



LAND AT GOSFORD

HEALTH IMPACT ASSESSMENT – FINAL VERSION

BARWOOD DEVELOPMENT SECURITIES LIMITED & THE TRUSTEES OF THE PHILIP KING HOMES TRUST

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CONTENTS

1.	HEALTH IMPACT ASSESSMENT BACKGROUND	1
2.	DEMOGRAPHIC OVERVIEW.....	5
3.	OVERVIEW OF HEALTH POLICY IN OXFORDSHIRE	3
4.	ASSESSMENT	15
5.	SUMMARY AND RECOMMENDATIONS	48
6.	CONCLUSIONS.....	53

Appendix A – Site Development Plan

1. HEALTH IMPACT ASSESSMENT BACKGROUND

Scheme Description

- 1.1 This Health Impact Assessment has been prepared on behalf of Barwood Development Securities Ltd and the Trustees of the Philip King Homes Trust (registered charity No. 267458) hereafter the "Applicant" or "Barwood". This Statement supports an application for outline planning permission for Land at Gosford (the "Site"). The Site is allocated for residential development in the adopted Cherwell Local Plan 2011 – 2031 (Part 1) Partial Review, through Policy PR7a.
- 1.2 This HIA has been prepared in discussion with Oxfordshire County Council and reflects feedback received from the Healthy place shaping team.
- 1.3 As noted in the Planning Statement, the Site is in the jurisdiction of Cherwell District Council and falls within Gosford and Water Eaton Parish. It is allocated for development within the adopted Cherwell Local Plan (Part 1) Partial Review – Oxford's Unmet Housing Need. The proposed Site lies on the south eastern edge of Kidlington and extends to approximately 27.75 hectares and is approximately 8 kilometres to the north of Oxford, 18 kilometres to the north of Abingdon and 12 kilometres south of Bicester, with Kidlington town centre located approximately 2km from the Site.
- 1.4 The west of the Site is bordered by Bicester Road, whilst Oxford Road borders the south west of the Site. To the north of the Site there is a single arable field which forms the northern part of 'Land South East of Kidlington' allocation. The field is bound by tree lined field boundaries to the east and west, which separate the field from Water Eaton and Bicester Road respectively.
- 1.5 The application will provide up to 370 residential dwellings, with 50% affordable homes. Access to the Site by vehicles will be from two points along Bicester Road. The main access point will be a newly created T junction, with the secondary access point being at another T junction along Bicester Road which will also serve the playing fields. This secondary access point will also serve as the emergency vehicular access point and pedestrian access point.
- 1.6 The timescale for the development of the scheme is projected to be around six years. The application is for outline planning permission and details on aspects such as walking and cycling routes will be dealt with at the reserved matters stage. Development is

proposed to start on-site in Q1 2024, with completion by 2030. A copy of the development plan for the scheme is provided in Appendix A.

Policy Context for the Site

1.7 A HIA is required for the scheme, and it follows guidance that has been produced by Oxfordshire County Council in the Oxfordshire Health Impact Assessment Toolkit¹. The HIA focuses on the eleven health priorities listed below:

- Housing.
- Physical activity.
- Healthy food environments.
- Air quality.
- Noise.
- Traffic & Transportation.
- Crime and Anti-social behaviour.
- Economy and Employment.
- Education and Skills.
- Local natural environment and access to green spaces.
- Access to services.

1.8 To supplement the analysis, the HIA draws on other documents produced to support the full planning application and these are referenced in the HIA where applicable.

Health Impact Assessments

1.9 A HIA is commonly defined as:

*"A combination of procedures, methods and tools by which a policy, programme or project may be judged as to its potential effects on the health of a population, and the distribution of those effects within the population"*²

1.10 The HIA is based upon a socio-economic model of health. It is a tool to organise both positive (for example, the creation of jobs) and negative (for example, the generation of

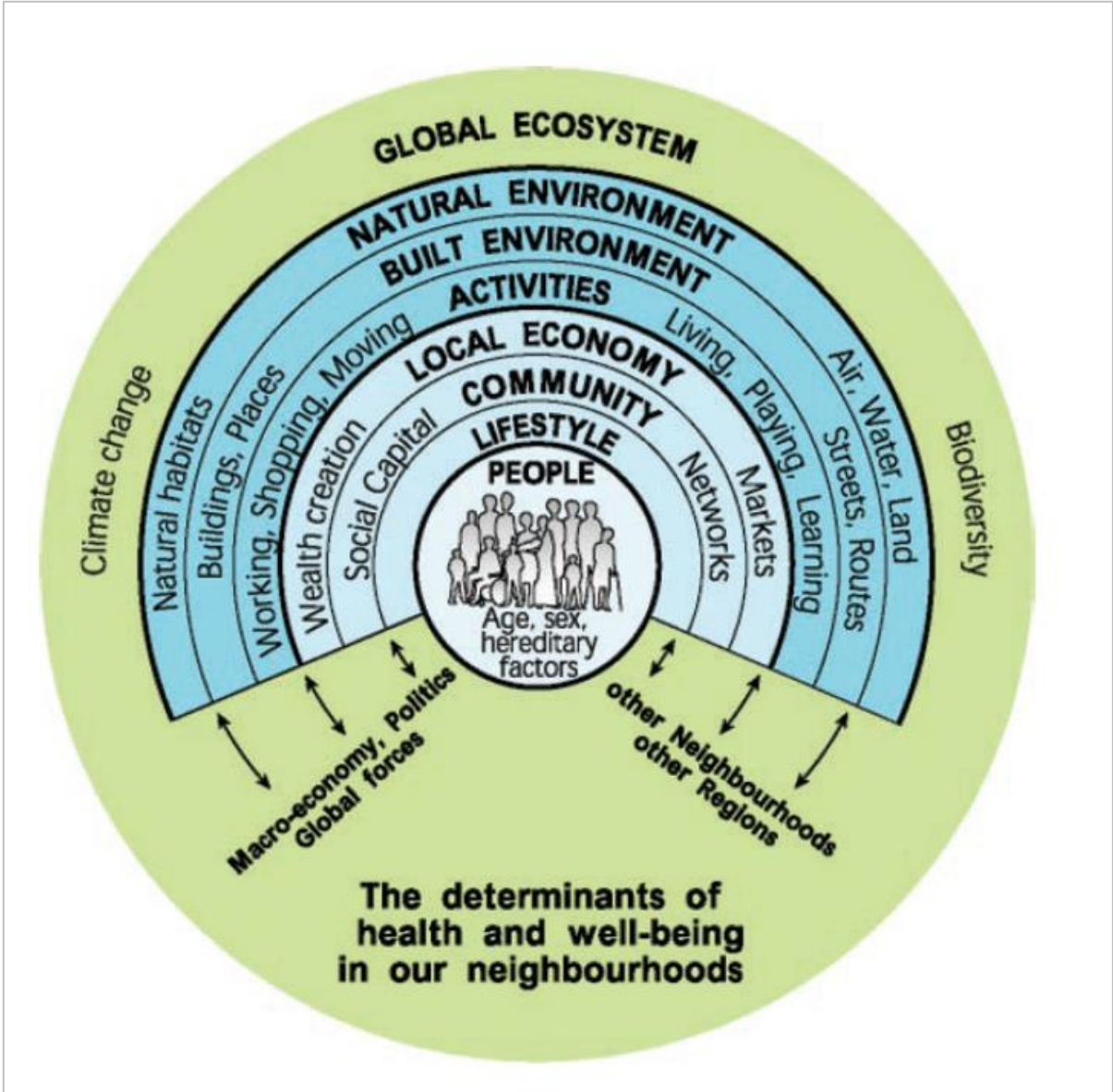
¹ Oxfordshire Health Impact Assessment Toolkit: Oxfordshire County Council, January 2021.

² Health impact assessment for intersectoral health policy: a discussion paper for a conference on health impact assessment: from theory to practice: Lehto & Ritsatakis, 1999.

pollution) impacts on the different affected subgroups of the population that might result from the development.

- 1.11 The HIA aims to identify all these effects on health in order to enhance the benefits for health and minimise any risks. The HIA framework moves beyond analysing healthcare services, which help people when they are ill, to assessing the effects of development upon major health assets, which help people stay healthy.
- 1.12 Many factors influence health and well-being. These include housing, community networks, places to play and modes of travel and opportunities to move. These are known as determinants of health. The Proposed Development will shape some of these determinants of health and by contributing an entirely new housing stock to the area will be able to have a positive influence on health and well-being. The HIA is also concerned with inequalities in health, as some population groups are more susceptible to change in the social, economic and physical environments and may be more susceptible to poor health.
- 1.13 One of the additional aims of a HIA is to assist public health management planning. Management planning is an impartial output as it proposes ways in which health and health inequalities can be addressed by all parties involved in the physical design of the scheme. In this way, benefits can be embodied within the scheme and extend beyond the life of the HIA itself.
- 1.14 Figure 1.1 shows the many factors that influence health and well-being. These include housing, community networks, places to play and modes of travel and opportunities to move.

Figure 1.1: Main determinants of health



Source: Human ecology model of a settlement (Barton and Grant, 2006)

2. DEMOGRAPHIC OVERVIEW

Introduction

- 2.1 In line with guidance from Oxfordshire County Council, this section provides an overview of the population in Kidlington and Cherwell. Where possible, Kidlington East ward has been used for the analysis, however where 2011 Census data has been used the data relates to the Old Yarnton, Gosford and Water Eaton ward.

Population

- 2.2 Data from the 2020 population estimates published by the Office for National Statistics (ONS) show the population of Cherwell is currently around 151,800. The population of Kidlington East Ward (within which the Proposed Development is located) currently stands at around 9,739. Table 2.1 shows the population of Kidlington East Ward split by gender compared to Cherwell, the South East and Great Britain. All areas have a similar share of males and females at almost 50/50, with all areas having a slightly higher proportion of females. Kidlington East has a split of 51.3% (4,998) females and 48.7% (4,741) males and Cherwell has a split of 50.5% (76,700) females and 49.5% (75,100) males.

Table 2.1: Population by Gender, 2020

	Kidlington East Ward	Cherwell	South East	Great Britain
Males	48.7%	49.5%	49.3%	49.4%
Females	51.3%	50.5%	50.7%	50.6%

Source: ONS, Population Estimates

- 2.3 Table 2.2 shows the population of Kidlington East ward, Cherwell and comparator areas split by age group. In all areas, the largest proportion of the population is of working age (16-64). It stands at 59.7% (5,816) in Kidlington East and 61.3% (93,100) in Cherwell. This is similar to the South East and Great Britain, with the cohort 16-64 accounting for 61.1% and 62.4% of the population respectively. The second biggest cohort in Kidlington East is those aged 65+, accounting for 21.9% and those aged 0-15 account for the smallest proportion at 18.4%. In Cherwell those aged 0-15 account for 20.2%, while those aged over 65 account for the smallest proportion at 18.5%.

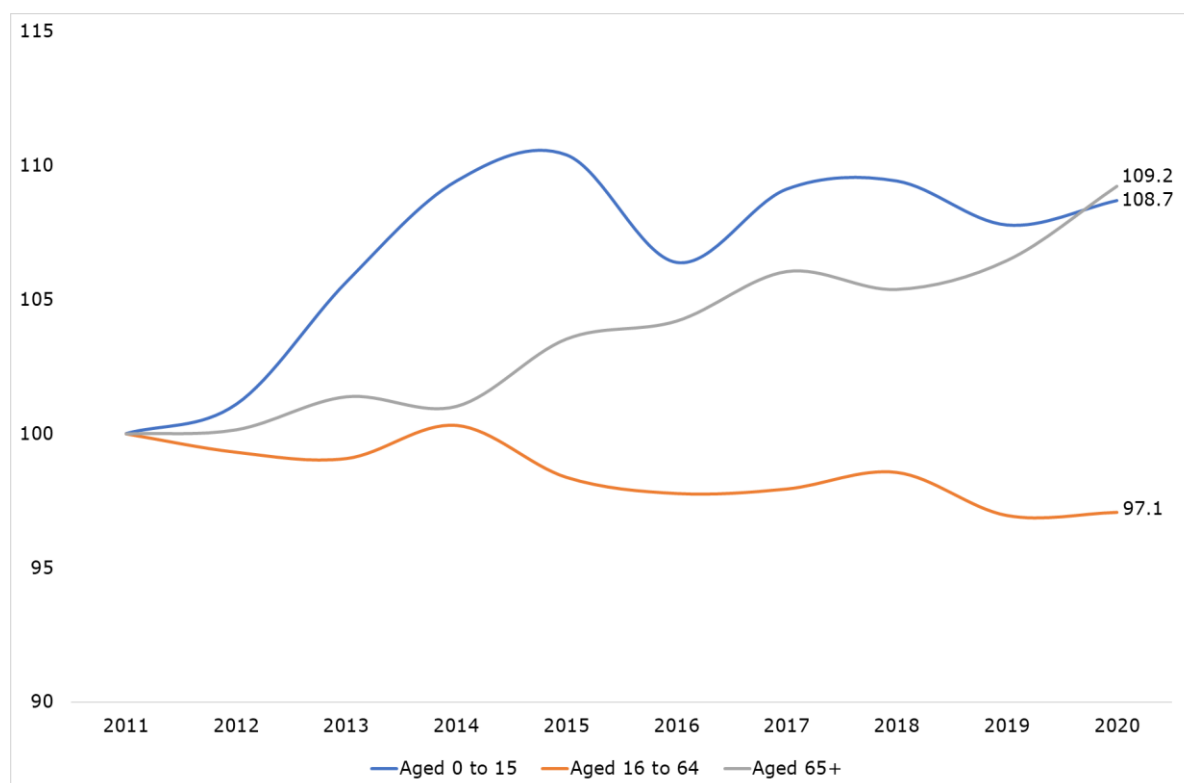
Table 2.2: Population by age group, 2020

	Kidlington East Ward	Cherwell	South East	Great Britain
0-15	18.4%	20.2%	19.3%	18.9%
16-64	59.7%	61.3%	61.1%	62.4%
65+	21.9%	18.5%	19.7%	18.7%

Source: ONS, Population Estimates

- 2.4 Figure 2.3 shows the population change by age group in Kidlington East ward between 2011 and 2020. As shown, the fastest growing age group were those aged 65 and over with a growth of 9.2%. This is an additional 180 people in this age group. The number of people aged 0-15 grew by slightly less at 8.7% (143 additional people), whereas those of working age (16-64) fell by 2.9% (175 fewer people).

Figure 2.1: Population Change by Age in Kidlington East, 2011-20



Source: ONS, Population Estimates

- 2.5 Table 2.3 shows the population of Yarnton, Gosford and Water Eaton ward split by ethnic group compared to Cherwell, the South East and England, drawing on data from the 2011 Census³. In 2011, 93.3% of the ward's population was white, 2% were mixed/multiple ethnic groups, 2.9% were Asian/Asian British, 1.4% were Black/African/Caribbean/Black

³ Data for Kidlington East ward is not available from the 2011 Census.

