



Brighter strategies
for greener projects



Client: YMCA London City and North
Project: 184 Tottenham Road
Report: Health Impact Assessment

QUALITY ASSURANCE

Issue/Revision:	Draft	Final
Date:	March 2026	July 2026
Comments:		
Prepared by:	Jozie Beattie	Petronella Tyson
Authorised by:	Petronella Tyson	James Bumphrey
File Reference:	553975JB17MAR26_HIA_DV03.docx	553975JB17MAR26_HIA_DV03.docx

CONTENTS

1.0	EXECUTIVE SUMMARY	1
2.0	INTRODUCTION	2
3.0	DEVELOPMENT CONTEXT	3
3.1	SITE DESCRIPTION	3
3.2	PROPOSED DEVELOPMENT	3
4.0	METHODOLOGY	4
4.1	BACKGROUND	4
4.2	APPROACH TO ASSESSMENT	4
4.3	BASELINE ASSESSMENT	5
4.4	SUPPORTING INFORMATION	7
4.5	KEY STAKEHOLDERS CONSULTED	7
4.6	WORKSHOPS	7
4.7	ASSESSOR COMPETENCIES	8
4.8	ASSUMPTIONS AND LIMITATIONS	8
5.0	POLICY BACKGROUND	10
5.1	NATIONAL	10
5.2	REGIONAL	11
5.3	LOCAL	13
6.0	HEALTH PROFILE BASELINE	17
6.1	POPULATION PROFILE	17
6.2	HEALTH PROFILE	21
6.3	ECONOMIC PROFILE	24
6.4	SOCIAL INFRASTRUCTURE PROFILE	27
7.0	IMPACT ASSESSMENT	32
7.1	HEALTHY HOUSING	32
7.2	ACTIVE TRAVEL	33
7.3	HEALTHY ENVIRONMENT	35
7.4	VIBRANT NEIGHBOURHOODS	39
8.0	MITIGATION AND RECOMMENDATIONS	42
9.0	CONCLUSION	43
APPENDIX A EMPLOYMENT ADDITIONALITY		
APPENDIX B HUDU RAPID HIA MATRIX		

REFERENCES

Tables

Table 4.1 Competent Experts

Table 6.1 GP surgeries within 1.8km walking distance of site

Table 6.2 Dentists within 1.8km walking distance of site

Table 6.6 Open Space within 3.2km of the site

Table 6.7 Community Facilities within 3.2km of the site

Table 8.1 Summary of Mitigation and Enhancement Measures

Table A.1 On-site Construction Employment (FTE) Additionality Assessment

Table B.1 HUDU Rapid HIA Matrix

Figures

Figure 1.1 Executive Summary Infographic

Figure 4.1 The Health Map - Determinants of Health and Wellbeing in Our Neighbourhoods

Figure 6.1 Spatial Boundaries Map

Figure 6.2 Population by Age

Figure 6.3 Haringey Population Projections from 2022 to 2027

Figure 6.4 Ethnicity by Area

Figure 6.5 Religion by Area

Figure 6.5 General Health of Population

Figure 6.6 Disability by Area

Figure 6.7 Personal Wellbeing Estimates

Figure 6.8 Qualification Level by Area

Figure 6.9 Indices of Multiple Deprivation

Figure 6.9 Indices of Multiple Deprivation Chart 2025

Figure 6.10 Crime Rates, Hornsey

Figure 6.11 Health Services Near Proposed Development

1.0 EXECUTIVE SUMMARY

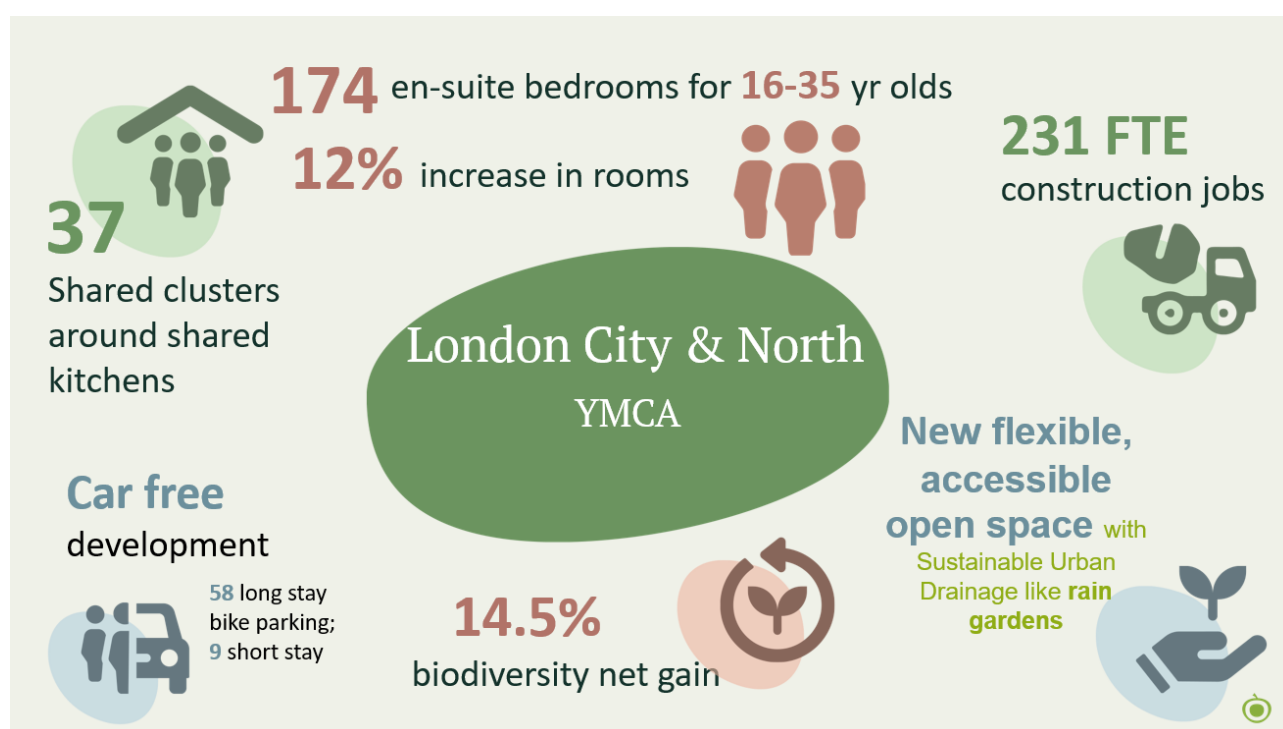
Greengage Environmental Ltd (Greengage) was commissioned by YMCA London City and North to undertake a Health Impact Assessment (HIA) in relation to a planning application for the Proposed Development located at 184 Tottenham Road, within the London Borough of Haringey.

The Proposed Development's health impacts have been assessed against the NHS London Healthy Urban Development Unit (HUDU) Healthy Urban Planning Checklist, considering impacts directly related to the proposal, as well as indirect influences on the wider community.

Of the 51 criteria the Proposed Development has been assessed against, nine were not applicable to the Proposed Developments it use and its users. Of the 41 criteria remaining, 31 have a positive impact on health and ten a neutral impact. Mitigation and recommendations have been set out where necessary.

The benefits to come forward as a result of the Proposed Development are summarised in the infographic below.

Figure 1.1 Executive Summary Infographic



2.0 INTRODUCTION

Greengage Environmental Ltd (Greengage) was commissioned by YMCA London City and North to undertake a Health Impact Assessment (HIA) in relation to a detailed planning application for the Proposed Development known as 184 Tottenham Road, within the London Borough of Haringey.

Proposals seek to demolish and redevelop the existing building to deliver 174 bedspaces and associated infrastructure, up to six storeys in height, continuing the core use of the site as accommodation for homeless young people.

The Proposed Development's health impacts have been assessed against the NHS London Healthy Urban Development Unit (HUDU) Healthy Urban Planning Checklist, considering impacts directly related to the proposal, as well as indirect influences on the wider community. The outcomes of this analysis form the evidential base for the second stage of the assessment framework using the HUDU Rapid HIA Tool (Appendix B) to determine the results of the Proposed Development's impact on health. Where necessary, measures to mitigate any negative impacts are given.

The NHS London Healthy Urban Development Unit (HUDU) Healthy Urban Planning Checklist identifies eleven determinants of health likely to be influenced by a development proposal. 'Detriments of Health' are factors that have the most significant influence on the health of a population. Owing to the nature of the proposals, the Proposed Development has been assessed against all eleven determinants, with the Rapid HIA Tool splitting these determinants into 51 criteria

The built environment is a key determinant of health. Factors including air quality, noise quality, access to nature, sustainability, and access to local facilities, influence both physical and social wellbeing. Well-built environments can help reduce inequalities and foster safe, supportive and healthy communities.

3.0 DEVELOPMENT CONTEXT

The following section provides a description of the existing site and the development proposals.

3.1 SITE DESCRIPTION

184 Tottenham Road, the application site is centred on National Grid Reference TQ 30309 88711. The site is located in the London Borough of Haringey and the surrounding area is comprised of largely residential areas, public highway and high street shops. Specifically, the site is bounded by Tottenham Lane to the east, and Elmfield Avenue to the north.

The existing YMCA property is a five storey semi-detached property fronting Tottenham Lane in central Crouch End, built circa 1920 for 18-35 year olds. The building currently comprises 155 single occupancy bedrooms with communal areas (including meeting rooms, storage areas and a canteen with adjacent kitchen) and a privately operated fitness centre, which has separate access to the main YMCA residential building.

3.2 PROPOSED DEVELOPMENT

The Proposed Development seeks to;

“Demolition of the existing building and erection of a new, improved hostel facility with ancillary office, training and communal facilities within a part four to part six storey building”.

This is specifically a detailed planning application to demolish and redevelop the existing building to deliver 174 bedspaces and associated infrastructure for 16-35 year olds, up to six storeys in height, continuing the core use of the site as accommodation for homeless young people.

4.0 METHODOLOGY

4.1 BACKGROUND

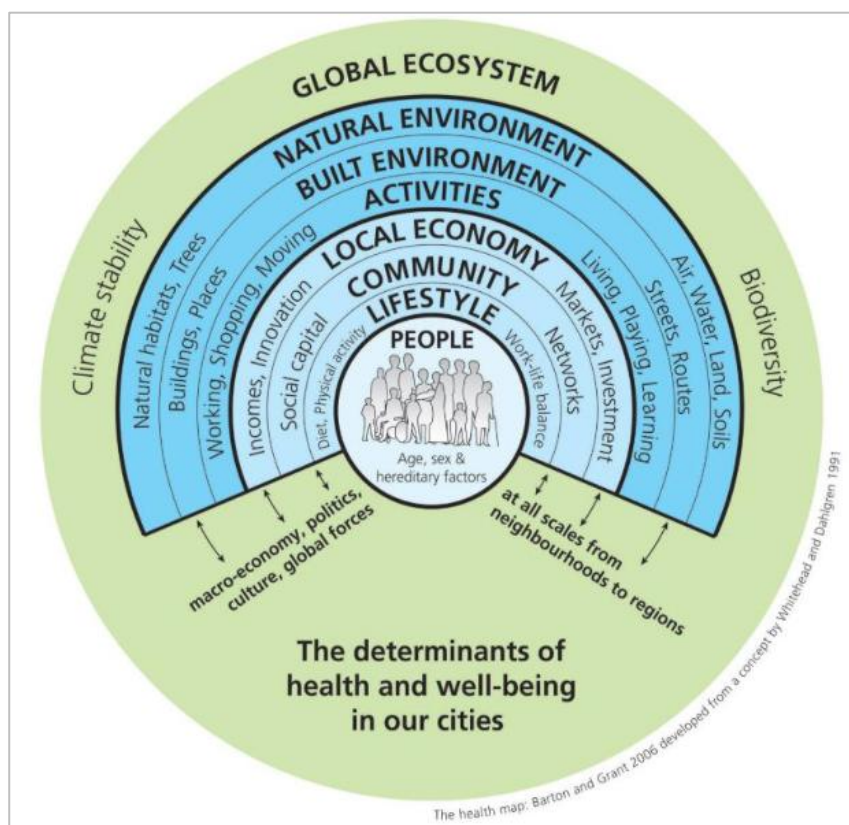
The World Health Organisation (WHO)¹ defines health as;

'A state of complete physical, mental and social well-being and not merely the absence of disease or infirmity.'

This highlights how health is shaped not only by biological factors, but also by social, economic and environmental conditions in which people live.

Barton and Grants Health Map², shown in Figure 4.1 is widely recognised as an exemplar framework for understanding the relationship between health and the wider determinants of health with people at the centre. This layered approach provides a clear basis for assessing how planning and development decisions can affect health outcomes, and underpins the methodology applied in this assessment.

Figure 4.1 The Health Map - Determinants of Health and Wellbeing in Our Neighbourhoods



4.2 APPROACH TO ASSESSMENT

In assessing the potential health impacts of the Proposed Development, the HIA predominantly follows the assessment criteria and procedures contained within the following key documents:

- The NHS Healthy Urban Development Unit's 'HUDU Planning for Health – Healthy Urban Planning Checklist'³; and

- The NHS Healthy Urban Development Unit's 'HUDU Planning for Health - Rapid Health Impact Assessment Tool'⁴.

Health Determinants

The Rapid HIA Tool identifies 11 key determinants of health likely to be influenced by a development proposal. 'Determinants of health' are factors that have the most significant influence on the health of a population⁵. The 11 key determinants are as follows:

1. Housing Design and Affordability;
2. Access to Health and Social Care Services and Other Social Infrastructure;
3. Access to Open Space and Nature;
4. Air Quality, Noise and Neighbourhood Amenity;
5. Accessibility and Active Travel;
6. Crime Reduction and Community Safety;
7. Access to Healthy Food;
8. Access to Work and Training;
9. Social Cohesion and Inclusive Design;
10. Minimising the Use of Resources; and
11. Climate Change.

The HIA assesses the Proposed Development (during construction and operation) against the above determinants of health, to establish potential health impacts.

Due to the residential nature of the Proposed Development, no health determinants will be scoped out of the assessment.

Significance Criteria

In line with the NHS HUDU guidelines impacts on health determinants are categorised as;

- Positive;
- Negative;
- Neutral; or
- Uncertain.
- Where applicable, recommendations are provided to enhance health benefits or mitigate any potential negative effects.

4.3 BASELINE ASSESSMENT

A desk-based study drawing on information from a number of sources including the Office for National Statistics (ONS) Census⁶ for example, has been undertaken to determine the baseline conditions for the site and the wider study area. The review of baseline conditions focuses on the following topics:

- Population and Age;

- Population Projections;
- Ethnicity;
- Religion;
- General Health and Disability;
- Obesity, Mental Health and Loneliness
- Qualifications and Economic Activity;
- Deprivation and Crime;
- Local Healthcare Provision;
- Local Open, Amenity and Play Space Provision;
- Local Community Facilities Provision; and
- Connectivity.

Distance Thresholds

For the assessment of local facilities, the following distance thresholds have been applied:

- GPs, dentists and pharmacies: a distance of up to 1.8km is considered acceptable for access to healthcare services, reflecting a reasonable walking distance;
- Nurseries and Primary Schools: a distance of up to 1.8km is used to assess access to nurseries and primary schools, which is typically an acceptable walking distance for young children;
- Further Education colleges: a distance of up to 3.2km is considered for further education institutions, reflecting the wider catchment areas and potential for longer travel distances for adults;
- Open Space, amenity and play space: a distance of up to 4.8km is used for assessing access to these facilities, reflecting a wider range that may encompass larger or more varied open spaces; and
- Community Facilities: a distance of up to 3.2km is considered acceptable for access to community facilities, reflecting a reasonable walking distance.

There are no widely accepted guidelines defining specific distance thresholds for access to healthcare or community facilities; therefore, accessibility has been assessed using reasonable walking distances appropriate to the site's context.

School thresholds are consistent with Department for Education⁷ guidance on statutory walking distances: two miles (3.2km) for children under eight, and three miles (4.8km) for older children. Best practice suggests maximum journey times of 45 minutes (primary) and 75 minutes (secondary), which have been considered in the assessment. For consistency, these distances have been converted to kilometres.

