# **Health Impact Assessment**



## **Barrow Borough Local Plan**

**December 2017** 

Norking together to support sustainable development within the Borough of Barrow-in-Furnes



Barrow Borough Council Health Impact Assessment: December 2017

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### 1. Introduction

This Health Impact Assessment (HIA) has been completed by Barrow Borough Council in relation to the policies contained in the Barrow Borough Local Plan.

This HIA has identified the prospective health impacts of the policies contained within the Local Plan. There is no statutory duty to undertake an HIA, but it is considered best practice and shows the Council's commitment to improving health in the Borough.

The Local Plan contains a realistic vision for the Borough, looking forward to 2031. The vision will seek to address the key planning issues that are currently facing the Borough. It sets out the locations for delivering the housing and other strategic development such as economy, retail, health and leisure.

Improving health is not only an issue for the borough, but is one of the critical issues at a local and national level. Every opportunity must be taken to improve the health of our community. There is an important link between planning and health in terms of how places are planned and develop and how that impacts on the health of the communities who live in them.

The Local Plan has a broad remit and wide ranging influence on factors which determine health and well being. The Local Plan must help create and sustain healthy, inclusive and active communities. The Health Impact Assessment is intended to transparently consider health implications of the policies within the Plan, which contribute towards achieving this objective.

The purpose of the HIA helps to identify and respond to health inequalities, particularly targeting disadvantaged and marginalised groups and encourage the full participation of those likely to be affected by the policy and promote partnership working with other health focused agencies within the Borough.

#### 1.1 Health Impact Assessment links to other assessments

#### **Sustainability Appraisal**

The Sustainability Appraisal assesses the social, economic and environmental impacts of the chosen sites and associated policies using a set of indicators, a number of which overlap and inform the Health Impact Assessment.

## **Links to the Equality Impact Assessment**

The Council is required to undertake an Equality Impact Assessment for Council policies. The assessment is a tool for identifying impacts on different groups in the community based on age, race, gender, sexual orientation, gender reassignment, pregnancy and maternity, marriage and civil partnership, religion and belief. Some of the needs of these groups relate to issues considered in the HIA.

#### **Links to the Joint Strategic Needs Assessment**

An updated Joint Strategic Needs Assessment (JSNA) 2015-2017 was produced for Cumbria by a partnership of the primary care trust and local authorities. The assessment identifies the health and social needs and assets in the county and supports the basis of forward planning.

#### **Key Issues from JSNA**

The key health and wellbeing needs identified in Cumbria from the JSNA are summarised as follows:

- In order to ensure that every child has the best possible start in life, children and their
  families require support to ensure that preventable health conditions and poor lifestyle
  choices are addressed; better monitoring and action is required to support an increase in
  breastfeeding rates.
- There is a need to ensure that the positive progress in ensuring that children are "school ready" is continued.
- Child injury related hospital admissions need to be reduced; children and their families require support to recognise potential danger areas.
- Unhealthy lifestyles and inactivity are leading to the development of a range of preventable health conditions. The risk of developing some conditions can be reduced by making some simple lifestyle changes. Support is required to promote the benefits of taking up exercise, losing weight, eating more healthily and reducing alcohol consumption to enable adults to lead healthy and fulfilling lives.
- There is a need to reduce the rate of premature mortality and increase healthy life expectancy by understanding and addressing the underlying causes.
- Prevention activities are effective in minimising the risk of people developing long term
  health conditions; there is a need to encourage the take up of health checks and relevant
  vaccinations.
- There is a need to address the health inequalities between the least and most deprived communities and the subsequent impact on health and wellbeing.
- People with protected characteristics can find it more difficult to access services. There is a need to understand and address the underlying causes.
- Poor mental health has a detrimental impact on health and life expectancy. There is a need
  to support and promote mental wellbeing and emotional resilience. There is a need to be
  mindful of the ongoing impacts of flooding on mental health and wellbeing as successive
  weather events affect the county.
- Complex and long term health conditions that could be attributable to the needs of an
  ageing population are increasing and increasing demand for services. There is a need to
  ensure prevention, early intervention and support and management of long term conditions
  is in place to enable older people to live independent and healthy lives.

#### Links to the Council Plan 2017-2020

The Council Plan is a strategic document which will guide the Council's decision on what it does and how it does it and covers the period 2017-2020, however it sets the long term strategy for future plans.

The Council Plan identifies four thematic priorities:

- Developing the local economy to secure a long term economic future for all our community
- A strong and vibrant town centre community
- Closing the gap on health inequalities
- Providing a greater choice of good quality housing and regenerating the oldest and poorest housing in the Borough

## Priority 3 – Closing the gap on health inequalities

The 'health gap' in Cumbria – the difference between those areas with the best health outcomes and those with the worst - has stayed constant, though health in all areas has improved.

Barrow has high levels of coronary heart disease, cancers and lung disease linked, in part, to the legacy of heavy industry in the town.

Barrow has the poorest health outcomes in Cumbria on the majority of health indicators.

Barrow has significant poverty which cross-cuts across childhood issues around obesity, emotional wellbeing and children being school ready linking through to educational achievement and employment.

The primary agencies to deliver this priority will be the Clinical Commissioning Group, Cumbria County Council and Morecambe Bay Hospitals NHS Foundation Trust; however, many of the Borough Council's activities will impact upon health outcomes. Housing and leisure are particularly influential.

The Council Plan identifies six objectives to address this priority:

- HI1 Encourage greater use of leisure facilities including parks, woodlands and open spaces.
- HI2 Engagement in activities to reduce health inequalities.
- **HI3** Participate in targeted public health campaigns identified by the Locality Health and Wellbeing Forum.
- HI4 Maintaining the Council's housing stock to ensure it meets the decency standard.
- HI5 Agreeing a third sector strategy to improve health and well-being in the Borough.
- **HI6** Support Cumbria County Council Pilot in Greengate Children's Centre Parenting Relationship Enrichment Programme (PREP). Identifying key issues for children and young families and providing support through Children Health & Wellbeing Coaches (CHAWCS) in the family home.

#### **Methodology of Health Impact Assessment**

The HIA has been prepared by the Planning Policy Team, taking account of other assessments such as the Equality Impact Assessment and Sustainability Appraisal. The Health Impact Assessment shows how the Local Plan can influence health and well being.

## 1.2 What approach has been taken?

In accordance with guidance, the Health Impact Assessment methodology has comprised of the following key stages:

- Screening If a policy or development is considered to have a potential impact on health, then a HIA should be carried out. The Council considers that the Local Plan is an important document that can influence health and therefore it is essential that a HIA is carried out to maximise the benefit to health that planning can provide.
- **Scoping** This section sets out what the Local Plan and HIA are seeking to achieve and the questions to be answered by the HIA and how the assessment would be carried out.
- Appraisal This section sets out information about the potential nature of the policy's
  impacts on the objectives identified at the scoping stage. It also provides an opportunity to
  suggest the positive ways planning may maximise the benefits and minimise the risks on
  health and how health inequities could be reduced.
- Recommendations This section sets out specific recommendations that are based on the
  best available evidence, these are prioritised where appropriate. Recommendations can be
  made to make adjustments to development, which would improve health impacts and
  consequences.
- Monitoring and evaluation Draws conclusions as to the likely health impacts of the Local Plan and making recommendations for maximising positive impacts and resolving negative impacts. Once implemented the Local Plan's impacts on health and well being will be monitored.