British and 0.4% were other ethnic groups. This was similar in Cherwell where 92.2% of the population were white, 1.8% were mixed/multiple ethnic groups 4.3% were Asian/Asian British, 1.4% were Black/African/Caribbean/Black British and 0.4% were other ethnic groups.

Table 2.3: Population by Ethnic Group, 2011

	Yarnton, Gosford and Water Eaton Ward	Cherwell	South East	England
White	93.3%	92.2%	90.7%	85.4%
Mixed/multiple ethnic groups	2.0%	1.8%	1.9%	2.3%
Asian/Asian British	2.9%	4.3%	5.2%	7.8%
Black/African/Caribbean/Black British	1.4%	1.4%	1.6%	3.5%
Other ethnic group	0.4%	0.4%	0.6%	1.0%

Source: Census 2011, Table: KS201EW

- 2.6 The Kidlington Community profile of Health and Wellbeing⁴, that was produced as part of the Oxfordshire Joint Strategic Needs Assessment (JSNA), also draws on data from the 2011 Census. According to the report, the largest groups of non-UK born residents in Kidlington East were from India (221), Poland (116) and the United States (113).

Claimant Count

- 2.7 The claimant count gives the number of people claiming Jobseeker's Allowance plus those who claim Universal Credit and are required to seek work and be available for work. Table 2.4 shows the claimant count for Kidlington East and comparator areas for January 2020 and January 2022. During this time the claimant count in Kidlington East increased by 0.9 percentage points from 1.4% to 2.3%, which represents an additional 50 people claiming benefits. In Cherwell, the claimant count rose from 1.5% to 2.6% in the same period, an increase of 1.1 percentage points. This represents 1,045 additional people claiming benefits. The rise in the claimant count in Kidlington East and Cherwell was below the increase seen in the South East and Great Britain, which saw rises of 1.4 percentage points and 1.5 percentage points respectively.

⁴ Kidlington Community profile of Health and Wellbeing evidence: Oxfordshire County Council, July 2021.

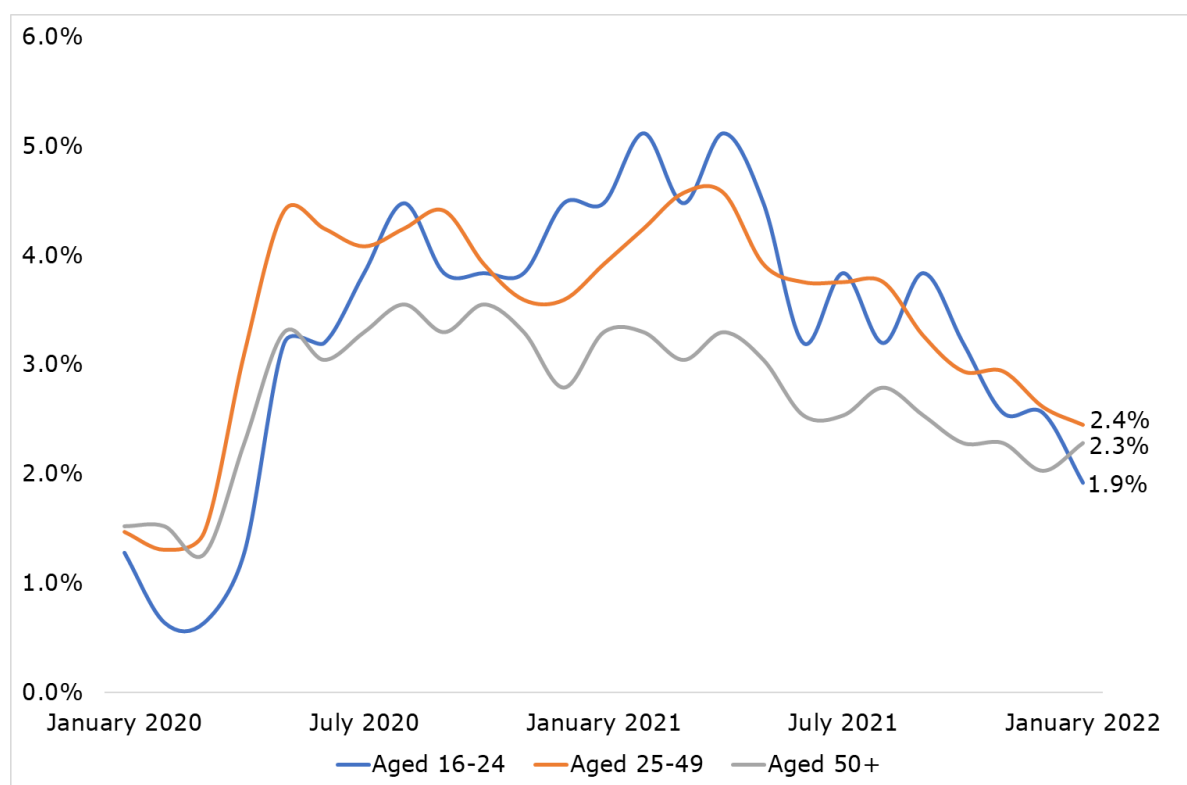
Table 2.4: Claimant Count, December 2019-December 2021

	January 2020	January 2022	Percentage Point Change
Kidlington East Ward	1.4%	2.3%	0.9%
Cherwell	1.5%	2.6%	1.1%
South East	2.0%	3.4%	1.4%
Great Britain	2.9%	4.4%	1.5%

Source: ONS, Claimant Count

- 2.8 The ONS also provides data on claimant count by age groups 16-24, 25-49 and 50+ for the Kidlington East Ward. Figure 2.2 shows the claimant count for each age group as a proportion of the total number of people in that particular cohort. In January 2020, the claimant count for those aged 16-24 was 1.3% and the rate for those aged 25-49 and 50+ was 1.5%. By January 2022 the rate of those aged 16-24 had increased to 1.9% (5 additional people), those aged 25-49 had increased to 2.4% (30 additional people) and those aged 50 and over had increased to 2.3% (15 additional people).

Figure 2.2: Claimant Count by age group as a proportion of age group in Kidlington East Ward, January 2020-January 2022



Source: ONS, Claimant Count

Summary

- 2.9 The population of Kidlington East ward is almost equally split between males and females, with a slightly higher proportion of females, but this is in line with local, regional and national benchmarks. In Kidlington East, the largest proportion of the population is aged 16-64, however this age cohort account for a smaller proportion of the population when compared to the other areas. Kidlington East ward also has a higher proportion of those aged 65 and over when compared to Cherwell, the South East and Great Britain.
- 2.10 The claimant count in Kidlington East ward is lower than all comparator areas, however since 2020 it has increased by 0.9 percentage points and this is likely to be a reflection of the Covid-19 pandemic. The age group with the highest claimant count are those aged 25-49 at 2.4%. Between 2020 and 2022, the claimant count in this age group also increased the most in absolute terms, with an increase of 30 people.
- 2.11 Given the size of the proposed scheme, it is likely that most of the population groups will be affected during the construction phase and once the Proposed Development is built.

3. OVERVIEW OF HEALTH POLICY IN OXFORDSHIRE

- 3.1 This section provides a review of the current health policy in Oxfordshire and summarises the main health priorities that will be impacted by the Proposed Development.

Oxfordshire Joint Strategic Needs Assessment

- 3.2 In June 2021, Oxfordshire County Council published their Joint Strategic Needs Assessment⁵ (JSNA) which identifies the current and future health and wellbeing needs of Oxfordshire's population.
- 3.3 The report looks at the impact of Covid-19 on health and wellbeing in Oxfordshire. Between January and December 2020, there were 19,000 confirmed cases of Covid-19 in Oxfordshire with 700 recorded deaths from the virus. As well as an impact on the health of the population in Oxfordshire, Covid-19 has significantly increased the number of people claiming unemployment-related benefits in Oxfordshire, with the younger age groups in Oxford City and Cherwell particularly affected.
- 3.4 The JSNA also looks at the overall health and wellbeing of the population of Oxfordshire, noting that Oxfordshire's population is relatively healthy with the County doing better or similar to the national average on most public health indicators and life expectancy and healthy life expectancy being significantly higher than national and regional averages for both males and females. The report finds that Oxfordshire's population is ageing, and this is forecast to continue into the future. Alongside this house prices are continuing to rise, and the cost of renting is above average. The report concludes that 'the future growth of the population (especially the number of young people) is very dependent on levels of house building in future and will vary across the county'⁶.
- 3.5 The full JSNA⁷ published by Oxfordshire County Council emphasises the importance of healthy place shaping and active travel. This includes shaping the built environment through 'promoting access to green spaces and health enabling infrastructure at a local level to improve health and wellbeing'⁸. It also involves working with local people and local organisations and re-shaping health, wellbeing and care services. The aims of the Council include embedding health place shaping into the work of the Oxfordshire Growth

⁵ *Oxfordshire Joint Strategic Needs Assessment, Summary of Findings*: Oxfordshire County Council, June 2021.

⁶ *Ibid*, page 9.

⁷ *Oxfordshire Health and Wellbeing, Joint Strategic Needs Assessment 2021*: Oxfordshire County Council, June 2021.

⁸ *Ibid*, page 250.

Board and supporting active travel and communities in response to Covid-19. The report found that during the first Covid-19 lockdown car use in Great Britain fell drastically, hitting a low in mid-April 2020 of 22% of the equivalent day in February 2020. Between April and November 2020, cycling in England increased significantly.

- 3.6 Looking at young people, the JSNA concludes that 42% of children in Oxfordshire did not meet the daily physical activity guidelines in 2019/20, whilst excess weight in children has remained high. In 2019/20, 18.6% of those aged 4 or 5 and 29% of those aged 10 or 11 were overweight or obese. This issue was also found in adults, with over half of Oxfordshire adults classified as overweight or obese, with the prevalence higher in males, older people, some ethnic groups and in more deprived areas.
- 3.7 As part of the JSNA, there is an overall summary for Cherwell⁹, which looks at key health indicators for the District. Of the health indicators in Cherwell, admissions for injuries under 5, under 15's and in 15-24 year-olds were significantly worse than average.
- 3.8 Of the nineteen Middle Super Output Areas¹⁰ (MSOAs) in Cherwell, four had no indicators that were worse than average, one of which covered Kidlington East. Looking at deprivation in Cherwell, it became relatively more deprived moving from 249th to 220th out of 317 local authorities between 2015 and 2019. The number of Lower Super Output Areas¹¹ (LSOAs) amongst the 20% most deprived areas in Cherwell have increased from 4 in 2015 to 6 in 2019 which means that overall Cherwell is relatively more deprived.
- 3.9 Cherwell had the second highest number of confirmed Covid-19 cases of all the Oxfordshire districts, with 139 registered deaths in 2020. The Covid-19 pandemic also impacted Cherwell's labour market. In June 2020, Cherwell had 25,300 jobs furloughed, which amounted to 31% of total eligible employment. This decreased to 7% by October 2020 but rose back again to 15.5% in February 2021.

Oxfordshire Joint Health and Wellbeing Strategy

- 3.10 In March 2019, the Oxfordshire Health and Wellbeing Board published the Oxfordshire Joint Health and Wellbeing Strategy¹² for the period 2018-2023. The Strategy has the shared vision "to work together in supporting and maintaining excellent health and well-

⁹ *Cherwell District Summary 2021*: Oxfordshire County Council, June 2021.

¹⁰ MSOAs are a geographic hierarchy and have an average population of around 7,000.

¹¹ LSOAs have an average population of around 1,500.

¹² *Oxfordshire Joint Health and Wellbeing Strategy*: Health and Wellbeing Board, March 2019.

being for all the residents of Oxfordshire”¹³. There are four main priorities for the Health and Wellbeing Board outlined below:

1. Agreeing a coordinated approach to prevention and healthy place shaping.
2. Improving the resident’s journey through the health and social care system (as set out in the Care and Quality Commission Action Plan).
3. Agreeing an approach to working with the public so as to re-shape and transform services locality by locality.
4. Agreeing plans to tackle critical workforce shortages.

3.11 Through these priorities, the Health and Wellbeing Board and its sub-groups will deliver a good start in life, living well, ageing well and tackling wider issues that determine health. A good start in life is important as it has a lasting impact on what happens in future years, influencing aspects of life such as physical and mental health, safety, educational achievement and a successful work life. The Board aims to achieve prevention of illness through promoting:

- Healthy living.
- Healthy weight.
- Physical activity including active travel and everyday activity.
- Mental wellbeing.
- Childhood immunisations.

3.12 It was found in the JSNA that Oxfordshire has seen an increase in the number of children referred to social care, children on protection plans and children who are looked after. The proportion of care leavers in Oxfordshire who are in employment, education or training is below average. There will also be a focus on targeting inequality issues in particular groups with the worst outcomes. These include:

- Childhood obesity.
- Identify hotspots for children missing out on education.

¹³ *Ibid*, page 2.

- Inequalities in opportunity and life chances.

3.13 Living well is an important priority for Oxfordshire, because despite being above the national average for many health outcomes, many people in the County are still living with avoidable conditions such as heart disease, cancer and diabetes. The JSNA found that there is a considerable difference in life expectancy between affluent wards and more deprived wards for both males and females and it was found by the 2011 Census that 89,800 people in Oxfordshire reported that they had activities limited by health or disability. To target disease and promote living well, the Board aims to promote healthy lifestyles, including reducing physical inactivity and to promote physical activity, enabling people to eat healthily, reducing the prevalence of smoking and promoting mental wellbeing.

3.14 The Health and Wellbeing Strategy also priorities ageing well. This is becoming an increasingly important priority for Oxfordshire and the UK as a whole as the trend of an ageing population continues. According to the JSNA, by 2031 the number of people aged 85 and over is expected to have increased by 55% in Oxfordshire as a whole. One of the aims of the Strategy is to focus on prevention and reduce the need for treatment to delay the need for care by helping people to manage long-term conditions. The Strategy focuses on the following:

- Address the problem of loneliness and promote mental wellbeing.
- Reduce the impact of ill health through falls prevention.
- Delay the need for services and care through services close to home.

3.15 The final priority in the Health and Wellbeing Strategy is to tackle wider issues that determine health. The Strategy focuses on how quality housing can be delivered whilst promoting health and wellbeing. A large housing problem in Oxfordshire is rising house prices. The JSNA found that house prices in Oxfordshire are continuing to rise at a faster rate than wages. District councils in Oxfordshire have a combined target of 34,300 new homes to be built by the end of March 2022 and a further 47,200 homes by the end of March 2031. High house prices in Oxfordshire are creating problems when trying to recruit and retain health and care staff, meaning services are struggling to function. Further to this, there has been an increase in the proportion of households defined as “fuel poor” in each district of Oxfordshire. To target these wider issues, the Strategy outlines plans to prevent poor health outcomes through good spatial planning for community interaction

and active travel and to reduce the impact of other factors which have a negative impact on health such as domestic abuse, poor air quality and fuel poverty.