Open and play space thresholds are consistent with Natural England's⁸ recommended benchmark guidelines that everyone, wherever they live, should have an accessible greenspace;

- Of at least 2 hectares in size, no more than 300 metres (5 minute walk) from home;
- At least one accessible 20 hectare site within two kilometres of home;

- One accessible 100 hectare site within five kilometres of home;
- One accessible 500 hectare site within 10 kilometres of home; and
- A minimum of one hectare of statutory Local Nature Reserve per thousand population.

4.4 SUPPORTING INFORMATION

The HIA has been informed through review of the following application documents:

- Design and Access Statement
- Planning Statement
- Statement of Community Involvement
- Construction Logistics Plan
- Noise Impact Assessment
- Air Quality Assessment
- Transport Assessment/Travel Plan
- Flood Risk Assessment
- Sustainable Drainage Strategy
- Biodiversity Net Gain Assessment and Urban Greening Factor
- Arboricultural Assessment
- Daylight & Sunlight Report
- Sustainability and Energy Statement
- Overheating Assessment

4.5 KEY STAKEHOLDERS CONSULTED

In April 2026, NHS London Healthy Urban Development Unit as part of NHS North East London Integrated Care Board was consulted. Their response follows:-

"As mentioned, I have discussed the details below with colleagues in the ICB Estate Team. We have reviewed the information provided and have used the HUDU Model to assess the potential impact of the proposed development on existing primary healthcare capacity. On the basis that the proposal would result in a net increase of (circa) 20 bed spaces, we are satisfied that there is sufficient capacity within the existing primary care system to accommodate the new patient population.

Accordingly, mitigation in the form of a healthcare related planning contribution is not being sought at this time."

4.6 WORKSHOPS

A health impacts workshop on early designs was held in April 2026 with the design team and representatives from YCLAN to introduce what a Health Impact Assessment is for, what it is assessing and collectively review early designs for their health impacts both positive and negative.

4.7 ASSESSOR COMPETENCIES

Table 4.1 below demonstrates the qualifications and relevant experience of those involved in the production of this HIA.

Table 4.1 Competent Experts

Name	Role	Qualifications	Relevant Experience
James Bumphrey Director	Reviewer of the report	MSc in Environmental Consultancy Full Member of Institute of Environmental Sciences	Over 13 years experience in environmental consultancy.
Petronella Tyson Principal Consultant	Co-author of the report	MSc Strategic Leadership Towards Sustainability	Over 5 years experience in preparing Health Impact Assessments and Socio-economic Assessments
Jozie Beattie Consultant	Co-author of the report	MSc in Environmental Consultancy	2 years experience in EIA and preparing Health Impact Assessments and Socio-economic Assessments Practitioner Member of ISEP (PISEP) and Registered Environmental Practitioner (REnvP).

This report was written by Jozie Beattie and Petronella Tyson, and reviewed by James Bumphrey who confirms in writing that the report is in line with the following;

- Represents sound industry practice;
- Reports and recommends correctly, truthfully and objectively; and
- Avoids invalid, biased and exaggerated statements.

4.8 ASSUMPTIONS AND LIMITATIONS

The assessment draws on the latest available datasets, some of which pre-date or were collected during the COVID-19 pandemic. As with any baseline, this information is subject to change over time.

It is not possible to quantify the relative influence of each determinant; therefore, impacts are assessed qualitatively, based on available evidence at the time of writing.

5.0 POLICY BACKGROUND

The following section sets out the national, regional and local policy that has informed the assessment.

5.1 NATIONAL

National Planning Policy Framework (NPPF)

The NPPF⁹ was updated in February 2025. The revised NPPF sets out the Government's planning policies for England and how they are expected to be applied. It provides a framework within which locally prepared plans for housing and other development can be produced. Within this framework, the chapter that is most relevant to this HIA is Chapter 8 'Promoting healthy and safe communities'. This states that:

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

a) promote social interaction, including opportunities for meetings between people who might not otherwise come into contact with each other – for example through mixed-use developments, strong neighbourhood centres, street layouts that allow for easy pedestrian and cycle connections within and between neighbourhoods, and active street frontages;

b) are safe and accessible, so that crime and disorder, and the fear of crime, do not undermine the quality of life or community cohesion – for example through the use of beautiful, well-designed, clear and legible pedestrian routes and cycle routes, and high quality public space, which encourage the active and continual use of public areas; and

c) enable and support healthy lives, through both promoting good health and preventing ill-health, especially where this would address identified local health and well-being needs and reduce health inequalities between the most and least deprived communities – for example through the provision of safe and accessible green infrastructure, sports facilities, local shops, access to healthier food, allotments and layouts that encourage walking and cycling.'

Further guidance is also contained in the National Planning Practice Guidance¹⁰ (PPG) on Healthy and Safe Communities which states that:

'The design and use of the built and natural environments, including green infrastructure are major determinants of health and wellbeing. Planning and health need to be considered together in two ways: in terms of creating environments that support and encourage healthy lifestyles, and in terms of identifying and securing the facilities needed for primary, secondary and tertiary care, and the wider health and care system (taking into account the changing needs of the population).'

The PPG defines a healthy place as:

'One which supports and promotes healthy behaviours and environments and a reduction in health inequalities for people of all ages. It will provide the community with opportunities to improve their physical and mental health, and support community engagement and wellbeing.

It is a place which is inclusive and promotes social interaction. The National Design Guide sets out further detail on promoting social interaction through inclusive design including guidance on tenure neutral design and spaces that can be shared by all residents.

It meets the needs of children and young people to grow and develop, as well as being adaptable to the needs of an increasingly elderly population and those with dementia and other sensory or mobility impairments.'

National Design Guide

The National Design Guide¹¹ was issued by the Ministry of Housing, Communities and Local Government in 2021. This guide outlines ten characteristics which well-designed places should feature. These support the NPPF in achieving physically, mentally, and socially healthy environments, tailored to the needs of specific contexts. These characteristics have been broadly considered to supplement this HIA assessment.

The ten characteristics are summarised below:

1. **Context** - enhances surroundings
2. **Identity** - attractive and distinctive
3. **Built Form** - coherent grain
4. **Movement** - accessible and fluid
5. **Nature** - enhanced and optimised
6. **Public Spaces** - safe, social, inclusive
7. **Uses** - mixed and integrated
8. **Homes/Buildings** - functional and healthy
9. **Resources** - efficient and resilient
10. **Lifespan** - made to last

5.2 REGIONAL

London Plan, 2021

The London Plan 2021¹² was formally adopted in March 2021, forming the Spatial Development Plan for London and part of the statutory Development Plan for Greater London.

Underpinned by the concept of 'good growth', the Plan operates until 2041 and provides a long-term framework for decision-making. It replaces the previous London Plan 2016 and is therefore a key material consideration in both planning decisions and this assessment. Relevant, specific policies are outlined below.

Housing Design and Affordability:

Policy GG4 Delivering the Homes Londoners Need & Policy H4 Delivering Affordable Housing

These policies set a strategic target of 50% of all new homes being genuinely affordable. This target was not previously defined in the London Plan 2016.

Policy D5 Inclusive Design

This policy states development proposals should achieve the highest standards of accessible and inclusive design. They should be convenient, welcoming and have no disabling barriers, and an inclusive design statement (DAS) should be included within development proposals.

Policy D7 Accessible housing

This policy sets a target for residential developments to provide at least 10% wheelchair user dwellings in accordance with M4(3), with all other dwellings being accessible and adaptable in accordance with M4(2).

Policy H10 Housing Size Mix

States schemes should consist of a range of unit sizes, tenures, and prices, reflecting robust evidence of local need.

Access to Work and Social Infrastructure:

Policy GG1 Building Strong and Inclusive Communities

This policy aims to deliver diverse, equal, and strong communities. It states development proposals must engage with stakeholders early, provide access to good quality community spaces, and ensure streets and public spaces are planned for people to move about comfortably and safely. New buildings must reinforce identity, inclusivity, and adaption to changing community requirements regardless of age, disability, gender, religion, race, sexuality, marital status, or social class.

Access to Open Space:

Policy G1 Green Infrastructure and Policy G6 Biodiversity and Access to Nature

States development proposals should incorporate elements of green infrastructure and manage impacts on biodiversity to secure net gain. Proposals which reduce deficiencies in access to nature are considered positively.

Health, Safety and Active Travel:

Policy GG3 Creating a Healthy City

This policy outlines requirements that proposals must follow to improve health and reduce health inequalities. These include promoting more active lifestyles, seeking to improve London's air quality, and improving access to, and the quality of, green and play space.

Policy T5 Cycling

States development proposals should remove barriers to cycling and secure appropriate levels of cycle parking which are fit for purpose, secure, and well-located. Standards are outlined as 1 cycle space per studio or 1-person dwelling, 1.5 spaces for 2-person 1-bedroom dwellings and 2 spaces for all other dwellings. Additionally, short-stay spaces should be provided at a minimum of 2 spaces for a density of 5-40 dwellings.

Policy T6 Car Parking

States car free developments should be the starting point for all proposals in places which are well-connected by public transport. Where car parking is provided in new developments, infrastructure provisions should be made for electric or other Ultra-Low emissions vehicles. A Parking Design and Management Plan should be submitted alongside all applications which include car parking provision. For residential parking at least 20% of spaces should have active charging facilities. For locations with are PTAL 0-1 the maximum car parking provisions are 1.5 spaces per dwelling.

Climate Change and Sustainable Construction:

Policy SI2 Minimising Greenhouse Gas Emissions

States major developments should be net-zero carbon and include a detailed energy strategy. Residential developments should achieve a minimum on-site reduction of 10% beyond building regulations.

Policy SI7 Reducing Waste and Supporting the Circular Economy

States developments should look to conserve resources, reduce waste, and increase material re-use. They should promote circular economy outcomes.

5.3 LOCAL

Haringey Local Plan

Haringey adopted their Local Plan in 2013 (consolidated 2017). This will shape the location and scale of development in the borough until 2026. It is made up of the Strategic Policies¹³ and Development Management DPD¹⁴, and various SPDs. The following policies have been identified as of relevance for the HUDU Assessment matrix and health impacts of new developments:

Housing Design and Affordability:

Policy SP1: Managing Growth

The Council will focus Haringey's growth in the most suitable locations, and manage it to make sure that the Council delivers the opportunities and benefits and achieve strong, healthy and sustainable communities for the whole of the Borough. The Council will maximise the supply of additional housing to meet and exceed its minimum strategic housing requirement of 19,802 homes over the plan period from 2011-2026.

Policy SP2: Housing

The Council will aim to provide homes to meet Haringey's housing needs and to make the full use of Haringey's capacity for housing by maximising the supply of additional housing to meet and exceed the minimum target of 19,802 homes from 2011-2026 (820 units per annum from 2011-2014 and 1,502 units per annum).

Policy SP11: Design

All new development should enhance and enrich Haringey's built environment and create places and buildings that are high quality, attractive, sustainable, safe and easy to use. To achieve this all development shall for example;

- Be of the highest standard of design that respects its local context and character and historic significance, to contribute to the creation and enhancement of Haringey's sense of place and identity;
- Ensure impacts on health, climate change, natural resources and biodiversity are minimised by adopting and improving sustainable design and construction techniques; and
- Incorporate solutions to reduce crime and the fear of crime, such as promoting social inclusion; creating well-connected and high quality public realm that is easy and safe to use; and by applying the principles set out in secured by Design' and Safer Place.

Policy DM1: Delivering High Quality Design

All new development and changes of use must achieve a high standard of design and contribute to the distinctive character and amenity of the local area. Development proposals shall demonstrate how the landscaping and planting are integrated into the development as a whole, and development proposals must ensure a high standard of privacy and amenity for the development's users and neighbours.

Access to Work and Social Infrastructure

Policy SP9: Improving Skills and Training to Support Access to Jobs and Community Cohesion and Inclusion

The Council will seek to address unemployment by facilitating training opportunities for the local population, increasing the employment offered in the borough and allocating land for employment purposes. The Council will secure financial contributions from development that results in a net loss of employment floorspace to invest in training and other initiatives that seek to promote employment and adult education in the borough.

Policy DM48: Use of Planning Obligations

A Planning obligation will be sought on a scheme-by-scheme basis having regard to the relevant policy requirements of the Local Plan, development specific impacts, appropriate mitigation, viability, and the statutory tests for the use of planning obligations.

Access to Open Space

Policy SP13: Open Space and Biodiversity

New development shall protect and improve Haringey's parks and open spaces. All new development shall for example:

- Protect and enhance, and when and where possible, extend the existing boundaries of the borough's Green Belt, designated Metropolitan Open Land, designated Open Spaces, Green Chains, allotments, river corridors and other open spaces from inappropriate development;
- Provide amenity space in accordance with the Council's Open Space and Recreational Standards Supplementary Planning Document (SPD);
- Manage the impact of such new developments in areas adjacent to designated open space; and
- Secure improvements, enhancement and management in both quality and access to existing green spaces.

Health, Safety and Active Travel

Policy SP7: Transport

In line with the London Plan, the Council will work with its partners to promote the following travel demand management schemes to tackle climate change, improve local place shaping and public realm, and environmental and transport quality and safety;

- Minimising congestion and addressing the environmental impacts of travel;
- Promoting public transport, walking and cycling (including minimum cycle parking standards);

- Promoting road safety and pedestrian movement particularly in town centres and close to local services; and
- Promoting car sharing and establishing car clubs.

Policy SP14: Health and Well-Being

The Council will seek to improve health and wellbeing in Haringey. The Council will for example:

- Work with NHS Haringey in its goal to reduce health inequalities in the areas with poorest health;
- Prioritise interventions and resources to those areas of the borough where health inequalities are greatest; and
- Support the integration of community facilities and services, i.e. health, education, cultural and leisure in multi-purpose buildings.

Climate Change and Sustainable Construction

Policy SP0: Presumption in Favour of Sustainable Development

Council will take a positive approach that reflects the presumption in favour of sustainable development contained in the NPPF. Planning applications that accord with the policies in Haringey's Local Plan (and, where relevant, with policies in neighbourhood plans) will be approved without delay, unless material considerations indicate otherwise.

Policy SP4: Working Towards a Low Carbon Haringey

Over the life time of the Local Plan, reducing energy use in buildings and working towards a low carbon borough will be one of the key challenges facing Haringey. For example, from 2011 onwards, all new residential development will achieve a minimum 25% reduction in total (regulated) CO2 emissions in line with Code for Sustainable Homes Level 4 energy standards, and should aim to achieve Level 6. And all new residential development shall be zero carbon from 2016 onwards.

Policy DM21: Sustainable Design, Layout and Construction

All new development, including building and landscape works, will be expected to consider and implement sustainable design, layout and construction techniques. Proposals should seek opportunities for locally sourced labour.

Haringey's Health and Wellbeing Strategy 2024-2029

Haringey's Health and Wellbeing Strategy 2024-2029¹⁵ was developed by Haringey Health and Wellbeing Board - a partnership board with local Health. This work is informed by the Marmot principles, a set of national principles to tackle the challenge of health inequity. Four key themes emerged from the engagement with residents and partner organisations and these are the foundation of the Health and Wellbeing Strategy. They are:

- Mental health and wellbeing are very important aspect of health; good mental health cannot exist without addressing the wider determinants of mental health
- Poor housing conditions are a significant driver to poor health and wellbeing, particularly for those with multiple complex needs

- The environment, including access to green spaces, good air quality and healthy high streets is important for our health and wellbeing
- Access and waiting times for health and care services is a concern. The shift to digital focus of service and information provision created barriers to some people. A focus on preventative care and early intervention, delivered locally in neighbourhoods.

Some of the main objectives most relevant to this assessment include ensuring homes are available for those with highest needs, for example those who are disabled or have significant health and care needs, older people, families etc; links to housing allocations policy and the New Build Programme. Also, providing housing and health support for people who are homeless and providing clear information about housing pathways to residents and health professionals.

Haringey Homelessness Strategy 2026-2027

The Haringey Homelessness strategy sets out the strategic objectives for the next two years based on improvements achieved and the Vision for 2035, ' *where all residents have the opportunity to thrive and , at a time of insecurity and change, that Haringey is a place where people can put down roots and feel they really belong.* ' This accompanies the Rough Sleeping strategy 2023-2027 and both will be combined by 2028.