2. Current Health Position Profile

#### 2.1 Life Expectancy

Life expectancy in the Borough for both men and women is lower than the England average. Deprivation is higher than average and there is a strong correlation between overall deprivation and deprivation in terms of health. Central ward in Barrow is both the most deprived ward in Cumbria and the most deprived in terms of health. Those living in Central ward have the lowest life expectancy in Cumbria at 58.9%. Life expectancy is 13.0 years lower for men and 8.4 years lower for women in the most deprived areas of the Borough than in the least deprived areas.

Male life expectancy at birth in Barrow is 76.9 years, 3.9 years lower than the district with the highest life expectancy, 2.1 years lower than the Cumbria average and 2.5 years lower than the England average.

Female life expectancy at birth in Barrow is 81.6 years, 3 years lower than the district with the highest life expectancy, 0.9 years lower than the Cumbria average and 2.1 years lower than the England average.

Over the last 10 years, all cause mortality rates have fallen. The early death rate from heart disease and stroke has fallen.

## 2.2 Long Term Illness and Health Status

The proportion of working age adults in Barrow with a disability has increased and at 25% is the highest in the county. The number of young people in the Borough with disabilities is also on the rise and the highest in Cumbria with 3.6% of young people in Barrow entitled to Disability Living Allowance, compared to the County average of 2.6%.

The percentage of working age adults with disabilities in employment is in decline and the second lowest in the County, behind Copeland. 38.2% of working age adults with disabilities are in employment, compared to the county average of 49.3%.

In the Borough, there is a high percentage of working age residents claiming Incapacity Benefit and Employment Support Allowance (ESA). Although falling, the Borough has the highest rate in Cumbria and a rate well above the Cumbrian, Regional and National average.

The charts below show information from the 2011 Census, demonstrating the level of disability in the Borough.

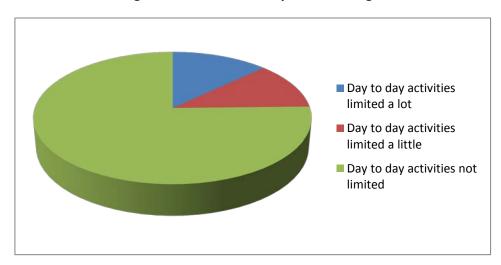
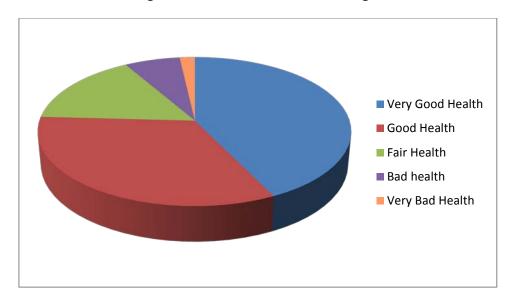


Figure 1: Level of Disability in the Borough





#### 2.3 General attributes of the Borough – Size and Density

The 2011 Census indicates that the Borough had a total resident population of 69,056 and this is concentrated in the principal settlement of Barrow and the market town of Dalton, with smaller populations in the outlying villages and rural areas. The population of the Borough is predicted to decline over the Plan period, along with the average household size.

## 2.4 General attributes of the Borough – Age

The age profile of the Borough is broadly in line with the national average, although there are fewer people in the age group 20-39. There is a higher proportion of people aged 60 and over compared to the national average, and this proportion increased by 3.5% between 2001 and 2011 (ONS). The proportion of older people living in the Borough is projected to increase over the Plan period.

#### 2.5 General attributes of the Borough – Gender

The 2011 Census identifies that within Barrow 49.5% of the population is male and 50.5% of the population is female. Life expectancy for both men and women in the Barrow Borough is lower than the England average. Life expectancy is 13.0 years lower for men and 8.4 years lower for women in the most deprived areas of the Borough than in the least deprived.

#### 2.6 General attributes of the Borough - Income

Earnings for full time employees in the Borough are higher than the Cumbria and regional average but are lower than the national average. For all employees, earnings are slightly higher than the Cumbria average but lower than the regional and national average.

The chart below shows the annual earnings of residents in the Borough.

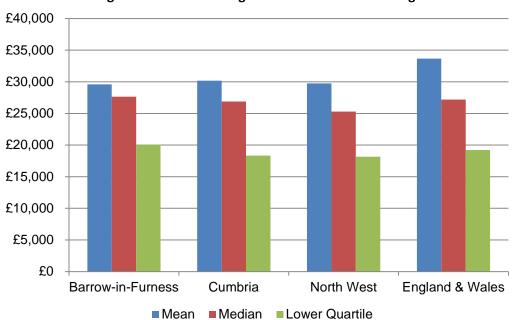


Figure 3: Annual Earnings of Residents in the Borough

## 2.7 General attributes of the Borough – Employment

The latest employment statistics show that the Borough's employment levels are comparable to national trends. In 2014, 77.9% of the working age population in the Borough were economically active compared to 77.3% nationally. During 2014, 70.6% were in employment in the Borough compared to 72.4% nationally. In April 2015, 2.6% of the working age population in the Borough were claiming Job Seekers Allowance, compared to the national figure of 1.9%.

Rates of youth unemployment are particularly high in Barrow (5.8%). The Barrow Island ward also has youth unemployment rates more than five times the national average.

The proportion of people working in the manufacturing sector (23.34%) is more than double that of the UK (8.81%) and BAE Systems, which specialises in marine manufacturing, continues to be the main employer in the Borough with over 5,800 employees.

The following chart shows employment in the Borough by sector in 2013.

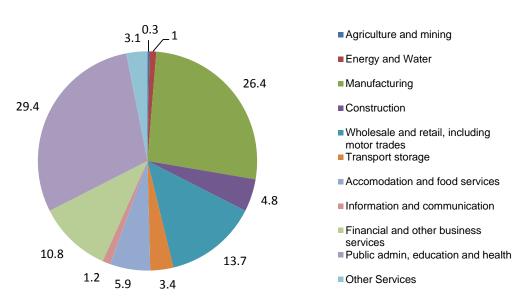


Figure 4: Employment in the Borough by Sector

#### 2.8 General attributes of the Borough - Open Space

Although the Borough is often recognised for its industrial heritage, it also has a rich and varied natural environment, featuring picturesque coastlines, green spaces and woodlands. The Council's Green Wedge policy has successfully protected key areas of open space within the Borough from inappropriate development since 1991. Approximately 3461 ha of land within and surrounding the Borough's settlements are protected by the Green Wedge.

The Council undertook an assessment of existing Green Wedges to ensure they remain fit for purpose providing the foundation and evidence base for an emerging Green Infrastructure Strategy. The Council has produced a Sports Facilities and Playing Pitch Assessment to sit alongside the Green Infrastructure Strategy SPD to identify the patterns of use and requirement for a variety of informal and formal open spaces; ensuring that spaces are viable and do not impact unduly on the amenities of neighbouring communities as well as developing approaches to enhance their management, appearance and usability.

