

**TOWN AND COUNTRY PLANNING ACT 1990** 

**HEALTH IMPACT ASSESSMENT** 

TO ACCOMPANY AN OUTLINE PLANNING APPLICATION FOR:

APPLICATION FOR OUTLINE PLANNING PERMISSION (ALL MATTERS RESERVED EXCEPT MEANS OF ACCESS (NOT INTERNAL ROADS) FROM B4100) FOR THE ERECTION OF BUILDINGS COMPRISING LOGISTICS (USE CLASS B8) AND ANCILLARY OFFICES (USE CLASS E(G)(I)) FLOORSPACE; ENERGY CENTRE, HGV PARKING, CONSTRUCTION OF NEW SITE ACCESS FROM THE B4100; CREATION OF INTERNAL ROADS AND ACCESS ROUTES; HARD AND SOFT LANDSCAPING; THE CONSTRUCTION OF PARKING AND SERVICING AREAS; SUBSTATIONS AND OTHER ASSOCIATED INFRASTRUCTURE.

APPLICANT:

TRITAX SYMMETRY ARDLEY LTD

**APRIL 2022** 

PF/10679



# **CONTENTS**

1.0	Introduction		3
2.0	Impact	Area	4
3.0	Planning Policy and Literature Review		4
4.0	Method	d of Assessment	6
5.0	Commu	inity Profile	9
6.0	Assessn	nent of Impacts	14
7.0	Conclus	ion	14
TABLES			
Table 1		Health Determinants and Outputs	7
Table 2		District Gender Profile	9
Table 3		District Age Profile	
Table 4		Cherwell Areas of Deprivation (Percent of the Population)	
Table 5		Qualifications (%)	10
Table 6		Access to Health Assets and Hazards (%)	
Table 7		Car Ownership (%)	
Table 8		Housing Tenure	12
Table 9		Significance Table	14
FIGURE	:S		
Figure 1		Determinants of Health	4
APPENI	DICES		
Append	lix 1	HIA Construction Phase Assessment	

HIA Operation Phase Assessment

Appendix 2



## 1.0 INTRODUCTION

- 1.1 This Health Impact Assessment (HIA) has been prepared by Framptons Town Planning Ltd on behalf of Tritax Symmetry LLP (the Applicant) in support of an outline application (all matters reserved) for, 'Application for outline planning permission (all matters reserved except means of access (not internal roads) from B4100) for the erection of buildings comprising logistics (Use Class B8) and ancillary offices (Use Class E(g)(i)) floorspace; Energy Centre, HGV parking, construction of new site access from the B4100; creation of internal roads and access routes; hard and soft landscaping; the construction of parking and servicing areas; substations and other associated infrastructure.'
- 1.2 The planning application is supported by an Environmental Statement (ES). This standalone HIA seeks to explore the health impacts of the proposed development during both the construction and operational phase of the development.
- 1.3 The construction of the Proposed Development is anticipated to deliver 500 on-site jobs per annum during the construction period. Once leakage, displacement, and multiplier effects are considered, it is anticipated there will be a net addition of 610 jobs.
- 1.4 The operation of the Proposed Development is expected to deliver 2,426 on-site jobs per annum during its lifetime.
- 1.5 The Socio-economic and health information included in this HIA has been collated from a number of sources to build up an understanding of the characteristics of Cherwell. The key data sources include:
  - Office for National Statistics;
  - NOMIS (UK Labour Market Statistics);
  - Cherwell District Council Local Plan (evidence base);
  - Local Insight for the Cherwell Area (February 2021); and
  - Public Health Area Profiles Cherwell and Oxfordshire.

# Links between planning and health

- 1.6 Health Impact Assessments (HIA) form an important tool in assessing how developments contribute to the health and well-being of the local population. Local authorities and developers are required to consider how proposed developments will impact on health and health inequalities. The eventual outcome is to inform decision-making on new development in order to assist in the reduction of health inequalities.
- 1.7 The revised EU EIA Directive (2014/52/EU), which has been transposed into UK law through the Town and Country Planning (Environmental Impact Assessment) Regulations 2017, includes requirements to consider the direct and indirect significant effects of projects on 'population and human health' and the interaction with other factors listed, for example biodiversity, climate and the landscape. Each topic chapter of the ES identifies and assesses any potential interaction with human health.
- 1.8 In the UK, the public health profession uses the World Health Organization (WHO) definition of health, where health is defined as a state of complete physical, mental and social wellbeing, and is not merely the absence of disease or infirmity. This definition underpins the 'wider determinants of health' model used by public health that is used to show how the wider social environment is society can impact upon an individual is shown in Figure 1 below.



1.9 Influences that result in changes to these determinants have the potential to cause beneficial or adverse effects on health, either directly or indirectly. The degree to which these determinants influence health varies, given the degree of personal choice, location, mobility and exposure.