Cherwell District Council Active Communities Strategy 2019-2023

3.16 In 2019, Cherwell District Council published its Active Communities Strategy¹⁴ for the period 2019-2023. The vision of the Council is to make the District a 'great place to live, work, visit and invest'. It also helps contribute to the three corporate priorities of the Council:

- Thriving communities and wellbeing.
- Clean, green and safe.
- Become a district of opportunity and growth.

3.17 The Strategy focuses on the importance of sport, leisure, physical activity play and the support of the Council to provide informal open space, sports pitches and sports centres. The Council aims for this provision to encourage an active lifestyle in the local population to improve physical and mental wellbeing, reduce obesity levels to reduce the risk of associated diseases and to increase success in sport by providing facilities, supporting sport development programmes and clubs.

3.18 The Strategy has four priorities to deliver the Council's targets which, are outlined below:

1. To enable all residents to lead an active life, increase physical activity and improve inactivity levels.
2. To increase accessibility to physical activity opportunities and services for all ages.
3. To improve and develop the quality of local sport and leisure facilities.
4. To support the improvement of health and mental and physical wellbeing for Cherwell District throughout delivered services and working with our partners

3.19 One goal of the first priority is to increase the number of people using the parks and open spaces. This will be achieved through promoting open space in the District for recreational activities focussing on jogging, walking and cycling and delivering youth activator programmes in community parks and open spaces to maximise the uses of these

¹⁴ *Active Communities Strategy 2019-2023*: Cherwell District Council, May 2019.

facilities. A main goal of this priority is also to increase activity levels and reduce inactivity levels in all ages. This will be done through working with schools to promote physical activity and delivering sports holiday programmes for children aged 5-15. The Council will also work with local communities to ensure there are opportunities for adults to participate in sports programmes and the delivery of 50+ physical activity programme across Cherwell.

- 3.20 To increase accessibility to physical activity opportunities the Council aims to increase the number of sports clubs and physical activity opportunities in the District through support and start-up programmes. This includes activities such as a park run, walking football and netball, beginner jog groups and 50+ activities. There will also be a focus on increasing physical activity in wards of high inactivity through working in partnership with Active Oxfordshire as part of the Healthy Place Making Agenda.
- 3.21 To improve and develop the quality local sports and leisure facilities the Council want to improve the efficiency of spending and distribution of funds received from developers on their associated projects and to improve the quality of Council provided sports and leisure facilities. This priority will also be achieved through increasing the number of community hours offered by local educational establishments for their sports and leisure facilities and the Council will proactively support local sports clubs to increase their accessibility to these facilities.
- 3.22 The final priority is to improve physical and mental wellbeing within the Cherwell Community. The Council will work with partners to successfully increase the profile of sport and leisure and embed it in wider policy areas, for example health, crime, environment, housing and transport. The Council also aims to increase the number of clubs formed to meet any gaps in the current provision and ensure existing clubs obtain grant funding.

Oxfordshire Oxwell School Survey 2019

- 3.23 Oxfordshire County Council conducted the Oxwell school survey¹⁵ in 2019 which aimed to collect pupils' responses to questions on a range of health and wellbeing-related issues, to inform individual schools, Oxfordshire County Council and other research. The data that was collected is to be used to improve the wellbeing and mental health of children

¹⁵ *Oxfordshire Oxwell School Survey*: Oxfordshire County Council, December 2020.

and adolescents and to ensure resources are used effectively. The survey had a total of 4,222 respondents, 45% of which were males and 55% females.

- 3.24 The survey first looks at mental wellbeing using the Warwick-Edinburgh mental wellbeing scale. For those in primary school 18% reported having a high mental wellbeing score, those with an average score was 71%, 8% reported a below average mental wellbeing score and those that reported a low mental wellbeing score was at 3%. Comparing this to those in year 12, the amount that reported high mental wellbeing and average mental wellbeing had both decreased to 6% and 61% respectively, whilst the amount who reported a below average and low mental wellbeing score had increased to 16% and 17% respectively.
- 3.25 The report also looks at lifestyle and healthy eating. Overall, 79% of pupils ate breakfast most mornings, with girls consistently eating breakfast less frequently than boys. The amount that ate breakfast every day decreased with age. In year 4, 91% of girls and 93% of boys ate breakfast every day, this decreased to 66% for girls in year 12 and 73% of boys in year 12. When looking at physical activity, the survey found that in girls the proportion who partake in more than six or more hours of exercise a week decreased with age, whilst it increased in boys. In year 4, 50% of boys exercised for six hours or more a week compared to 42% of girls. By year 12, this had increased to 52% in boys but decreased to 32% in girls. Overall, the survey found that 47% of pupils across all the age groups took part in at least six hours of exercise a week, but 80% of girls and 79% of boys said they would like to do more physical activity.

Kidlington Local Cycling and Walking Infrastructure Plan

- 3.26 The Kidlington Local Cycling and Walking Infrastructure Plan¹⁶ was published in January 2022 and is a report by the Corporate Director for Environment and Place at Oxfordshire County Council. The report outlines the cycling and walking network plan for Kidlington. It includes how the village will be linked to neighbouring rural settlements and outlines measures to improve over the ten years up to 2031. It is the aim that by improving the network there will be an increase in the uptake of active travel modes.

¹⁶ *Kidlington Local Cycling and Walking Infrastructure Plan*: Corporate Director for Environment and Place, January 2022.

- 3.27 The Cycling and Walking Infrastructure Plan will play a key role in achieving the Council's strategy to increase Active and Healthy Travel and meet further objectives on climate action, air quality, and healthy place shaping.
- 3.28 The Cycling and Walking plan has two functions. Firstly, it sets out how the Council could achieve a measurable and step-change increase in cycling and walking in Kidlington and secondly it sets out the scale of ambition to achieve this change, with analysis of the potential challenges and impacts of cycling and walking schemes.
- 3.29 The Plan specifically aims to directly enhance the quality of life, improve health and wellbeing, help reduce the impact of climate change and protect the local environment by making active and sustainable modes of travel more attractive. It is also an aim that improved cycling and walking routes through Kidlington will improve accessibility between the most and least deprived areas of the village and improve access to cycling and walking infrastructure for all socio-economic groups to help reduce health inequalities.

PR7a Development Brief

- 3.30 The PR7a Development Brief¹⁷ produced for the site looks at eight development principles including Healthy Place Shaping. It outlines that early planning and provision of health promoting design and infrastructure can have a positive impact on health and wellbeing and is important in establishing positive behaviour and a healthier lifestyle. This can include community facilities, green spaces and safe and legible walking and cycling routes. The proposed site should be developed in a way that contributes to the health and wellbeing of local residents including:
- The provision of new and enhanced walking, wheelchair and cycling connections to support and active lifestyle and prioritise pedestrians and cyclists over cars.
 - Provide new and improved bus stops on Bicester Road.
 - The provision of new sports pitches and supporting facilities complementing existing facilities at Stratfield Brake.
 - Create new areas of accessible open space, woodland, food growing opportunities and children's play space.

¹⁷ PR7a Land South East of Kidlington: Cherwell District Council, January 2022.

- Meet the need for early provision of health promoting infrastructure.

Public Health England: A place based approach to addressing health inequalities

- 3.31 In September 2021, Public Health England published their place-based approach for reducing health inequalities report¹⁸. The report looks at health inequalities that are present in society and what can be done to reduce these inequalities.
- 3.32 The main health inequalities outlined in the report were the gap in life expectancies between the most and least deprived parts of the country. The life expectancy for females in the most deprived parts of the country is declining. The report also looks at quality of life, with the gap in healthy life expectancy between the most and least deprived parts of England being around 19 year for males and females between 2014 and 2016.
- 3.33 These health inequalities lead to extra costs to the NHS as a result of greater hospital use by people living in deprived areas. With the current additional cost estimated to be £4.8 billion a year. Health inequalities also come at an extra cost to the national and local economies as they can cause a reduction in employment and productivity.
- 3.34 Narrowing gaps in life expectancy is highlighted in the Industrial strategy, the green paper produced by the Department for Health and Social Care and in the NHS Long Term Plan. These all look at opportunities for ambitious, co-ordinated, national and local level action on health inequalities. These health inequalities are not caused by a single issue. They are the result of a mix of environmental and social factors in the local area, therefore, local areas have an important role in reducing health inequalities.

Public Health England: Spatial planning for health

- 3.35 The spatial planning for health report¹⁹ from Public Health England looks at the linkages between health and the built and natural environment. The review focuses on five aspects of the built and natural environment that can be designed and shaped to promote certain health outcomes.

1. Neighbourhood design

¹⁸ *Place-based approach for reducing health inequalities*: Public Health England, September 2021 (accessed: 31/05/2021). Available here: <https://www.gov.uk/government/publications/health-inequalities-place-based-approaches-to-reduce-inequalities/place-based-approaches-for-reducing-health-inequalities-main-report>

¹⁹ *Spatial Planning for Health*: Public Health England, July 2018.

- Enhancing neighbourhood walkability through improved street connectivity can help encourage active travel and promote physical activity.
- Building complete and compact neighbourhoods with provision of local amenities can improve mobility and social engagement among older adults.
- Enhancing connectivity with safe and efficient infrastructure through enhancing street connectivity and improving the public realm can provide alternative routes for active travel and increase pedestrian activity.

2. Housing

- Improving the quality of housing such as ensuring homes are warm and energy efficient can improve general physical and mental health. Also, the reduction of hazards in the home can reduce the risk of unintentional injury or death.
- Increasing provision of affordable and diverse housing can improve safety perceptions in the neighbourhood and can be associated with increased physical activity.
- Increasing provision of affordable housing for groups with specific needs can lead to improvements in social, behavioural and health-related outcomes.

3. Healthier food

- Ensuring the provision of healthy, affordable food for the general population is associated with improved attitudes towards healthy eating and healthier food purchasing behaviours, such as increased fruit and veg consumption.
- There is new but limited evidence to suggest that enhancing community food infrastructure can improve attitudes towards healthier food, increased opportunities for physical activity, and can increase fruit and veg consumption.

4. Natural and sustainable environment

- Recent evidence suggests that a reduction in exposure to environmental hazards and living in an area with clear air can lead to positive changes in people's health behaviours such as increased physical activity amongst older adults.

- Access to and engagement with the natural environment is associated with positive health outcomes, including improved physical and mental health and reduced risk of cardiovascular disease, mortality and other chronic conditions.
- There is moderate quality evidence to suggest adaptation to climate change and the planting of trees has a cooling effect on the environment, with an urban park being around 1 degrees Celsius cooler than a non-green site.

5. Transport

- Investing in the provision of active travel infrastructure can increase physical activity levels and improve mobility among children, adults and older adults. This can lead to numerous health gains.
- The provision of public transport is associated with higher levels of active travel amongst children and combining public transport with other forms of active travel, such as walking or cycling, can improve cardiovascular fitness.
- Prioritising active travel and road safety is associated with positive behavioural and health outcomes and can reduce the risk of pedestrian injury.
- Enabling mobility for all ages and activities can have an positive impact on engagement in physical activity behaviours.

Putting Health into Place

3.36 In August 2019, NHS England published a series of Putting Health into Place publications. The Putting Health into Place Executive Summary looks at the main purpose of the report and how where we live impacts our health and wellbeing. The places we live can often have a significant impact on peoples mental and physical health, although this impacts can often be negative. To combat these negative impacts there needs to be a 'whole systems' approach to creating healthier places where the council, developers and housing associations, the NHS and the voluntary community and social enterprise sector all work together.

3.37 The report identifies the top 10 principles to ensure the creation of healthier neighbourhoods.

1. Plan ahead collectively.
2. Assess local health and care needs and assets.

3. Connect, involve and empower people and communities.
4. Create compact neighbourhoods.
5. Maximise active travel.
6. Inspire and enable healthy eating.
7. Foster health in homes and buildings.
8. Enable healthy play and leisure.
9. Develop health services that will help people stay well.
10. Create integrated health and wellbeing centres.

Summary

3.38 Based on a review of policy, the main health priorities identified for Kidlington, Cherwell and Oxfordshire are summarised below:

- Increase physical activity levels and reduce rates of inactivity in all age groups to improve physical and mental wellbeing.
- Decrease levels of obesity, to reduce the risk of associated diseases and reduce the strain and costs on the NHS and public services.
- Encourage the increased use of open spaces, parks and sports and leisure facilities. Increasing the provision and quality of these spaces is also important.
- Achieve the priority of healthy place making and encourage active travel through increasing levels of walking and cycling for travel and to reduce health inequalities by improving cycling and walking infrastructure for all socio-economic groups.
- Health inequalities between communities need to be addressed to ensure the best health outcomes for all groups in society.

4. ASSESSMENT

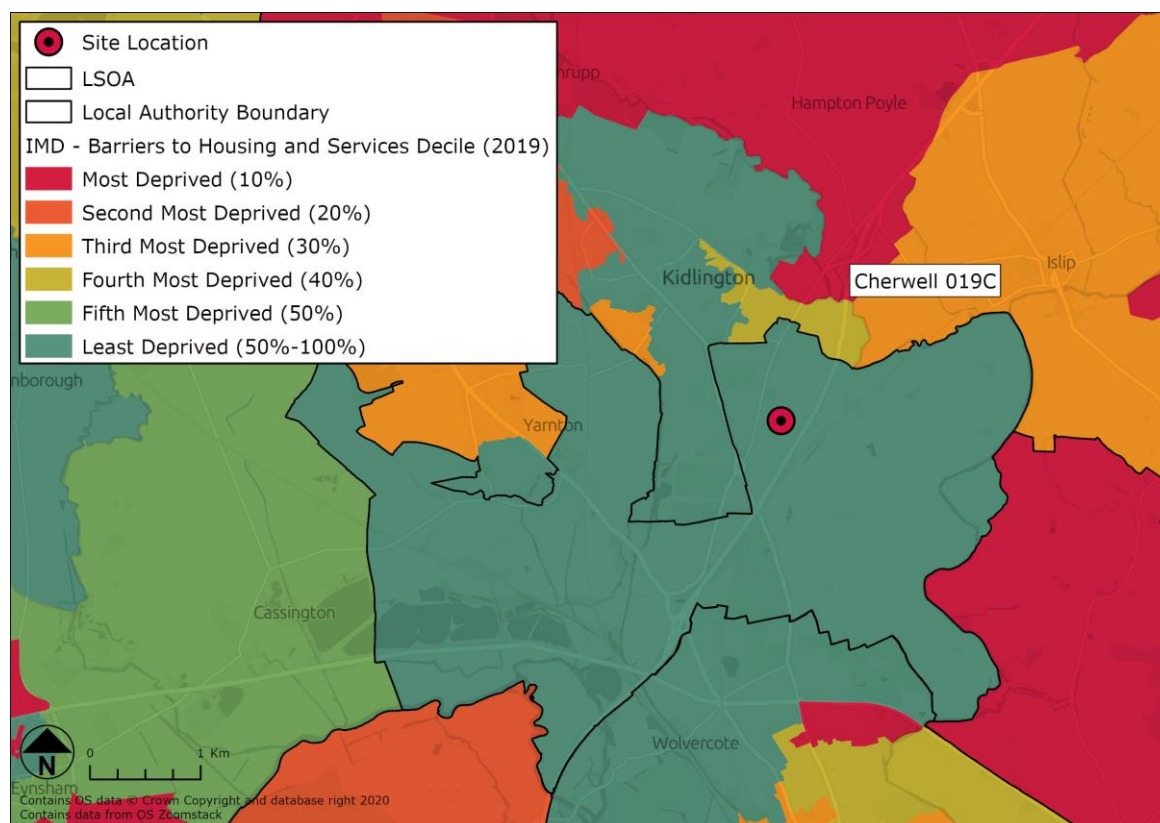
Introduction

- 4.1 This section identifies the impact of the proposed scheme on the eleven priorities outlined in the Oxfordshire Health Impact Assessment Toolkit, beginning with the first priority of housing. Where data analysis has been undertaken in the form of maps, charts and tables for a particular priority, this is presented first and is then followed by the summary table suggested in the HIA toolkit.