#### 2.9 General attributes of the Borough – Hospitals

Barrow Borough has one hospital, Furness General, located on the edge of the town of Barrow; it is operated by University Hospital of Morecambe Bay NHS Foundation Trust. Key services offered at Furness General include Accident and Emergency Department, Oncology Unit, Critical Care, Maternity and Special Care Baby Unit and Outpatient Services. The hospital has 268 beds.

The demands upon, and utilisation of, health and social care services helps establish the picture of health and wellbeing in an area. Demands on elements of the emergency health system within the Borough are above those for Cumbria as a whole. In Barrow there were 139 emergency admissions to hospital per 1000 residents compared to 115 for Cumbria and 120 calls to the ambulance service compared to 108 for Cumbria.

Barrow has worse rates than the national average of hospital admissions caused by unintentional and deliberate injuries in: children aged 0-14 years (175.1 compared to 112.2 per 10,000 nationally), children aged 0-4 (231.7 compared to 140.8 per 10,000 nationally) and young people aged 15-24 (181.8 compared to 136.7 per 10,000 nationally). Barrow also has significantly higher rates of alcohol hospital stays for under 18s.

The hospital is used by residents from outside the Borough particularly Millom, Kirkby and Broughton. The next nearest hospital is in Kendal, with the next Accident and Emergency Department being at Lancaster.

#### 2.10 General attributes of the Borough – Water Quality

A significant factor in maintaining the visitor economy in the area, along with maintaining and enhancing wildlife habitats, is the quality of the Borough's bathing waters. The Environment Agency has designated three bathing waters at popular beaches on the Barrow coastline. The quality of these waters is regularly monitored by the Environment Agency, who measure bathing water quality against the standard set out in the Bathing Water Directive.

By 2015, all bathing waters must meet the higher standards set out in the revised Bathing Waters Directive (2006). Barrow's three designated bathing waters are situated along the west coast of Walney Island, and these met the higher bathing water standards in 2013, 2014 and 2015.

#### 2.11 General attributes of the Borough – Housing

There are relatively low house prices in the Borough compared to Cumbrian, regional and national averages, however average incomes are lower. Unlike national trends, the population of the Borough fell between 2001 and 2011, particularly in the 20-34 age range.

The Council proposes a housing requirement of 1785 dwellings over the Plan period with an annual requirement of 119 dwellings per year. This is the minimum number of dwellings, which should be delivered in the Borough over those periods.

## 2.12 General attributes of the Borough – Transport

More residents in the Borough are travelling to work by car, although the proportion of residents travelling to work by walking and cycling is also greater that the national average. Quality and reliable public transport are required to reduce the number of trips by car, particularly for longer journeys. This includes efficient interchanges between different modes of transport. Barrow currently does not have a bus station, with the main bus interchange being located at the side of the Town Hall.

#### 2.13 General attributes of the Borough – Poverty

Earnings for both full time and total resident employees in the Borough are lower than the Cumbria, regional and national average. Eight communities within Cumbria are classified as being amongst the 3% most deprived nationally; this comprises 2.3% of the County population. Half of the communities are in Barrow-in-Furness.

The Public Health England – Barrow Health Profile 2016 shows that the health of people in the Borough is generally poorer than the national average.

Deprivation is higher than average and about 2,600 children live in poverty. Central Ward has the greatest proportion of children living in poverty at 48.4%. Four wards fall between the bottom 10% nationally for levels of child poverty, these are Hindpool, Central, Risedale and Barrow Island.

There are currently 14,520 children (aged 0-18 years) in Cumbria living in 'out-of-work claimant' households, a total of 8,230 families. Numbers are greatest in Barrow and Carlisle, and in particular urban areas with high concentrations of young people and deprivation. Areas with high levels of child poverty are typically areas which have markedly lower levels household income, with a tendency towards a greater proportion of households having very low incomes indeed.

#### 2.14 General Attributes of the Borough – Children and Young People

Rates of 4-5 year olds with excess weight in Barrow are worse than the national average. Barrow also experienced increases in excess weight over the last year and currently being rated the worst out of all local authorities in England (30.6%). Between 2011/2012 and 2013/2014, Hindpool, Risedale, Ormsgill and Newbarns had significantly higher rates of 4-5 year olds with excess weight than the national average. Hindpool and Central Ward also had worse rates of 10-11 year olds with excess weight than the national average between 2011/2012 and 2013/2014. Barrow also has significantly higher rates of tooth decay in children aged 5 (1.45 compared to 0.94 nationally).

The Department of Education reported that in 2013/2014 56.8% of Cumbrian pupils achieved more than five GCSE's at grades A\*-C (including English and Maths) at Key Stage 4, which is the same as the national average. Barrow, however, had lower proportions of pupils achieving the above levels of attainment (50.5% and 47%).

#### 2.15 Local Priorities for Health in Barrow Borough

Public Health England state the priorities in Barrow in Furness include reducing health inequalities, improving mental health and wellbeing, reducing substance misuse (alcohol, drugs) and reducing smoking.

## 3. Screening

#### 3.1 Does the Local Plan have an impact on health?

In order to decide whether an HIA is required, a review of the possible health impacts of the Local Plan was undertaken in the form of a desk based assessment. A checklist that covers the basic screening questions was used to record the impacts examined and the associated findings. The following screening questions were included in the checklist to determine the likely nature and scale of the health impacts of the new Local Plan.

Question	Answer
Does the Local Plan affect health indirectly?	<b>✓</b>
Does the Local Plan affect health directly?	*
Are there any potential seriously negative health impacts that you know off?	*
Are the potential health impacts judged to be minor?	<b>✓</b>
Is the population affected by the initiative large?	
Is the cost of the initiative high?	<b>×</b>
Is the initiative a high priority / important for the organisation?	<b>✓</b>
Is there a limited amount of time to conduct a HIA?	<b>✓</b>
Is there only a limited opportunity to influence decisions?	<b>✓</b>
Is the timeframe for decision making process beyond your control due to external factors?	<b>✓</b>
Do officers within Barrow Borough Council have the skills to conduct the HIA?	<b>✓</b>
Do officers within Barrow Borough Council have time to conduct the HIA?	<b>~</b>

The National Planning Policy Framework (NPPF) states that the planning system can play an important role in facilitating social interaction and creating healthy, inclusive communities. The Council recognises that value of providing and maintaining an environment for residents to live and work in which is not harmful to their health. The Local Plan supports proposals which promote and enhance the Borough's environment, including its housing, facilities, public realm and open space thus maintaining and improving the character of the Borough and maximising the associated benefits on the health and wellbeing of residents.

An individual's health is also influenced by their lifestyle choices, as well as socio-economic factors and the environment in which they live. Lifestyle choices such as smoking, alcohol and drug consumption, a lack of physical activity and poor diet all impact negatively on an individual's health. Public health priorities in Barrow in Furness include reducing smoking, reducing alcohol misuse and reducing obesity in children.

## 4. Scoping

#### 4.1 What is the Local Plan seeking to achieve?

As stated in the Introduction, the Local Plan will contain a realistic vision for the Borough, looking forward to 2031. The vision will seek to address the key planning issues that are currently facing the Borough. These issues include population decline, lack of housing choice and unemployment. The vision will also seek to promote the Borough's greatest assets to attract and retain people and businesses in the area, such as its natural environment, its highly skilled workforce and its strong communities.

