N/A		☐ Positive ☐ Negative ☐ Neutral ☐ Uncertain	
Has engagem nt nd consultat on b en carr ed ut w th he lo al commun ty nd volunt ry sect r?	□ s □ o □		☐ Posit e ☐ Negat e ☐ Neut I ☐ Uncert	

7 Access to healthy food

Assessment criteria	Relevant?	Details/evidence	Potential health impact?	Recommended mitigation or enhancement actions
Does the proposal facilitate the supply of local food, ie allotments, community farms and farmers' markets?	☐ Yes ☐ No ☐ N/A		☐ Positive ☐ Negative ☐ Neutral ☐ Uncertain	
Is there a range of retail uses, including food stores and smaller affordable shops for social enterprises?	☐ Yes ☐ No ☐ N/A		☐ Positive ☐ Negative ☐ Neutral ☐ Uncertain	
Does the proposal avoid contributing towards an over-concentration of hot food takeaways in the local area?	☐ Yes ☐ No ☐ N/A		☐ Positive ☐ Negative ☐ Neutral ☐ Uncertain	

8 Access to work and training

Assessment criteria	Relevant?	Details/evidence	Potential health impact?	Recommended mitigation or enhancement actions
Does the proposal provide access to local employment and training opportunities, including temporary construction and permanent 'end-use' jobs?	☐ Yes ☐ No ☐ N/A		☐ Positive ☐ Negative ☐ Neutral ☐ Uncertain	
Does the proposal provide childcare facilities?	☐ Yes ☐ No ☐ N/A		☐ Positive ☐ Negative ☐ Neutral ☐ Uncertain	
Does the proposal include managed and affordable workspace for local businesses?	☐ Yes ☐ No ☐ N/A		☐ Positive ☐ Negative ☐ Neutral ☐ Uncertain	
Does the proposal include opportunities for work for local people via local procurement arrangements?	☐ Yes ☐ No ☐ N/A		☐ Positive ☐ Negative ☐ Neutral ☐ Uncertain	

9 Social cohesion and inclusive design

Assessment criteria	Relevant?	Details/evidence	Potential health impact?	Recommended mitigation or enhancement actions
Does the proposal consider health inequalities by addressing local needs through community engagement?	☐ Ye ☐ o ☐ /A		☐ Positive ☐ Negative ☐ Neutral ☐ Uncertain	
Does the proposal connect with existing communities, ie layout and movement which avoids physical barriers and severance and land uses and spaces which encourage social interaction?	☐ Ye ☐ N ☐ N A		☐ Positive ☐ Negative ☐ Neutral ☐ Uncertain	
Does the proposal include a mix of uses and a range of community facilities?	☐ Yes ☐ No ☐ N A		☐ Positive ☐ Negative ☐ Neutral ☐ Uncertain	
Does the proposal provide opportunities for the voluntary and community sectors?	□ □ □ N/A		☐ Positi ☐ Negat e ☐ Neutra ☐ tain	
Does the proposal take into account issues and principles of inclusive and age-friendly design?	☐ Yes ☐ No ☐ N/A		☐ Positive ☐ Negative ☐ Neutral ☐ Uncertain	

10 Minimising the use of resources

Assessment criteria	Relevant?	Details/evidence	Potential health impact?	Recommended mitigation or enhancement actions
Does the proposal make best use of existing land?	☐ Yes ☐ No ☐ N/A		☐ Positive ☐ Negative ☐ Neutral ☐ Uncertain	
Does the proposal encourage recycling, including building materials?	☐ Yes ☐ No ☐ N/A		☐ Positive ☐ Negative ☐ Neutral ☐ Uncertain	
Does the proposal incorporate sustainable design and construction techniques?	☐ Yes ☐ No ☐ N/A		☐ Positive ☐ Negative ☐ Neutral ☐ Uncertain	

11 Climate change

Assessment criteria	Relevant?	Details/evidence	Potential health impact?	Recommended mitigation or enhancement actions
Does the proposal incorporate renewable energy?	☐ Yes ☐ No ☐ N/A		☐ Positive ☐ Negative ☐ Neutral ☐ Uncertain	
Does the proposal ensure that buildings and public spaces are designed to respond to winter and summer temperatures, ie ventilation, shading and landscaping?	☐ Yes ☐ No ☐ N/A		☐ Positive ☐ Negative ☐ Neutral ☐ Uncertain	
Does the proposal maintain or enhance biodiversity?	☐ Yes ☐ No ☐ N/A		☐ Positive ☐ Negative ☐ Neutral ☐ Uncertain	
Does the proposal incorporate sustainable urban drainage techniques?	☐ Yes ☐ No ☐ N/A		☐ Positive ☐ Negative ☐ Neutral ☐ Uncertain	