Housing

- 4.2 Figure 4.1 shows the Index of Multiple Deprivation at the Site location for the barriers to housing domain. The Cherwell 019C LSOA within which the Site sits in is within the 50% least deprived LSOAs for barriers to housing, however there are areas of deprivation in the surrounding LSOAs. To the north and east of the Site, there are LSOAs which fall within the top 10% most deprived areas for barriers to housing. Areas to the south west and the north east fall within the top 20% and top 30% most deprived areas.

Figure 4.1: Index of Multiple Deprivation, Barriers to Housing and Services for Site Location (2019)



Source: Ministry of Housing, Communities & Local Government

- 4.3 Table 4.1 shows housing tenure for Yarnton, Gosford and Water Eaton Ward, Cherwell and comparator areas. According to the 2011 Census, 82.7% of people own their own home in Yarnton, Gosford and Water Eaton. This is higher than the proportion in Cherwell (69.3%), the South East (67.6%) and England (63.3%). In the ward, there is also a significantly lower proportion of people who rent social housing. In Yarnton, Gosford and Water Eaton, 5.2% of the population social rent, compared to 12.1% in Cherwell, 13.7% in the South of England and 17.1% in England. Table 4.1 shows the tenure profile of the areas in more detail.

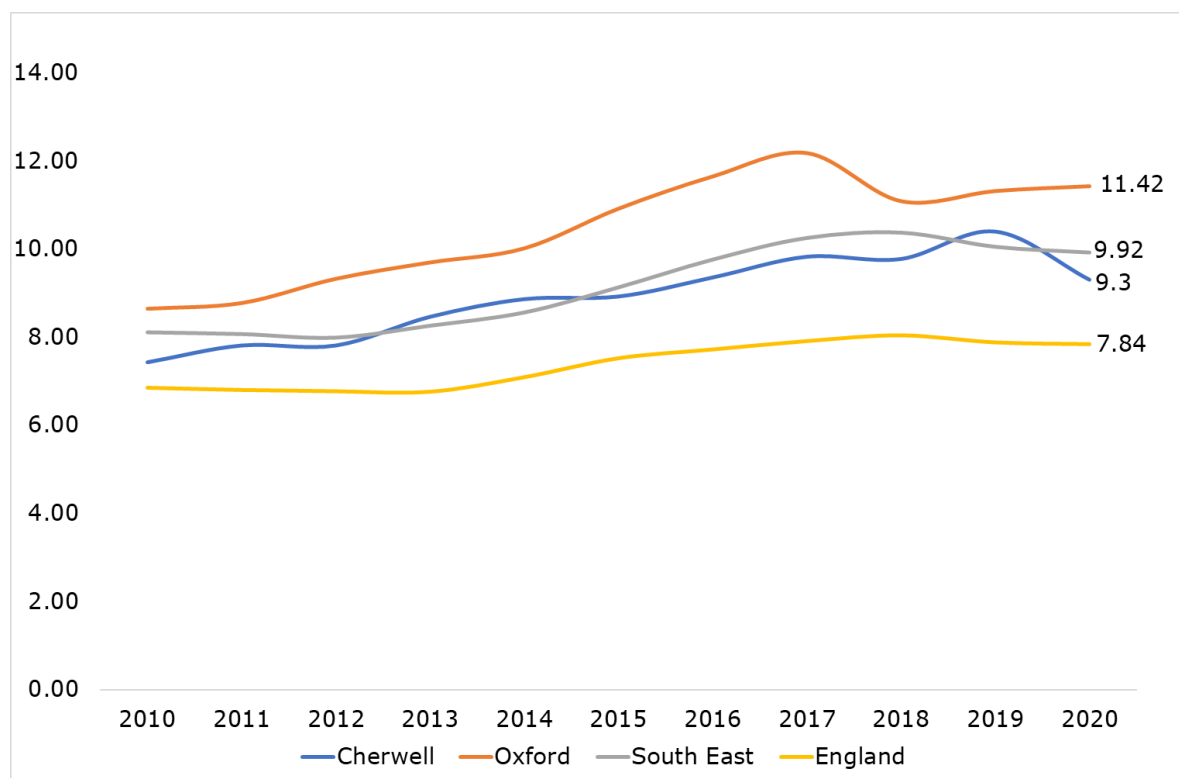
Table 4.1: Housing Tenure, 2011

	Yarnton, Gosford & Water Eaton	Cherwell	South East	England
Owned	82.7%	69.3%	67.6%	63.3%
Shared ownership (part owned and part rented)	1.1%	0.8%	1.1%	0.8%
Social rented	5.2%	12.1%	13.7%	17.7%
Private rented	9.9%	16.2%	16.3%	16.8%
Living rent free	1.2%	1.6%	1.3%	1.3%

Source: Census 2011, Table: KS402EW

- 4.4 Figure 4.2 shows the change in affordability ratios over the past decade and includes data from the neighbouring local authority of Oxford for comparison. The current median price for a house in Cherwell is £300,000. This is below the median price for a house in Oxford (£400,000) and the South East (£327,500), but it is above the median price of a house in the whole of England (£249,000).
- 4.5 In 2010, the affordability ratio in Cherwell was 7.43, meaning the median house price was 7.43 times the median salary. By 2020, the affordability ratio in Cherwell had increased by 1.87 to reach 9.3. This is currently below the affordability ratio for Oxford (11.42) and the whole of the South East (9.92); however, it is significantly above the ratio for the whole of England (7.84).

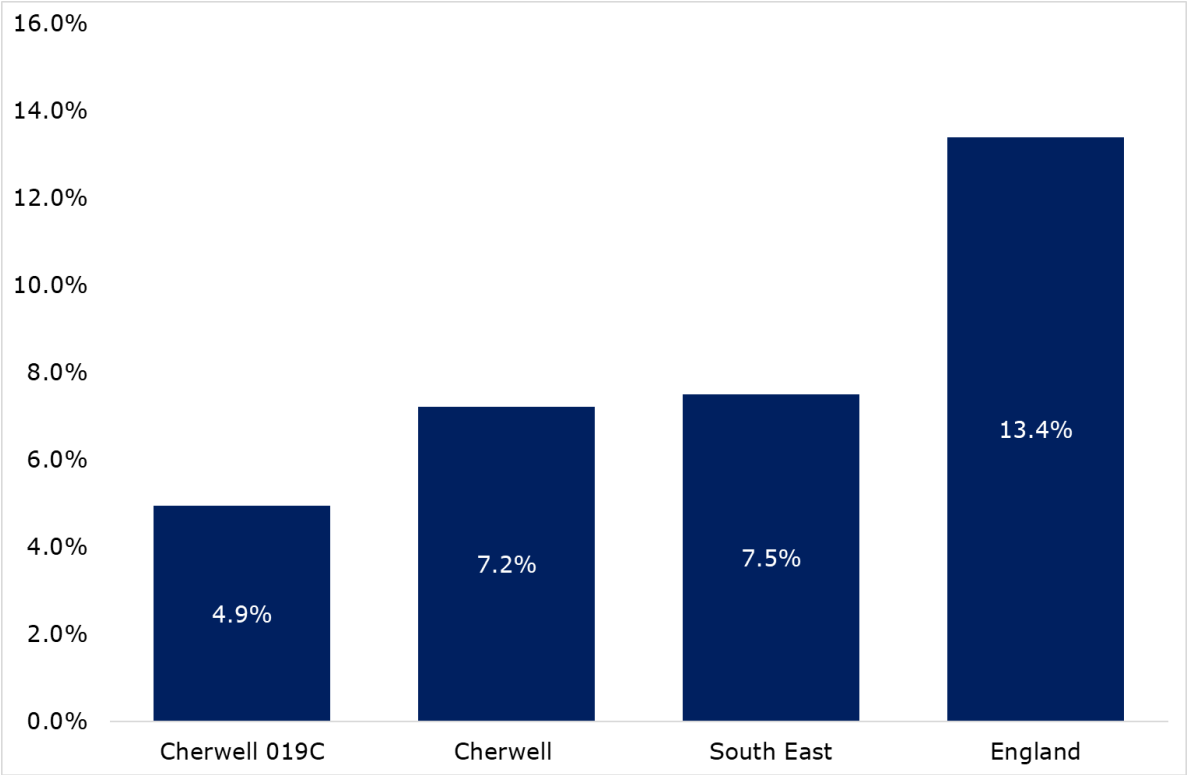
Figure 4.2: Affordability ratios, 2010-20



Source: ONS, Affordability Ratios

- 4.6 Figure 4.3 shows fuel poverty in the LSOA within which the Site is located, Cherwell 019C, Cherwell local authority, the South East and England. Cherwell 019C had the lowest proportion of households in fuel poverty than all other comparator areas and was significantly below the proportion for England as a whole. The rate in the LSOA was 4.9% of households in fuel poverty compared to 7.2% in Cherwell, 7.5% in the South East and 13.4% in England.

Figure 4.3: Proportion of Households in Fuel Poverty, 2019



Source: ONS, Fuel Poverty

Table 4.2: Assessment of Housing Related Health Impacts

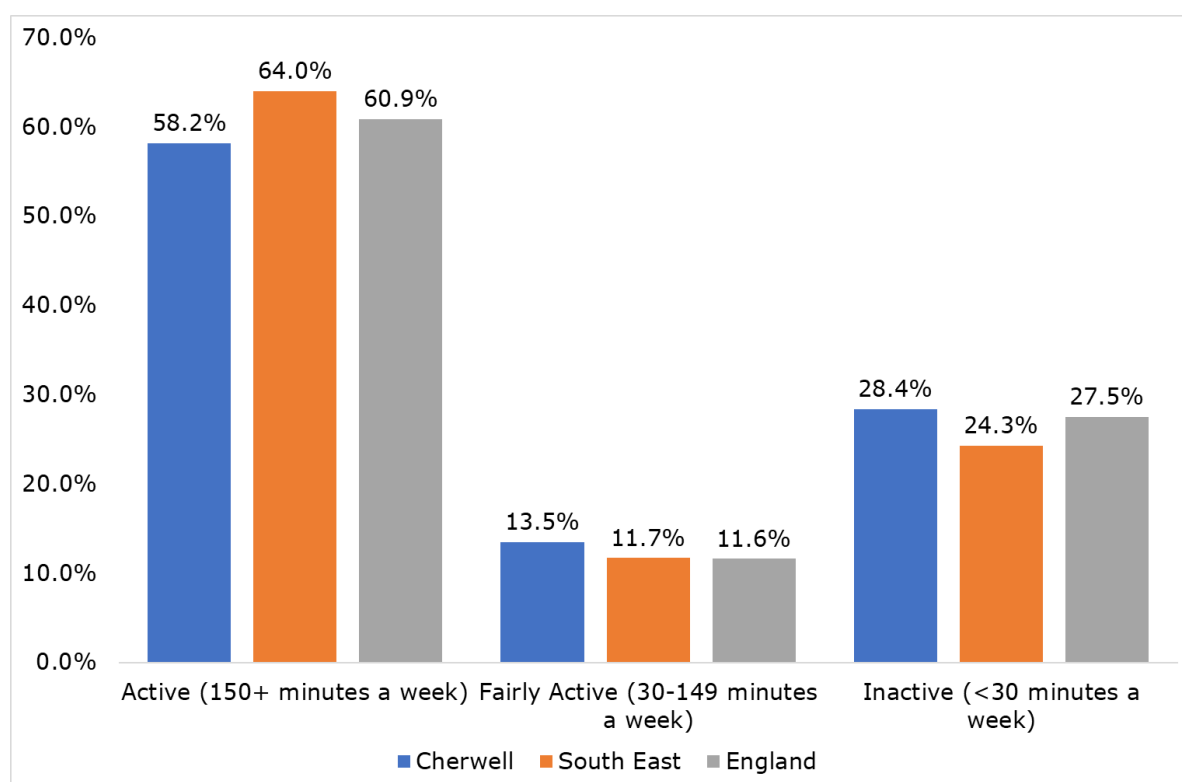
Housing	
Baseline	<p>The LSOA Cherwell 019C, within which the proposed scheme is located, falls within the 50% least deprived LSOAs in England, whilst the proportion of households in the LSOA in fuel poverty is also significantly below all comparator areas.</p> <p>The proportion of people who own their own home in Yarnton, Gosford and Water Eaton is above all comparator areas at 82.7%. The affordability ratio of housing in Cherwell is above the ratio for the whole of England, indicating that gaining a foot on the housing ladder is more of an issue than in other parts of the country, however, for people who may wish to move into the area.</p>

Housing	
Evidence	<p>The above baseline is based on evidence sourced from:</p> <ul style="list-style-type: none"> • Index of Multiple Deprivation from the Ministry for Housing, Communities & Local Government. • 2011 Census. • Office for National Statistics.
Stakeholder Engagement	<p>Consultation has been undertaken with Water Eaton Parish Council, Kidlington Parish Council and Cherwell District Council throughout the promotion of the Site, including during the progression of the Development Plan, and also the period leading up to the planning application. Full details on stakeholder engagement are provided in the Planning Statement for the scheme.</p>
Health Effects	<p>The main health effects from the Proposed Development are as follows:</p> <ul style="list-style-type: none"> • Increased supply of affordable housing – 50% of the homes will be affordable. • Provision of better quality homes in Cherwell • An increase in the quantity of homes in Cherwell • Proposed Site provides access to local shops and services for local residents
Summary	<p>Cherwell is a relatively affluent local authority, with Cherwell 019C falling within the top 50% least deprived LSOAs in the country, however the area has a lack of affordable housing, emphasising the importance of the provision of affordable housing included in the Proposed Development.</p>

Physical Activity

- 4.7 Data published by Sport England in its Active Lives Survey show levels of physical activities at a local authority level for adults over the age of 16. The most recent data were reported for May 2020 – May 2021 and show that in Cherwell 58.2% of adults are active, which is defined as engaging in 150+ minutes of physical activity a week (see Figure 4.4). This is below the figures for the South East and England which are 64% and 60.9% respectively.