Barrow Borough Council recognises the value of providing and maintaining an environment for residents to live and work which is not harmful to their health. The Local Plan will support proposals which promote and enhance the Borough's environment, including its housing, facilities, public realm and open space, thus maintaining and improving the character of the Borough and maximising the associated benefits on the health and wellbeing of residents.

## 4.2 What is the Health Impact Assessment seeking to achieve?

As identified in the introduction, the HIA is intended to ensure the new Local Plan maximises health gains and reduces health inequalities. As the health of people in Barrow Borough is generally worse than the England average, the Local Plan hopes to try to provide solutions through strategic planning and local planning policies.

The following table identifies the objectives in the Local Plan which can influence health and wellbeing and the questions asked to determine the impact the Plan has on health.

## **Summary of the Health Impact Assessment Findings**

Objective 1: Housing			
HIA Question: Does the plan	Answer	Relevant Policy	
Promote adaptable/lifetime homes?	Yes	H12: Homes for Life	
Promote high quality/sustainable	Yes	DS1: Sustainable Development	
design of residential accommodation?		DS2: Sustainable Development Criteria	
		H7: Housing Development on Windfall	
		Sites	
		H12: Homes for Life	
		H26: Houses in Multiple Occupation	
Ensure residential developments are	Yes	DS2: Sustainable Development Criteria	
located close to basic services		13: Access to Community Facilities	
		H7: Housing Development on Windfall	
		Sites	
Seek to provide a mix of types and	Yes	H11: Housing Mix	
tenure of housing			
Seek to provide sufficient affordable	Yes	H14: Affordable Housing	
housing			

Objective 2: Access to public services such as health centres, libraries and education		
HIA Question: Does the plan	Answer	Relevant Policy
Consider the needs, location and	Yes	I2: Community Facilities
accessibility of public services?		13: Access to Community Facilities
		HC2: Doctors Surgeries and Health
		Centres
		HC4: Access to Buildings and Open Spaces
		HC15: Education Provision
Consider the requirements for the	Yes	I1: Developer Contributions
delivery of health services?		HC2: Doctors Surgeries and Health
		Centres
Seek to provide community facilities in	Yes	I2: Community Facilities
conjunction with development		13: Access to Community Facilities

Objective 3: Opportunities for physical activity  HIA Question: Does the plan Answer Relevant Policy		
Make provision for a walking and	Yes	I1: Developer Contributions
cycling network and seek to prioritise		14: Sustainable Travel Choices
walking and cycling?		I5: Travel Plans
		GI1: Green Infrastructure
		GI5: Green Routes
		HC1: Health and Wellbeing
Seek to enhance recreation and leisure	Yes	I1: Developer Contributions
facilities?		HC6: New Indoor Leisure Facilities
		HC7: Loss of Playing Fields, Pitches and
		Facilities
		HC8: Outdoor Facilities
		HC9: Multi-Use Games Areas
		HC10: Play Areas
		HC11: Golf Courses
		HC12: Equestrian Development
Protect and enhance existing green	Yes	I1: Developer Contributions
spaces and seek to create new ones?		HC7: Loss of Playing Fields, Pitches
		Facilities
		HC13: Allotments
		HC14: Despoiled Landscapes
		GI1: Green Infrastructure
		GI2: Green Wedges
		GI3: Green Corridors
		GI4: Green Spaces
		GI5: Green Routes
		GI6: Green Links
		GI7: Open Countryside
		GI8: Woodland
Ensure residential developments are	Yes	DS2: Sustainable Development Criteria
located close to basic services		13: Access to Community Facilities
		H7: Housing Development on Windfall
		Sites
Seek to enhance the quantity and	Yes	I1: Developer Contributions
quality of open space provision?		HC13: Allotments

GI1: Green Infrastructure
GI2: Green Wedges
GI3: Green Corridors
GI4: Green Spaces
GI5: Green Routes
GI6: Green Links
GI8: Woodland

Objective 4: Air quality, noise and neighbourhood amenity			
HIA Question: Does the plan	Answer	Relevant Policy	
Seek to minimise air and noise	Yes	C5: Promoting Renewable Energy	
pollution?		C6: Renewable Energy	
		DS2: Sustainable Development Criteria	
Promote enhanced air quality?	Yes	DS2: Sustainable Development Criteria	
(Particularly through green		C5: Promoting Renewable Energy	
infrastructure)		C6: Renewable Energy	
		N4: Protecting other Wildlife Features	
		GI1: Green Infrastructure	
		GI8: Woodland	
Seek to provide high quality amenity	Yes	DS2: Sustainable Development Criteria	
space close to people's homes?		H17: Protection of Residential Amenity	
		GI1: Green Infrastructure	
		GI4: Green Spaces	
Seek to minimise car use and/or road	Yes	DS2: Sustainable Development Criteria	
freight?		I4: Sustainable Travel Choices	
		I5: Travel Plans	
		HC1: Health and Wellbeing	
Segregate bad neighbour uses	Yes	DS2: Sustainable Development Criteria	
		H7: Windfall Housing Development	
		EC3: Managing Development of	
		Employment Land	
Seek to protect open spaces that offer	Yes	GI1: Green Infrastructure	
visual amenity?		GI2: Green Wedges	
		GI3: Green Corridors	
		GI4: Green Spaces	
		GI6: Green Links	
		GI7: Open Countryside	
		GI8: Woodland	

Objective 5: Accessibility and Transport		
HIA Question: Does the plan	Answer	Relevant Policy
Promote enhanced streetscape?	Yes	DS5: Design
		DS7: Development on Strategic Routes
		I1: Developer Contributions
		GI5: Green Routes
Seek to enhance public transport	Yes	I1: Developer Contributions
provision		14: Sustainable Travel Choices
		I5: Travel Plans
Ensure residential developments are	Yes	DS2: Sustainable Development Criteria

located close to basis services		12: Assass to Community Escilitios
located close to basic services		I3: Access to Community Facilities
		H7: Housing Development on Windfall
		Sites
		HC2: Doctors Surgeries and Health
		Centres
		HC3: Children's Nurseries
		HC15: Education
Make provision for walking and cycling	Yes	I1: Developer Contributions
network and seek to prioritise walking		14: Sustainable Travel Choices
and cycling?		I5: Travel Plans
		GI1: Green Infrastructure
		GI5: Green Routes
		HC1: Health and Wellbeing

Objective 6: Crime reduction and community safety		
HIA Question: Does the plan	Answer	Relevant Policy
Contain urban design policies that seek	Yes	DS5: Design
to design out crime		HC5: Crime Prevention

Objective 7: Access to healthy food		
HIA Question: Does the plan	Answer	Relevant Policy
Make provision for spaces where	Yes	HC13: Allotments
community can grow their own food		N2: Safeguarding and Improving Soils
Seek to enhance convenience goods	Yes	R19: Neighbourhood Shopping Centres
retail if there is a shortfall		
Seek to avoid an over concentration of	Yes	R15: Hot Food Takeaway Locations
fast food outlets		R16: Opening Hours of Hot Food
		Takeaways
Protect/enhance the provision of	Yes	I1: Developer Contributions
allotments		N2: Safeguarding and improving soils
		GI1: Green Infrastructure
		HC13: Allotments
Maintain/enhance the vitality and	Yes	R1: The Vision for Barrow and Dalton
viability of town and local centres		Town Centres
		R2: Barrow Town Centre
		R3: Barrow Primary Shopping Area
		R5: Dalton Town Centre

