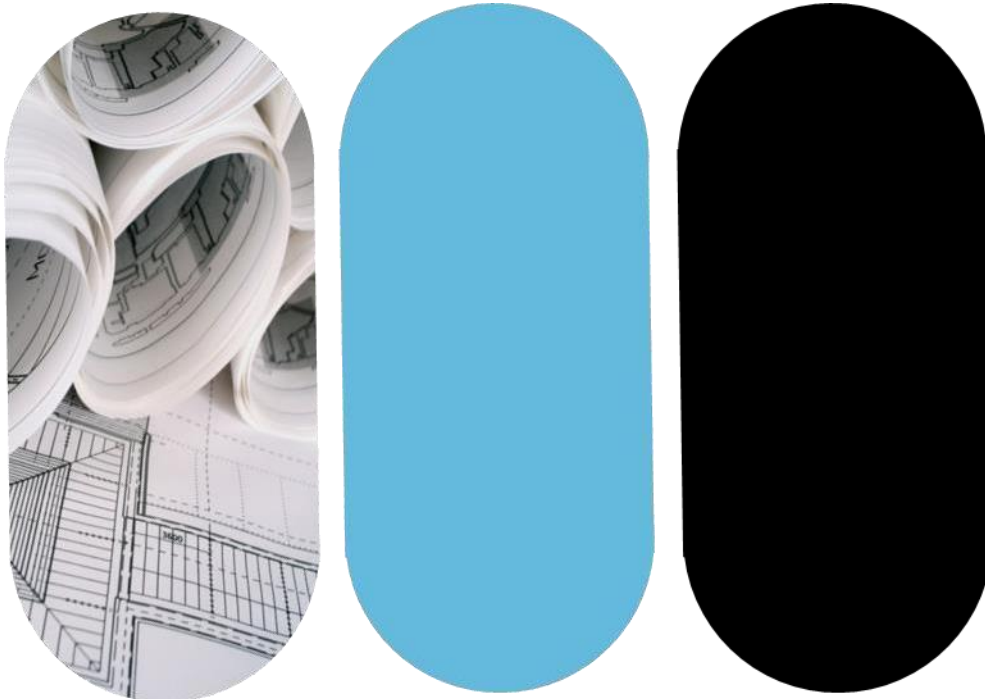




Hallam Land Management

Land North of the A507, West of A10, Buntingford

HEALTH IMPACT ASSESSMENT





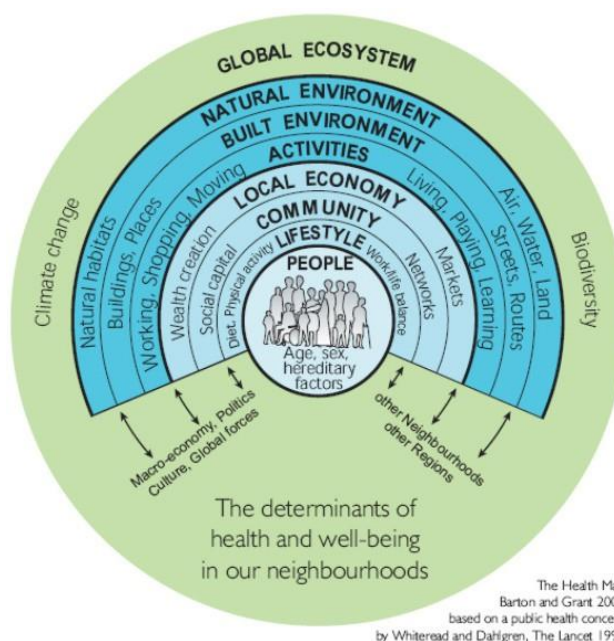
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1. INTRODUCTION

- 1.1 This Health Impact Assessment has been prepared by Marrons Planning on behalf of Hallam Land Management and forms part of an outline planning application at Land North of the A507, Buntingford. The description of development is:
- 'Outline planning application for development of up to 600 dwellings (C3), elderly accommodation (C3), Mixed Use Local Centre (including flexible use E, F and Sui Generis), First School, informal and formal open space, associated works and infrastructure including a new access from the A507 and pedestrian bridge over the A10, with all matters reserved save for access.'*
- 1.2 The site, which extends to 50.12 (ha), is identified on the site location plan submitted with the application.
- 1.3 This HIA aims to assess the potential health impacts of the proposals as well as offering recommendations to mitigate adverse effects and maximise health benefits.
- 1.4 The purpose of this Health Impact Assessment is to demonstrate that there are no adverse health impacts of the proposals that would significantly and demonstrably outweigh the health benefits and, as such, planning permission should be granted.
- 1.5 HIA's have been guided by reports such as the Health Impact Assessment in Spatial Planning guide and the Wales Health Impact Assessment Support Unit (WHIASU) methodology which outline how health impacts can be assessed. These assessments provide a deeper understanding of the mechanisms and themes involved in health and wellbeing and HIAs.
- 1.6 This HIA is based on the Hertfordshire's Rapid Health Impact Assessment Tool for Planning¹.
- 1.7 The wider determinants of health are summarised in the Health Map illustrated in figure 1.1 below.