Figure 4.4: Sport and Physical Activity Levels for Adults Aged 16+, May 2020 - May 2021



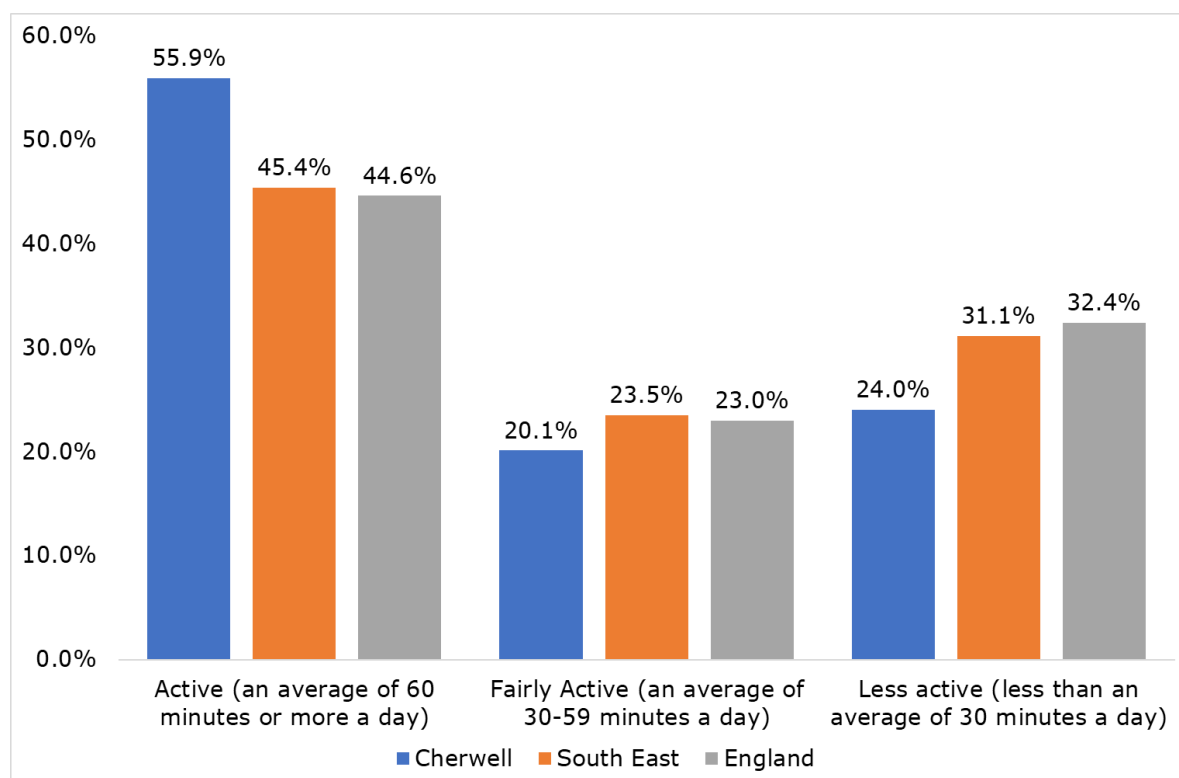
Source: Sport England, Active Lives Survey

- 4.8 The data also show that 28.4% of adults in Cherwell are inactive which is defined as engaging in less than 30 minutes of physical activity per week. This is above the figures for the South East (24.3%) and England (27.5%).
- 4.9 A separate Active Lives Survey carried out by Sport England for children in years 1-11 has data for the academic year 2020/21. This is the most recent data available as the survey is conducted for an academic year. The data show that in Cherwell, 55.9% of children were active, meaning they engaged in an average of 60 or more minutes of

physical activity a day (see Figure 4.5). This was above the figures for the South East (45.4%) and England (44.6%).

The Survey also found that in Cherwell 24% of children were less active, meaning they engaged in less than 30 minutes of physical activity per day. This was less than the figures for the South East and England which were 31.1% and 32.4% respectively.

Figure 4.5: Sport and Physical Activity Levels for Children in Years 1-11, Academic year 2020/21



Source: Sports England, Active Lives Survey

- 4.10 Table 4.3 shows the method of travel to work used in the Yarnton, Gosford and Water Eaton ward and comparator areas. The most common method of travelling to work in all areas is driving a car or van with 44.7% of workers using this method of transport in Yarnton, Gosford and Water Eaton ward. In the ward 3.7% of people travel to work on foot, which is below the rate that travel on foot in Cherwell (8.7%), the South East (7.4%) and England (6.9%). In the ward, 3.7% of workers also travel to work by bicycle, which is above the rates travelling by bicycle in Cherwell (2.5%), the South East (2%) and England (3.3%). It should be noted that this data has been sourced from the 2011 Census and figures in the 2021 Census are likely to vary significantly when released because of the Covid-19 pandemic.

Table 4.3: Methods of Travel to Work, 2011

	Yarnton, Gosford & Water Eaton	Cherwell	South East	England
Work mainly at or from home	4.2%	4.6%	4.5%	3.5%
Underground, metro, light rail, tram	0.1%	0.1%	0.2%	2.6%
Train	0.8%	2.1%	5.0%	3.5%
Bus, minibus or coach	9.8%	3.6%	3.0%	4.9%
Taxi	0.1%	0.3%	0.3%	0.3%
Motorcycle, scooter or moped	1.2%	0.5%	0.6%	0.5%
Driving a car or van	44.7%	45.8%	41.3%	36.9%
Passenger in a car or van	3.3%	3.9%	3.2%	3.3%
Bicycle	3.7%	2.5%	2.0%	1.9%
On foot	3.7%	8.7%	7.4%	6.9%
Other method of travel to work	0.3%	0.4%	0.5%	0.4%
Not in employment	28.1%	27.5%	32.1%	35.3%

Source: Census 2011, Table: QS701EW

Table 4.4: Assessment of Physical Activity Related Health Impacts

Physical Activity	
Baseline	<p>The proportion of adults that are 'active' in Cherwell is below the rates seen in both the South East and England, whilst the proportion of adults that are inactive in Cherwell is above that seen in the South East and England.</p> <p>For children, Cherwell has a higher proportion of those in years 1-11 that are active and a lower proportion of those that are inactive compared to the South East and England.</p> <p>The most common mode of transport to work in all comparator areas is by car or van, with 44.7% of workers in the Yarnton, Gosford and Water Eaton ward using this method of transport. The proportion of workers walking to work is significantly lower than Cherwell, the South East and England.</p>
Evidence	<p>The above baseline is based on evidence sourced from:</p> <ul style="list-style-type: none"> • Sport England's Active Lives Survey.

Physical Activity	
	<ul style="list-style-type: none"> 2011 Census.
Stakeholder Engagement	Consultation with Oxfordshire County Council regarding the HIA emphasised the importance of the sports pitches provision being delivered by the scheme. In particular, the need for changing facilities at the sports pitches was emphasised. Such provision has been designed into the scheme.
Health Effects	<ul style="list-style-type: none"> Promoting increased levels of physical activity amongst children and adults in Cherwell, particularly walking and cycling which can help reduce obesity. This includes promoting active travel. Proximity to local services. Proximity to sports and leisure provision.
Summary	Physical activity rates in children in Cherwell are above regional and national averages, however adults in Cherwell are relatively less active when compared to the South East and England. The inclusion of open space and sports pitches in the Proposed Development is important to increase adult activity rates and bring them more in line with regional and national averages.

Healthy Food Environments

- 4.11 Data from the Office for Health Improvement and Disparities found that in 2019-2020 65.1% of adults in Cherwell were classified as overweight or obese. This is above the rates seen in the South East (61.5%) and England (62.8%). A Local Authority Health Profile published by Public Health England in 2019 found that 17.8% of children were

classified as obese²⁰. This is above the regional average in the South East of 16.8%, however it is below the average from England at 20.2%.

- 4.12 A review of the local area shows that within 1 mile of the proposed Site there are a number of pubs, bars and restaurants. Within 2 miles of the Site there are three allotments: Cherry Community Allotments (1 mile), Hazel Walk Allotments (1.3 miles), and Lanford Community allotments (1.9 miles). There are also a number of parks within 2 miles of the Site including Alexander Close Green (0.8 miles), Kidlington Green Gardens (1.2 miles) and Orchard Park Play Area (1.3 miles). There are currently sports pitches within the vicinity of the Site including Powerplay which is 0.8 miles away.

Table 4.5: Assessment of Healthy Food Environment Related Health Impacts

Healthy Food Environments	
Baseline	<p>The Proportion of adults in Cherwell classed as overweight or obese is above the rates seen at a regional and national level. The proportion of children classed as obese in Cherwell is also above the rate in the South East, however it is below the rate seen in England.</p> <p>There are a number of pubs, bars and restaurants within the vicinity of the Site, but the Site is also within travelling distance of a number of allotments, parks and sports pitches.</p>
Evidence	<p>The above baseline is based on evidence sourced from:</p> <ul style="list-style-type: none"> • Office for Health Improvement and Disparities. • Public Health England.
Stakeholder Engagement	<p>Provision of allotments is included in the development plan for the scheme, which has been informed by stakeholder consultation throughout the planning process.</p>

²⁰ Public Health Profile: Cherwell, 2018. Accessed 23 February 2022.

Healthy Food Environments	
Health Effects	<p>The main health effects from the Proposed Development are as follows:</p> <ul style="list-style-type: none"> • The provision of allotments in the Proposed Development will allow residents to grow their own produce. Considerations on the potential for other smaller scale community growing spaces may be considered at the reserved matters stage. • Sports pitches will be provided as part of the Proposed Development which will help reduce obesity rates in adults and children.
Summary	<p>Obesity rates in adults are higher than regional and national comparators, whilst rates in children are also above regional rates. There are a number of provisions including allotments and sports pitched within the Proposed Development which will help reduced rates of obesity in the local population and encourage the residents to live healthier lives.</p>

Air Quality

- 4.13 A detailed consideration of air quality at the Proposed Development is available in a separate Air Quality Assessment that has been completed as part of the planning application by Brookbanks.
- 4.14 The assessment concludes that the main impact on air quality from the Proposed Development would be from dust during the construction phase of the scheme. The most likely parties to be affected would be the ten existing properties that are located within 20m of the Site boundary. However, the exact impact of the dust would depend on a number of factors such as wind direction and strength, local, topography, rainfall and the presence of intervening structures (buildings, etc.) that may intercept dust before it reaches sensitive locations.

- 4.15 Cherwell measure NO₂ levels using passive diffusion tubes, of which five are located within Kidlington. Currently, the levels measured at each receptor point are below the air quality objective level. The assessment looks at potential NO₂ emissions with the development in place as a result of an increase in traffic. The increased level of NO₂ are concluded to remain well below air quality objective levels at all sensitive receptor points once the development has been completed.

Table 4.6: Assessment of Air Quality Related Health Impacts

Air Quality	
Baseline	As outlined above, there is likely to be an impact on dwellings currently located near the application Site from dust created during the construction phase of the development. Once complete, the additional traffic is unlikely to increase NO ₂ levels above the air quality objective levels.
Evidence	The baseline above is based on evidence sourced from: <ul style="list-style-type: none"> Air Quality Assessment produced by Brookbanks as part of the wider planning application.
Stakeholder Engagement	-
Health Effects	The main health effects from the Proposed Development is as follows: <ul style="list-style-type: none"> Dust pollution during the construction phase of the development which could impact residents living nearby to the Site. Improving air quality in Kidlington by encouraging use of sustainable methods of travel.
Summary	The potential for an increase in dust pollution from the proposed scheme needs to be reduced through implementation measures, full details of which are outlined

	in the Air Quality Assessment report. There is also the opportunity to improve air quality in the local area by supporting sustainable modes of travel.
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Noise

- 4.16 Full consideration of noise at the Proposed Development is based in a separate Noise Assessment that has been completed as part of the planning application by Brookbanks. The assessment concludes that the dominant source of noise on the Site will be from Bicester Road and further details on this are available in the Noise Assessment.

Table 4.7: Assessment of Noise Related Health Impacts

Noise	
Baseline	<p>As stated in the Noise Assessment, the proposed Site is located to the left of Bicester Road with the A34 to the east of the Site. The traffic noise resulting from these roads is likely to be the main source of noise that will potentially impact the Site.</p> <p>The Noise Assessment found that maximum internal noise levels were not exceeded when windows are closed, however when windows are open, internal noise levels exceed the thresholds.</p>
Evidence	The Baseline above is based on evidence sourced from the Noise Assessment produced by Brookbanks as part of the planning application for the Proposed Development. A full copy of this assessment is included as part of the planning application.
Stakeholder Engagement	The Noise Assessment has been developed whilst consulting with the Environmental Health Department within Cherwell District Council.

Noise	
Health Effects	<p>The main health effects from the Proposed Development in terms of noise are identified as:</p> <ul style="list-style-type: none"> • The NPPF and Noise Policy Statement for England find that high levels of noise and noise pollution can have a significant adverse effect on individuals' health and quality of life. • Availability of quiet, protected, external publicly accessible amenity spaces nearby.
Summary	<p>The dominant source of noise on the Proposed Development would be from the A34 and Bicester Road, which would exceed noise recommendations when windows are open. The availability of quiet, protected, external publicly accessible amenity spaces nearby is recognised as being important for the scheme.</p>

Traffic and Transportation

- 4.17 Table 4.8 shows the car and van availability in Yarnton, Gosford and Water Eaton Ward and comparator areas. In the ward area and all comparator areas, the majority of households have 1 car or van, with 43.7% in the ward, 41.4% in Cherwell, 41.7% in the South East and 42.2% in England. Yarnton, Gosford and Water Eaton has a higher proportion of households with 4 or more cars or vans than all comparator areas at 3%. This compares to 2.8% in Cherwell and the South East and 1.9% in England. The ward also has a smaller proportion of households with no cars or vans at 9.8%. This compares to 15.6% in Cherwell, 18.6% in the South East and 25.8% in England.