Objective 8: Access to work and impact of unemployment and low incomes		
HIA Question: Does the plan	Answer	Relevant Policy
Seek to provide a range of jobs close to	Yes	EC1: Waterfront Business Park
where people live, in accessible		EC2: Provision of Employment Land
locations, particularly the most		EC3: Managing Development of
deprived communities		Employment Land
Ensure employment sites are located	Yes	DS2: Sustainable Development Criteria
close to basic services		EC3: Managing Development of
		Employment Land
Seek to raise the profile of the district	Yes	DS3: Development Strategy

to encourage investment	EC1: Waterfront Business Park
	EC8: Economic Diversification - Tourism
	R1: The Vision for Barrow and Dalton
	Town Centres
	HE1: Heritage Assets and their setting

Objective 9: Social Cohesion and Amenity		
HIA Question: Does the plan	Answer	Relevant Policy
Seek to provide a mix of types and	Yes	H2: Distribution of Housing
tenures of housing in all communities		H3: Allocation of Sites for Housing
where possible		Development
		H11: Housing Mix
Ensure residential developments are	Yes	DS2: Sustainable Development Criteria
located close to basic services, meeting		13: Access to Community Facilities
places and employment opportunities		H7: Housing Development on Windfall
		Sites
Seek to provide high quality amenity	Yes	DS2: Sustainable Development Criteria
space close to people's homes		H17: Protection of Residential Amenity
		GI1: Green Infrastructure
		GI4: Green Spaces
Seek to provide community facilities in	Yes	12: Community Facilities
conjunction with development		13: Access to Community Facilities

Objective 10: Resource Minimisation		
HIA Question: Does the plan	Answer	Relevant Policy
Encourage the redevelopment of	Yes	DS4: Opportunity Areas
brownfield land		N1: Protecting and Enhancing Landscape
		Character
Encourage and promote recycling	Yes	DS2: Sustainable Development Criteria
		C3a: Water Management
		H26: Large Houses in Multiple Occupation
		(HMO's) and the Subdivision of Dwellings
		HC6: New Indoor Leisure Facilities
		HC13: Allotments
		HC15: Education Provision
Promote building designs which seek to	Yes	DS2: Sustainable Development Criteria
minimise resources		

Objective 11: Climate Change		
HIA Question: Does the plan	Answer	Relevant Policy
Promote the use of renewable energy	Yes	C5: Promoting Renewable Energy
		C6: Renewable Energy
Promote sustainable drainage systems	Yes	DS2: Sustainable Development Criteria
		DS5: Design
		C1: Flood Risk and Erosion
		C3a: Water Management
		GI1: Green Infrastructure
Seek to minimise flood risk impacts on	Yes	DS2: Sustainable Development Criteria

new development		DS5: Design
		C1: Flood Risk and Erosion
		C3a: Water Management
		GI1: Green Infrastructure
Seek to avoid inappropriate	Yes	DS2: Sustainable Development Criteria
development in areas at risk from		C1: Flood Risk and Erosion
flooding		C3a: Water Management
Promote sustainable travel choices	Yes	I4: Sustainable Travel Choices
		I5: Travel Plans
		GI1: Green Infrastructure
		GI5: Green Routes
		HC1: Health and Wellbeing

Objective 12: Fuel Poverty		
HIA Question: Does the plan	Answer	Relevant Policy
Promote building designs which seek to	Yes	DS2: Sustainable Development Criteria
minimise resources		

Objective 13: Access to Education		
HIA Question: Does the plan	Answer	Relevant Policy
Seek to ensure residents have the opportunities to gain access to higher levels of education	Yes	HC15: Education Provision
Promote opportunities to reduce skills gap	Yes	HC15: Education Provision

## 5. Appraisal

The HIA has increased the understanding of the effects that the Local Plan can have upon the health of residents in the Borough. Throughout the process of the HIA, it has become evident that the Local Plan policies do not hinder the health within the Borough, but propose to improve the level of health. The majority of the policies incorporate aspects which promote health and will allow for an improved quality of life for the residents of the Borough.

The table below assesses each identified objective from the scoping stage in terms of the negative impacts on health and the positive effects of the proposed planning policy. It also sets out the links to policies within the Local Plan and how the Council intends to monitor the effects of these policies.

#### 1. Housing

#### Impact on Health

- Overcrowding and sanitation
- Lack of affordable housing- low income families spend high proportion of income on housing to detriment of lifestyle
- Poor choice of location and bad design/orientation can lead to physical and mental health conditions
- Poor construction methods can have impacts on wellbeing
- Poor match between housing stock and household needs
- Some houses lack basic facilities to enable the preparation of healthy foods

## **Positive Effects on Planning**

- Code for Sustainable Homes
- Accessibility
- Adaptable/lifetime homes
- Good design and orientation including internal layout
- Housing mix (the type and tenure)
- Energy efficiency
- Affordable homes
- Location close to basic services such as post offices, shops and health facilities
- The provision of land in the right places to fulfil housing need.

#### Links to Policies in the Local Plan

- Policy DS2: Sustainable Development Criteria
- Policy DS5: Design
- Policy C5: Promoting Renewable Energy
- Policy I3: Access to Community Facilities
- Policy H3: Allocated Housing Sites
- Policy H11: Housing Mix
- Policy H12: Homes for Life
- Policy H14: Affordable Housing
- Policy H16: Loss of Sunlight or Daylight
- Policy H17: Protection of Residential Privacy
- Policy HC1: Health and Wellbeing

## **Monitoring Indicators**

- Number of developments which have achieved a national design award
- Number of applications refused on design grounds
- Number of new public art projects created as part of a planning consent or obligation
- Number of planning consents requiring ground investigations and remediation
- Number of planning consents granted on brownfield sites
- Number of new community facilities granted planning consent
- Number of existing community facilities lost through change of use applications
- Number of dwellings completed on each allocated site per year
- Number of dwellings granted planning permission on each allocated site
- Housing mix within new developments
- Number of Lifetimes Homes completed
- Number of affordable dwellings delivered per year
- % of affordable homes in the Borough of the overall stock
- Affordability ratio in the Borough
- Position in the Index of Multiple Deprivation
- % residents in good or very good health
- Life Expectancy at birth
- Healthy Life expectancy
- Premature mortality rate from cancer and circulatory disease per 100,000 people

- % of under 16 pupils participating in at least 2 hours of high quality PE within the curriculum per week
- % of residents participating in sports and using leisure facilities
- Number of obese children

#### 2. Access to public services such as health centres, libraries and information centres and education

#### **Impact on Health**

- Access to public services required to develop strong communities, can lead to greater community cohesion
- Use of primary/preventative healthcare dependent on accessibility
- Services located far away can cause significant problems for the less mobile, including the elderly, particularly lack of social interaction potentially leading to isolation and depression.