The objectives include:

1. Prevent Homelessness in Haringey through more effective partnerships
2. Protect Haringey's population from the risk of homelessness - tackling the root causes of homelessness
3. Provide specific support for people at higher risk of homelessness
4. Improve the council's homelessness prevention services, prevention crises and helping people stay in their homes
5. Improve temporary accommodation and make people's experiences better if they do become homeless
6. Reduce the number of people sleeping rough for long periods and ensure that people do not experience homelessness more than once.

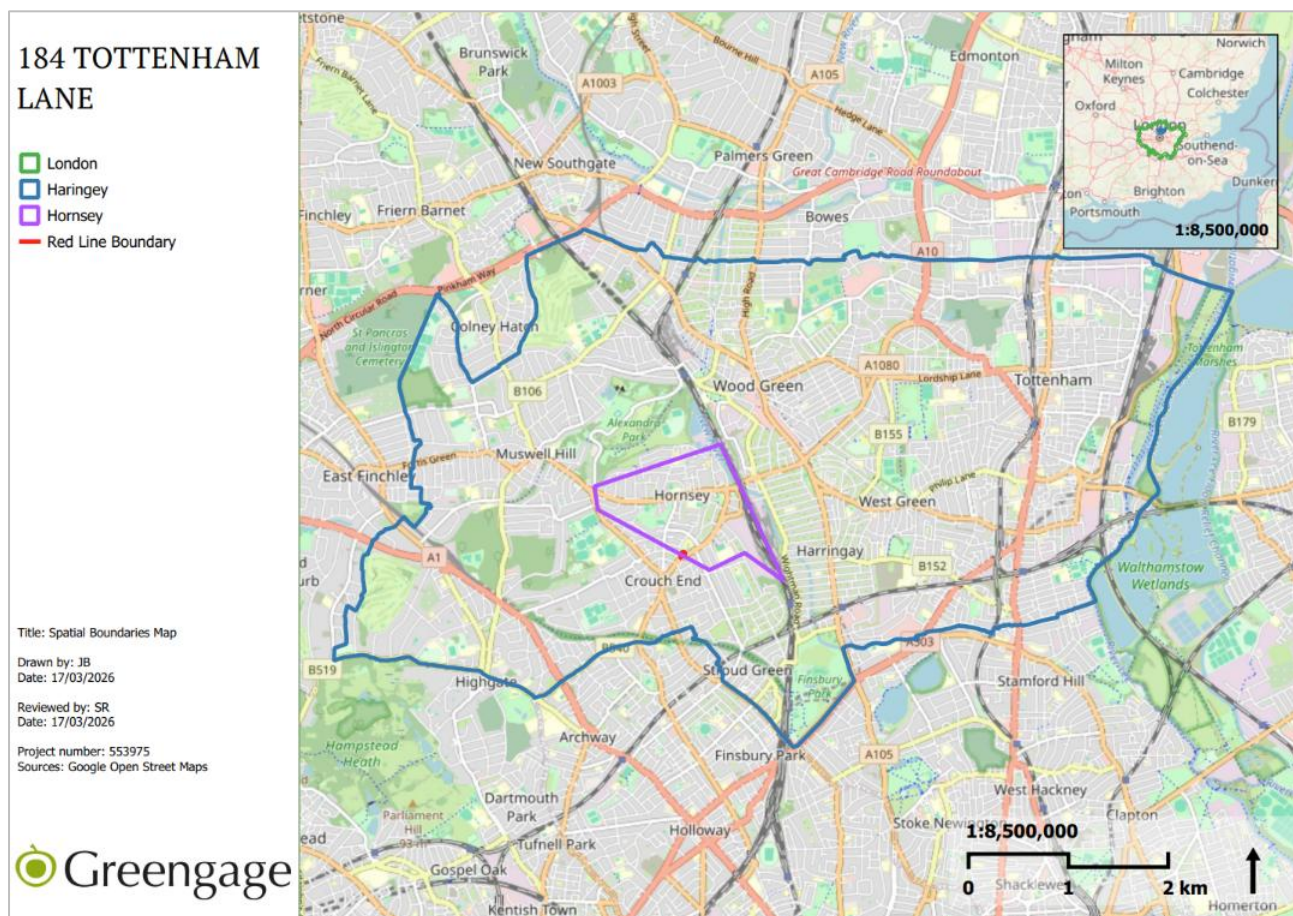
6.0 HEALTH PROFILE BASELINE

It is important when undertaking an assessment of the health impacts of a Proposed Development that the geographical scope of the assessment is clearly understood.

The full geographical scope of the Proposed Development is as follows (Figure 6.1):

- Ward: **Hornsey**;
- Local Authority: **Haringey**;
- Region: **London**; and
- National: averages for **England, Great Britain, or the United Kingdom** dependent upon data availability to provide context.

Figure 6.1 Spatial Boundaries Map



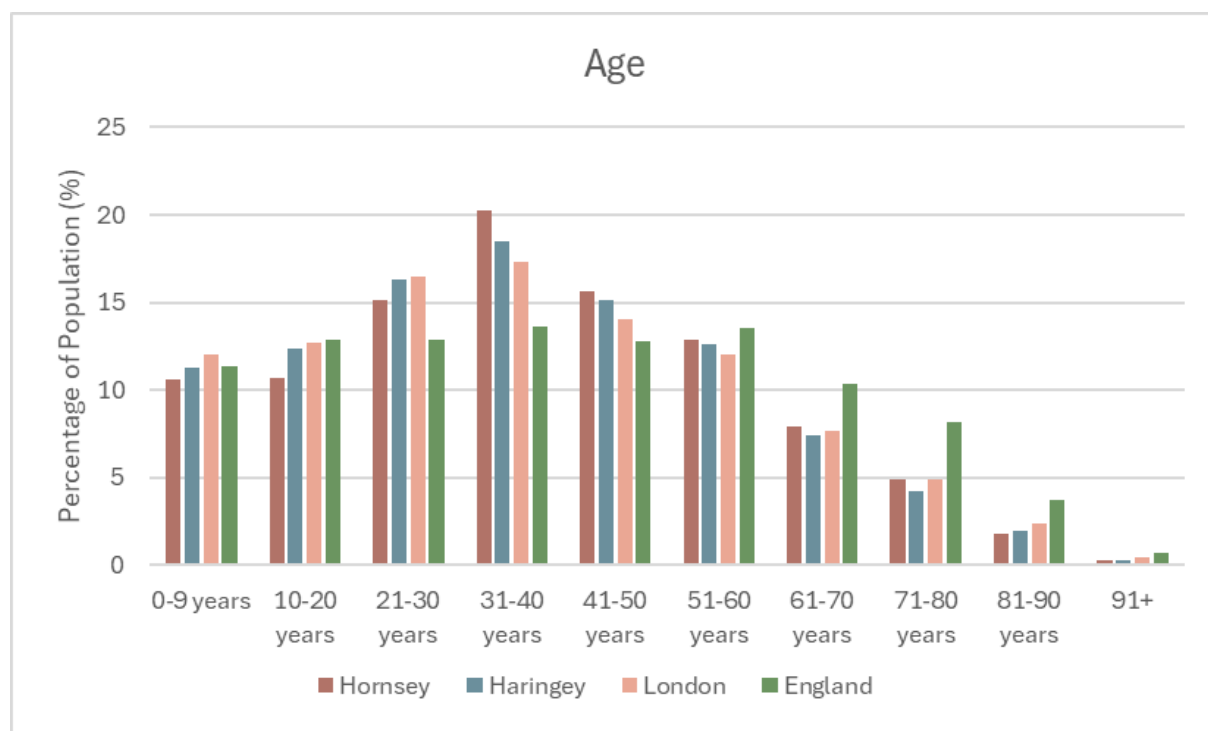
6.1 POPULATION PROFILE

According to the Census¹⁶, the London Borough of Haringey has a total population of 264,234. Within this figure, Hornsey ward, represents a total population of 15,038.

Age

In Haringey, the greatest proportion of residents are within the 31-40 age bracket equating to 18.4% of residents, which is followed by the 21-30 age bracket equating to 16.3% of residents. Within Hornsey ward, most residents are also between 31-40 years equating to 20.3% of residents. Here and in Haringey there are a lower proportion of elderly residents, for example 4.8% and 4.2% are aged 71-80 here, compared to 8.2% in England overall. Figure 6.2 below shows the age structure of England, London, Haringey and Hornsey ward¹⁷.

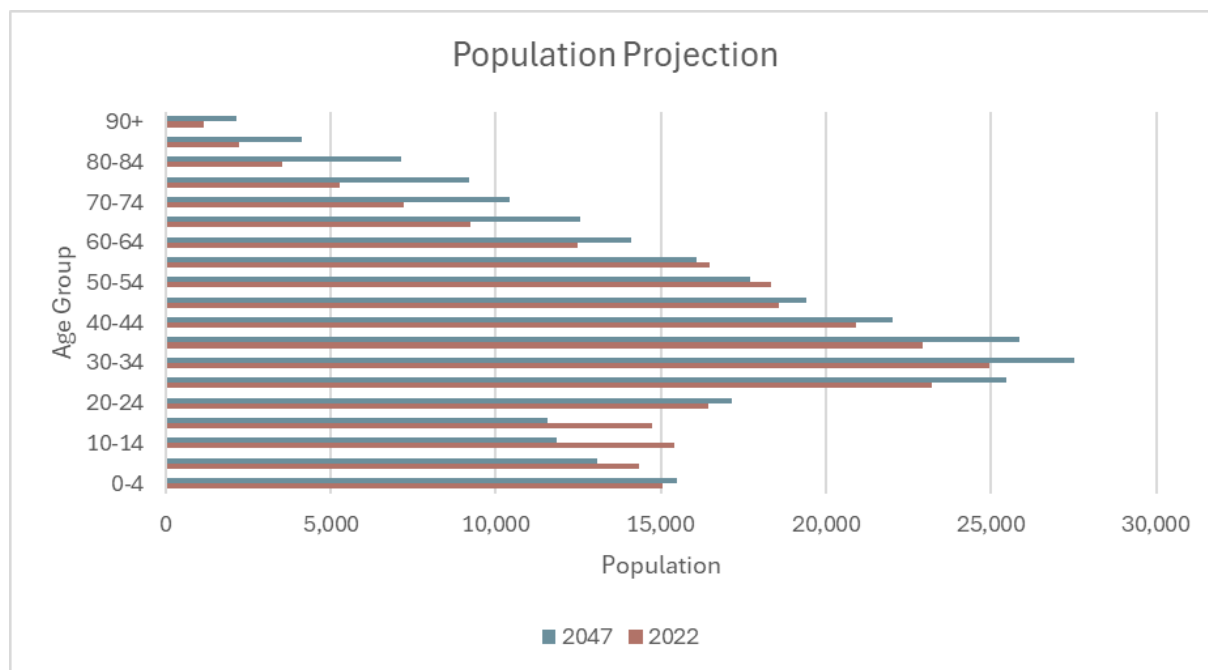
Figure 6.2 Population by Age



Population Projections

Population forecasts for Haringey¹⁸ show that between 2022 and 2047 figures are expected to rise from 262,413 to 282,893 -an increase of 7.8%. Notably, the proportion of 75-79 year olds will increase by 74.6% by 2047. Population forecasts show the Haringey will have a significantly aging population by 2047. Figure 6.3 below demonstrates how the age profile is projected to change in Haringey.

Figure 6.3 Haringey Population Projections from 2022 to 2027

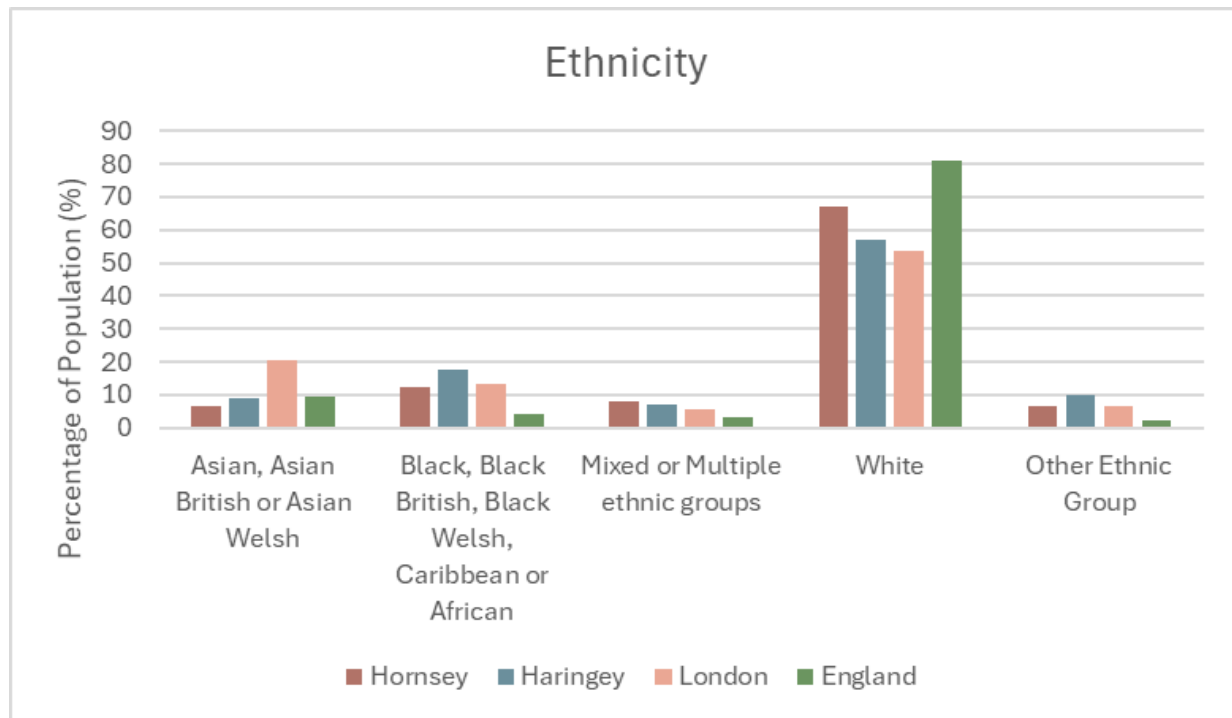


Ethnicity

Haringey is a highly diverse borough. 38% of residents are from BAME groups and 180+ languages are spoken¹⁹.

Within Hornsey²⁰, 66.8% of the population are White, this is followed by 12.2% of the population being Black, Black British, Black Welsh, Caribbean or African. Within Haringey, there is a smaller proportion of White residents (60%) followed by 17.6% Black, Black British, Black Welsh, Caribbean or African residents. Here 8.7% are Asian, Asian British or Asian Welsh. This is shown in Figure 6.4 below.