Table 4.8: Proportion of Households with car or van availability, 2011

	Yarnton, Gosford & Water Eaton Ward	Cherwell	South East	England
1 car or van in household	43.7%	41.4%	41.7%	42.2%
2 cars or vans in household	33.9%	32.5%	29.8%	24.7%
3 cars or vans in household	9.6%	7.7%	7.1%	5.5%
4 or more cars or vans in household	3.0%	2.8%	2.8%	1.9%
No cars or vans in household	9.8%	15.6%	18.6%	25.8%

Source: Census 2011, Table: KS404EW

- 4.18 There are a number of public transport services within the vicinity of the Site. The Transport Assessment produced by Brookbanks as part of the planning application found that the Oxford Parkway Park and Ride is located 1km to the south east of the Site. It provides services such as the 500 bus which connects the area with Oxford town centre, with a journey time of 12 minutes. The closest bus stops to the Site are located on Bicester Road which provides the S5 service with a connection between Bicester and Oxford. Oxford Parkway is the closest railway station to the Site which provides onward routes to Oxford and Bicester.
- 4.19 The Transport Assessment also looks at Personal Injury Collision data (PIC) for the most recently available 5-year period. The study area included the proposed Site along with junctions near to the Site. Between 2015 and 2019 there were 74 PIC's recorded within the study area, of which 24 were recorded at the Bicester Road/Oxford Road roundabout. Full details of PIC's are available in the Transport Assessment.

Table 4.9: Assessment of Traffic & Transportation Related Health Impacts

Traffic & Transportation	
Baseline	<p>In the Yarnton, Gosford and Water Eaton Ward, a higher proportion of households have cars or vans available, and a lower proportion of households have no cars or vans when compared to Cherwell, the South East and England.</p> <p>There are a number of public transport services close to the proposed Site include bus and rail services.</p> <p>The majority of the PIC's that have been recorded in the study area have been focused around major junctions close to the Site.</p>
Evidence	<p>The baseline above is based on evidence sourced from:</p> <ul style="list-style-type: none">• 2011 Census.• Transport Assessment (produced by Brookbanks).

Traffic & Transportation	
Stakeholder Engagement	The Transport Assessment has been developed in consultation with Oxfordshire County Council's Transport Scoping Note.
Health Effects	<p>The health effects of the Proposed Development are as follows:</p> <ul style="list-style-type: none"> • There will be increased congestion on the road during the build phase and once the development is fully built and occupied. • Increased use of vehicles can impact on health through reduced inactivity and increasing risk of road traffic accidents. • Promotion of sustainable travel methods, i.e. walking, cycling and public transport use. • Integrating patterns of movement, streets and Site access into the design of the scheme to help create a high-quality development that is easily accessible.
Summary	The majority of households in Cherwell have access to at least one car or van. The increased use of vehicles resulting from the Proposed Development could increase congestion in and around the Site and increase the risk of road traffic accidents. The promotion of sustainable travel is recognised as being important to the scheme alongside integrating patterns of movement, streets and Site access into its design.

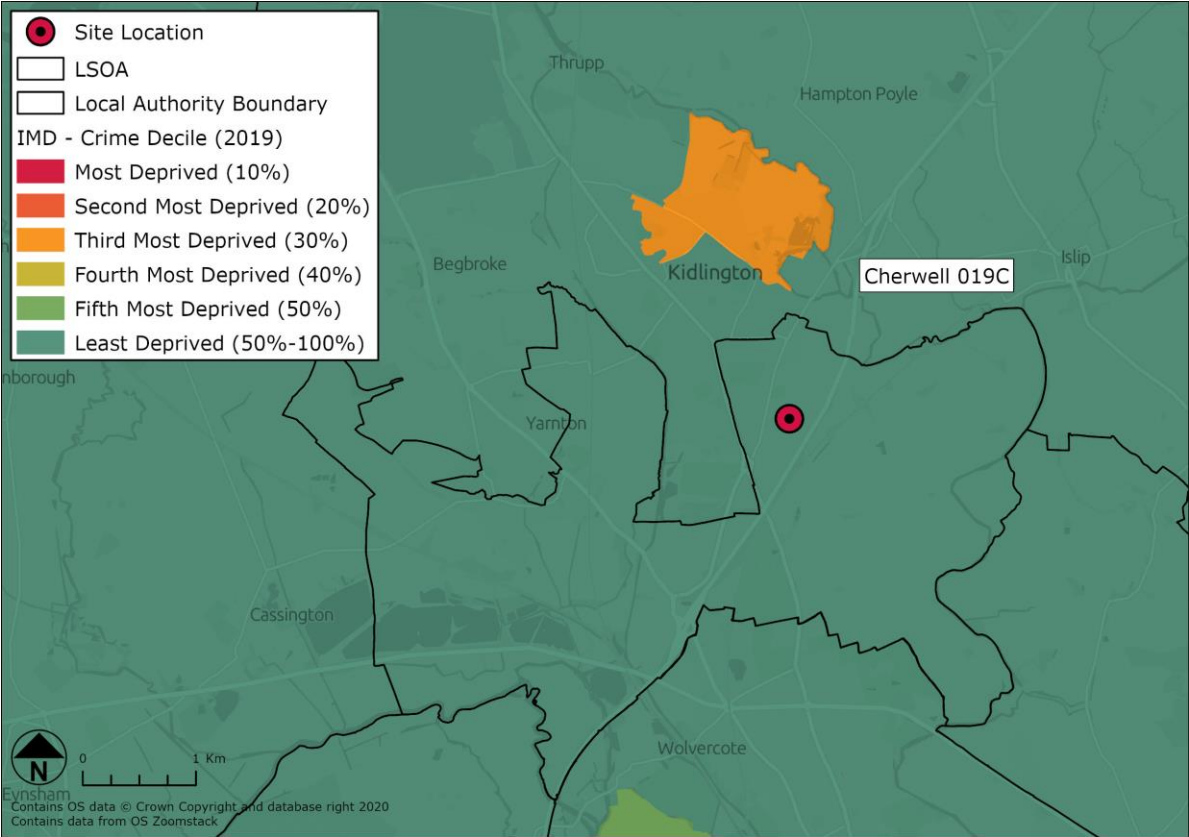
Crime and anti-social behaviour

- 4.20 According to data from the Oxfordshire Crime Dashboard for January-December 2020, Kidlington recorded 47.63 crimes per 100,000 of the population. This was significantly

below the rates recorded in Banbury (105.05 per 100,000) and Bicester (80.53 per 100,000). The rate in Kidlington was also slightly below the rate of 48.91 recorded in the rest of Cherwell.

4.21 Figure 4.6 shows the Index of Multiple Deprivation rank in the crime domain for the Site location and surrounding area. The LSOA in which the scheme is located and much of the surrounding LSOAs are in the least 50% deprived areas for crime, however there is a pocket of deprivation to the north of the Site which falls within the top 30% of deprived areas for crime.

Figure 4.6: Index of Multiple Deprivation for Site Location, Crime Domain (2019)



Source: Ministry for Housing, Communities & Local Government

Table 4.10: Assessment of Crime & Anti-social Behaviour Related Health Impacts

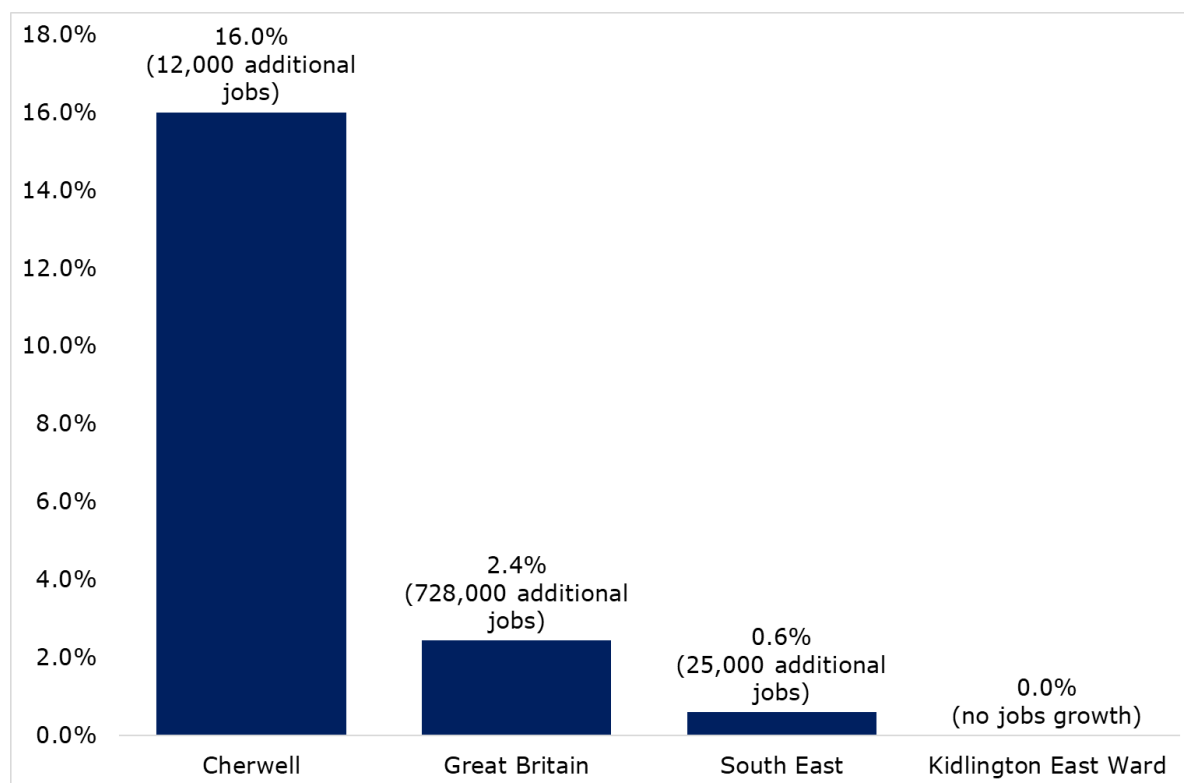
Crime & Anti-social Behaviour	
Baseline	When looking at the number of crimes per 100,000 of the population, Kidlington is significantly below neighbouring

Crime & Anti-social Behaviour	
	Banbury and Bicester. Kidlington 019C is also in the least deprived 50% of LSOAs in the country for the crime domain.
Evidence	<p>The baseline above is based on evidence sourced from:</p> <ul style="list-style-type: none"> • Oxfordshire Crime Dashboard. • Index of Multiple Deprivation from the Ministry for Housing, Communities and Local Government.
Stakeholder Engagement	-
Health Effects	<p>The potential health effects of the Proposed Development are as follows:</p> <ul style="list-style-type: none"> • The potential for building materials to be stolen during the construction of the Proposed Development. • Once fully built and occupied, there is an increase in the risk of criminal activity as a result of the rise in the number of houses in the area. • Developing the Site to ensure high degrees of natural surveillance and safe, well-used spaces.
Summary	<p>When comparing Kidlington to Cherwell, Bicester and Banbury it has significantly lower crimes rates. It is also among the least 50% deprived LSOAs in the country for the crime domain. However, the Proposed Development does increase the risk of crime occurring in the local area because of more homes being built which could potentially be targeted by criminals. It is important the scheme is developed with high degrees of natural surveillance and safe, well-used spaces.</p>

Economy and Employment

- 4.22 Based on the most recent ONS data from the Business Register & Employment Survey (BRES), in 2020 around 87,000 people – including the self-employed – worked in Cherwell, of which 3,500 worked in the Kidlington East Ward.
- 4.23 Figure 4.7 shows that between 2015 and 2020, Cherwell experienced an increase in employment of 16% (12,000 additional jobs), however, Kidlington East ward had no growth in the same time period. The increase in jobs in Cherwell was above that seen in the South East (0.6% - 25,000 additional jobs) and Great Britain (2.4% - 728,000 additional jobs).
- 4.24 As of 2020, the largest sector by employment in Kidlington East was public administration, education and health which employed 2,075 people and accounted for 59% of total employment. In Cherwell, the largest sector was business, financial and professional services which accounted for 22.9% of total employment and supported 19,750 jobs in 2020. The construction sector will be the main sector to benefit from the Proposed Development. In Kidlington East the construction sector supports 200 jobs and accounts for 5.7% of employment. In Cherwell, the sector accounts for 5.2% of total employment and supports 4,500 jobs.

Figure 4.7: Employment Change, 2015-20



Source: ONS, Business Register & Employment Survey

- 4.25 Table 4.11 shows the proportion of resident working population split by occupation in Cherwell and comparator areas. The proportion of managers, directors and senior officials in Cherwell is currently 11.1%. This is above the rate in Great Britain (10.7%) but is below the rate in the South East (12.2%). There is also a higher proportion of professional occupations in Cherwell (25.1%), compared to the South East (24.3%) and Great Britain (23.4%). The proportion of those in elementary occupations in Cherwell is 8.7%, which is currently above the rate in the South East (7.8%), but below the rate in Great Britain (9.4%).

Table 4.11: Employment by Occupation, Resident Working Age Population (16-64), 2021

	Cherwell	South East	Great Britain
Managers, directors and senior officials	11.1%	12.2%	10.7%
Professional occupations	25.1%	24.3%	23.4%
Associate prof & tech occupations	12.9%	16.6%	15.5%
Administrative and secretarial occupations	12.9%	10.3%	10.2%
Skilled trades occupations	9.5%	8.5%	8.9%
Caring, leisure and other service occupations	7.9%	9.3%	9.1%
Sales and customer service occupations	2.2%	6.4%	7.0%
Process, plant and machine operatives	9.8%	4.4%	5.6%
Elementary occupations	8.7%	7.8%	9.4%

Source: Annual Population Survey

- 4.26 Data from the Business Register and Employment Survey show that in Kidlington East 64.3% of employees are in full-time employment. This is below the proportion of full-time employees in Cherwell (67.9%), the South East (67.4%) and Great Britain (67.9%).