#### **Positive Effects on Planning**

- Take Account of public services needs, location and accessibility
- Reconfiguration of health and social service provision
- Co-location of public services

#### Links to Policies in the Local Plan

- Policy I1: Developer Contributions
- Policy I3: Access to Community Facilities
- Policy HC1: Health and Wellbeing
- Policy HC2: Doctors Surgeries and Health Centres
- Policy HC4: Access to Buildings and Open Spaces
- Policy HC15: Education Provision

## **Monitoring Indicators**

- Number of S106/S278 agreements signed for developer contributions
- Total amount (£) raised in developer contributions
- Number of new community facilities granted planning consent
- Number of existing community facilities lost through change of use applications
- Position in the Index of Multiple Deprivation
- % of residents in good or very good health
- Life expectancy at birth
- Healthy life expectancy
- Premature mortality rate from cancer and circulatory disease per 100,000 people

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- % of under 16 pupils participating in at least 2 hours of high quality PE within the curriculum per week
- % of residents participating in sports and using leisure facilities
- Number of obese children
- Number of new doctors surgeries/health centres in the Borough
- Number of new doctors surgeries/health centres granted planning consent
- % of Council owned buildings which are accessible to disabled people (Building Control Records)
- % of residents educated to NVQ Level 5 or equivalent
- % of residents with 5 or more GCSE's Grade A\*-C
- % of residents with no qualifications
- 16-18 year olds not in education, employment or training (NEET)
- Position in the Index of Multiple Deprivation

#### 3. Opportunities for physical activity

#### **Impact on Health**

- Low levels of physical activity are the main cause of obesity and a range of other significant health issues
- Green space facilitates opportunities for exercise
- Green spaces can help reduce depression for those in urban areas
- Physical activity in childhood perceived to be a significant determinant in adult behaviour- access to sport and play facilities important
- Isolated developments can lead to sedentary lifestyles and mental ill health
- Badly located facilities can lead to excessive use of cars and lack of physical activity
- Moderate physical activity can help against cognitive decline in older people

## **Positive Effects on Planning**

- Facilitating walking and cycling
- Recreation opportunities distributed equally across communities
- Protecting/enhancing green space
- Locating housing and employment close to services/facilities
- Planning for extended schools

#### Links to Policies in the Local Plan

- Policy DS2: Sustainable Development Criteria
- Policy DS5: Design
- Policy EC3: Managing Development of Employment Land

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- Policy H7: Housing Development on Windfall Sites
- Policy GI1: Green Infrastructure
- Policy GI2: Green Wedges
- Policy GI3: Green Corridors
- Policy GI4: Green Spaces
- Policy GI5: Green Routes
- Policy GI6: Green Links
- Policy GI7: Open Countryside
- Policy GI8: Woodland
- Policy HC1: Health and Wellbeing
- Policy I3: Access to Community Facilities
- Policy I4: Sustainable Travel Choices
- Policy I5: Travel Plans
- Policy HC15: Education Provision

#### **Monitoring Indicators**

- Number of developments which have achieved a national design award
- Number of applications refused on design grounds
- Number of new public art projects created as part of a planning consent or obligation
- Number of planning consents granted for employment uses on allocated sites
- Employment land availability by type (B1, B2, B8)
- Amount of floorspace developed by employment type (B1, B2, B8)
- % of working age population which are economically active
- % of working age population claiming Job Seekers Allowance
- % of working age population employed in the manufacturing sector
- Number of active enterprises
- Number of new enterprises born
- Number of enterprise deaths
- % of residents who work from home
- Average household income
- Number of dwellings approved on windfall sites per year
- Number of dwellings completed on windfall sites per year
- % of dwellings built on brownfield sites

- % of dwellings which are within 500m of accessible natural green space over 1 ha in size
- % of residents satisfied with LA parks and open spaces
- Number of parks and open spaces awarded Green Flag status
- Number of planning applications approved/refused for development within a Green Wedge
- Resident satisfaction levels with parks and open spaces
- Number of open spaces awarded Green Flag status
- Number of applications approved with contributions towards open space provision: on site, off-site and financial contributions for open space
- Number of planning applications approved/refused for development on a green route
- Number of new green routes created as part of a planning consent
- Number of planning applications approved/refused for development on a green link
- Number of new green links created as part of a planning consent.
- Number of applications approved/refused for development within the open countryside
- Areas of woodland (ha) in the borough.
- Number of new woodland areas (ha) created as part of a planning consent or obligation.
- Number of applications for development approved/refused within woodland areas.
- Position in the Index of Multiple Deprivation
- % residents in good or very good health
- Life expectancy at birth
- Healthy life expectancy
- Premature mortality rate from cancer and circulatory diseased per 100,000 people
- % of under 16 pupils participating in at least 2 hours of high quality PE within the curriculum per week
- % of residents participating in sports and using leisure facilities
- Number of obese children

## 4. Air quality, noise and neighbourhood amenity

#### **Impact on Health**

- Poor air quality can lead to increased incidence of lung and heart conditions and potentially asthma amongst children
- Living in proximity to busy roads is linked to negative health outcomes
- Absence of good neighbour policy can mean residents and workers are subject to excessive noise and fumes
- Visually and environments can undermine wellbeing and not facilitate physical activity

#### **Positive Effects on Planning**

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- Segregation of 'bad neighbour' uses
- Enhanced green space and green infrastructure
- Good quality amenity space incorporated into development
- Deter car use and restrict lorries to specific routes to minimize air pollution

#### Links to Policies in the Local Plan

- Policy DS2: Sustainable Development Criteria
- Policy DS5: Design
- Policy H7: Windfall Housing Development
- Policy EC3: Managing Development of Employment Land
- Policy I4: Sustainable Travel Choices
- Policy I5: Travel Plans
- Policy N4: Protecting other Wildlife Features
- Policy GI1: Green Infrastructure
- Policy GI2: Green Wedges
- Policy GI3: Green Corridors
- Policy GI4: Green Spaces
- Policy GI5: Green Routes
- Policy GI6: Green Links
- Policy GI7: Open Countryside
- Policy GI8: Woodland

## **Monitoring Indicators**

- Number of developments which have achieved a national design award
- Number of applications refused on design grounds
- Number of new public art projects created as part of a planning consent or obligation
- Number of dwellings approved on windfall sites per year
- Number of dwellings completed on windfall sites per year
- Percentage of dwellings built on brownfield sites
- Number of planning consents granted for employment uses on allocated sites
- Employment land availability by type (B1, B2, B8)
- Amount of floorspace developed by employment type (B1, B2, B8)
- % of working age population claiming Job Seekers Allowance
- % of working age population which are economically active

- % of working age population employed in the manufacturing sector
- Number of active enterprises
- Number of new enterprises born
- Number of enterprise deaths
- % of residents who work from home
- Average household income
- % of residents who use a private vehicle as passenger or driver as their main method to travel to work
- % of journeys to work which are on public transport
- % of journeys to work which are on foot or by bicycle
- Number of travel plans submitted as part of a planning application
- Number of Air Quality Management Areas
- Estimated transport emissions
- Number and size (ha) of RAMSAR sites
- Number and size (ha) of Special Areas of Conservation (SAC) sites
- Number and size (ha) of Special Protection Areas (SPA)
- Number and size (ha) of National Nature Reserves
- % of Sites of Special Scientific Interests (SSSIs) attaining PSA targets
- Number of Local Geological Sites
- Number of planning applications which have been subject to Habitats Regulation Assessment (HRA)
- Number of planning consents where an 'adverse effect' on a Natura 2000 site has been identified
- Number of BAP listed species present within the Local Plan area
- Amount of land (ha) created/managed as a result of a planning obligation
- Standard of bathing waters
- Number of planning consents granted which impose conditions to ensure working practises or works to protect/enhance protected species
- Number of planning applications which result in the need for a protected species license
- Number of planning applications refused on the grounds of impacts upon biodiversity
- % of dwellings which are within 500m of accessible natural green space over 1 ha in size
- % of residents satisfied with LA parks and open spaces
- Number of parks and open spaces awarded Green Flag status
- Number of planning applications approved/refused for development within a Green Wedge
- Number of planning applications approved/refused for development within a Green Corridor
- Resident satisfaction levels with parks and open spaces