Figure 1: Determinants of Health



#### 2.0 IMPACT AREA

2.1 Impact areas are the localities where the health of people is most likely to be directly affected by a development. The proposed development sits within the Cherwell District Council, which forms part of the County of Oxfordshire. As the proposed development will have district wide implications, the impact area will cover the whole of the administrative area of Cherwell District Council.

#### 3.0 PLANNING POLICY AND LITERATURE REVIEW

National Planning Policy Framework

- 3.1 The National Planning Policy Framework (2021) (the Framework) sets the Government's planning policies for England and Wales. Section 8 of the Framework addresses the promotion of healthy and safe communities. The Framework requires developments to achieve healthy, inclusive and safe places.
- 3.2 Planning policies should promote social interaction, by creating spaces that facilitate opportunities for people to meet through: strong neighbourhood centres; street layouts that encourage pedestrian and cycle connection within and between neighbourhoods, (paragraph 92). Places should be safe and accessible. Crime and disorder, and the fear of crime should not undermine the quality of life or social cohesion (paragraph 92).
- 3.3 Planning Practice Guidance at Paragraph 001 (ID 53-001-20140306) further emphasises health and wellbeing, citing the built and natural environments as key drivers of health and wellbeing.



# **Local Planning Policy**

Cherwell Local Plan Part 1 2031 (Adopted July 2015)

3.4 There are no specific health and wellbeing planning policies (other than Policy BSC8 that will support the provision of health services facilities) contained within the Cherwell Local Plan Part 1 2031 (Adopted July 2015). Paragraph A.8 sets out the vision for the Cherwell District.

'By 2031, Cherwell District will be an area where all residents enjoy a good quality of life. It will be more prosperous than it is today. Those who live and work here will be happier, healthier and feel safer.'

Literature Review

Healthy Lives, Healthy People: Our Strategy for Public Health in England (2010)

3.5 This White Paper outlines the Government's commitment to protecting the population from serious health threats; helping people live longer, healthier and more fulfilling lives; and improving the health of the poorest, fastest. The White Paper recognised the wider factors, including the environment, influencing health, inequality and wellbeing:

'Our health and wellbeing is influenced by a wide range of factors – social, cultural, economic, psychological and environmental ... we are all strongly influenced by the people around us, our families, the communities we live in and social norms. Our social and cognitive development, self-esteem, confidence, personal resilience and wellbeing are affected by a wider range of influences throughout life, such as the environment we live in, the place in which we work and our local community... The quality of the environment around us also affects any community. Pollution, air quality, noise, the availability of green and open spaces, transport, housing, access to good-quality food and social isolation all influence the health and wellbeing of the local population.' (Healthy Lives, Healthy People, paras 1.13-1.16)

A Green Future: Our 25 Year Plan to Improve the Environment (2018)

- 3.6 The Government's Environment Plan sets out the Government's approach to protecting and enhancing the natural environment over the next 25 years. One of the six key areas of action identified was 'connecting people with the environment to improve health and wellbeing' which would be achieved by:
  - 1. Helping people improve their health and wellbeing by using green spaces;
  - 2. Encouraging children to be close to nature, in and out of school; and
  - 3. Greening our towns and cities.

Heath Impact Assessment Tool

- 3.7 Rapid Heath Impact Assessment Tool (2019) (RHIAT), published by the NHS London Healthy Urban Development Unit (HUDU) is intended to help ensure that health is properly considered when evaluating planning proposals, and where possible development proposals will have a positive rather than a negative influence on health. This HIA draws on this best practice assessment tool.
- 3.8 The Oxfordshire Health Impact Assessment Toolkit (OHIAT), (approved by the Future Oxfordshire Partnership in January 2021). The OHIAT acknowledges how the planning system can address local health and well-being needs and tackle inequalities through influencing the



wider determinants of health. In Oxfordshire, a sub-group of the Future Oxfordshire Partnership, with representation from all the local planning authorities and public health, has been working with consultants to produce an Oxfordshire HIA Toolkit for use with the assessment of the Oxfordshire Spatial Plan 2050, assessment of local plans and major developments.

### 4.0 METHOD OF ASSESSMENT

- 4.1 Health Impact Assessment (HIA) is a process which assists the design and decision-making process by predicting the health consequences of a proposed development under consideration. It is designed to identify and assess the potential health outcomes (both adverse and beneficial) of a proposal and to deliver evidence-based recommendations that maximise health gains; and reduce or remove potential negative impacts or inequalities on health and well-being.
- 4.2 The scale and complexity of the development or proposal will determine the type of HIA used and the extent of analysis and engagement. This HIA has used the Rapid Health Impacts Assessment Tool (HUDU Planning for Health 2019). The tool assists in identifying health determinants which are likely to be influenced by a specific development proposal.
- 4.3 The HIA identifies links between new development and health using determinants, pathways and impacts. This analysis informs the identification of potential health outcomes of the Proposed development during the construction and operational phases of the development.
- 4.4 In line with the HUDU and the OHIAT, the following sections set out the baseline, in terms of the demographics of the search area, the potential health effects, identification of the population that may be affected by these effects, and a summary table setting out the impact, significance of the health impact, proposed mitigation (if required) and any residual effects.