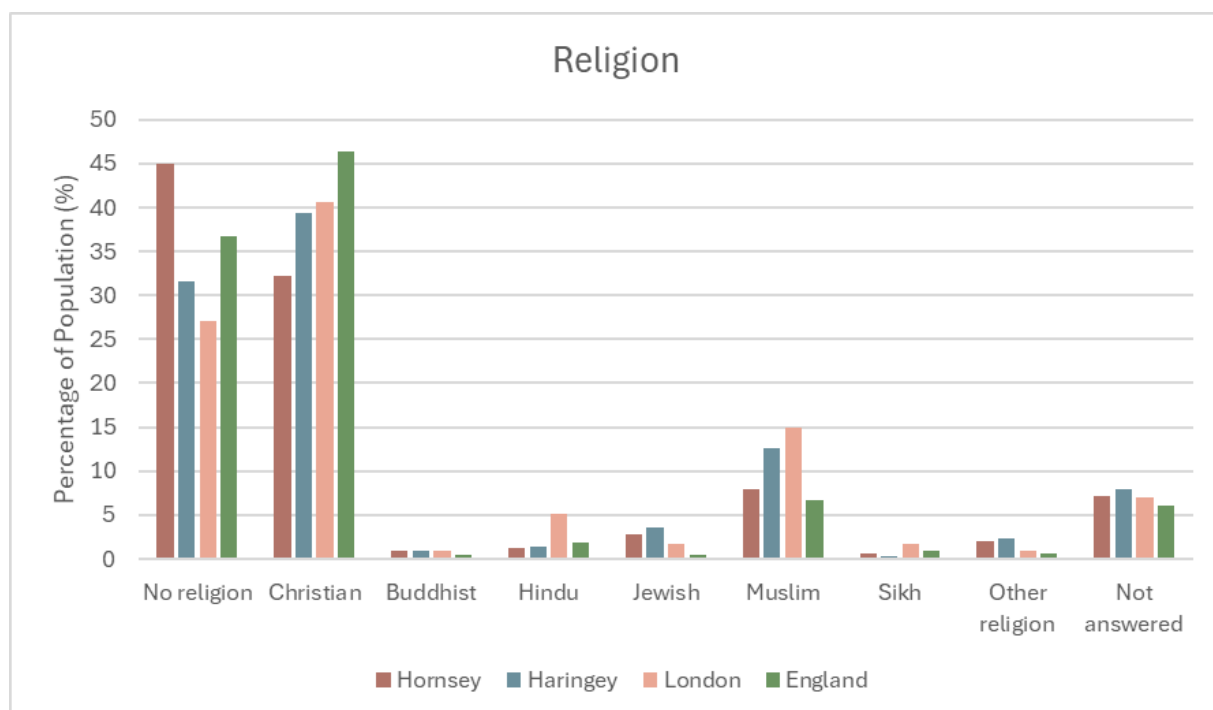
Figure 6.4 Ethnicity by Area



Religion

Within Hornsey²¹, most of the population have no religion (45%). Following this, 32.2% of residents are Christian and 8% are Muslim. In Haringey there is a larger Christian and Muslim population (39.3% and 12.6%) compared to 31.6% having no religion. This can be seen in Figure 6.5 below.

Figure 6.5 Religion by Area

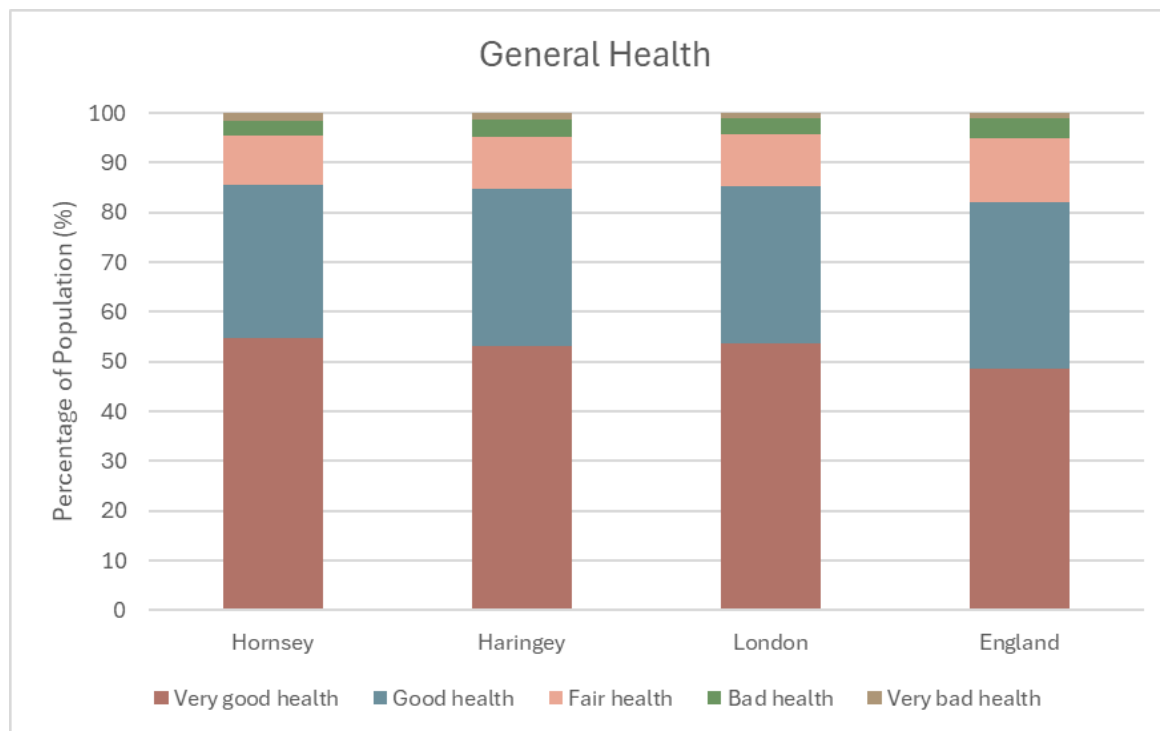


6.2 HEALTH PROFILE

General Health

According to the census data²², 54.8% of residents within Hornsey are in 'Very good health' and 30.8% of residents are in 'Good health'. The proportion of residents in 'Very good health' is slightly more than in Haringey (53%) and similar to London (53.5%). 1.5% of residents in Hornsey are in 'Very bad health'. This is more than that in Haringey (1.2%), London (1%) and England (1.2%). Figure 6.5 below demonstrates this.

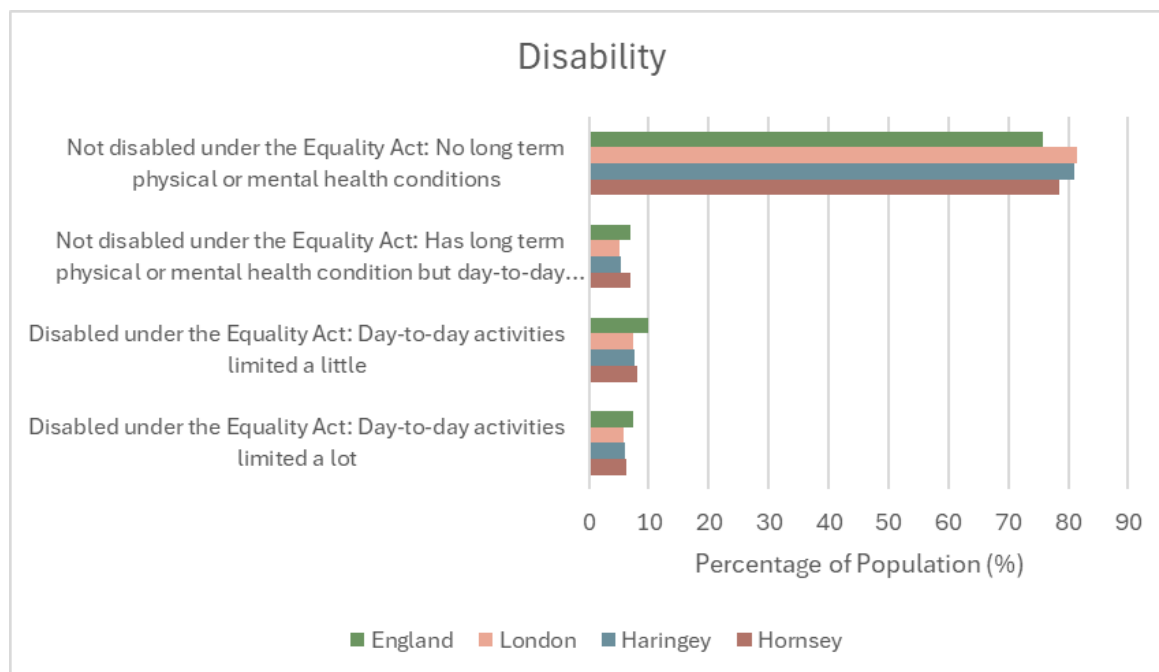
Figure 6.5 General Health of Population



Disability

In Hornsey²³, 78.6% of the population are not disabled under the Equality Act. 6.3% of residents are disabled under the Equality Act and have daily activities limited a lot, and 8.1% have daily activities limited a little. This is similar to Haringey where 81.1% of the population are not disabled under the Equality Act, 6.1% of residents are disabled under the Equality Act and have daily activities limited a lot, and 7.5% have daily activities limited a little. See Figure 6.6 below.

Figure 6.6 Disability by Area



Obesity

An obesity baseline establishes current health conditions, allowing for the assessment of potential impacts the development might have on obesity rates.

The Health Survey for England 2022²⁴ estimates that 28% of adults in England are obese and a further 36% are overweight but not obese. Obesity is usually defined as having a body mass index (BMI) of 30 or above. BMI between 25 and 30 is classified as 'overweight'²⁵. 16.5% of adults in Haringey are obese (from corrected height and weight), this lower than in London, where around 20.2% of adults have obesity²⁶.

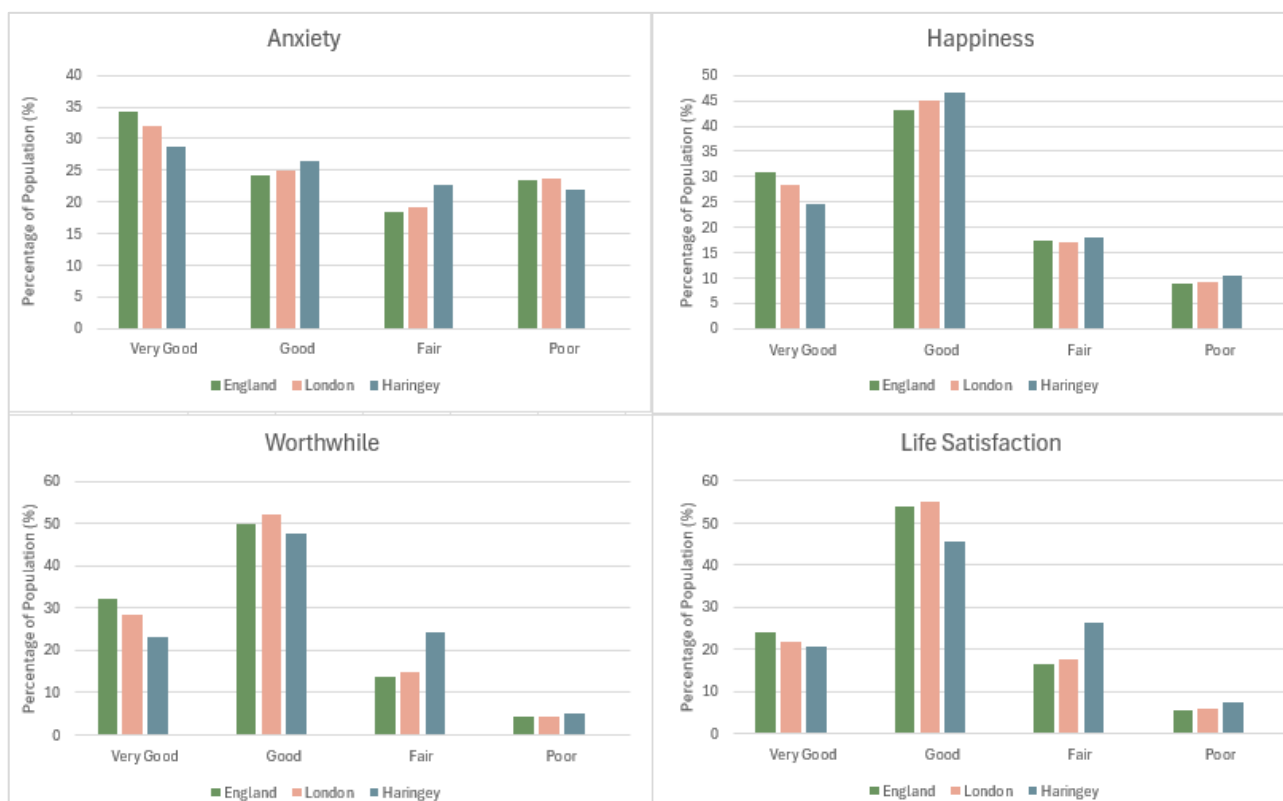
Mental Health

Mental wellbeing is a vital factor for individuals and communities to realise a full range of health, social and economic benefits for the population.

The Personal Wellbeing Estimates dataset²⁷ for Haringey, London and England give's estimates of life satisfaction, happiness, anxiety and 'the feeling that things done in life are worthwhile'. The headline figures are bullet pointed below and are demonstrated in Figure 6.7 below.

- 46.8% rate Happiness as 'Good' in Haringey, vs 45.1% in London
- 26.5% rate Anxiety as 'Good' in Haringey, vs 25% in London
- 47.6% rate Worthwhile as 'Good' in Haringey, vs 52.2% in London
- 45.7% rate Life Satisfaction as 'Good' in Haringey, vs 54.9% in London

Figure 6.7 Personal Wellbeing Estimates



In Haringey, mental health issues are significant in all ages. Almost one in ten adults (9.2%) are diagnosed with depression in Haringey. Around 4,800 children and young people aged 5-15 years have a diagnosable mental health condition in Haringey²⁸.

Loneliness

Understanding levels of loneliness helps to identify at risk groups and evaluate the potential impact of a Proposed Development on loneliness. By quantifying the existing levels of loneliness, we can assess associated health risks, such as mental health issues, cardiovascular disease, and decreased life expectancy.

Within Haringey, 9.7% of the population feel lonely 'Often/always', this is higher than both in London and England (7.3%)²⁹.

Life Expectancy

Life expectancy in Haringey for males is 80 and for females is 84.6. This is higher at Hornsey ward level for males where life expectancy for males is 80.6, however lower for females where the life expectancy is 81.9³⁰.

Homelessness

Data from CHAIN³¹ (Combined Homelessness and Information Network) shows that 268 individual people were seen rough sleeping in the borough by an outreach team in 2021/22. This represents a 34% decrease when compared to 2020/21, when 405 different people were seen. This has been achieved through investing significantly in tackling rough sleeping with the development of new

approaches to working with people experiencing multiple disadvantage, by opening new specialist housing and by creating bedspaces for people affected by immigration restrictions.

In London, despite a significant reduction in rough sleeping in 2020/21, the figure for 2021/22 is still 29% higher than the total of 6,437 people recorded rough sleeping in London ten years ago in 2012/13.

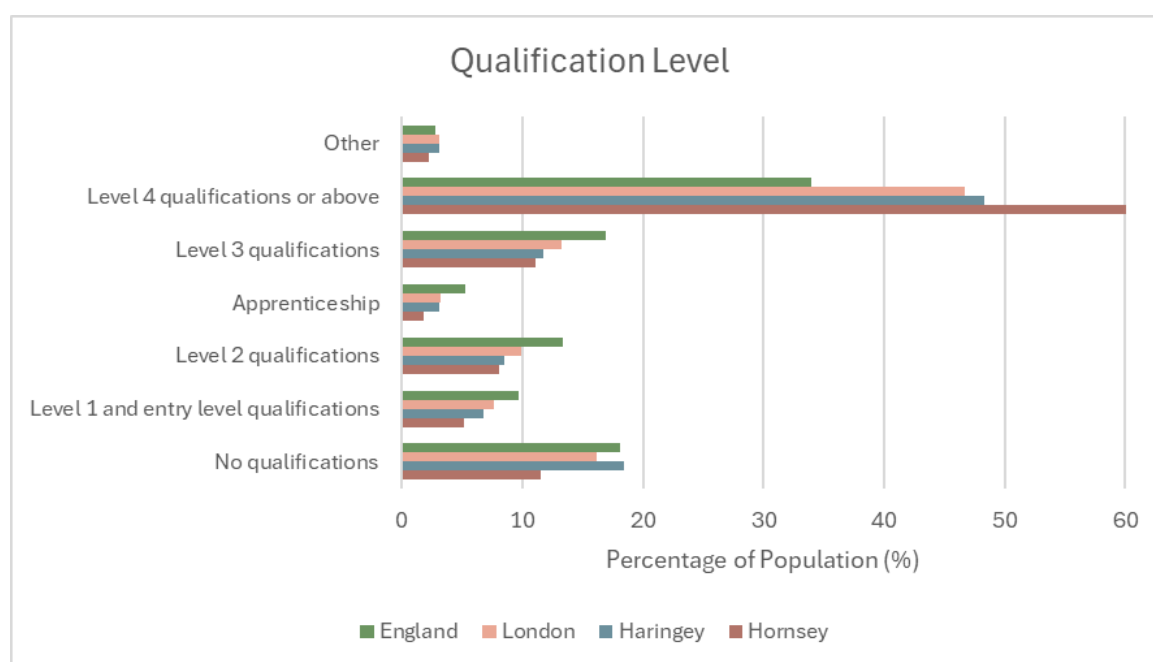
- 62% of people seen rough sleeping in Haringey during the year were new to rough sleeping
- 13% of those seen rough sleeping were women and 87% were men
- 44% of those seen rough sleeping were UK Nationals, 41% were EEA Nationals and 15% were non – EEA (Rest of World)

6.3 ECONOMIC PROFILE

Qualifications and Economic Activity

Data provided by the Census³² demonstrates that 60.1% of residents in Hornsey aged 16 years and over have gained Level 4 qualifications and above, which is significantly more than in relation to Haringey (48%) and London (46.7%). This is shown in Figure 6.8 below.