Appendix B

MAPS OF LOCAL HEALTHCARE INFRASTRUCTURE

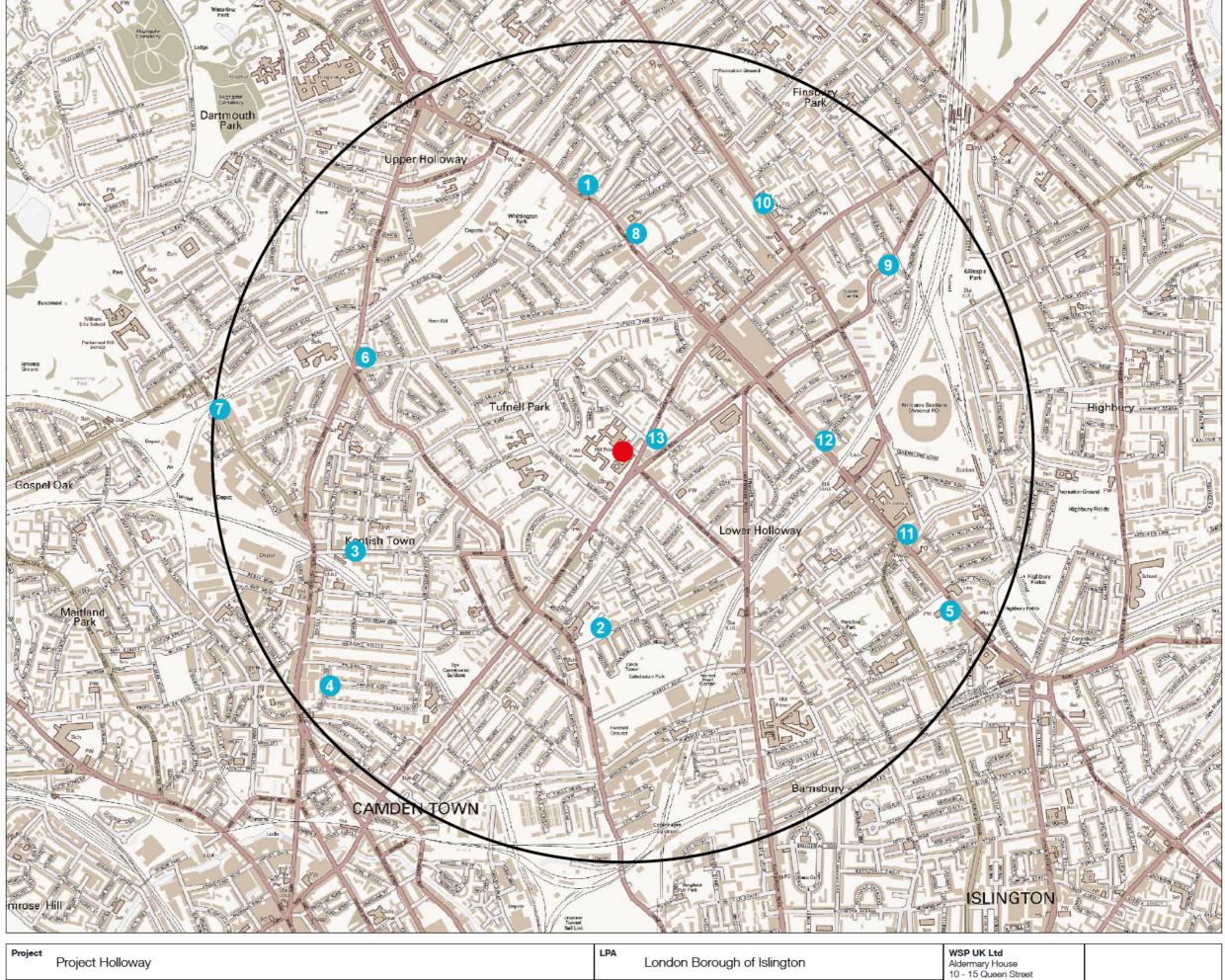


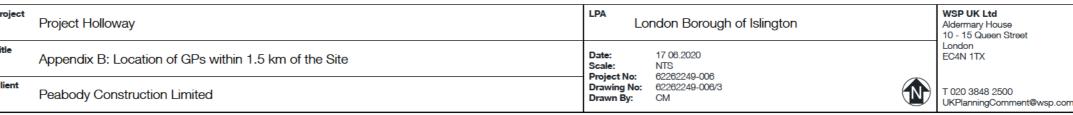


- 1.5 km Radius

GP practices

- 1 Archway Medical Centre
- 2 The Goodinge Group Practice
- 3 Caversham Group Practice
- 4 James Wigg Group Practice
- 5 The Family Practice
- 6 The Junction Medical Practice
- 7 The Parliament Hill Medical Practice
- 8 The Northern Medical Centre
- 9 The Village Practice
- 10 Andover Medical Centre
- 11 Dr Simon Edoman Practice
- 12 Sobell Medical Centre
- 13 Partnership Primary Care Centre