Health Determinants and Pathways

- 4.5 Health determinants are those factors that can influence health outcomes. Factors may be personal, social, cultural, economic and environmental. They include living and working conditions such as housing, employment, the environment, transport, education and access to services. The HUDU assessment tool has been used to identify the health determinants on an activity basis, alongside the more effect based OHIAT. The health determinants are set down below, with the OHIAT elements in italics<sup>1</sup>.
  - Access to health and social care services and other social infrastructure
  - (Access to Services)
  - Access to open space and nature
  - (Local natural environment and access to green spaces and Physical activity)
  - Air quality, noise and neighbourhood amenity
  - (Air quality, Noise)
  - Accessibility and active travel
  - (Traffic and Transportation)
  - Crime reduction and community safety
  - (Crime and anti-social behaviour)

<sup>&</sup>lt;sup>1</sup> Health priority does not include housing, as the development is for commercial use only.



- Access to healthy food
- (Healthy food environments)
- Access to work and training
- (Economy and Employment and Education and Skills)
- Social cohesion and inclusive design
- (Crime and anti-social behaviour)
- Minimising the use of resources, and
- Climate change.

**Table 1: Health Determinants and Outputs** 

HUDU Methodology Categories	PATHWAYS	OUTCOMES
Air quality, noise and neighbourhood amenity.	Exposure to land contamination and poor air quality has the potential to adversely impact health and wellbeing.	Travel Plans and Construction Management Plans can mitigate the impact of construction and any increase in traffic generation.
	High levels of traffic can result in higher levels of air pollution and noise that has the potential to adversely impact health and wellbeing.	Improved access to public transport and good cycle and pedestrian links can assist in reducing the impact of additional traffic and also encourage physical activity and social integration that has the potential to positively impact health and wellbeing.
Accessibility and active travel.	Increase in traffic volumes and speed can increase the risk of traffic injuries, poor urban design that prioritises vehicle traffic over pedestrian and cycle travel, with over provision of car parking has the potential to adversely impact health and wellbeing.	Improved access to public transport and good cycle and pedestrian links, and appropriate levels of car parking can assist in reducing the impact of additional traffic and also encourage physical activity and social integration that has the potential to positively impact health and wellbeing.
Crime reduction and community safety.	Poor urban design can exacerbate crime and community safety by creating under-used, isolated spaces without natural surveillance, together with pedestrian environments that are intimidating, can reduce social interaction has the	Good urban design can create safe, attractive and usable streets, that decrease the opportunities for anti-social behaviour, that will encourage a feeling of security in occupiers has the potential to positively impact health and wellbeing.

PF/10679



HUDU Methodology Categories	PATHWAYS	OUTCOMES
	potential to adversely impact health and wellbeing.	
Access to work and training.	Locating employment in inaccessible locations or failing to provide diversity of local jobs or training opportunities has the potential to adversely impact health and wellbeing.	Accessible to a range of employment opportunities has the potential to positively improve health and wellbeing.
Social cohesion and lifetime neighbourhoods.	Poor urban design and intensive housing developments and dispersals of resident communities, as well as developments with poor infrastructure such as open space, cycle and pedestrian links has the potential to adversely impact health and wellbeing.	Mixed use developments using the best practice urban design principles, has the potential to positively improve health and wellbeing.
Minimising the use of resources.	Poor disposal of hazardous waste, and the increase in vehicular movements to transport waste, and the potential for loss of ecological value by the stripping of material, has the potential to adversely impact health and wellbeing of the population in the wider context.	Redevelopment on brownfield sites or derelict urban land also ensures that land is effectively used, recycled and enhanced.  Correct hazardous waste disposal, as well as using local recycled and renewable materials whenever possible in the building construction process minimises the environment impact.
Climate change.	Developments can exacerbate the impacts of climate change by failing to consider risk of flooding, and the use of technologies that could assist in reducing energy consumption, that has the potential to adversely impact health and wellbeing of the population in the wider context.	New developments that include renewable energy resources, and the use of SuDs to reduce the risk of flooding has the potential to positively improve health and wellbeing in the wider context.



#### 5.0 COMMUNITY PROFILE

5.1 This section sets out, briefly, the demographic, social economics, health and environmental context of the impact area.