Table 4.12: Assessment of Economy & Employment Related Health Impacts

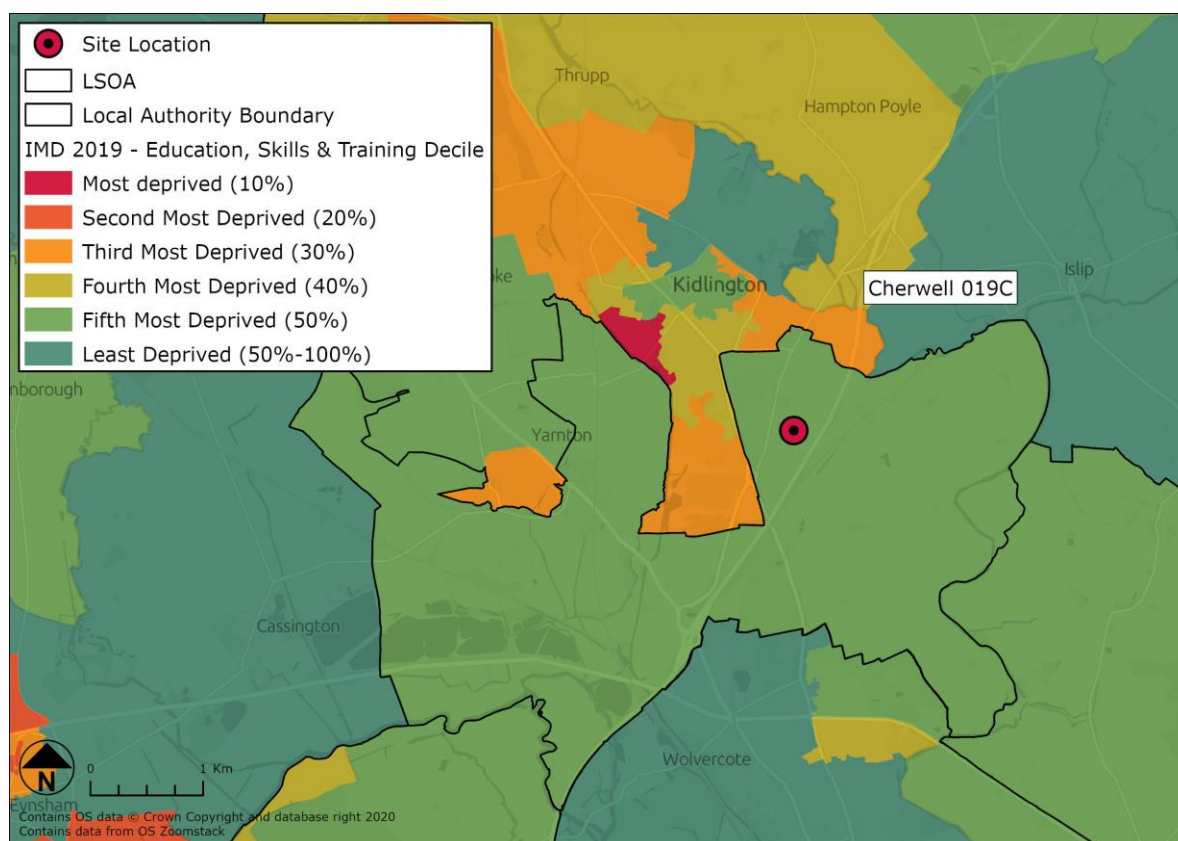
Economy & Employment	
Baseline	<p>Around 87,000 people currently work in Cherwell, 3,500 of which work in the Kidlington East ward. Between 2015 and 2020, Cherwell experienced jobs growth of 16%, however, none of this growth was in Kidlington East ward, putting jobs growth in the ward below all comparator areas.</p> <p>The proportion of workers in higher value added occupations in Cherwell is currently below the proportions in the South East and Great Britain. The proportion of full-time workers in Kidlington East ward is also below the rates seen in Cherwell, the South East and Great Britain.</p>
Evidence	<p>The baseline above is based on evidence sourced from:</p> <ul style="list-style-type: none"> • ONS Business Register & Employment Survey. • ONS Annual Population Survey.

Economy & Employment	
Stakeholder Engagement	Reflecting feedback from stakeholders, an Employment, Skills and Training Plan has been developed for the scheme, with the aim of encouraging the training and employment of local people during the build phase.
Health Effects	<p>The potential health effects from the Proposed Development are as follows:</p> <ul style="list-style-type: none"> • The creation of temporary jobs during the construction phase of the development. • There will be additional spend by the new households, a proportion of which will be retained within the local area and help support existing businesses. • There will be increased Council Tax revenue from the new dwellings in the Proposed Development. • There is likely to be increased travel of residents at the scheme to employment areas in the surrounding settlements.
Summary	<p>Cherwell experienced significantly higher employment growth between 2015 and 2020 compared to all comparator areas, however none of this growth was in the Kidlington East ward.</p> <p>The Proposed Development will create temporary jobs during the construction phase and once operational the new homes will generate additional household spend and council tax revenue.</p>

Education & Skills

- 4.27 Figure 4.8 shows the Index of Multiple Deprivation rank in the education, skills and training domain for the Site location and surrounding area. The LSOA in which the scheme is located falls within and much of the surrounding LSOAs are in the top 50% most deprived areas for education, however there are some LSOAs to the north west that fall into the top 10% and top 30% most deprived LSOAs for Education.

Figure 4.8: Index of Multiple Deprivation for Site Location, Crime Domain (2019)



Source: Ministry for Housing, Communities & Local Government

- 4.28 Table 4.13 shows the highest qualification held by those aged 16-64 in Cherwell, the South East and Great Britain. In Cherwell, 48.6% of residents have a degree qualification or higher (NVQ4+). This is higher than the proportion in the South East (45.1%) and Great Britain (43.1%). There are 16.6% with A-Level qualifications (NVQ3) in Cherwell, which is below the rate in the South East (17.4%) and Great Britain (16.8%). Only 5.5% of those aged 16-64 in Cherwell have no qualifications. This is above the level in the South East (4.8%), however it is below the proportion that have no qualifications in Great Britain (6.4%).

Table 4.13: Highest Qualification held, Ages 16-64

	Cherwell	South East	Great Britain
% with NVQ4+	48.6%	45.1%	43.1%
% with NVQ3 only	16.6%	17.4%	16.8%
% with Trade Apprenticeships	1.9%	2.4%	2.8%
% with NVQ2 only	13.7%	15.5%	15.4%
% with NVQ1 only	7.9%	9.7%	9.6%
% with other qualifications (NVQ)	5.8%	5.0%	5.9%
% with no qualifications (NVQ)	5.5%	4.8%	6.4%

Source: ONS, Annual Population Survey

School Capacity

- 4.29 Local Education Authorities (LEA) have a statutory duty to secure sufficient school places within their area. The school that any particular child attends is a matter of parental choice subject to availability of capacity at the selected school. It is always subject to the overriding requirements of any published admission criteria that the school has, as well as the appeals procedure for individual pupils.
- 4.30 The Home to School Travel and Transport Guidance²¹, published by the Department for Education in June 2014 is largely derived from the Education and Inspections Act 2006²². The Act states that the statutory walking distances are two miles for children aged under eight, and three miles for children aged eight and over. This guidance has been taken into account in the assessment of education provision.
- 4.31 Table 4.14 presents the capacity of the primary schools within three miles of the Application Site. Within 3 miles of the Application Site, there is a combined capacity of 441 primary school places.

Table 4.14: Capacity of Primary Schools

School Name	Distance from Application Site	School Capacity	Number of Pupils on roll	Surplus/ Deficit
Edward Field Primary School	0.22 miles	386	309	77
St Thomas More Catholic Primary School, Kidlington	0.5 miles	210	174	36
West Kidlington Primary and Nursery School	0.5 miles	420	340	80
North Kidlington Primary school	1.01 miles	315	291	24

²¹ New Home to School Travel And Transport Guidance: Department for Education, March 2014.

²² Education and Inspections Act 2006: <https://www.legislation.gov.uk/ukpga/2006/40/contents>

School Name	Distance from Application Site	School Capacity	Number of Pupils on roll	Surplus/Deficit
Dr South's Church of England Primary School	1.5 miles	105	102	3
William Fletcher Primary School	1.85 miles	315	265	50
Cuttesslowe Primary School	2.03 miles	420	315	105
Wolvercote Primary School	2.2 miles	315	280	35
Bletchington Parochial Church of England Primary School	2.81 miles	105	74	31
Total	-	2,591	2,150	441

Source: Department for Education (website accessed 10/01/2022); School capacity: Academic year 2018 to 2019.

- 4.32 Table 4.15 presents the capacity of the two secondary school within three miles of the application Site. Gosford Hill School has capacity of 338 secondary school places, however The Cherwell School is currently above capacity, leaving the total secondary capacity within 3 miles of the Application Site at 338.

Table 4.15: Capacity of Secondary Schools

School Name	Distance from Application Site	School Capacity	Number of Pupils on roll	Surplus/Deficit
Gosford Hill School	0.33 miles	1,221	883	338
The Cherwell School	2.85 miles	1,850	1,996	0
Total	-	3,071	2,879	338

Source: Department for Education (website accessed 10/01/2022); School capacity: academic year 2018 to 2019.

Table 4.16: Assessment of Education & Skills Related Health Impacts

Education & Skills	
Baseline	<p>Looking at deprivation data for the education, skills and training domain, Cherwell 019C falls within the top 50% deprived LSOAs.</p> <p>In Cherwell, the proportion of the working age population with a NVQ4+ qualification is currently above the rate seen in the South East and England. The proportion with no</p>

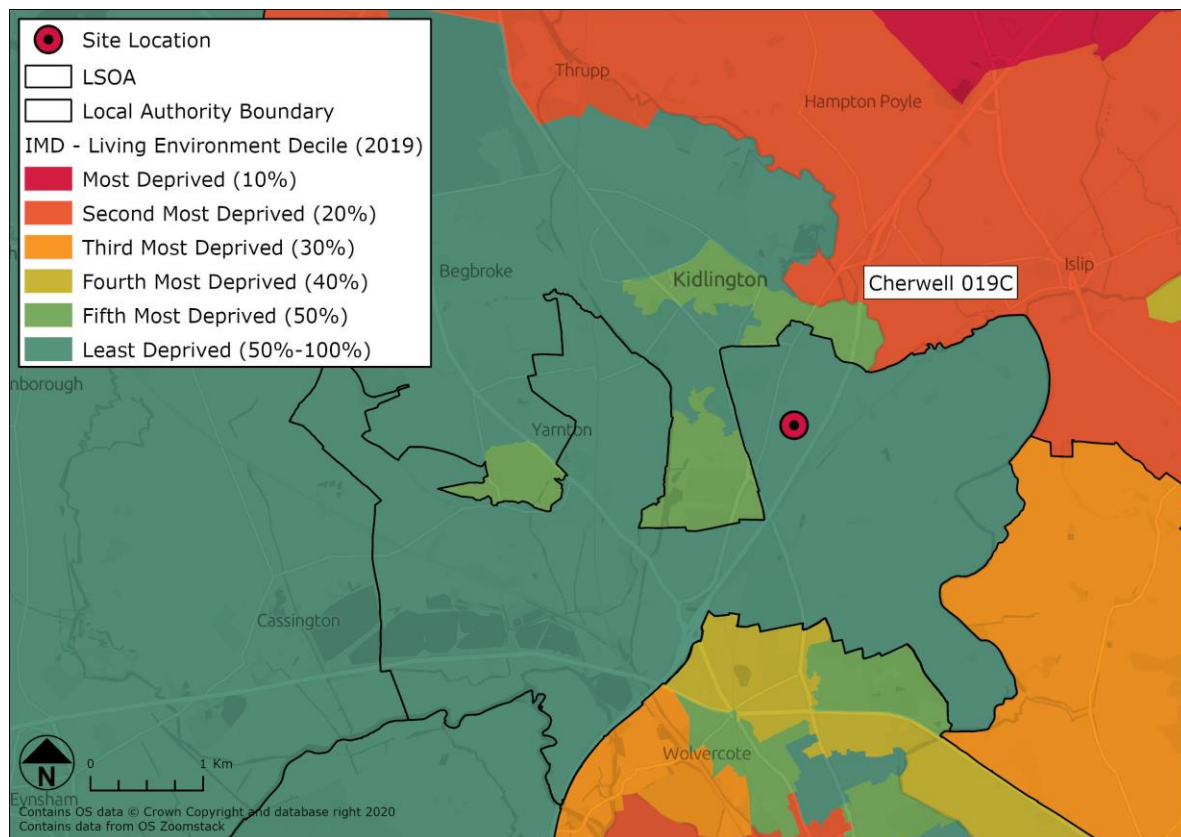
Education & Skills	
	<p>qualifications is also below the rate seen in England, however it is above the rate seen in the South East.</p> <p>Within three miles of the proposed Site there is also currently a surplus of both primary and secondary school places.</p>
Evidence	<p>The baseline above is based on evidence sourced from:</p> <ul style="list-style-type: none"> • Index of Multiple Deprivation (2019). • Office for National Statistics Annual Population Survey. • School Capacity data from the Department for Education.
Stakeholder Engagement	<p>Consultation has been undertaken with the Local Education Authority regarding school provision.</p>
Health Effects	<p>The potential health effects of the Proposed Development are as follows:</p> <ul style="list-style-type: none"> • Increased pressure on education provision in the local area. • Potential opportunities for local residents to access employment/apprenticeships during the build phase.
Summary	<p>Cherwell 019C falls within the top 50% most deprived LSOAs for education, however, the proportion of the working age population that have a degree level qualification or higher is above the rate in the South East and England.</p>

Education & Skills	
	The Proposed Development will increase pressure on local education provision. Within three miles of the Site there is currently spare capacity for both primary and secondary places, however there is still likely to be the need for a financial contribution to improve education provision in the area.

Local natural environment and access to green space

4.33 Figure 4.9 shows the Index of Multiple Deprivation for the living environment domain at the Site location. The LSOA where the Site falls is in the 50% least deprived areas for living environment, however surrounding areas do have some higher levels of deprivation. LSOAs to the north and east of the Site fall within the top 10% and top 20% most deprived areas for living environment, whilst there are some LSOAs in the top 30% most deprived areas to the south east of the Site.

Figure 4.9: Index of Multiple Deprivation for Site Location, Living Environment Domain (2019)



Source: Ministry for Housing Communities and Local Government

- 4.34 A review of the local area shows that there are a number of parks within 2 miles of the Site including Alexander Close Green (0.8 miles), Kidlington Green Gardens (1.2 miles) and Orchard Park Play Area (1.3 miles). There are currently sports pitches within the vicinity of the Site including Powerplay which is 0.8 miles away.
- 4.35 Data from the Office for National Statistics show that the population density in Cherwell is 258 people per sq. km. This is below the population density in Oxfordshire (268), the South East (483) and Great Britain (285).
- 4.36 As identified in the Transport Assessment there are several public rights of way (PRoW) within the vicinity of the Site, with a footpath bordering the east of the Site. The Design and Access Statement produced as part of the planning application outlines that this footpath has the opportunity to be retained as part of the Proposed Development and provide a connection to the proposed new neighbourhood's green space. Full details of the PRoW's close to the Site are shown in the Transport Assessment and the Design and Access Statement, including provision for pedestrians and cyclists.

Table 4.17: Assessment of Local Environment and Access to Green Space Related Health Impacts

Local natural environment and access to green space	
Baseline	As outlined above, the LSOA Kidlington 019C within which the Proposed Development is located is in the least 50% deprived LSOAs for living environment. However, there are some areas of deprivation for living environment to the north, east and south of the Site with some areas falling into the top 10% most deprived LSOAs for this domain.
Evidence	<p>The baseline above is based on evidence sourced from:</p> <ul style="list-style-type: none"> • Index of Multiple Deprivation from the Ministry of Housing, Communities and Local Government (2019) • ONS Population Density data
Stakeholder Engagement	Stakeholder workshops included discussion on green infrastructure and comments received have been reflected in the development plan for the scheme.
Health Effects	<p>The potential health effects of the Proposed Development are as follows:</p> <ul style="list-style-type: none"> • There may be temporary or permanent diversion of walking and cycling routes. • Loss of open space, however the need to minimise this (including the Site's existing tree groups) is recognised in the Design and Access Statement for the scheme. • Provision of new open space, sports facilities/play areas and grassland/woodland.