Figure 1.1 - Human Ecology Model of a settlement (Barton and Grant, 2006)



¹ Hertfordshire County Council [Health Impact Assessment Position Statement \(hertfordshire.gov.uk\)](http://hertfordshire.gov.uk)



- 1.8 Hertfordshire County Council guidance set out in its HIA Position Statement² states that a HIA should be conducted for schemes of 100 or more residential units. Guidance for each stage of the HIA process and recommended toolkits are provided including the Wales Health Impact Assessment Support Unit (WHIASU) screening toolkit.
- 1.9 Hertfordshire County Council have stated that they favour the Wales Health Impact Assessment Support Unit (WHIASU) methodology (over that of the HUDU HIA approach).
- 1.10 It is understood that Hertfordshire Public Health's recommendations are as follows:
- Developments between 50-99 residential units = Desktop HIA required
 - Developments of 100 or more residential units = Rapid HIA required
 - Developments subject to an Environment Impact Assessment = Full HIA required
- 1.11 Accordingly, and given that the Application Proposal is not subject to EIA, a Rapid HIA has been undertaken.

Competency Statement

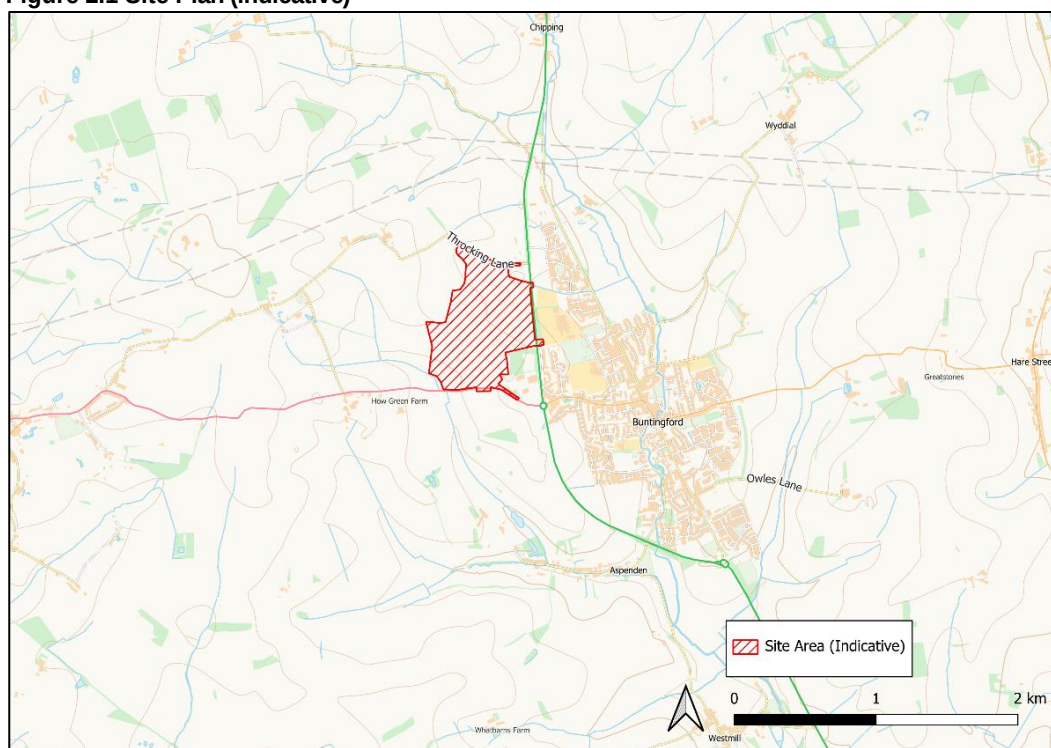
- 1.12 This HIA has been prepared at Planner level (RTPI Licentiate) and its preparation overseen by Simon Macklen. Simon Macklen is Head of Socio Economics and Partner of Marrons and has 18 years' experience in the preparation of socio economic and health impact related assessments. Simon is a Member of the RTPI.