# **Demographic Profile**

5.2 Cherwell is a predominantly rural district, with population concentrated in the three main urban areas of Banbury, Bicester and Kidlington. The population of Cherwell, at 151,846 accounts for 22% of Oxfordshire's total population of 696,880. Table 2 sets out the age profile of the district.

**Table 2: District Gender Profile** 

Indicator	Cherwell	Oxfordshire
Males	75,100	347,600
Females	76,700	349,300

**Table 3: District Age Profile** 

Indicator	Cherwell	Oxfordshire
Population aged under 5 years	6.3%	5.7%
Population aged 5 to 15 years	13.7%	13.29%
Population aged 16 to 24 years	8.5%	11.79%
Population aged 25 to 64 years	53 %	50.6%
Population aged 65 years and	18.2%	18.52%
over		

## **Socio-Economic Profile**

- In 2020, the District's proportion of working-age (16-64) residents was 61%, slightly below the averages for Oxfordshire (62.3%) and England (62.4%). 87.8% of the working age population within the search area are economically active, this is higher than the national level (78.4%) and Oxfordshire (80.1%).
- 5.4 47.1% of the search area population are working in managerial and professional roles, lower than in Oxfordshire (54.5%) and in England (50%). 7.8% of the population are in unskilled elementary roles, higher than in Oxfordshire (5.5%) and lower than the national (9.1%). (Source: NOMIS)
- 5.5 At October 2021, 3.8% of the search area population was claiming unemployment benefit, slightly higher than Oxfordshire at 3.6%, and lower than the national average of 6.3%. (Source: Oxfordshire Insight)
- 5.6 12.7% of children and 7.4% of the older population (over 64 claiming pension credit) within the district are living with economic deprivation, this is similar to county level, but lower than the national level. (Source: Local Insight Profile for Cherwell Area OCSI February 2021)



# **Deprivation**

5.7 The Index of Multiple Deprivation (IMD) 2019 is the most comprehensive measure of those deprived neighbourhoods. The IMD is based upon seven separate types of deprivation which are separately recognised and measurable and shows the numbers of people living in Cherwell in neighbourhoods that are ranked among the most deprived 20% of neighbourhoods in England. The table below sets out below the deprivation types and numbers of people in Cherwell living with that deprivation.

**Table 4: Cherwell Areas of Deprivation (Percent of the Population)** 

Income Domain	Employment Domain	Education Domain	Health Domain	Barrier to Housing Domain	Living environment Domain	Crime Domain
4.3%	5.4%	19.8%	5.3%	23.9%	15.5%	8.2%
(20%)	(19.5%)	(19.8%)	(19.6%)	(21.4%)	(21%)	(20.4%)

# **Crime and Safety**

5.8 During the period September 2020 to November 2020 there were a total of 3,004 crimes within the district, which equates to 20.9 per 100,000 population. This compares to 29 crimes per 100,000 population in Oxfordshire and 26.9 per 100,000 population in England. Most crimes related to violent offences (27.6 per 100,000 population, about the same as the national level) and anti-social behaviour (10.1 per 100,000 population, less than the national average of 27.6).

## **Education and Skills**

5.9 Overall, the population in the search area has a lower education attainment level when compared to Oxfordshire and similar levels at the National level.

**Table 5: Qualifications (%)** 

	No	NVQ1 and	NVQ2 and	NVQ3 and	NVQ4 and
	Qualifications	above	above	above	above
Cherwell	5.5	88.8	80.8	66.2	48.6
Oxfordshire	4.7	91.5	81.7	67.3	52.8
England	5.9	87.7	78.1	61.3	43.1

Source: NOMIS



# **Health and Wellbeing**

Access to Health Assets and Hazards

- 5.10 This is a measure of how healthy neighbourhoods are in terms of four criteria as set our below:
  - Retail environment: access to fast food outlets, pubs, off-licences, tobacconists, gambling outlets;
  - Health services: access to GPs, hospitals, pharmacies, dentists, leisure services;
  - Physical environment: access to Blue Spaces, Green Spaces Active, Green Spaces Passive (total green space areas available to each postcode in a range of a 900-metre
    buffer, prior to creating LSOA averages),
  - Air Quality: three air pollutants (Nitrogen Dioxide, Particulate Matter 10 and Sulphur Dioxide).

Table 6: Access to Health Assets and Hazards (%)

	Retail Environment	Health Services	Physical Environment	Air Quality
Cherwell	17.1	29.4	37.6	16.9
England	23.4	20.1	21.3	26.8

Source: Local Insight Profile for Cherwell Area OCSI February 2021

### **Access and Transport**

5.11 The following table sets out the level of car ownership within the search area.

Table 7: Car Ownership (%)

	No Cars	One Car	Two Cars	Three Cars	Four + cars
Cherwell	15.6	41.4	32.5	7.7	2.8
England	25.8	42.2	24.7	5.5	1.9

Source: Census 2011KS402EW

# **Housing Tenure**

5.12 The mix and tenure of properties available in the area reflect the extent of housing choice available to the community. Table 9 summarises the tenure of dwellings in the search area and



the wider context. Overall, within the search area, residents are more likely to own their own home as to rent.