- Number of open spaces awarded Green Flag status
- Number of applications approved with contributions towards open space provision: on site, off site and financial contributions collected for open space
- Number of planning applications approved/refused for development on a green route
- Number of new green routes created as part of a planning consent
- Number of planning applications approved/refused for development on a green link
- Number of new green links created as part of a planning consent
- Number of applications approved/refused for development within the open countryside
- Areas of woodland (ha) in the borough
- Number of new woodland areas (ha) created as part of a planning consent or obligation
- Number of applications for development approved/refused within woodland areas

#### 5. Accessibility and Transport

#### **Impact on Health**

- Easy, well orientated and walkable access to facilities provides the opportunities for greater social interaction
- Easily accessible buildings and spaces encourages greater use by elderly/disabled
- Reducing car dependency leads to more physical exercise
- Poor access can disadvantage particular community groups such as elderly, children
- Traffic congestion can lead to more hostile environments and reduce reliability of bus services, therefore decreasing walking
- Road traffic accidents are a major cause of injury and fatality in young people and perceived danger can place restrictions on children's mobility.

## **Positive Effects on Planning**

- Improved streetscape
- Improved choice of modes of transport by ensuring homes, jobs and services are well connected to each other and to existing transport corridors
- · Making local facilities accessible by walking and cycling
- Promoting walking and cycling networks
- Traffic calming in residential areas
- Requiring travel plans to support modal shift

#### Links to Policies in the Local Plan

• Policy DS2: Sustainable Development Criteria

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- Policy DS5: Design
- Policy I4: Sustainable Travel Choices
- Policy I5: Travel Plans
- Policy GI1: Green Infrastructure
- Policy GI5: Green Routes

#### **Monitoring Indicators**

- Number of developments which have achieved a national design award
- Number of applications refused on design grounds
- Number of new public art projects created as part of a planning consent or obligation
- % of residents who use a private vehicle as passenger or driver as their main method to travel to work
- % of journeys to work which are on public transport
- % of journeys to work which are on foot or by bicycle
- Number of travel plans submitted as part of a planning application
- Number of Air Quality Management Areas
- Estimated transport emissions
- % of dwellings which are within 500m of accessible natural green space over 1 ha in size
- % of residents satisfied with LA parks and open spaces
- Number of parks and open spaces awarded Green Flag status
- Number of planning applications approved/refused for development on a green route
- Number of new green routes created as part of a planning consent

## 6. Crime reduction and community safety

#### **Impact on Health**

- Environment (street design, unfriendly environments) can increase 'fear of crime' and be detrimental to wellbeing
- Where a pedestrian environment is intimidating people use cars and social interaction is reduced increasing potential crime
- Poorly designed green space can potentially increase crime and anti social 27behaviour
- Lack of trust in services can increase the fear of crime.

#### **Positive Effects on Planning**

- Layout of spaces to ensure natural surveillance
- Designing places to enhance opportunities for social interaction

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- Improved lighting in public places
- Designing out crime

#### Links to Policies in the Local Plan

- Policy DS2: Sustainable Development Criteria
- Policy DS5: Design
- Policy HC5: Crime Prevention

#### **Monitoring Indicators**

- Number of developments which have achieved a national design award
- Number of applications refused on design grounds
- Number of new public art projects created as part of a planning consent or obligation
- Number of crimes per 1000 population
- Perception and fear of crime surveys
- Cumbria Quality of Life Surveys
- Resident satisfaction surveys

#### 7. Access to healthy food

## Impact on Health

- People on low incomes less able to eat well
- Food production co-op schemes can increase wellbeing, levels of physical activity and social interaction
- Centralisation of food shopping facilities can reduce variety locally and exacerbate social inequality
- A concentration of fast food outlets, particularly in areas close to schools, could potentially increase consumption of unhealthy foods

## **Positive Effects on Planning**

- Safeguarding areas for community food growing
- Diversity of food shopping facilities including access to affordable healthy food and avoiding an over concentration of fast food outlets
- Reduced reliance on large supermarkets
- Retention/enhancement/provision of allotments
- Development of farmers markets

#### Links to Policies in the Local Plan

- Policy N2: Safeguarding and Improving Soils
- Policy GI1: Green Infrastructure

Policy HC13: Allotments

#### **Monitoring Indicators**

- Number of planning consents which include a requirement for ground investigations and remediation
- Number of planning consents on brownfield sites
- Number of new allotments created
- Number of allotments lost through planning consents for alternative uses
- % of dwellings which are within 500m of accessible natural green space over 1ha in size
- % of residents satisfied with LA parks and open spaces
- Number of parks and open spaces awarded Green Flag status
- Number of allotments in the Borough
- Number of new allotments created as part of a planning application
- Length of waiting list for allotments
- Position in the Index of Multiple Deprivation
- % residents in good or very good health

#### 8. Access to work and impact of unemployment and low incomes

#### **Impact on Health**

- Job security and job variety leads to increased health and wellbeing
- Income is a strong indicator of health
- Job satisfaction links to increased contribution to social networks
- Correlation between unemployment and heightened health risks
- Employment opportunities in inaccessible locations can affect health and wellbeing

## **Positive Effects on Planning**

- Allocating appropriate accessible sites
- Encouraging diversity in employment
- Local job retention through local labour agreements
- Promoting access to work via walking and cycling
- Availability of support services- such as childcare- but other town centre uses shops and services
- Provision of facilities/activities for people on low/limited incomes

#### Links to Policies in the Local Plan

• Policy DS2: Sustainable Development Criteria

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- Policy I2: Protecting Community Facilities
- Policy I3: Access to Community Facilities
- Policy I4: Sustainable Travel Choices
- Policy I5: Travel Plans
- Policy EC2: Provision of Employment Land
- Policy HC3: Children's Nurseries

## **Monitoring Indicators**

- Number of new community facilities granted planning consent
- Number of existing community facilities lost through change of use applications.
- % of residents who use a private vehicle as passenger or driver as their main method to travel to work
- % of journeys to work which are on public transport
- % of journeys to work which are on foot or by bicycle
- Number of travel plans submitted as part of a planning application
- Number of Air Quality Management Areas
- Estimated transport emissions
- Number of planning consents granted for employment uses on allocated sites
- Employment land availability by type (B1, B2, B8)
- Amount of floorspace developed by employment type (B1, B2, B8)
- % of working age population which are economically active
- % of working age population claiming Job Seekers Allowance
- % of working age population employed in the manufacturing sector
- Number of active enterprises
- Number of new enterprises born
- Number of enterprise deaths
- % of residents who work from home
- Average household income
- Number of children's nurseries in the Borough
- Number of children's nurseries granted planning consent