Figure 6.8 Qualification Level by Area



Additionally, 59.4% of the population aged 16 to 74 are economically active in Hornsey, which is more than 55.4% in Haringey and 53.4% in London³³.

Industry

The Education industry employs the most residents in Hornsey equating to 12.3% of residents, with the Retail trade (except of motor vehicles and motorcycles) sector employing the next largest group at 7.7%. Here, 4.7% of residents are employed in the Construction sector. This is similar to

Haringey where 10.9% are employed in Education, 8.9% in Retail trade, and a high proportion in Construction at 7.7%.³⁴

Deprivation and Crime

The context of people's lives directly influences their health. The Multiple Deprivation Domain measures the relative deprivation of small areas of England, the LSOAs, according to a range of variables including wealth, health and quality of life. The Indices of Deprivation (2025) Multiple Deprivation Domain³⁵ shows that the Lower Layer Super Output Area (LSOA) the site sits within (Haringey 028B) is Less deprived than most neighbourhoods within Haringey. Figure 6.9 below illustrates levels of deprivation surrounding the site.

Figure 6.9 Indices of Multiple Deprivation

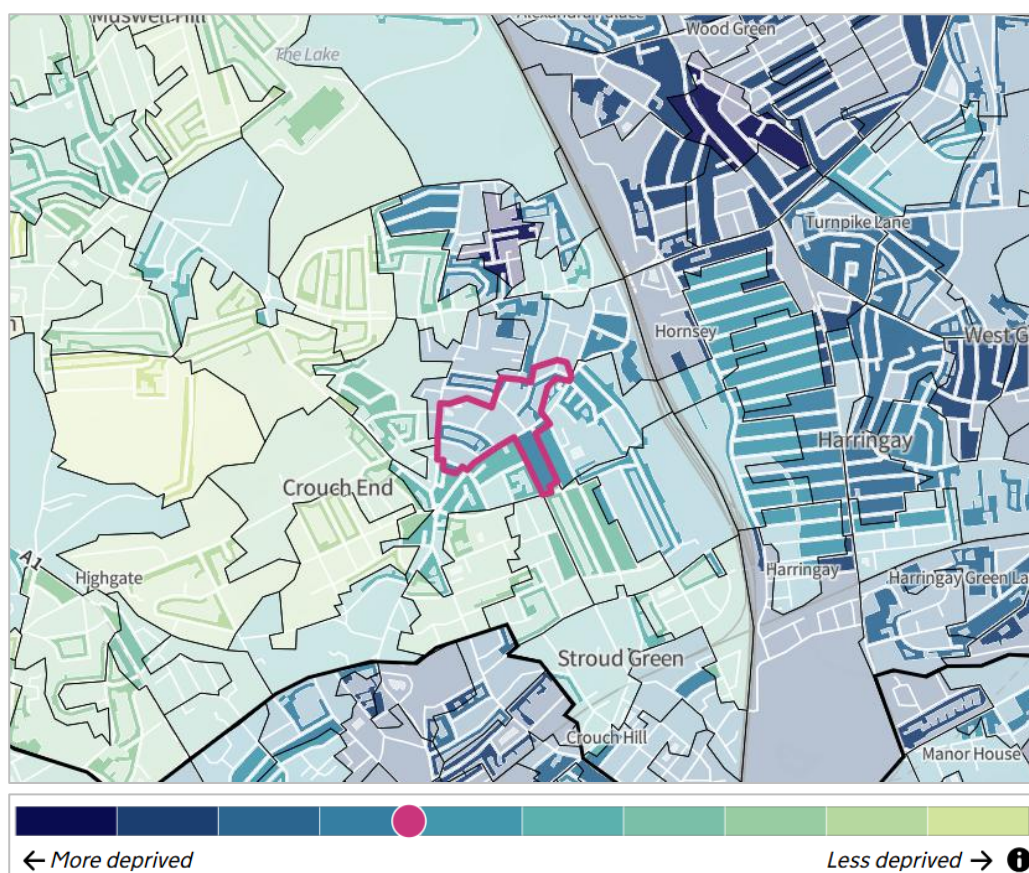
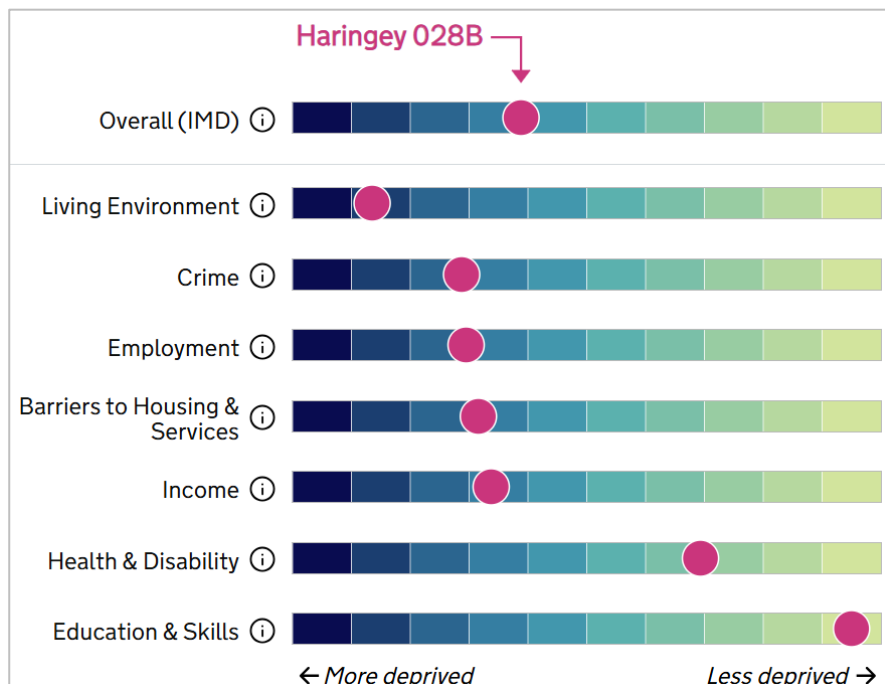


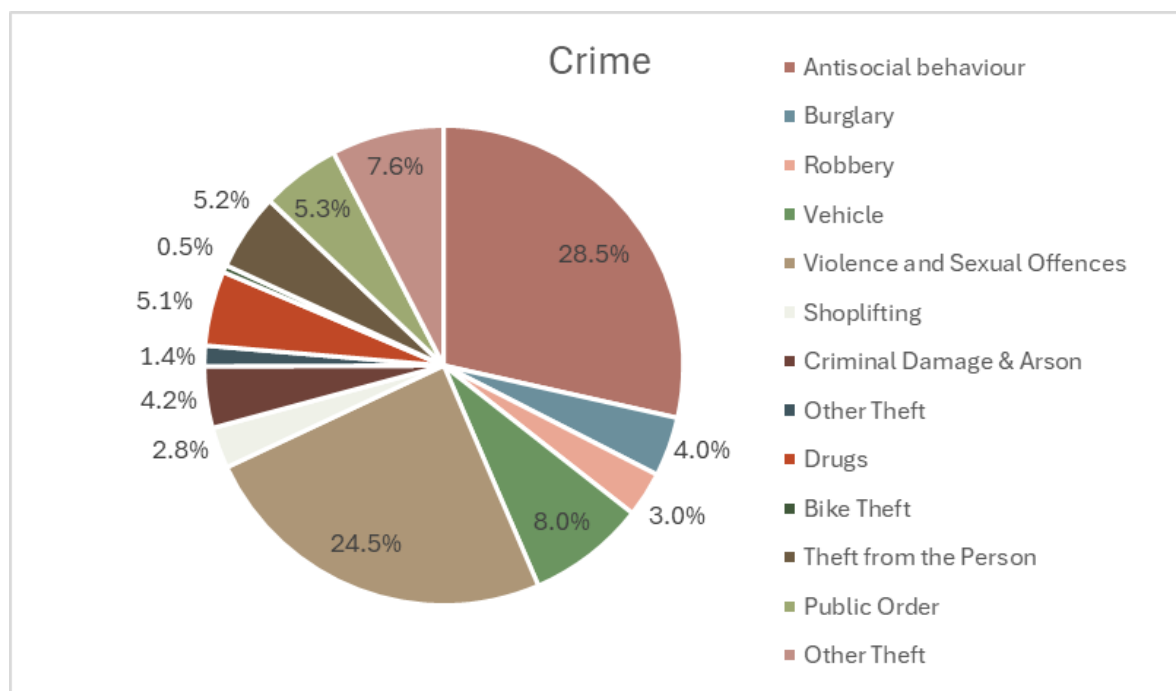
Figure 6.10 below shows the different deprivation domains, and where Haringey 028B sits within these categories. The lowest ranked category is 'Living Environment', which reflects measures such as the standard of housing, access to private outdoor space, pollution and traffic hazards. Compared to other neighbourhoods in Haringey, Haringey 028B is most deprived in relation to living environment. Approximately two thirds of the neighbourhoods in Haringey are less deprived in relation to Living Environment.

Figure 6.9 Indices of Multiple Deprivation Chart 2025



The UK Crime Statistics gives an overview of the crime levels in the area. Figure 6.10 below shows the percentage of crimes between April 2025 and March 2026 for Hornsey³⁶. This shows that the majority of crime within the ward is antisocial behaviour (28.5%) and violence and sexual offences (24.5%). The rate of knife crime with injury is the 10th highest in London.

Figure 6.10 Crime Rates, Hornsey



6.4 SOCIAL INFRASTRUCTURE PROFILE

Health Services

GP Surgeries

The NHS database³⁷ has identified that there are seven GP surgeries within 1.8km walking distance of the site.

The average ratio of patients per GP at these practices is 1:1,923 which is outside the best practice of 1,800 patients per GP recommended by the General Medical Council used by the Department of Health and Primary Care Trusts. This data is gathered from NHS Patients Registered at a GP Practice for the month of March 2026³⁸, and NHS General Practice Workforce data for the month of January 2026³⁹. Table 6.1 below summarises this.

Table 6.1 GP surgeries within 1.8km walking distance of site

GP surgery	Distance (km)	No. of GPs (FTE)	No. of patients	GP to patient ratio	Accepting new patients?
The Vale Practice	0.4	5	9,814	1,963	Yes
Crouch Hall Road Surgery	0.4	7	8,958	1,280	Yes
Christchurch Hall Doctors Surgery	0.6	2	2,834	1,417	Yes
Queenswood Medical Practice	0.8	16	21,300	1,331	Yes
Hornsey Wood Green GP	1.1	3	10,515	3,505	Yes
Beaumont Practice	1.4	1	3,185	3,185	Yes
Stroud Green Medical Clinic	1.8	1	10,711	10,711	Yes
Total		35	67,317	1,923	-

To note, Crouch End Health Centre (0.3km from site) offers NHS psychological therapies services only. Thus, it is not listed in the table above.

Dental Surgeries

Within 1.8km walking distance of the site, there are 10 dentists. The extent to which they are accepting new patients varies across each practice. Table 6.2 below summarises this.

Table 6.2 Dentists within 1.8km walking distance of site

Dentist	Distance (km)	Accepting new NHS patients?
Denchic Dental Spa	0.3	Private

Dentist	Distance (km)	Accepting new NHS patients?
Middle Lane Dental Practice	0.3	NHS Waitlist
Crouch Hall Dental Care	0.3	NHS Waitlist
Weston Park Dental Surgeons	0.3	Private
Smiles4U	0.4	Private
Treehouse Dental	0.4	Private
186 Park Road Dental Practice	0.8	Private
Dental Artistry	0.5	Private
Park Road Dental Clinic	1.2	Yes
Sky Dental	1.2	Yes

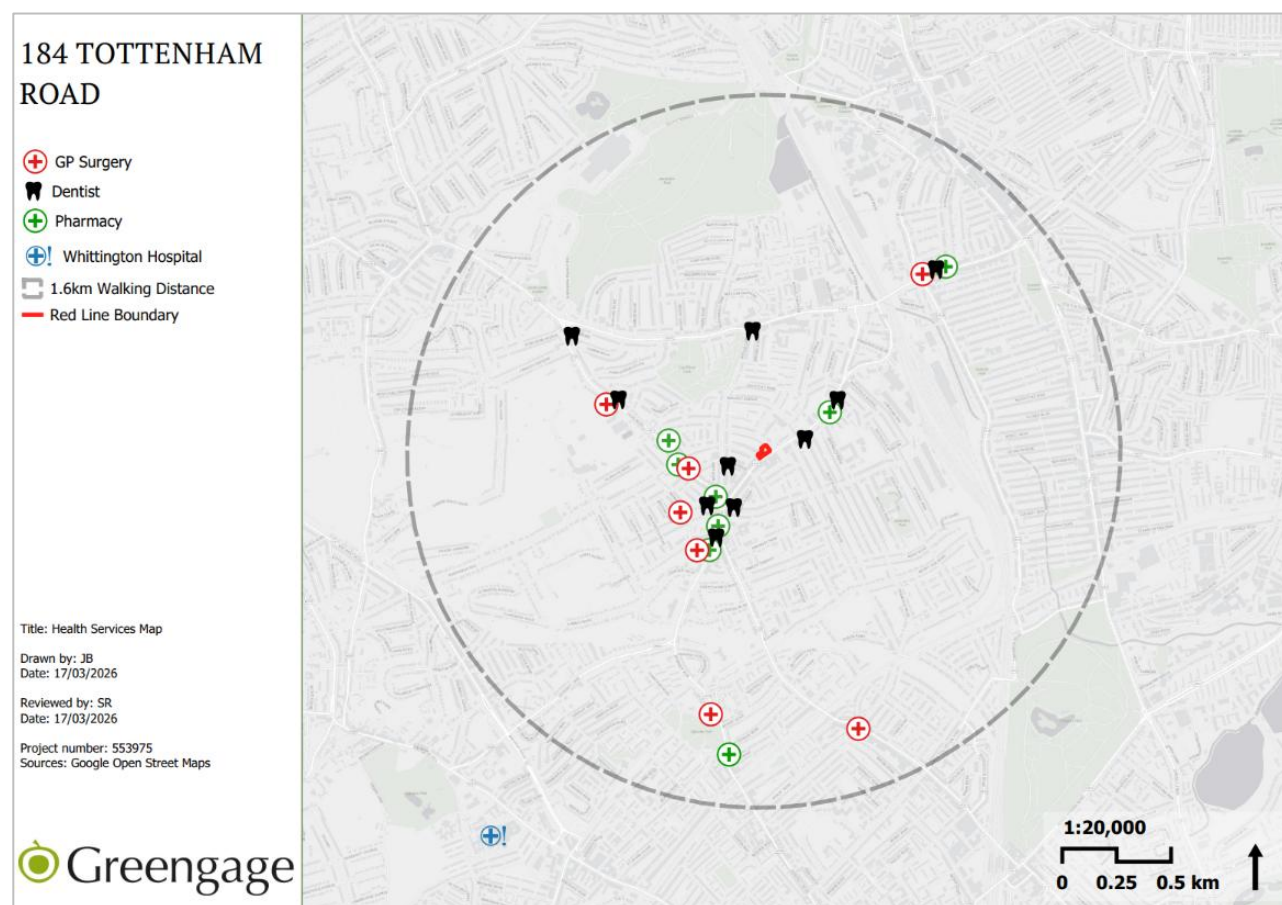
Hospitals and Pharmacies

The closest hospital to site is Whittington Hospital (2.5km southwest). This offers a wide array of services, including accident and emergency, maternity and mental health services.