**Table 8: Housing Tenure** 

	Owned	Shared Ownership	Social Rented	Private Rented	Rent free	Total
Cherwell	69.30%	1%	12%	16%	2%	100%
Oxfordshire	46%	2%	22%	28%	2%	100%
England	63.40%	1%	18%	17%	1%	100%

Source: Census 2011KS402EW

## **Life Expectancy**

5.13 In the period from 2015 to 2019 the average life expectancy for males within the search area was 80 years, similar for Oxfordshire and the average for England. The life expectancy for females in the district is 84 years, similar for Oxfordshire and the same for England. (Source: Local Insight Profile for Cherwell Area OCSI February 2021).

### Levels of Good and Bad Health

5.14 The residents of the search area, on the whole, experience the same levels of good and bad health as at County and National level. Within the search area, around 84% of the population either experience good or very good health, slightly less than at County and national level. (Source: Census 100 KS301EW).

### **Long-term Illness and Disability**

5.15 Around 20,072 (14%) of the population of Cherwell are living with a long-term illness or disability, slightly higher than Oxfordshire at 13.7% and lower than England at 17.6%; of this, 8,966 (9.8%) are aged between 16-64 (Source: Local Insight Profile for Cherwell Area OCSI February 2021).

# Lifestyle

5.16 Lifestyle behaviours are risk factors which play a major part in an individual's health outcomes and will have varying physical and psychological consequences. Around 24% of the population of Cherwell are classified as obese slightly higher than for Oxfordshire at 20.7% and the same as England. 5.7% of the population of Cherwell are regular smokers, a similar level to Oxfordshire and England (Source: Local Insight Profile for Cherwell Area OCSI February 2021).



# **Vulnerable Groups and Priority Groups**

- 5.17 Within the overall population of the district there will be certain groups of people who will be more sensitive to changes to health determinants than the general population. Whilst unemployment levels are high and residents within the impact area are likely to be quite well off, there are a number of residents in the district that are unemployed or in low paid jobs, where their access to healthy foods and other facilities such as gyms may be compromised.
- 5.18 Around 14% of the population of the district are living with a long-term illness or a disability, which may lead to this group being more susceptible to health issues.

### **Environmental Profile**

Air Quality

- 5.19 The development at both the construction and the operational phases could impact the air quality of the local area that could affect the health and wellbeing of the immediate population as well as the site workforce.
- 5.20 During the construction phase, the dust generated from construction activities, such as demolition, earthworks and emissions from traffic movements could affect the local air quality. During the operational phase, emissions from traffic movements and plant could affect local air quality.
- 5.21 The Air Quality chapter of the Environmental Statement that accompanies this planning concluded that the impact on the air quality at both the construction and the operational phases would be negligible and low risk to the health and wellbeing of the local population and the workforce.

Noise

- 5.22 The development at both the construction and the operational phases of the development could impact the noise level of the local area. Noise at a level that could be considered a nuisance, has the potential to affect the health and wellbeing of the local population (the construction and site workforce will be protected from noise through health and safety procedures).
- 5.23 Noise is likely to occur from construction activities and associated traffic movements, and from plant and traffic movements associated with the operational phase of the development. The Noise chapter of the Environmental Statement that accompanies this planning application concluded that the impact on the potential noise generated at both the construction and the operational phases would be negligible and low risk to the health and wellbeing of the local population and the workforce.

**Ground Conditions** 

5.24 Contaminants, ground gas and any made ground, when disturbed by construction processors may affect the health and wellbeing of the local population and workforce at the construction and the operational phases of development. Pollution entering the water course at both the constriction and the operational phases also has the potential to affect the health and wellbeing of the workforce and the local population.



5.25 In such circumstances remediation of the site would have to be undertaken prior to both commencement and operational phases of the development. The ground conditions ES chapter has confirmed that the risk from the ground conditions, and from all sources is low.

# 6.0 ASSESSMENT OF THE IMPACTS

- 6.1 This section assesses the likely health impacts arising from the proposed development, both through the construction phase and during operation. Scoping has identified the potential effects likely to occur during the construction and operational phases associated with the health determinants at Table 1.
- 6.2 The assessment has considered the population as a whole in the impact area and the priority groups identified in the community profile; that live with a long-term illness or disability, and those unemployed or on a low income. The assessment has followed the significance criteria that has been used in the Environmental Statement that accompanies this planning application as set out in Table 9.