Local natural environment and access to green space	
	<ul style="list-style-type: none"> • Provision of green corridors to enhance local green infrastructure. • Access to green infrastructure for all residents across all age groups. • Access to the sporting provision, which can help promote mental wellbeing, particularly for younger people.
Summary	Cherwell 019C LSOA is not deprived in the living environment domain and the Proposed development will include provision of new open green space, however, some walking and cycling paths could be diverted either temporarily during the build phase or permanently as a result of the Proposed Development. The retention of existing trees and the provision of green corridors is important in the development of the Site.

Access to Services

4.37 Table 4.18 shows the GP surgeries within 3 miles of the Proposed Development. Within this radius there are a total of seven GPs, the closest being Gosford Medical Centre at 0.4 miles away. This surgery currently has 7,184 patients and 3.2 full-time equivalent (FTE) GPs, giving a patient to GP ratio of 2,245. Where surgeries are part of a wider practice or group individual patient and GP data are not available, however, these surgeries have still been included in the table. The average patient to GP ratio for all the GPs within 3 miles is 2,026 patients per GP.

	Distance from Site	Number of Patients	Number of GPs	Patient to GP ratio
Gosford Hill Medical Centre	0.4 miles	7,184	3.2	2,245
The Key Medical Practise	0.8 miles	13,132	6.1	2,153
Islip Surgery	1.6 miles	6,025	4.1	1,470
Yarnton Medical Practise	1.8 miles	-	-	-
Wolvercote Surgery	2.4 miles	-	-	-

	Distance from Site	Number of Patients	Number of GPs	Patient to GP ratio
Banbury Road Medical Centre	2.9 miles	9,336	4.6	2,030
Summertown Health Centre	2.9 miles	17,865	8	2,233

Table 4.18: GP Surgeries within 3 miles of the Proposed Site

Source: NHS Choices

Dentists, Pharmacies & Opticians

- 4.38 Within 3 miles of the Proposed Site there are also 5 dentists, 4 opticians and 6 pharmacies.

Proximity to Shops and Local Centre

- 4.39 The Proposed Scheme is 0.8 miles from Kidlington and Gosford Leisure Centre and 1 mile from Sainsbury's situated on Oxford Road. Oxford Road also has a range of other services such as a post office, a café and a local Co-Op.

Proximity to Train Station and Bus Routes

- 4.40 The Transport Assessment produced by Brookbanks as part of the planning application found that the Oxford Parkway Park and Ride is located 1km to the south east of the Site. It provides services such as the 500 bus which connects the area with Oxford town centre, with a journey time of 12 minutes. The closest bus stops to the Site are located on Bicester Road which provides the S5 service with a connection between Bicester and Oxford. Oxford Parkway is the closest railway station to the Site which provides onward routes to Oxford and Bicester.

Table 4.19: Assessment of Access to Services Related Health Impacts

Access to Services	
Baseline	As outlined above, within 3 miles of the proposed Site there are seven GPs which have an average patient to GP ratio of 2,026. Within 3 miles of the Site there are also 5 dentists, 4 opticians and 6 pharmacies.

Access to Services	
	<p>The proposed Site is within walking distance to a number of shops and services, including a leisure centre, Sainsbury's, post office, café and a Co-op.</p> <p>Public transport is available within the proximity of the Site with bus stops on Bicester Road with services running between Oxford and Bicester. Oxford Park railway station is also located nearby away that runs services to Oxford and Bicester.</p>
Evidence	<p>The baseline above is based on evidence sourced from:</p> <ul style="list-style-type: none"> NHS Choices
Stakeholder Engagement	<p>The Transport Assessment which assesses distance to services has been developed in consultation with Oxfordshire County Council's Transport Scoping Note.</p>
Health Effects	<p>The potential health effects of the Proposed Development are as follows:</p> <ul style="list-style-type: none"> Increased pressure on local healthcare provision and services. Access to local shops and public transport from the Site.
Summary	<p>There are a number of services within the vicinity of the proposed Site including healthcare services, shops, and public transport.</p> <p>Close proximity to shops and services will encourage walking and cycling as a main mode of transport, however the increased population from the households will increase</p>

Access to Services	
	pressure on health services. This will need to be addressed by financial contributions in the form of S106 agreements.

5. SUMMARY AND RECOMMENDATIONS

- 5.1 Based on a review of existing policy and data, the main health challenges in Kidlington and Cherwell can be summarised as follows:

Main health challenges identified from policy review:

- Increase physical activity levels and reduce rates of inactivity in all age groups to improve physical and mental wellbeing.
- Decrease levels of obesity, to reduce the risk of associated diseases and reduce the strain and costs on the NHS and public services.
- Encourage the increased use of open spaces, parks and sports and leisure facilities. In addition, increasing the provision and quality of these spaces is recognised as being important.
- Achieve the priority of healthy place making and encourage active travel through increasing levels of walking and cycling for travel and to reduce health inequalities by improving cycling and walking infrastructure for all socio-economic groups.

Main health challenges identified from data analysis:

- The affordability of housing in Cherwell is an issue for the area, with the affordability ratio being significantly above that for the whole of England.
- Physical activity rates in adults in Cherwell are currently below the rates seen in the South East and England, with a higher proportion of adults in Cherwell being inactive than comparator areas.
- The proportion of adults in Cherwell classed as overweight or obese is above the rate seen in the South East and England, and the proportion of children classed as obese in Cherwell is also above the rate in England.
- Between 2015 and 2020, despite employment growth in Cherwell, there has been no employment growth in the Kidlington East Ward.

Health Effects Identified in the HIA Toolkit

5.2 Based on analysis of the 11 health indicators outlined in the Oxfordshire Health Impact Assessment Toolkit, the main health effects of the Proposed Development have been outlined below:

- The scheme will increase the provision of affordable housing in Cherwell, helping to increase the affordability of the area as a place to live.
- Provision of sports facilities and play areas will increase physical activity rates in both adults and children.
- There is the potential for recommended noise levels in the homes to be exceeded as a result of traffic noise on Bicester Road.
- Increased congestion on roads in and around the Site from the increase in the number of households and people using vehicles.
- Increased risk of criminal activity from an increased number of households in the area.
- Temporary employment opportunities during the construction phase of the development.
- Increased pressure on schools and healthcare services in the local area.

Recommendations

5.3 To ensure that positive impacts of the scheme are realised, and any negative impacts are mitigated against, the following recommendations have been made. They have been structured to align with the themes outlined in the Oxfordshire Health Impact Assessment Toolkit:

Housing

- With the affordability of housing being such an important issue in Cherwell, the “affordable” element of the scheme needs to be developed at the same time as the market housing. As noted in the planning statement, 50% of the housing provision will be affordable.
- For the dwellings built for sale on the general market, a range of price points should be considered so that the scheme benefits as many people as possible.

Physical Activity

- It is important that the sports pavilion within the Proposed Development includes changing facilities to ensure that as many adults and children as possible utilise the new provision. The absence of such facilities could impact on the quality of the offer. It should be noted that such provision is planned as part of the scheme.
- Ensure that the LEAP/NEAP/MUGA and sports provision requirements resulting from the scheme are developed in line with the Development Plan. This will help increase physical activity levels in children and help bring activity amongst adults of Cherwell more in line with regional and national averages.
- Cycling and walking connections from the site to the existing community will be delivered in-line with the construction programme. This matter will be dealt with in further detail as part of reserved matters.

Healthy Food Environments

- Ensure the allotment provision is developed as outlined in the plan for the Site.

Air Quality & Noise

- Without mitigation, the levels of noise from Bicester Road would exceed the recommended levels when windows in the homes are open. It is therefore important for the mitigation measures identified in the Noise Assessment to be fully implemented. This includes a 6m high noise barrier to be built on the boundary facing the A34 made from a 3m earth bund and 3m acoustic fence. It is also proposed by the Noise Assessment that dwellings with habitable rooms fronting onto Bicester Road would have alternative means of ventilation so windows do not need to be opened, and noise levels would not be exceeded.
- For early settlers in the development, it is important that they aren't affected by noise and dust from construction work, for example. It is therefore important that careful construction management practices are adopted to ensure that early settlers will not experience noise and dust from construction work. This will include the creation of a Construction Environmental Management Plan (CEMP). Full air quality mitigation measures are outlined in the Air Quality Assessment.
- A construction management plan will be produced which will include details on dust management.

Traffic & Transportation

- It is important that measures outlined in the Transport Assessment are fully implemented which include:
 - The proposed scheme will have a primary route connecting the Site to the main access point on Bicester Road. This will have a speed limit of 30 mph, with the potential for a lower speed limit to increase safety.
 - There will also be secondary and tertiary routes with lower vehicle speeds and reduced road width to accommodate cycling and walking. This will increase safety and encourage more sustainable and healthy modes of transport.
- Ensure the scheme has improved pedestrian and cycling links to encourage more sustainable and healthy modes of transport and reduce the need to use a car or van to travel.
- Ensure the Travel Plan, produced by Brookbanks, is fully implemented. To encourage sustainable travel and increase walking and cycling as a mode of transport information about local walking and cycling routes, information about nearby provision of public transport and details of local car share scheme and their benefits should be distributed to residents as they move into the development.
- To increase the safety of the roads within the Proposed Development, all internal roads will have a speed limit of 20 mph.

Crime & Anti-social Behaviour

- As noted in the Design and Access Statement, it is important that the green spaces throughout the Site are overlooked by the new homes to create the basis for high degree of natural surveillance and to create safe, well-used spaces.

Economy, Employment, Education & Skills

- A contribution to education provision is likely to be required and will need to be agreed with the Local Education Authority in due course.
- An Employment, Skills and Training Plan should be developed to ensure that employment opportunities during the build phase of the development can be

accessed by local people and businesses as part of the procurement process. Such a plan is already being developed as part of the planning application.

- Job opportunities created during the construction phase should be advertised/made actively available to local residents. Engaging with Cherwell District Council and Oxfordshire County Council will be useful in identifying what level of support is available to help with such activities.
- It is important that the development supports active travel to employment areas in the surrounding settlements.

Local Natural Environment & Access to Green Spaces

- The use of green infrastructure to address any environmental concerns should be maximised. These should be developed in line with the Design and Access Statement, including new woodland planting along the south eastern boundary of the Site and use the opportunity to protect and enhance existing trees and wildlife habitats that already exist on the application Site.
- The proposed sports provision should be promoted to residents of the scheme and other people in the local area, in order to promote improved physical health and mental wellbeing amongst the residents of Kidlington.
- Ensure that the proposed public open space to be delivered by the scheme is accessible to all age groups. In particular to older people in order to promote social interaction.

Access to Services

- Engage with local primary care providers to make them aware of the new dwellings and the resulting increase in local population. A contribution towards primary healthcare is likely to be required and this will need to be agreed by all parties via a S106 Agreement.

6. CONCLUSIONS

- 6.1 Having reviewed the proposed scheme in line with guidance produced by Oxfordshire County Council in the Oxfordshire Health Impact Assessment Toolkit²³, from a policy perspective the scheme has the potential to impact on the main health priorities for Kidlington, Cherwell and Oxfordshire, which are identified as:
- Increasing physical activity levels and reducing rates of inactivity in all age groups to improve physical and mental wellbeing.
 - Reducing levels of obesity and the strain and costs on the NHS and public services which this generates.
 - Encouraging the increased use of open spaces, parks and sports and leisure facilities.
 - Encouraging active travel through increasing levels of walking and cycling for travel and to reduce health inequalities by improving cycling and walking infrastructure for all socio-economic groups.
- 6.2 The Proposed Development of 370 homes on land at Gosford will have an impact on all eleven indicators outlined in the County Council's HIA Toolkit. Key impacts include: increasing the provision of affordable housing in Cherwell; provision of sports facilities and play areas; temporary employment opportunities during the construction phase of the development; and increased pressure on schools and healthcare services in the local area.
- 6.3 To ensure that positive impacts of the scheme are realised, and any negative impacts are mitigated against, 16 recommendations have been made by this HIA and these align with the eleven themes in the HIA Toolkit. As noted in the Toolkit, these recommendations should be monitored by the Local Planning Authority over a suitable timeframe to ensure they have been fully implemented.

²³ *Oxfordshire Health Impact Assessment Toolkit*: Oxfordshire County Council, January 2021.

Appendix A – Site Development Plan



0 50 100 metres

Balance of PR7a site being brought forward with Hill Residential Ltd

Site Boundary: 27.75ha

Proposed residential development:
Approx. 9.89ha Approx. 370 dwellings @ 37.5 dph

Green Belt boundary

Proposed vehicular access points

Emergency vehicular/pedestrian access point

Main transport links & existing bus stops

Oxford Parkway Station - Oxfordshire Rapid Transit

A34 dual carriageway

Proposed primary street through the development (tree lined LTN1/20 compliant corridor)

Proposed secondary streets

Proposed private lanes/drives

Proposed shared street space

Public Footpath

Bridleway

National cycle route (Sustrans 51)

Proposed combined cycleway/footways

Proposed pedestrian routes

The Greenway - providing a direct route between Oxford Parkway Station, Water Eaton Park & Ride, and The Parade

Existing vegetation to be retained where appropriate

Proposed public open space (to include new amenity landscaping, wildflower margins, tree planting, play areas and SuDS features)

Proposed woodland planting

Proposed wildflower planting

New allotments

Proposed play provision for children and young adults

Proposed formal sport facilities (inc. 4ha of sports pitches, sports pavilion and car park)

Potential location for Community sports pavilion and car park

Existing watercourses & water bodies

Proposed sustainable drainage basins (SuDS)

Proposed swale

Proposed 3m high acoustic bund and 3m high fence

Potential location for foul pump station

* LAP - Local Area for Play
LEAP - Local Equipped Area for Play
NEAP - Neighbourhood Equipped Area for Play
MUGA - Multi Use Games Area

D	25.04.21	SM	Updated to reflect client's comments
C	19.04.21	SM	Updated to reflect client's comments
B	13.01.21	SM	Updated to reflect client's comments
A	11.01.21	SM	Updated to reflect client's comments

Rev	Date	By	Description
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Project

Kidlington East, Oxfordshire

Title

Development Framework Plan

Client

Barwood Development Securities Ltd

Scale

1:2500 @ A2

Drawn

SM

Date

Dec 2021

Checked

RR

Drawing No.

CSA/3263/123

Rev

D