#### 9. Social Cohesion and Social Capital

#### Impact on Health

- Fragmentation of social structure can lead to ghettos contributing to isolation and insecurity
- Material deprivation but also social and psychological problems of living in poverty
- Dispersal of residential communities and roads serving as barriers
- Loss of community facilities such as education, health care and meeting places
- Indirect impacts on income arising from spatial planning such as access to employment
- Perceptions of racial discrimination contribute to mental ill health
- Improved social networks and social support can improve mental wellbeing

#### **Positive Effects on Planning**

- Mixed use developments in town centres
- Safe and permeable environments with natural social areas
- Providing diverse employment opportunities
- Involvement of the voluntary sector in the planning process

#### Links to Policies in the Local Plan

- Policy DS2: Sustainable Development Criteria
- Policy DS5: Design
- Policy I2: Protecting Community Facilities
- Policy EC2: Provision of Employment Land
- Policy R1: Vision for Barrow and Dalton Town Centres
- Policy GI1: Green Infrastructure

## **Monitoring Indicators**

- Number of new community facilities granted planning consent
- Number of existing community facilities lost through change of use applications
- Number of developments which have achieved a national design award
- Number of applications refused on design grounds
- Number of new public art projects created as part of a planning consent or obligation

#### 10. Resource Minimisation

#### Impact on Health

- Reducing and minimising waste can improve environmental quality and improve human health
- Disposal of hazardous waste can have significant health impacts
- Maximising natural light can have a therapeutic/calming effect

## **Positive Effects on Planning**

- Impose standards on hazardous waste disposal and waste linked to development
- Redevelopment of brownfield sites- recycling land
- Improved building design by meeting BREEM standards

#### Links to Policies in the Local Plan

- Policy DS2: Sustainable Development Criteria
- Policy DS4: Opportunity Areas
- Policy DS5: Design
- Policy H16: Loss of Sunlight or Daylight

## **Monitoring Indicators**

- Number of planning consents granted within the five Opportunity Areas
- Number of developments which have achieved a national design award
- Number of applications refused on design grounds
- Number of new public art projects created as part of a planning consent or obligation

## 11. Climate Change

## **Impact on Health**

- Extreme weather events can affect health
- Anxiety arising from Vulnerability to flooding
- Physical health risks from flooding, with sewers flooding

## **Positive Effects on Planning**

- Impact on energy use through building design, transport
- Avoid inappropriate development in areas at risk of flooding in accordance with the sequential and exception tests

#### Links to Policies in the Local Plan

- Policy DS2: Sustainable Development Criteria
- Policy DS5: Design

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- Policy C1: Flood Risk and Erosion
- Policy C3a: Water Management
- Policy I4: Sustainable Travel Choices
- Policy I5: Travel Plans

#### **Monitoring Indicators**

- Number of developments which have achieved a national design award
- Number of applications refused on design grounds
- Number of new public art projects created as part of a planning consent or obligation
- Number of planning applications objected to by the Environment Agency on flood risk grounds
- Number of properties within Flood Risk Zones 2 and 3
- Bathing water quality
- River water quality
- Area of coastline protected by defences against flooding or erosion
- Number of SuDS assets delivered
- % of residents who use a private vehicle as passenger or driver as their main method to travel to work
- % of journeys to work which are on public transport
- % of journeys to work which are on foot or by bicycle
- Number of travel plans submitted as part of a planning application
- Number of Air Quality Management Areas
- Estimated transport emissions

## 12. Fuel Poverty

#### Impact on Health

- Cold housing is a health risk and contributes to extra deaths in the winter
- Lack of hot meals / poor nutrition contribute to poor health

## **Positive Effects on Planning**

• Sustainable design

#### Links to Policies in the Local Plan

- Policy DS2: Sustainable Development Criteria
- Policy DS5: Design

## **Monitoring Indicators**

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- Number of developments which have achieved a national design award
- Number of applications refused on design grounds
- Number of new public art projects created as part of a planning consent or obligation

#### 13. Access to Education

#### Impact on Health

- To improve level of skills education and training
- To improve access to jobs
- To improve health and wellbeing of people
- To improve awareness of healthy eating and lifestyle choices
- To promote physical activity

## **Positive Effects on Planning**

- To create active inclusive and open minded communities
- To improve access to services and facilities
- To promote sustainable development
- To promote sustainable transport methods

#### Links to Policies in the Local Plan

- Policy DS1: Councils commitment to Sustainable Development
- Policy I3: Access to Community Facilities
- Policy I4: Sustainable Travel Choices
- Policy HC15: Education

## **Monitoring Indicators**

- % of residents educated to NVQ Level 5 or equivalent
- % of residents with 5 or more GCSEs Grade A-C
- % of residents with no qualifications
- Position in the Index of Multiple Deprivation

The HIA, together with the Equality Impact Assessment (EIA), assess the policies within the Local Plan in order to reveal any detrimental impacts on equality groups and health issues relating to residents in the Borough. These two assessments will aid the improvement of the planning service that the Council provides to its residents, workers and visitors to the Borough on a day to day basis.

#### 6. Recommendations

To help mitigate any potential negative effects from the implementation of the Barrow Borough Local Plan, the following key recommendations are highlighted:

- Align the HIA alongside other Local Plan documents to ensure health planning is reflected throughout.
- Encourage partnership working to deliver common objectives of Local Plan and other Council strategies such as the Council Plan.
- Consider innovative ways of using Section 106 monies or tariffs to maximise health gains.
- Continue to align services in order to achieve operational efficiencies whilst strengthening access to health and wellbeing services
- Encourage health impact assessments at a project level / planning application stage for larger sites.

## 7. Monitoring and Evaluation

The Barrow Borough Local Plan has potential wide ranging health implications; however most of the impacts are indirect rather than direct. An example of this would be that improvements to the built and natural environment can indirectly influence the life style choices of individuals and communities. Many of the likely impacts are difficult to articulate in summary form, for example, planning growth across the Borough will lead to increased housing and new Barrow based jobs. This has the potential to have positive impacts on the health of residents in the Borough.

The aging population profile will place a steadily increasing strain on health care services, which has the potential to impact on the future sustainability and resilience of communities. The Local Plan seeks to rebalance this situation. Policy HC2 supports the development of facilities to promote heath and wellbeing in the Borough, whilst protecting residential amenity and sustainability. The Plan seeks to create sustainable communities that are supported by jobs, housing, services and amenities that help support health, wellbeing, social and community resilience, cohesion and independence.

Overall the process of the HIA has helped to critically appraise the likely health impacts of the Plan. It has led to further consideration of health and well being issues within the Local Plan, and highlighted areas where the Local Plan aligns with other Council strategies.

Through the Annual Monitoring Report (AMR) process, the Council will monitor the proportion of residents describing health as poor and the proportion of residents with limiting long term illness. Should new issues emerge or challenges worsen, the Council may look to review elements of the Local Plan to better address health and wellbeing objectives.

**Contact:** 

**Planning Policy Team** 

**Development Services** 

**Barrow Borough Council** 

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**Duke Street** 

**Barrow-in-Furness** 

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Working together to support sustainable development within the Borough of Barrow-in-Furness