**Table 9: Significance Table** 

Significance	Health Impact				
Major adverse	Health impacts that will have an influence at a sub-				
	regional/district wide scale.				
Moderate adverse	Health impacts effects that will have an influence on the wider				
	County scale.				
Minor adverse	Health impacts effects that will have an influence at local level.				
Negligible	No discernible health impacts impact.				
Minor benefit	Health impacts effects that will have an influence at local level.				
Moderate benefit	Health impacts effects that will have an influence at a wider				
	County scale.				
Major benefit	Health impacts effects that will have an influence at a regional				
	scale.				

6.3 The assessment has covered both the construction and the operational phase of the development as set out in **Appendix 1** and **Appendix 2**.

#### 7.0 CONCLUSION

- 7.1 This HIA has assessed the potential impact on the health and wellbeing of the population of the search area as a result of the proposed development.
- 7.2 The assessment has identified that, overall, the development is likely to have a minor beneficial impact during the construction phase of the development through the creation of unskilled and skilled jobs. This will particularly benefit those groups on the low income or without work.
- 7.3 The assessment has identified that, overall, the development is likely to have a minor benefit to the health of the population during the operational phase of the development through the creation of unskilled and skilled jobs.

Appendix 1: Symmetry Park Ardley: Health Impact Assessment	
Construction Phase - Assessment	

Access to health care and other social infrastructure	The construction of the Proposed Development is anticipated to deliver 500 on-site jobs per annum during the construction period. Once leakage, displacement, and multiplier effects are considered, it is anticipated there will be a net addition of 610 jobs. These could increase the need for local health care services.      Temporary on-site welfare facilities would reduce the need for the use of local facilities.	Group Specific Health Impact  General population Negligible Low-income group. Negligible  People with long term illness or Disability Negligible	Overall Health Impact Negligible	Mitigation Enhancement
Access to open space	The proposed development will not lead to the closure of any existing areas of open spaces or PRoW used by the general public.	General population Neutral Low-income group Neutral People with long term illness or Disability Neutral	Neutral	
Air quality and noise and neighbourhood amenity	<ul> <li>The application is accompanied by an Environmental Statement that has assessed the potential impacts as a result of the Construction phase of the development.</li> <li>The ES concluded that dust and other emissions from construction activities and plant can be satisfactory mitigated by the implementation of a Construction Environment Management Plan (CEMP) incorporating a Construction Transport Plan (CTP).</li> <li>As part of the application on land adjoining the site, Land at Junction 10 M40 development (refs. 21/03266/F,</li> </ul>	General population Negligible  Low-income group. Negligible  People with long term illness or Disability Negligible	Negligible	Measures as set out in the ES Chapter 6 Air Quality, Chapter 7 Noise and Vibration, and a CEMP and CTP agreed with the Council.

	<ul> <li>21/03267/OUT and 21/03268/OUT)., OCC has sought the provision of a new shared footway/cycleway towards Bicester. It is understood that the final form of this link will be confirmed following the outcome of further detailed discussions with OCC that will take into account the usual technical and viability assessments associated with any new piece of significant infrastructure.</li> <li>A new bus stop/layby will be provided to improve accessibility by public transport for future employees and visitors of the site.</li> </ul>			
Access and active travel	<ul> <li>The proposed development will not lead to any closures of PRoW or cycle routes that the workforce may use.</li> <li>It is not anticipated that there will be a significant increase in vehicular traffic during the construction phase of the development that would impact the local community.</li> <li>A Construction Environment Management Plan (CEMP) and a Construction Transport Plan (CTP) will be agreed with the Council that will set out hours of work and other mitigation measures.</li> </ul>	General population Negligible Low-income group. Negligible People with long term illness or Disability Negligible	Negligible	
Crime reduction and community safety	<ul> <li>The site will be secured at each boundary by hoarding and fencing. There will be strict controls over access to the site, with visitors having to sign in.</li> <li>It is not anticipated that the construction phase of the development will lead to an increase in the level or the fear of crime in the local area.</li> </ul>	General population Negligible Low-income group. Negligible People with long term illness or Disability Negligible		
Access to healthy foods		General population  Negligible  Low-income group.	Negligible	