Within 1.8km walking distance of the site, there are eight pharmacies. They offer a range of services including electronic prescriptions.

Figure 6.11 below shows the proximity of these health services, to the site.

Figure 6.11 Health Services Near Proposed Development



Education provision

The young adults that will be using the YMCA are aged 16 - 35 years and therefore Further Education providers have been included in our baseline, omitting early years, primary and secondary schools.

Further Education

Two further education colleges within 3.2 km of the site have been identified, Adult Learning And Skills from Islington Borough Council 3km south and Capital City College Finsbury Park Centre (formerly City and Islington College - Centre for Lifelong Learning), 2.7km south east.

Islington Borough's Adult Learning courses range from green skills, to maths, to creative skills, to English for Speakers of Other Languages (ESOL). Capital City College offers industry - led courses with qualifications including BTECs, Diplomas, City & Guilds, Access to HE qualifications, Higher education programmes, and T Levels.

Open Space

Areas without sufficient access to public open space are likely to be deficient and this can have a serious impact on public health. Some of the closest open spaces comprise those listed in Table 6.6 below.

Table 6.6 Open Space within 3.2km of the site

Name	Distance from Site (km)
Priory Park	0.4
Stationers Park	0.8
Shepherds Hill Gardens	1.1
Parkland Walk	1.1
Crouch End Playing Fields	1.3
Fairland Park	1.4
Crouch End Open Space (CREOS)	1.4
Ducketts Common	1.6
Elthorne Park	1.6
Alexandra Park	1.7
Wood Green Common	1.9
Finsbury Park	2.2
Highgate Wood	2.2
Downhills Park	2.8
Lordship Recreation Ground	3.2

Access to Healthy Food

Data within the UK reveals as many as 9% of people over the age of 65 are admitted to hospital on account of micronutrient deficiency, of whom 14% have a nutritional deficiency as the primary

reason for admission to hospital⁴⁰. Access to healthy and nutritious food can prevent such deficiencies, improve diets, and reduce the health burden of chronic conditions such as obesity.

People on low incomes, including young families, and older people, are the least likely to have access to healthy food. Developments which increase opportunities to grow and purchase fresh, local, or organic food can change these patterns and improve health outcomes. This can be compounded by limiting concentrations of hot food takeaways.

The nearest allotments are Shepherds Hill Allotments (1.1km west) and Quernmore Road Allotments (1.3km southeast).

Community and Leisure Facilities

There are numerous community facilities within 3.2km of the site. These include but are not limited to those detailed in Table 6.7 below.

Table 6.7 Community Facilities within 3.2km of the site

Name	Distance from Site (km)
Holy Innocents Church, Crouch End	0.2
Chabad Crouch End and Muswell Hill Synagogue	0.4
Middle Lane Methodist Church	0.4
Hornsey Vale Community Centre	0.6
Union Church & Community Centre, Crouch End	0.6
Hornsey Library	0.6
Harringay Club	0.8
Park Road Leisure Centre & Lido	0.8
St Peter in Chains Church, Stroud Green	0.8
London Islamic Cultural Society and Mosque	1.1
St John The Baptist Greek Orthodox Church	1.1
Stroud Green and Harringay Library	1.4
Brickworks Community Centre	1.6
Highgate Library	1.9
Wood Green Fatih Mosque	1.9
Sandbunker Community Centre	2
Highgate Hill Murugan Temple	2.1
Kurdish Community Centre	2.2
Archway Leisure Centre	2.5
Chestnuts Community Centre	2.8
West Reservoir Centre	3.2

Connectivity

The Public Transport Access Level (PTAL) for the site is PTAL 3⁴¹. This indicates an area of moderate access to frequent public transport services. The best PTAL score achievable is 6b.

The location of the site is deemed a 'walkable neighbourhood' according to the Transport Assessment by Velocity. Around the site, the A103 Tottenham Lane, Rosebery Gardens and Elmsfield Avenue have well maintained footways on both sides with dropped kerbs, tactical paving and street lighting at regular intervals. These footways adjacent to the site connect to shops and amenities along Tottenham Lane, as well as a wider network of footways as expected in a dense urban neighbourhood of London.

Similarly, as expected for an urban neighbourhood, most of the roads surrounding the Site accommodate cyclists within the main carriageway.

The nearest bus stop is opposite the site on Tottenham Lane which services the 91, 41, N41, N91, W5 and W3 bus services to Greater London including Finsbury Park, Kings Cross and Trafalgar Square. There can be 16 busses an hour. There is Hornsey train station 800m north within easy walking distance of the site. This goes to Moorgate, Stevenage and Welwyn Garden City.

7.0 IMPACT ASSESSMENT

The potential health impacts have been assessed against the NHS Healthy Urban Planning Checklist⁴², considering impacts directly related to the proposals as well as indirect influences on the wider community. This assessment is set out in the below paragraphs. The outcomes of this analysis have formed the evidential base for the second stage of the assessment framework which uses the Rapid Health Impact Assessment Tool (Appendix B).

7.1 HEALTHY HOUSING

Access to suitable housing is vital for the health and wellbeing of a population. 2.6 million homes in England (11% of the country's housing stock) are categorised as 'poor quality' and therefore hazardous to occupants. Poor housing in England could be costing the NHS £1.4 billion a year in treatment bills⁴³. Thus, it is important that a range of unit types and tenures with a standard level of design are needed to meet the varying needs of a population.

By following guidelines, developers can allow residents to remain in their homes despite changing accommodation requirements. This links to health determinant 'Housing Design and Affordability'.

Housing Design

The Proposed Development seeks to provide 174 en-suite bedspaces, 14% of which will be move on accommodation, 10% will be wheelchair accessible. A communal lounge, undefined shared space for public and residential use, staff offices and meeting rooms, launderette, maintenance workshop and garden are also proposed for the ground floor use. This is a shift to make the space more community oriented and welcoming. The proposed designs have carefully considered the specific needs of the younger residents aged 16-17 and support staff. This has led to more space per resident and staff member, as well as designs to 'empower' the young residents and take responsibility for their domestic life. The intention is to balance privacy and dignity with spaces for social interaction and peer support.

In that way, the proposals are for 'shared clusters' where four to six single occupancy bedrooms with ensuite bathrooms are arranged around a shared kitchen. On the ground floor are other shared amenities and social spaces. Security is managed with fob controlled access zones, CCTV and accessibility is enhanced with three lifts as well as wheelchair accessible bedrooms.

Accessible Housing

The Equality Act (2010)⁴⁴ provides a legal framework to protect the rights of individuals in Great Britain and to advance the quality of opportunity for all. By outlining several 'protected characteristics' including Age, Disability, Gender reassignment, Marriage and Civil Partnership, Pregnancy and Maternity, Race, Religion, Sex and Sexual Orientation, the Act creates a framework developers can use to ensure their designs are inclusive.

People with disabilities may interact with the built environment differently than others, so it's important that these needs are considered during the design process. Thoughtful, inclusive design such as clear layouts, step-free access, and appropriate lighting can help ensure spaces are accessible, welcoming and easy to navigate for all residents.

In line with Policy D7 of the London Plan (2021) residential developments should provide at least 10% wheelchair-used dwellings in accordance with M4(3), with all other dwellings being adaptable in accordance with M4(2). As such, the Proposed Development provides 10% M4(3) dwellings.

Healthy Living

Both the internal and external spaces have been designed intentionally to benefit the wellbeing of the residents. In the outside spaces, this includes social and creative areas, spaces for playing sport and for growing plants. Internally, there is flexibility around the use of spaces, such as the ground floor smaller meeting type rooms, as well as distinct private and shared living spaces. The double height reception / lobby creates a sense of space and also sightline through to the gardens outside. This passive surveillance supports a sense of safety and trust.

All the habitable rooms in the proposed designs meet the criteria for overheating risk when incorporating a combination of natural ventilation and solar control strategies such as optimised glazing ratios in south and west facades, window overhangs and deep reveals, use of low solar control glazing, maximising window openable area, and natural ventilation in daytime and night-time. However, due to noise impacts from the street (Tottenham Lane) and security concerns, there is a restriction on opening windows. Mitigation measures such as managing energy consumption during peak times ('peak load lopping') will be required to achieve full Approved Document Part O (AD O) compliance for habitable spaces.

In the shared spaces where active cooling has been provided, passive design measures have also been designed to reduce the cooling demand.

The Proposed Development is expected to have a **long-term positive impact** on all the residents within the building as well as the staff working in the building.

Housing Mix and Affordability

As a hostel, the Proposed Development provides a single occupancy bedrooms and shared kitchens free of charge for its residents. There is a charge for the rooms, which is covered by Universal Credit or Housing Benefit and often residents are referred to the hostel. The Proposed Development has 174 ensuite bedrooms split into clusters of four - six bedrooms to one shared kitchen, aside from those 'Move-on clusters' alongside Emfield Avenue where there are three bedrooms to one shared kitchen.

The Proposed Development is expected to have a **long-term positive impact** on all those needing requiring this type of accommodation and service. The inclusion of different sized clusters and the move-on clusters help meet diverse needs, supporting the residents development and inclusive communities.

7.2 ACTIVE TRAVEL

Public realm designs that address the 10 Healthy Street Indicators⁴⁵ help people feel relaxed, safe, and so are more likely to walk, cycle, and interact with their surroundings. These incorporate areas to stop and rest, accessible crossings, clean air, things to see and do, and encourage people to take up active forms of travel. Buildings and spaces that meet these criteria, and those of Sports England's Ten Principles for Active Design⁴⁶, are easily accessible and encourage all groups, to increase their physical activity. This links to health determinant 'Accessibility and Active Travel'.

Promoting Walking and Cycling

To encourage residents and staff to cycle, safe and available place to park their bikes is crucial. Considering the particular use of specialist accommodation for young people, the Transport Assessor surveyed the existing site and a similar hostel, LandAid House (146 residents) as well as the London Plan Policy. The Proposals are for 58 long stay spaces, including for e-bikes and designated staff spaces. Two additional Sheffield stands (four short stay spaces) are proposed in addition to the existing seven Sheffield stands adjacent to the site for visitors. One space for a mobility scooter is provided as per policy requirements of the London Plan. These will be integrated into the external courtyard.

The Proposed Development is well connected to existing cycle and walking infrastructure given it's urban location. Due to existing use as a specialist hostel, the proposals are not introducing a new transport pattern. The Travel Plan that accompanies this application will be available for residents and visitors to have the information they need for local routes and connections.

Connectivity

Due to existing use as a hostel, the proposals are not introducing a new transport pattern. The site is very well located for active travel uses and public transport use.

Minimising Car Use

To minimise car use on site the Proposed Development will provide only two car parking spaces, one Blue Badge holder for wheelchair users and one operational space for staff needs.

The combination of these measures will increase ease and safety of active travel opportunities and encourage residents to harness public transport services thereby minimising car use.

By enabling staff, residents and visitors to incorporate regular physical activity into their daily journeys, reducing reliance on private vehicles and improving local air quality, the Proposed Development contributes positively to public health outcomes, including a reduced risk of cardiovascular disease, obesity, and respiratory illness.

As such, the Proposed Development is expected to have a **long-term positive impact** on community health and wellbeing by promoting sustainable transport modes and minimising car use.

Safety

It has been suggested that fear of crime can contribute to social isolation, particularly for vulnerable groups such as women, older people, children, and ethnic minority groups⁴⁷. As such, community safety, or the perception of safety, is a particular pillar of wellbeing that can be influenced by the built environment. This links to health determinant 'Crime Reduction and Community Safety'.

In this context, additional measures have been considered in the design to protect the safety of the residents, while ensuring they still feel independent. Also, parts of the ground floor are now being proposed to potentially be opened up to the public and shared with the residents. A Housing Management Plan was therefore prepared by the YMCA as part of this application. In addition, an introduction meeting was held with the client, design team, cost consultants, and the Metropolitan Police on Secured By Design in February 2026. They reviewed the emerging proposal

and suggested key security measures such as access control, building layout, surveillance, alongside design principles that would help achieve SBD accreditation.

To ensure safety across the Proposed Development, several measures have been proposed:

- Centralised main entrance with key card controlled access and audio-visual intercom linked to reception
- Controlled access throughout the building, with card entry to ground floor areas, cores, and cluster flats
- Secured side gates, minimum 1800mm high
- Secondary entrance designed primarily as a fire exit and staff access point, with potential controlled use by residents
- Visitor management via reception sign-in, including photographic records and escorted access
- Cluster flat arrangement with access-controlled “mini neighbourhoods” and compartmentalisation
- Doors and windows to meet PAS24 standards, including all ground floor and residential bedroom doors
- Enhanced security doorsets (e.g. LPS1175 SR2 / NTS02 BRE3) to communal and service areas
- Secure glazing specifications (P3/P4 for doors; RC3-rated curtain walling at ground floor)
- Secure roof access with PAS24 or steel doors, supported by access control and CCTV
- Defensible planting to ground floor residential windows to discourage unauthorised access
- Secure, managed refuse strategy with controlled handling by staff
- Secure cycle storage within a controlled courtyard environment
- CCTV monitoring

7.3 HEALTHY ENVIRONMENT

Construction

During construction the accessibility of a local area can be affected. Construction can cause difficulties due to increased local traffic; reduced parking caused by construction vehicles and subcontractors; blocked access to homes, shops, bus stops and pavements; reduced safety on routes; and impeded wayfinding. It can also result in significant pollution relating to dust, noise, vibration, emissions and odours.

Accordingly, best practice environmental management measures will be used during construction to ensure that environmental pollution and public concern as a result of construction is kept to a minimum. This is supported by the Construction Logistics Plan.

A Construction Environmental Management Plan will be secured via planning condition.

Air Quality

The long-term impact of poor air quality has been linked to life-shortening lung and heart conditions, cancer, and diabetes. This links to health determinant 'Air Quality, Noise and Neighbourhood Amenity'.

Accordingly, an Air Quality Assessment has been carried out on site as well as a Construction Logistics Plan and the following methods will be used to keep air quality within safe limits.

During construction, there is potential for dust to result in human health impacts for those located close to the site. The Air Quality Assessment states that the pre-mitigation impacts to human health during construction is medium and dust soiling is high. During demolition and construction, the risk is medium; during earthworks and trackout, the risk is low. However, the adverse impact to human health and dust soiling is largely dependent on wind speed and wind direction. Unfavourable wind speeds and wind directions must occur at the same time as a dust generating activity to generate an adverse impact. Following the recommended mitigation measures, these impacts on construction can be reduced to **negligible**.

It is recommended continuous visual assessment of the site and a complaints log be maintained to track the origin of any dust nuisance.

During operation, the Proposed Development will be considered air quality neutral in relation to the building emissions as heating and hot water will be provided using heat pumps. As the Proposed Development is also car-free, it is considered air-quality neutral with regards to transport emissions too.

As such, the Proposed Development is expected to have a **long-term negligible impact** on the surrounding environment and local residents in terms of air quality. By maintaining pollutant concentrations within accepted standards, the Proposed Development will not contribute to increased risks of respiratory or cardiovascular health impacts for future occupants or the wider community.

As such, the Proposed Development will incorporate the following social infrastructures to improve community cohesion and satisfy policy DM23 of the Haringey Local Plan.

Noise

Accordingly, a Noise Assessment has been carried out on site by and the following methods will be used to keep noise levels within safe limits in terms of noise quality. This links to health determinant 'Air Quality, Noise and Neighbourhood Amenity'.

A Noise Impact Assessment has been carried out by KP Acoustics. The Assessment considers the daytime and night-time levels given the overnight accommodation use of the Proposed Development.

The assessments concludes that the Proposed Development follows a good acoustic design process, internal noise levels can be adequately controlled through the use of appropriate specified glazing and suitable means of ventilation, with the design specifications for the maximum a bedroom can be opened being incorporated by the architects.

The residents will have access to private or communal external amenity spaces, compliant with the aspirational noise levels indicated in WHO/BS8233 guidance. Indeed, an additional assessment was carried out as a result of the community consultation, on neighbouring residential receptors and the internal noise levels are compliant with daytime guidelines from BS 8233:2014.