² Hertfordshire County Council Position Statement: Health Impact Assessments (HIAs). [The role of Public Health in planning | Hertfordshire County Council](#)

2. SITE DESCRIPTION

- 2.1 The site comprises an area of 50.12 (ha) located north of the A507 and west of the A10 in Buntingford (figure 2.1) hereinafter referred to as the “site”.
- 2.2 Buntingford is a market town towards the northern edge of the East Hertfordshire District. It is surrounded by open countryside, and plays an important role as a centre for outlying villages to meet the everyday needs of the community.
- 2.3 The town has a range of services and facilities that serve the day-to-day needs of the residents. This includes, Co-op Food, Budgens, Sainsbury’s Local, McColls (Post Office), Cafes, restaurants and various other local retailers. There are several schools within 3.2km of the site including Edwinstree Church of England School, Buntingford First School, Layston Church of England First School, Milfield First and Nursery School and Freman College an upper school and sixth form academy ages 13-18.
- 2.4 The site also benefits from access to Buntingford Medical Centre. There are employment opportunities at Buntingford, including at the Buntingford Business Park (approximately 3.8km from the site).
- 2.5 The site is situated approximately 17km northeast of Stevenage town centre. The town provides a good range of local services and facilities, and the site is within a 30-minute drive of most of these. Including a leisure park, library and swimming centre.
- 2.6 The site is approximately 18km from the town centre of Letchworth Garden City. The town provides a good range of local services and facilities, and the site is within a 25-minute drive of most of these including a North Herts Leisure Centre.
- 2.7 There is a good network of footpaths and cycle routes throughout Buntingford, such as the existing PROW that goes through the centre of the development connecting the site to Bowling Green Lane. There are currently no footways at the A10 or A507 Baldock Road, so the Proposed Development would facilitate new pedestrian connections across the site which would link to existing footways that extend to the town centre.

Figure 2.1 Site Plan (indicative)





3. PLANNING POLICY

Health Impact Assessment

- 3.1 Health and wellbeing are important themes running through national and local planning policy as outlined in this section.
- 3.2 HIAs have been recognised as an important tool when assessing and analysing the impacts on health that developments could bring as well as highlighting mitigation strategies.

National Planning Policy Framework

- 3.3 The National Planning Policy Framework (NPPF)³, revised in December 2023, identifies that health is an important theme in the context of sustainable development. Section 8 is particularly concerned with ‘promoting healthy and safe communities’ and outlines that planning policies and decisions should aim to achieve healthy, inclusive and safe places which:
- 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;
 - 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 attractive, well-designed, clear and legible pedestrian and cycle routes, and high quality public space, which encourage the active and continual use of public areas; and
 - enable and support healthy lifestyles, especially where this would address identified local health and well-being needs – 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.
- 3.4 The East Herts Health and Wellbeing Strategy 2019-2023⁴ provides more details about the strategy priorities and how EHDC will address them through combined council and partner health and wellbeing work.

LOCAL DEVELOPMENT PLAN

- 3.5 The Local Development Plan is made up of The Adopted East Herts District Plan⁵ (EHDP) which plans for the 2011-2033 period. The Plan was adopted on 23rd October 2018. The Buntingford Community Area Neighborhood Plan 2014-2033, adopted in May 2017.

THE EAST HERTS DISTRICT PLAN (EHDP)

- 3.6 The East Herts District Plan sets out in paragraph 2.1.1 the overall strategic vision for development in East Herts over the Plan period to 2033.
- 3.7 The vision entails East Herts being a showpiece for modern green living with a distinctive character and economic prosperity will be retained.

³ NPPF, 2023.

⁴ East Herts Wellbeing Strategy [Health and Wellbeing Strategy 2019 - 2023.pdf \(eastherts.fra1.digitaloceanspaces.com\)](#)

⁵ East Herts District Plan, 2018 [East Herts District Plan 2018 \(onwebcurl.com\)](#)