Т		0.41 P		
	The provision of skilled and skilled construction jobs, which	Minor Benefit		
	may pay more than other local jobs, will increase the	People with long term illness or		
	opportunity for healthier food to be consumed.	Disability		
		Negligible		
Access to work	The construction of the Proposed Development is anticipated	General population	Moderate	An apprentice and
and training	to deliver 500 on-site jobs per annum during the construction	Moderate Benefit	Benefit	employment local
	period. Once leakage, displacement, and multiplier effects are			people strategy will be
	considered, it is anticipated there will be a net addition of 610			agreed with CDC – this
	jobs. Local residents will be employed, as well workers from			will ensure that where
	outside the impact area.			possible, the local
		Low-income group.		labour force will be
	There will be a range and type of jobs, both skilled and	<b>Moderate Benefit</b>		used.
	unskilled. The job creation will be beneficial to those workers			
	on low incomes, giving workers more disposable income to			
	purchase good that could improve their health and wellbeing			
	such as gym and use of other sports facilities such as			
	swimming pools.	People with long term illness or		
		Disability		
	<ul> <li>As part of the application on land adjoining the site, Land at</li> </ul>	Moderate Benefit		
	Junction 10 M40 development (refs. 21/03266/F,			
	21/03267/OUT and 21/03268/OUT), OCC has sought the			
	provision of a new shared footway/cycleway towards Bicester.			
	It is understood that the final form of this link will be			
	confirmed following the outcome of further detailed			
	discussions with OCC that will take into account the usual			
	technical and viability assessments associated with any new			
	piece of significant infrastructure. This could allow potential			
	workers a more attractive route to cycle to the site, assisting			
	in improving their overall health and wellbeing.			
	in improving their overall neutral and wellbeing.			
	<ul> <li>A new bus stop/layby will be provided to improve accessibility</li> </ul>			
	by public transport for future employees and visitors of the			
	site.			
	Site.			

Social cohesion and inclusive design	<ul> <li>The Transport ES chapter has concluded that the impact of the temporary additional vehicle trips generated by the proposed development will be negligible and will have a negligible impact on the local highway network. As such, the existing travel times of the local population will not change.</li> <li>The proposed development will not impact the existing public open space or access to PRoW, or local community meeting points.</li> </ul>	General population Negligible  Low-income group. Negligible  People with long term illness or Disability Negligible	Negligible	
Minimise the use of resources	<ul> <li>A Framework Waste Management Strategy (WMS) accompanies the planning application that will set out an estimated amount and type of waste that will accrue during construction.</li> <li>The WMS will set out a reuse/recycle strategy waste type to ensure that the most appropriate method of waste disposal is used.</li> </ul>	General population Negligible Low-income group. Negligible People with long term illness or Disability Negligible	Negligible	
Climate Change	<ul> <li>There will be a temporary increase in HGV and vehicle traffic during the construction phase. The ES has concluded that the impact of the additional emissions will be negligible.</li> <li>The construction phase of the development will not increase the risk of flooding on the site or in the immediate area.</li> <li>The buildings on the site will be constructed to net zero carbon in construction to accord with the UK Green Building Council's definition.</li> </ul>	General population Negligible Low-income group. Negligible People with long term illness or Disability Negligible		

Appendix 2: Symmetry Park Ardley: Health Impact Assessment
Operational Phase - Assessment

Determinant	Potential Impact	Group Specific Health Impact	Overall Health Impact	Mitigation Enhancement
Access to health care and other social infrastructure	<ul> <li>The proposals will generate up to 2,426 on-site jobs per annum during its lifetime.</li> <li>It is not anticipated that the additional numbers of staff will adversely impact the existing health care and other infrastructure.</li> <li>The open spaces proposed as part of the development will assist in maintaining the health and wellbeing of the workforce.</li> </ul>	General population Minor Benefit  Low-income group. Minor Benefit  People with long term illness or Disability Minor Benefit	Minor Benefit	
Access to open space	<ul> <li>The Proposed Development will include areas of open space.</li> <li>The Proposed Development will not lead to the closure of any existing areas of open space or PRoW used by the general public.</li> </ul>	General population Minor Beneficial  Low-income group Minor Beneficial  People with long term illness or Disability Minor Beneficial	Negligible	
Air quality, noise and neighbourhood amenity	<ul> <li>The application is accompanied by an Environmental Statement (ES) that has assessed the potential impacts as a result of the operational phase of the development.</li> <li>The ES concluded that dust and other emissions from the operational phase will be negligible.</li> </ul>	General population Negligible Low-income group. Negligible	Negligible	Measures as set out in the ES Chapter 6 Air Quality, Chapter 7 Noise and Vibration to be implemented.
	The ES concluded that noise from the operational phase of the development will be negligible.	People with long term illness or Disability Negligible		