As such the Proposed Development is expected to have a **long-term neutral impact** on the local environment and residents. Noise levels will be controlled to within accepted standards, ensuring that no significant adverse effects on human health are anticipated, including sleep disturbance, stress or reduced wellbeing for future occupants and neighbouring receptors.

Open Space

Access to green space has long been shown to have positive health benefits for everyone, and in particular those with physical disabilities, those with autism or learning difficulties, as well as those suffering with poor psychological health. It has been found that people have a lower risk of anxiety and depression if their homes' immediate surroundings (within 200-300 meters) are filled with nature, or if they could access green spaces nearby⁴⁸. This links to health determinant 'Access to Open Space and Nature'.

The Proposed Development is located in a residential part of London with available parks and recreation greens within walking distance for the residents.

On site, the Proposed Development will include an optimisation of the available open space. This contributes to the wellbeing of the residents, with a principle of 'feeling of freedom' for the residents, as well as calming with climate friendly planting. The flexibility of the spaces will encourage social interaction with the potential for fitness and games, upskilling, resilient building and discovering their own agency.

The quality of these spaces has been improved with level access, softer lighting and an uplift in biodiversity. Importantly, it is recreating the outside space as part of the amenity space. Consideration has been made to the proportion of shade and lit areas that are well balanced throughout the year.

As such, the Proposed Development is expected to have a **long-term positive impact** on new residents and the surrounding community by improving access to high-quality green space that supports physical activity, mental wellbeing, social interaction and contact with nature, while also contributing to inclusive, safe and attractive environment.

Biodiversity

In England, biodiversity net gain is required under a statutory framework introduced by Schedule 7A of the Town and Country Planning Act 1990 (inserted by the Environment Act 2021)⁴⁹. The objective is for development to deliver at least a 10% increase in biodiversity value relative to the pre-development biodiversity value of the onsite habitat. This increase can be achieved through onsite biodiversity gains, registered offsite biodiversity gains or statutory biodiversity credits.

In accordance with this, the Proposed Development will provide 14.5% biodiversity net gain; a net gain of 0.06 habitat units by habitat retention and new habitat creation. This is as a result of interventions such as a new rain garden, retaining trees and planting four small native trees and shrubs.

As such, the Proposed Development is expected to have a **long-term positive impact on** biodiversity within the Proposed Development.

Flood Risk and Drainage

Flooding can result in risks to physical and mental health. Particularly to older people, people with pre-existing mental health conditions, people with chronic illness or with physical, sensory or cognitive impairments, children, people in socioeconomically disadvantaged groups, people with language and culture-based vulnerabilities and people experiencing homelessness⁵⁰.

Therefore, it is important to ensure any risk of flooding to the Proposed Development is sufficiently managed and mitigated against to reduce negative impacts on existing and future residents.

Accordingly, a Flood Risk Assessment has been carried out. This shows the site lies within Flood Zone 1.

Sustainable Urban Drainage Systems (SuDS) have been incorporated into the design of the Proposed Development and include a geocellular tank, 10m³ permeable paving, a rain garden and downstream defender. Due to the increase in rooms and therefore foul water levels, a pump has been proposed to take foul connections from the basement and will need 24 hour emergency storage in accordance with Building Regulations.

As such, the Proposed Development is expected to have a **long-term positive impact** on flood risk and drainage to the surrounding environment which therefore presents no adverse implications for health, safety, or wellbeing in relation to flooding or surface water management.

Energy and Sustainability

In accordance with Haringey Local Plan Policy SP4, the Proposed Development seeks to integrate renewable energy technologies into the design such as photovoltaics, air source heat pumps as well as an energy efficient building fabric that will reduce energy consumption. This links to health determinant 'Minimising the use of Resources'.

The Energy strategy recommends implementation of the Energy Hierarchy - Be Lean, Be Clean, Be Green. It is not viable to connect to a District Heat Network to guarantee low carbon heating. Other measures to reduce consumption and increase efficiency include levels of insulation beyond Building Regulation requirements, low air tightness levels, efficient lighting as well as energy saving controls for space conditioning and lighting.

The CO₂ reduction as a result of implementing the steps Be Lean and Be Clean and it's interventions will lead to 28% reduction on the baseline. This does not meet the London Plan (2021) CO₂ savings target of 35% overall and the remaining will be offset. In spite of this, the building has been designed to meet the London Plan's criteria, the new Part L 2021 Regulations and LH Haringey's own policies to enhance the sustainability of the Proposed Development.

As such, the Proposed Development is expected to have a **long-term positive impact** on energy and sustainability, and in turn in the local and wider community by improving air quality, reducing carbon emissions, and supporting climate resilience. These measures can lower fuel poverty risks, help maintain comfortable indoor temperatures, and promote healthier living environments.

Climate Resilience

Climate resilience is important in safeguarding both the built environment and public health in the face of increasing climate-related challenges. The impacts of climate change, such as extreme heat, flooding, and air pollution, can emphasise health inequalities and affect vulnerable

populations⁵¹. In combination with the measures described in the above section, the Proposed Development has commissioned an Overheating Assessment. All habitable rooms meet CIPSE TM59 Approved Document Part O (AD O) overheating risk criteria for the London Weather Centre (LWC) DSY1 (2020 High 50 Percentile), which involves a combination of natural ventilation and solar control strategies. While active cooling has been provided in the common spaces, passive design measures have been implemented to reduce the cooling demand as far as feasible. This links to health determinant 'Climate Change'.

7.4 VIBRANT NEIGHBOURHOODS

This assessment considers the capacity of local healthcare, education, and community services to accommodate new residents while continuing to meet the needs of the existing population. Ensuring these services remain accessible and resilient will help maintain positive health outcomes, reduce strain on local infrastructure and staff, foster a strong sense of community cohesion and wellbeing, supporting the creation of a healthy and inclusive neighbourhood. This links to health determinant 'Access to Health and Social Care Services and Other Social Infrastructure'.

Population Yield

The Proposed Development is anticipated to bring forward a residential population of 174 persons. This has been calculated based on 174 single occupancy bedspaces for ages 16-35 as is the offer of the redeveloped YMCA.

Consultation

The Statement of Community Involvement was produced by Altair, the Applicant's Project Manager, to summarise their engagement activities between May and July 2026. A website was launched (ymcacrouchend.org), with feedback forms available online, as well as promoting the public exhibitions. Two public exhibition events for local residents to feedback were held, a presentation to Haringey Council's online Planning Forum meeting was given and in all 101 comments were received from local residents.

The political engagement consisted of briefing the Ward Councillors for the Crouch End and Hornsey Wards, and Catherine West MP; meeting with representatives from Rokesly School, the Crouch End Neighbourhood Forum and the Hornsey Historical Society; Haringey Quality Review Panel and the Local Planning Authority (LPA). Local businesses were also informed adjacent to the site.

The response was both positive and a number of concerns were raised. There was agreement with the purpose of the YMCA and the upgrade to a more public-facing and community-based building, particularly at the ground floor. From the Statement:

'There was concern from a number of residents regarding the loss of the Crouch End Fitness Centre as this is a much loved and well used facility. Several residents raised concerns regarding the proposed increased height of the new building, and the impact this would have, as well as the potential precedent it would set for future development in the local area. Neighbouring residents on Elmfield Avenue and Rosebery Gardens, as well as business owners on Tottenham Lane, all raised concerns regarding disruption and disturbance during the demolition and construction period. Neighbouring residents were also worried about potential increased noise and disturbance relating to the use of the proposed rear landscaped courtyard.'

These comments were fed back in time to adapt the scheme to better suit the neighbouring context and address some of these concerns.

Local Healthcare Provision

The baseline assessment identified 7 GP Surgeries within 1.8km of the site. Based on the collective information provided by the surgeries, the average ratio of patients to GPs in the area is 1: 1,923.

Based population yield analysis (Table 7.2), the Proposed Development would increase the average ratio of patients to GPs to 1:1928, and so it is deemed that the Proposed Development would not increase pressure on healthcare provision. This has been agreed by the North East Integrated Care Board when consulted in April 2026.

As such, the Proposed Development is expected to have a **long-term neutral impact** on local healthcare infrastructure.

Local Education Provision

Two further education colleges were identified within 3.2km walking distance of the application site. Both offer a range of courses appropriate to the age and need of the YMCA residents. There is no data available for capacity, and it is assumed there will be capacity.

Local Community Facilities Provision

The baseline assessment identified a variety of community facilities within 3.2km of the site. Population yield analysis showed the Proposed Development could result in an increase of 174 residents to the local area, and so it is deemed that the Proposed Development would increase pressure on community facility provisions, yet the offering at the YMCA would cater to their needs.

Accordingly, the Proposed Development is expected to have a **long-term neutral impact** on access to community facilities.

As such, the Proposed Development will incorporate the following social infrastructures to improve community cohesion and satisfy policy SP14 of the Haringey Local Plan.

Social Interaction

The Loneliness Lab identifies key design considerations which should be incorporated into projects to improve social interaction, health, and resilience⁵². Good designs are those which are Place-based, Participative, Iterative, People-centred and which foster both Flexibility and Diversity. This links to health determinant 'Social Cohesion and Inclusive Design'.

As such, a variety of measures will be embedded into designs to promote social interaction. These include:

- Shared clusters - 4-6 bedrooms sharing a kitchen space
- Shared flexible amenity space on ground floor
- Intentional design of the amenity courtyard to encourage activity, team-based work and gathering space

Access to Healthy Foods

The Proposed Development seeks to provide food growing raised beds in the courtyard area as one of the possible activities to be hosted there should residents and staff choose it. This links to health determinant 'Access to Healthy Food'.

As such, the Proposed Development is expected to have a **long-term positive impact on** access to healthy foods and local food growing in turn has a neutral effect on health by neither significantly enhancing nor constraining opportunities for nutritious food choices or community-based growing activities.

Local Employment and Healthy Workplaces

Generation of Employment

Temporary Construction Jobs

Construction employment represents part of the continual supply of work that construction firms and local tradesmen rely upon. The volume of employment is a direct function of the scale and type of construction project being undertaken, which in turn is reflected in the overall capital construction costs. This links to health determinant 'Access to Work and Training'.

Accordingly, it has been calculated that the Proposed Development will provide 231 FTE jobs during the 2.5-year construction period, which equates to 578 jobs in total (see Appendix A for detailed calculations).

It is uncertain at this stage if the proposed scheme will provide any additional training schemes/apprenticeships during the construction phase.

Once in Operation, it is assumed the staff numbers will remain the same as the existing site offers.

As such, the Proposed Development is expected to have a **temporary positive impact on** local employment opportunities. This impacts health by supporting income generation, financial security, and access to employment-related wellbeing benefits for workers. These factors can contribute to reduced stress, improved mental wellbeing, and enhanced overall quality of life.

8.0 MITIGATION AND RECOMMENDATIONS

The following section sets out the mitigation required to offset any negative impacts, and recommendations made to enhance positive outcomes. Any residual impacts would be neutral, or remain positive.

Table 8.1 Summary of Mitigation and Enhancement Measures

Health Impact Topic	Mitigation/Enhancement
Healthy Housing	It is recommended that the Building for a Healthy Life Design Toolkit, for example, is used throughout detailed design stages. It is recommended that any M4(3) dwellings are evenly distributed throughout and consist of a mix of dwelling types and tenures.
Active Travel	It is recommended that Sport England Active Design principles are utilised in the detailed design stages.
Healthy Environment	It is recommended a Landscape Management Plan is implemented to ensure the upkeep of high-quality green space. It is recommended that a residents 'friends of' group is encouraged to aid in maintenance. It is also recommended that reference is taken to Safer Parks - Improving Access for Women and Girls to ensure open spaces on site are utilised by everyone. It is recommended Secured by Design principles are utilised throughout design.
Local Employment and Healthy Workplaces	An employment and skills plan should be implemented during construction and operation to encourage employment and training of local people. Space could be made for community events, or public art installations for example.

9.0 CONCLUSION

Greengage was commissioned to undertake a HIA to the Proposed Development at 184 Tottenham Lane.

The Proposed Development's health impacts have been assessed against the Healthy Urban Planning Checklist, considering impacts directly related to the proposal, as well as indirect influences on the wider community. The outcomes of this analysis formed the evidential base for the second stage of the assessment framework using the Rapid Health Impact Assessment Tool to determine the results of the Proposed Development's impact on health.

Of the 51 criteria the Proposed Development has been assessed against, nine were not applicable to the Proposed Developments it use and its users. Of the 41 criteria remaining, 31 have a positive impact on health and ten a neutral impact. Mitigation and recommendations have been set out where necessary.

Design measures have been developed as part of the Proposed Development to promote health and wellbeing. Through good design and the creation of a sense of place, the Proposed Development will therefore provide a positive health impact to existing and future residents, staff and those that live in and use the surrounding area.

APPENDIX A EMPLOYMENT ADDITIONALITY

Temporary Construction Employment

Using the latest Annual Business Survey (ABS)⁵³ construction sector data and UK Workforce Jobs data⁵⁴ for the construction sector, along with the estimated construction value of the project, the likely amount of construction employment can be estimated. This is calculated by dividing the total workforce (2.25 million jobs), by the sector's total turnover (£340.2 billion) which gives the average employment generated per unit of turnover. This results in a figure of 6.6 jobs per £1 million of turnover, which is then applied to the total construction cost to estimate the final number of jobs generated.

Based upon this calculation, it is determined that approximately 231 FTE jobs will be generated over the 2.5 year construction period.

Additionality Assessment

Within direct employment generated from the construction of the development, more specific 'Additionality' analysis can be made to determine direct, indirect, induced, and localised employment impacts.

Direct employment comes from the on-site construction activity itself. Indirect employment results from the need to purchase construction materials and services within the supply chain, while induced employment is generated through the increased expenditure by construction workers in the local economy. Together, these effects produce a beneficial economic multiplier, sustaining and generating further economic activity within the area

The concept of 'additionality' therefore combines the direct, induced, and indirect employment impacts of a proposal and compares them against the reference or baseline position to identify the overall net additional employment created.

The Homes & Communities Agency Additionality Guide⁵⁵, provides a framework for this assessment, applying adjustments for leakage, displacement, and multiplier effects to determine the scale of local employment impacts. The scale of each factor depends on the characteristics of the Proposed Development and local labour market conditions, as described below.

Leakage

Considering that 7.7% of people were employed in construction in Hornsey according to the 2021 ONS data, it can be assumed that that around 25% of construction workers can be sourced from the Local Impact Area. Therefore, leakage has been assumed at 75%, i.e. 100-75% of benefits will be retained within area.

Displacement

Considering that there are a number of individuals seeking jobs in the area, there is unlikely to be a shortage of construction labour. Nevertheless, for the purposes of this assessment a low level of displacement has been allowed for. This has been estimated to be at 25% in accordance with the Additionality Guide where there is anticipated to be 'some displacement effects, although only to a limited extent.' This ensures the assessment remains conservative.

Multiplier

The local impact area is a relatively large market from which to source workers and there is a much wider market in the rest of London and beyond. In accordance with the composite multipliers developed by the Homes and Communities Agency for the neighbourhood level, a medium composite multiplier of 1.1 has therefore been applied to capture both indirect and induced employment.

Baseline

The baseline (or deadweight) represents the employment that would have occurred in the absence of the Proposed Development. In this case, the baseline is assumed to be zero.

Reference Case

The reference case assumes that, without the Proposed Development, the site would not deliver comparable construction activity or employment during the assessment period. As such, construction jobs arising from the scheme are considered additional, subject to the adjustments for leakage, displacement and multiplier effects set out above.