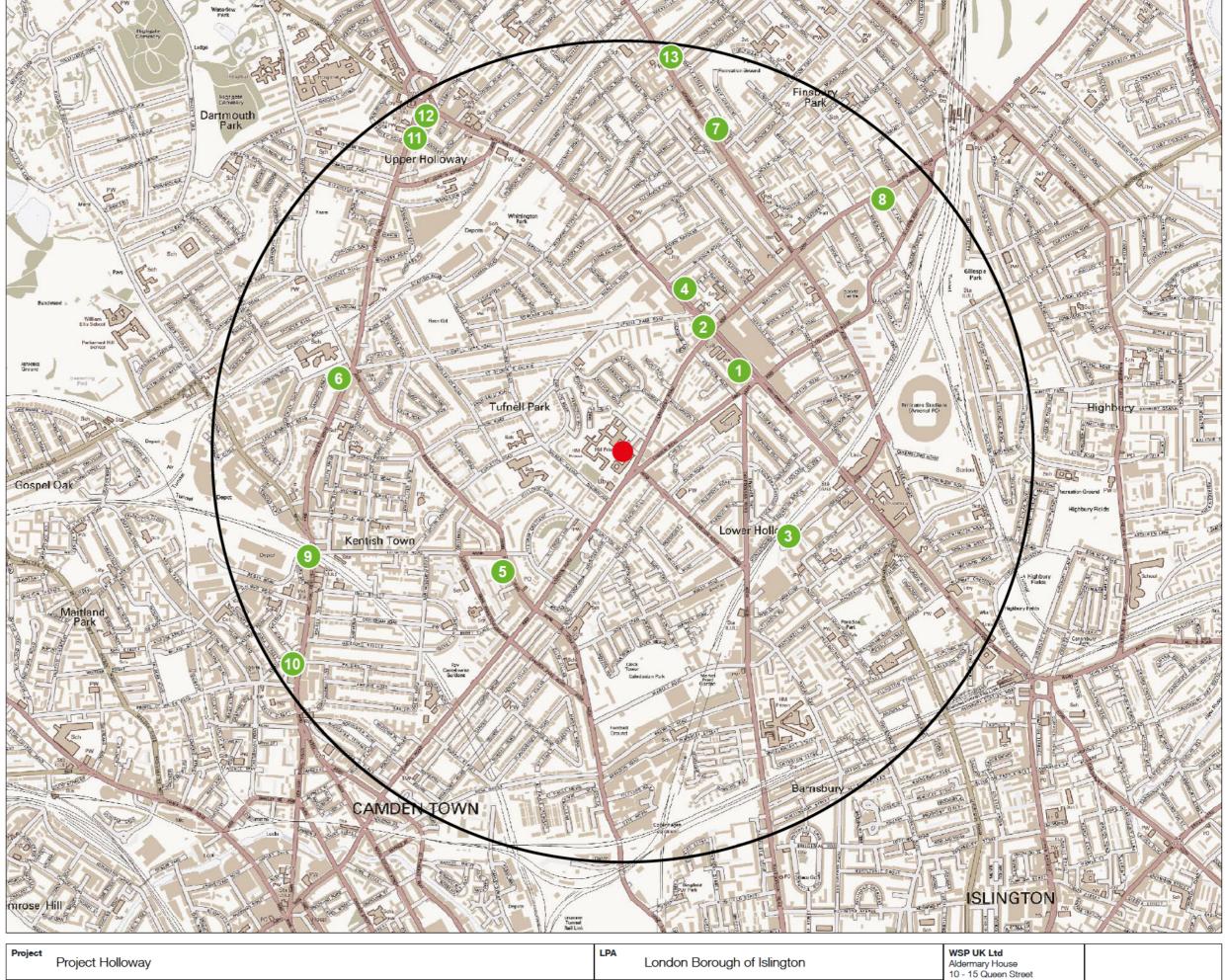


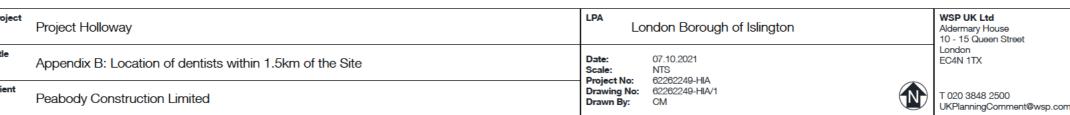


- 1.5 km Radius

Dentists

- 1 N7 Dental Care
- 2 Holloway Dental Centre
- Whittington Health NHS Oral Surgery Service (Islington)
- 4 Gentle Dental Care
- 5 Brecknock Dental
- 6 Aspire Dental Clinic
- 7 The Dental Surgery
- 8 Torrance Dental Surgery
- 9 AG Dentistry
- 10 Ace Dental
- 11 Family Dental Care
- 12 Smilecare Dental Centre
- 13 Hornsey Dental Care









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