				1
	The development includes substantial landscaping that will			
	screen the development from residential properties in the			
	nearby villages.			
Access and	The mitigation measures set out in the Transport Statement will ensure	General population	Minor	
active travel	that the workforce and other visitors will be able to access the site by a	Minor Benefit	Benefit	
	variety of measures. The workforce will not be reliant on their private	Low-income group.		
	car and will encourage walking and cycling that may assist in	Minor Benefit		
	maintaining the health and wellbeing of staff. The measures are set out	People with long term illness or		
	below.	Disability		
		Minor Benefit		
	The inclusion of shared pedestrian/cycle routes within the site	Willion Belletic		
	that will connect the site with the off-site infrastructure to the			
	south			
	South			
	As part of the application on land adjoining the site, Land at			
	Junction 10 M40 development (refs. 21/03266/F,			
	21/03267/OUT and 21/03268/OUT), OCC has sought the			
	provision of a new shared footway/cycleway towards Bicester.			
	It is understood that the final form of this link will be			
	confirmed following the outcome of further detailed			
	discussions with OCC that will take into account the usual			
	technical and viability assessments associated with any new			
	piece of significant infrastructure.			
	A new bus stop/layby will be provided to improve accessibility			
	by public transport for future employees and visitors of the			
	site.			
	Car and cycle parking that is consistent with the standards and			
	guidance that is outlined in Section 3.			
	Operating a Travel Plan that will encourage staff to make use			
	of more sustainable modes of transport when travelling			
	to/from the site.			
	, in the second			

0	T : 111 041 1: 0 1 1 1 1 1 1			
Crime reduction	The site will have 24-hour security. Gate houses will check on	General population		
and community	staff and visitors to the yard and other areas not accessible to	Negligible		
safety	the general public.	Low-income group.		
		Negligible		
	CCTV will be located around the site to ensure safety of staff	People with long term illness or		
	and visitors.	Disability		
		Negligible		
Access to	The provision of skilled and skilled construction jobs, which	General population	Minor	
healthy foods	may pay more than other local jobs, will increase the	Minor Benefit	Benefit	
	opportunity for healthier food to be consumed.	Low-income group.		
		Minor Benefit		
		People with long term illness or		
		Disability		
		Minor Benefit		
Access to work	• The proposals will deliver up to 2,426 on-site jobs per annum	General population	Moderate	An employment
and training	during its lifetime.	<b>Moderate Benefit</b>	Benefit	strategy will be agreed
				with CDC – this will
	<ul> <li>There will be a range and type of jobs, both skilled and</li> </ul>	Low-income group.		ensure that where
	unskilled. The job creation will be beneficial to those workers	Moderate Benefit		possible, the local
	on low incomes, giving workers more disposable income to			labour force will be
	purchase goods that could improve their health and wellbeing			used.
	such as gyms and use of other sports facilities such as			
	swimming pools.			
		People with long term illness or		
	<ul> <li>As part of the application on land adjoining the site, Land at</li> </ul>	Disability		
	Junction 10 M40 development (refs. 21/03266/F,	Moderate Benefit		
	21/03267/OUT and 21/03268/OUT), OCC has sought the			
	provision of a new shared footway/cycleway towards Bicester.			
	It is understood that the final form of this link will be			
	confirmed following the outcome of further detailed			
	discussions with OCC that will take into account the usual			
	technical and viability assessments associated with any new			
	piece of significant infrastructure.			
	F. 200 2. 2.0			
	A new bus stop/layby will be provided to improve accessibility			
	by public transport for future employees and visitors of the			
	by public transport for future employees and visitors of the			

	<ul> <li>site, creating the opportunity for staff to reduce their own carbon footprints.</li> <li>On-site cycle storage and shower facilities will be provided to encourage employees to cycle to work.</li> </ul>			
Social cohesion and inclusive design	<ul> <li>The Transport ES chapter has concluded that the impact of the temporary additional vehicle trips generated by the Proposed Development will be negligible and will have a negligible impact on the local highway network. As such, the existing</li> </ul>	General population Negligible	Negligible	
	travel times of the local population will not change.	Low-income group. Negligible		
	<ul> <li>The proposed development will not impact the existing public open space or access to PRoW, or local community meeting points.</li> </ul>	People with long term illness or Disability Negligible		
Minimise the use of resources	<ul> <li>A Framework Waste Management Strategy (WMS)     accompanies the planning application that will set out an     estimated amount and type of waste that will accrue during     the operational phase of the development.</li> </ul>	General population Negligible Low-income group. Negligible	Negligible	Mitigation measures set out in the Waste Management Strategy will be incorporate into
	Waste will be re-used on site or recycled where possible.	People with long term illness or Disability Negligible		the operation of the facility.
Climate Change	<ul> <li>The buildings on the site will be constructed to net zero carbon in construction to accord with the UK Green Building Council's definition.</li> </ul>	General population  Negligible  Low-income group.  Negligible	Negligible	
	<ul> <li>The development will include substantial on-site renewable energy generation through solar PV coverage on the roof, reducing the overall emissions.</li> </ul>	People with long term illness or Disability Negligible		
	<ul> <li>The operational phase of the development will not increase the risk of flooding on the site or in the immediate area.</li> </ul>			