As set out in Table A.1 below, the leakage, displacement, and multiplier factors have been applied to the gross construction employment estimates to determine the net additional local employment generated during the construction phase of the Proposed Development. This demonstrates 48 indirect jobs will be provided as a result of the Proposed Development

Table A.1 On-site Construction Employment (FTE) Additionality Assessment

Additionality Steps	FTE
Gross direct construction employment (approximate)	231
Estimated leakage	173.3
Gross direct construction employment to target area	57.8
Displacement	14.4
Net direct construction employment to target area	43.3
Plus multiplier effects	4.3
Less Reference Case	47.6
Net additional employment to target area	47.6

APPENDIX B HUDU RAPID HIA MATRIX

Table B.1 HUDU Rapid HIA Matrix

Housing Design and Affordability

Assessment Criteria	Relevant?	Details/Evidence	Potential Health Impact	Recommended Mitigation or Enhancement Actions
Does the proposal seek to meet all 16 design criteria of the Lifetime Homes Standard or meet Building Regulation requirement M4 (2)?	Yes	The proposals meet Building Regulation requirement M4(2)	Positive	
Does the proposal address the housing needs of older people, ie extra care housing, sheltered housing, lifetime homes and wheelchair accessible homes?	Yes	Proposals will provide accessible homes M4 (3), in line with the London Plan (10%). This equates to 17 M4(3) bedspaces.	Positive	
Does the proposal include homes that can be adapted to support independent living for older and disabled people?	No	The accommodation provided is for ages 16-35.	N/A	
Does the proposal promote good design through layout and orientation, meeting internal	Yes	All buildings meet internal space requirements and are designed to a high standard.	Positive	

Assessment Criteria	Relevant?	Details/Evidence	Potential Health Impact	Recommended Mitigation or Enhancement Actions
space standards?				
Does the proposal include a range of housing types and sizes, including affordable housing responding to local housing needs?	No	The Proposed Development is to provide temporary accommodation for homeless young people with subsidised rent	N/A	
Does the proposal contain homes that are highly energy efficient (eg a high SAP rating)?	Yes	The designs aim to reduce energy demand through energy efficiency measures and good practice sustainable building services	Positive	

Access to Health and Social Care Services and Other Social Infrastructure

Assessment Criteria	Relevant?	Details/Evidence	Potential Health Impact	Recommended Mitigation or Enhancement Actions
Does the proposal retain or re-provide existing social infrastructure?	Yes	The Proposed Development provides ground floor flexible amenity space, courtyards and gathering spaces	Positive	
Does the proposal assess the impact on health and social care services and has the local NHS been contacted?	Yes	The proposal has assessed the impact on health and social care services, identifying sufficient capacity. This was backed up by the NHS North East London Integrated Carre Board when consulted.	Neutral	

Assessment Criteria	Relevant?	Details/Evidence	Potential Health Impact	Recommended Mitigation or Enhancement Actions
Does the proposal include the provision, or replacement of a healthcare facility and does the facility meet NHS requirements?	N/A	N/A	N/A	
Does the proposal assess the capacity, location and accessibility of other social infrastructure, e.g. schools and community facilities?	Yes	The proposal has assessed the impact on other social infrastructure, and sufficient capacity has been identified for community facilities and further education colleges.	Neutral	
Does the proposal explore opportunities for shared community use and colocation of services?	Yes	Areas of the site could be made available for shared community use such as the large meeting room and areas of outdoor space, for example.	Positive	

Access to Open Space and Nature

Assessment Criteria	Relevant?	Details/Evidence	Potential Health Impact	Recommended Mitigation or Enhancement Actions
Does the proposal retain and enhance existing open and natural spaces?	Yes	The proposal provides a several new areas of open space, including the planting of trees and retaining existing trees.	Positive	
In areas of deficiency, does the proposal provide new	N/A	N/A	N/A	

Assessment Criteria	Relevant?	Details/Evidence	Potential Health Impact	Recommended Mitigation or Enhancement Actions
open or natural space, or improve access to existing spaces?				
Does the proposal provide a range of play spaces for children and young people?	No	This accommodation is not for children	N/A	
Does the proposal provide links between open and natural spaces and the public realm?	Yes	The proposal opens up the entrance way to help It be more welcoming as well as better connect with the street.	Positive	
Are the open and natural spaces welcoming and safe and accessible for all?	Yes	The new areas of open space, will be accessible to all and have been designed to ensure they are welcoming and safe.	Positive	
Does the proposal set out how new open space will be managed and maintained?	Yes	There is no detail as to how new open space will be managed.	Neutral	Landscape Management Plan Residents group

Air Quality, Noise and Neighbourhood Amenity

Assessment Criteria	Relevant?	Details/Evidence	Potential Health Impact	Recommended Mitigation or Enhancement Actions
Does the proposal minimise construction impacts such as	Yes	Construction noise has been mitigated through a Construction Logistics Plan.	Positive	

Assessment Criteria	Relevant?	Details/Evidence	Potential Health Impact	Recommended Mitigation or Enhancement Actions
dust, noise, vibration and odours?				
Does the proposal minimise air pollution caused by traffic and energy facilities?	Yes	Air pollution output is thought to be of minimal significance, and the use of public transport, walking and cycling will be encouraged.	Neutral	
Does the proposal minimise noise pollution caused by traffic and commercial uses?	Yes	Noise pollution of the site is to be of little significance, mitigation will be used as necessary.	Neutral	

Accessibility and Active Travel

Assessment Criteria	Relevant?	Details/Evidence	Potential Health Impact	Recommended Mitigation or Enhancement Actions
Does the proposal address the ten Healthy Streets indicators?	Yes	There are design features that follow the 10 Healthy Street Indicators.	Positive	
Does the proposal prioritise and encourage walking, for example through the use of shared spaces?	Yes	The Proposed Development will encourage walking through the Transport Plan and its location as a well connected city centre location.	Positive	
Does the proposal prioritise and encourage cycling, for example by	Yes	The Proposed Development will encourage cycling. A range of long and short stay spaces will	Positive	

Assessment Criteria	Relevant?	Details/Evidence	Potential Health Impact	Recommended Mitigation or Enhancement Actions
providing secure cycle parking, showers and cycle lanes?		be provided in line with the London Plan.		
Does the proposal connect public realm and internal routes to local and strategic cycle and walking networks?	Yes	The scheme is directly linked to the public realm and further to local walking and cycling networks.	Positive	
Does the proposal include traffic management and calming measures to help reduce and minimise road injuries?	Yes	The proposal includes a Framework Travel Plan to reduce traffic and minimise road injuries.	Positive	
Is the proposal well connected to public transport, local services and facilities?	Yes	The development is very well connected to local public transport services with a PTAL score of 3.	Positive	
Does the proposal seek to reduce car use by reducing car parking provision, supported by controlled parking zones, car clubs and travel plans measures?	Yes	The site will be car free. A framework Travel Plan is in place.	Positive	
Does the proposal allow people with mobility problems or a disability to access buildings and	Yes	The site will have step free access, accessible bikes storage and 1 blue badge parking spaces.	Positive	

Assessment Criteria	Relevant?	Details/Evidence	Potential Health Impact	Recommended Mitigation or Enhancement Actions
places?				

Crime Reduction and Community Safety

Assessment Criteria	Relevant?	Details/Evidence	Potential Health Impact	Recommended Mitigation or Enhancement Actions
Does the proposal incorporate elements to help design out crime?	Yes	Yes, design out crime measures have been incorporated such as adequate lighting, open space, and natural surveillance.	Neutral	
Does the proposal incorporate design techniques to help people feel secure and avoid creating 'gated communities'?	Yes	The site will be well overlooked and natural surveillance will be prioritised.	Neutral	
Does the proposal include attractive, multi-use public spaces and buildings?	Yes	Yes, ground floor and courtyard space is integrated into the residential elements appropriately.	Positive	
Has engagement and consultation been carried out with the local community and voluntary sector?	Yes	Community engagement events have taken place, and feedback taken onboard.	Positive	

Access to Healthy Food

Assessment Criteria	Relevant?	Details/Evidence	Potential Health Impact	Recommended Mitigation or Enhancement Actions
Does the proposal facilitate the supply of local food, i.e. allotments, community farms and farmers' markets?	N/A	N/A	N/A	
Is there a range of retail uses, including food stores and smaller affordable shops for social enterprises?	No	This is not part of the Proposed Development	N/A	
Does the proposal avoid contributing towards an over concentration of hot food takeaways in the local area?	Yes	There are no hot food takeaway proposals on site.	Neutral	

Access to Work and Training

Assessment Criteria	Relevant?	Details/Evidence	Potential Health Impact	Recommended Mitigation or Enhancement Actions
Does the proposal provide access to local employment and training opportunities, including temporary construction and permanent 'end-use' jobs?	Yes	231 FTE jobs per year during the construction phase are anticipated.	Positive	Use of Local Employment and Skills Plan

Assessment Criteria	Relevant?	Details/Evidence	Potential Health Impact	Recommended Mitigation or Enhancement Actions
Does the proposal provide childcare facilities?	N/A	N/A	N/A	
Does the proposal include managed and affordable workspace for local businesses?	N/A	N/A	N/A	
Does the proposal include opportunities for work for local people via local procurement arrangements?	Yes	There is no detail as to how local people may be employed via local procurement arrangements	Neutral	Use of Local Employment and Skills Plan

Social Cohesion and Inclusive Design

Assessment Criteria	Relevant?	Details/Evidence	Potential Health Impact	Recommended Mitigation or Enhancement Actions
Does the proposal consider health inequalities by addressing local needs through community engagement?	Yes	Community engagement has been carried out with the relevant people.	Positive	
Does the proposal connect with existing communities, i.e. layout and movement which avoids physical barriers and severance and land uses and spaces which	Yes	The layout of the Proposed Development is designed to encourage social interaction, such as the clusters and open space.	Positive	

Assessment Criteria	Relevant?	Details/Evidence	Potential Health Impact	Recommended Mitigation or Enhancement Actions
encourage social interaction?				
Does the proposal include a mix of uses and a range of community facilities?	Yes	Yes, community space is integrated within the residential element.	Positive	
Does the proposal provide opportunities for the voluntary and community sectors?	N/A	N/A	N/A	
Does the proposal take into account issues and principles of inclusive and age-friendly design?	Yes	The Proposed Development is designed to be inclusive for a wide range of ages and demographics.	Positive	

Minimising the Use of Resources

Assessment Criteria	Relevant?	Details/Evidence	Potential Health Impact	Recommended Mitigation or Enhancement Actions
Does the proposal make best use of existing land?	Yes	The development will optimise the existing site to increase the number of people the accommodation will benefit by increasing 19 bedspaces to much needed young homeless population in Haringey.	Positive	
Does the proposal encourage recycling,	Yes	Recycling and circular economy principles have been incorporated into the	Positive	

Assessment Criteria	Relevant?	Details/Evidence	Potential Health Impact	Recommended Mitigation or Enhancement Actions
including building materials?		construction and operational phases of development.		
Does the proposal incorporate sustainable design and construction techniques?	Yes	Sustainable design and construction techniques have been adopted.	Positive	

Climate Change

Assessment Criteria	Relevant?	Details/Evidence	Potential Health Impact	Recommended Mitigation or Enhancement Actions
Does the proposal incorporate renewable energy?	Yes	The Proposed Development will make use of renewable energy technologies such as photovoltaics and air source heat pumps.	Positive	
Does the proposal ensure that buildings and public spaces are designed to respond to winter and summer temperatures, i.e. ventilation, shading and landscaping?	Yes	Year round measurements have been applied site-wide to ensure sustainability. Overheating and ventilation measures have been addressed.	Positive	
Does the proposal maintain or enhance biodiversity?	Yes	14.5% BNG provided	Positive	

Assessment Criteria	Relevant?	Details/Evidence	Potential Health Impact	Recommended Mitigation or Enhancement Actions
Does the proposal incorporate sustainable urban drainage techniques?	Yes	SuDS will be implemented where feasible, such as a rain garden, a geocellular tank and permeable paving.	Neutral	

REFERENCES

- ¹ WHO Health and Well-Being <https://www.who.int/data/gho/data/major-themes/health-and-well-being>
- ² A health map for the local human habitat - PubMed DOI: 10.1177/1466424006070466
- ³ NHS, London Healthy Urban Development Unit, (2017); HUDU Planning for Health – Healthy Urban Planning Checklist, Third Edition April 2017.
- ⁴ NHS, London Healthy Urban Development Unit, (2019); HUDU Planning for Health – Rapid Health Impact Assessment Tool, Fourth Edition October 2019.
- ⁵ Determinants of health / World Health Organisation (2024) WHO
- ⁶ Office for National Statistics (2021) Census [online]. Available from: <https://www.ons.gov.uk/census>
- ⁷ Department for Education (2024) Travel to school for children of compulsory school age
- ⁸ Green Infrastructure Standards for England Summary - Natural England
- ⁹ Ministry of Housing, Communities and Local Government (2021) National Planning Policy Framework
- ¹⁰ NPPG (2022) Healthy and safe communities - GOV.UK
- ¹¹ Ministry of Housing, Communities and Local Government (2021) National Design Guide, [National_design_guide.pdf](https://www.publishing.service.gov.uk) ([publishing.service.gov.uk](https://www.publishing.service.gov.uk))
- ¹² The London Plan | London City Hall (2021)
- ¹³ Haringey Local Plan: Strategic Policies – 2013-2026
- ¹⁴ [final_haringey_dmp_dtp_online-optimised.pdf](#)
- ¹⁵ Haringey's Health and Wellbeing Strategy 2024-2029
- ¹⁶ Office for National Statistics (2021) Population estimates
- ¹⁷ Office for National Statistics (2023) Age by single year
- ¹⁸ Office for National Statistics (2021) Population projections for local authorities: Table 2
- ¹⁹ State of the Borough profile – May 2025
- ²⁰ Office for National Statistics (2023) Ethnic group
- ²¹ Office for National Statistics (2023) Religion
- ²² Office for National Statistics (2023) General health
- ²³ Office for National Statistics (2023) Disability
- ²⁴ Health Survey for England, 2022: Data tables - NHS England Digital
- ²⁵ House of Commons (2022) Obesity statistics - House of Commons Library ([parliament.uk](https://www.parliament.uk))
- ²⁶ British Heart Foundation (2023)
- ²⁷ Office for National Statistics (2023) Personal well-being estimates by local authority
- ²⁸ Haringey's Health and Wellbeing Strategy 2024-2029
- ²⁹ Loneliness rates and well-being indicators by local authority - Office for National Statistics
- ³⁰ Haringey Ward Profiles (Hornsey) Microsoft Power BI
- ³¹ CHAIN | Homeless Link
- ³² Office for National Statistics (2023) Highest level of qualification
- ³³ Office for National Statistics (2023) Economic activity status
- ³⁴ Office for National Statistics (2024) Industry
- ³⁵ Indices of Deprivation (2025); Indices of Deprivation explorer map.
- ³⁶ Your area | Police.uk
- ³⁷ NHS, (2025); NHS Service Search. <https://www.nhs.uk/service-search/GP/LocationSearch/>
- ³⁸ Patients Registered at a GP Practice - NHS England Digital
- ³⁹ NHS, (2025); GP practice workforce data searchable by practice name or practice code. <https://digital.nhs.uk/data-and-information/data-tools-and-services/data-services/general-practice-data-hub/workforce>
- ⁴⁰ Fact Sheet Template XXX
- ⁴¹ WebCAT planning tool (2024) - Transport for London (tfl.gov.uk)
- ⁴² [Healthy-Urban-Planning-Checklist-3rd-edition-April-2017.pdf](#)
- ⁴³ Garrett H, et al, The Building Research Establishment, The cost of poor housing in England, 2021

⁴⁴ Equality Act 2010: guidance - GOV.UK (www.gov.uk)

⁴⁵ Healthy Streets | Making streets healthy places for everyone

⁴⁶ Active Design Consultation Draft January 2023 (sportengland-production-files.s3.eu-west-2.amazonaws.com)

⁴⁷ Untangling the fear of crime | Centre for Crime and Justice Studies

⁴⁸ Ambient greenness, access to local green spaces, and subsequent mental health: a 10-year longitudinal dynamic panel study of 2.3 million adults in Wales Geary, Rebecca S et al. *The Lancet Planetary Health*, Volume 7, Issue 10, e809 - e818

⁴⁹ Town and Country Planning Act 1990 (Section 7A)

⁵⁰ Flooding and health: an overview - GOV.UK

⁵¹ Health Effects of Climate Change in the UK: state of the evidence 2023

⁵² Using Design to Connect us | The Loneliness Lab (2020)

⁵³ Annual Business Survey (ABS) - Office for National Statistics (ons.gov.uk)

⁵⁴ UK Workforce Jobs SA : F Construction (thousands) - Office for National Statistics

⁵⁵ HCA Policy Covers (2014)- Additionality Guide (publishing.service.gov.uk)