- 3.8 New homes at a range of sizes, types and tenure will be delivered, as well as jobs through well designed and sustainable development. Local communities will have embraced Neighborhood Planning to deliver their local objectives.
- 3.9 The Plan outlines several important issues and challenges the District currently faces. This includes issues related to housing, economy, infrastructure and services. These are mainly related to challenges of managing high levels of growth and the effects of population increase. (paragraph 2.3.1). These issues and challenges therefore form the basis for the East Herts 2033 Vision.
- 3.10 The theme of health and wellbeing is one of the core tenets of Community Strategies integral to the creation of the District Plan. This includes reducing health inequality, increasing life expectancy, promoting social inclusion, sport and recreation, and providing more access to healthy lifestyle options to improve health and wellbeing.
- 3.11 The Plan sets out 10 strategic objectives in order to deliver its vision which are:
- (1) To mitigate the effects of climate change by reducing carbon dioxide emissions, supporting decentralised, low carbon and renewable energy and reducing the risk of flooding.
 - (2) To encourage safe and vibrant mixed communities that provide for the needs of all East Herts residents including the young, the elderly and vulnerable people.
 - (3) To balance the housing market by delivering a mix of market, low cost, and affordable homes and accommodating the housing needs of an ageing population.
 - (4) To protect the countryside from inappropriate development and to protect and enhance the historic environment of East Herts, promoting good design that creates a distinctive sense of place.
 - (5) To foster entrepreneurial endeavour through educational attainment and encourage small and medium enterprises through maximising existing employment opportunities and clusters and supporting rural diversification.
 - (6) To improve access opportunities, minimise the need to travel, and encourage necessary journeys to be made by sustainable means to ease congestion and help reduce East Herts' carbon footprint.
 - (7) To meet the needs of all of East Herts' communities by maintaining and improving existing facilities and providing new facilities including for arts, culture, community, leisure, entertainment, recreation, faith and health.
 - (8) To improve the health and wellbeing of all East Herts' communities and to reduce health inequalities.
 - (9) To reduce water consumption, increase biodiversity and protect and enhance the quality of existing environmental assets by, inter alia, creating new green spaces and networks of high-quality green space for both recreation and wildlife.
 - (10) To ensure that development occurs in parallel with provision of the necessary infrastructure, including enhancement and provision of green infrastructure.
- 3.12 Objective 8 focuses on creating improving the health and wellbeing of East Herts' communities and to reduce health inequalities. It is stated that this will be achieved by improving existing facilities and providing new facilities including for arts, culture, community, leisure, entertainment, recreation, faith and health. As well as improving and reconnecting the districts rich and varied green infrastructure to provide new spaces for recreation and leisure.



3.13 In appendix 1 further detail relating to specific policies in the plan are outlined.

Other

3.14 The Public Health Strategy 2022– 2027⁶ describes how Hertfordshire County Council's Public Health Service contributes to achieving Hertfordshire County Council's vision - to create a cleaner, greener and healthier Hertfordshire. Specifically, the strategy shows how public health can deliver positive change through all of the council's priority themes -

- A cleaner and greener environment;
- Healthy and fulfilling lives for our residents;
- Excellent council services for all; and
- Sustainable, responsible growth in our county.

3.15 The East Herts Health and Wellbeing Strategy 2019-2023⁷ sets out EHDC will work with others to encourage and enable people to make healthy lifestyles choices. Specifically, the strategy identifies the following priorities and outcomes –

People: People Improve the health and wellbeing of our communities

- Residents living active and healthy lives;
- Support for our vulnerable families and individuals;
- Communities engaged in local issues.

Place: Enhance the quality of people's lives

- Attractive places;
- Future development best meets the needs of the district and its residents.

Economy: Enable a flourishing local economy

- Support our businesses and the local economy;
- Vibrant town centres;
- Working with others, to have achieved the right infrastructure for our businesses and communities.

⁶ Hertfordshire County Council Public Health Strategy 2022-2027: public-health-strategy-2022-2027.pdf (hertfordshire.gov.uk)

⁷ East Herts Health and Wellbeing Strategy 2019-2023 p.8 - [Health and WellbeingStrategy 2019 - 2023.pdf](https://health-and-wellbeingstrategy-2019-2023.pdf) (eastherts.fra1.digitaloceanspaces.com)



4. APPLICATION PROPOSALS

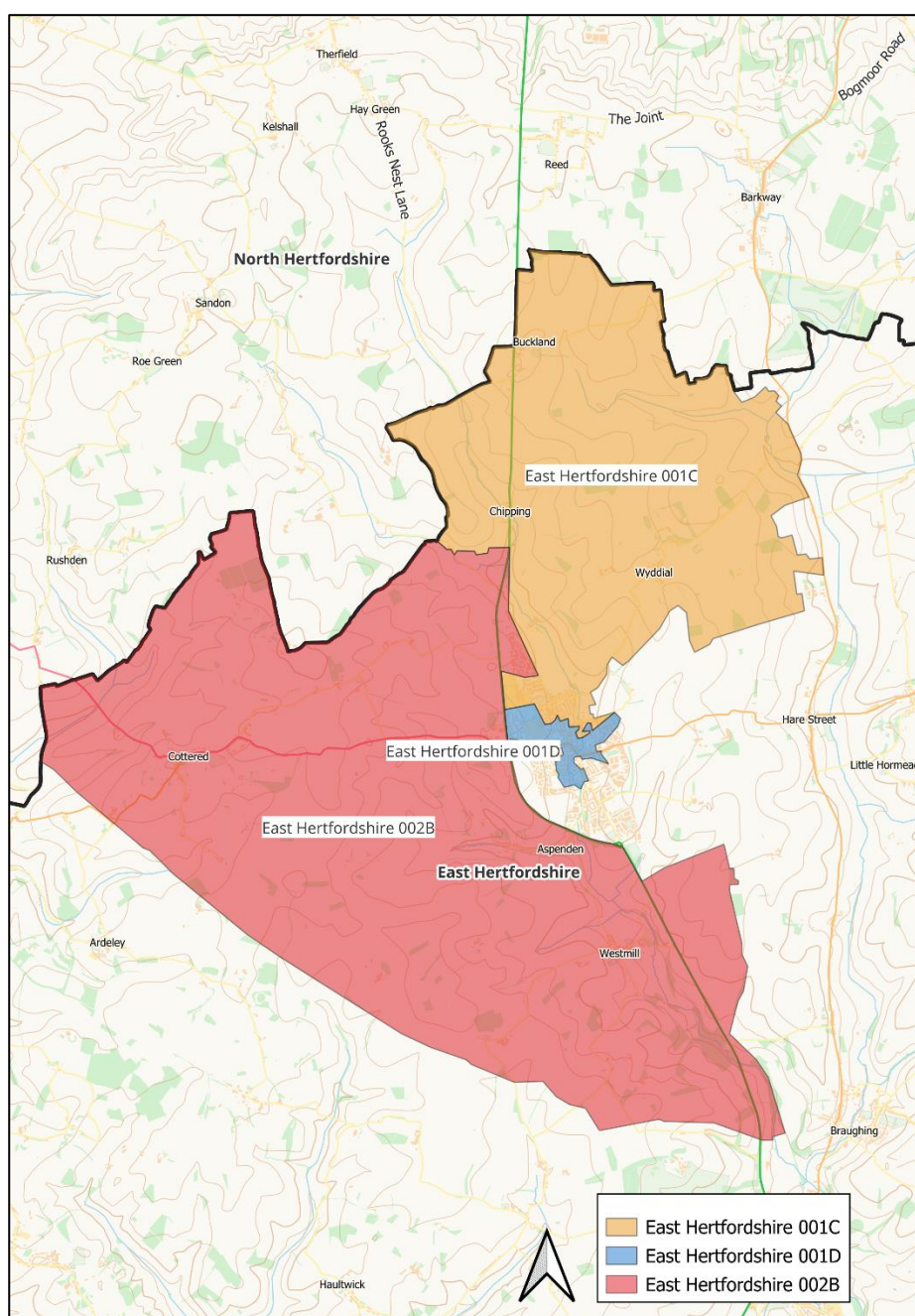
- 4.1 The proposals include up to 600 dwellings (C3), elderly accommodation (C3), Mixed Use Local Centre (including flexible use E, F and Sui Generis), First School, informal and formal open space, associated works and infrastructure including a new access from the A507 and pedestrian bridge over the A10, with all matters reserved save for access' to help meet the local housing requirement. The development will include a range of properties catering for families of all sizes.
- 4.2 In accordance with the East Herts District Plan, at this stage the development intends to provide up to 40% affordable housing provision, helping to create a diverse community.
- 4.3 The mix and tenure will be agreed with the local authority as part of the planning application. However, the proposed development will likely comprise a mix of 1 – 5 bedroom dwellings.
- 4.4 The development provides open space and 23.88 (ha) of Green Infrastructure. This includes a large western area of open space, recreational routes, cycleway, children's play areas, and further ecological enhancements.
- 4.5 A new Locally Equipped Area for Play (LEAP) is proposed. The illustrative masterplan shows how this could be located adjacent to residential areas and connected via the proposed recreational routes, maximising accessibility for all.
- 4.6 Additionally, a new Neighbourhood Equipped Area of Play (NEAP) is proposed. The illustrative masterplan shows how this could be located adjacent to the first school and health centre. This is also along the Public Right of Way allowing for maximised access.
- 4.7 The existing trees and landscaping along the site boundaries will be retained and enhanced as part of this proposal. This aims to include a new destination park and green connections throughout the development.
- 4.8 New landscape planting and habitat creation will improve the existing landscape quality and provide biodiversity net gains in excess of 15%.
- 4.9 The development will deliver a First School and a local centre with the potential for a medical centre, depending on discussions with existing providers.

5. KEY HEALTH STATISTICS

- 5.1 The site is located within East Hertfordshire. The main focus of this section will be on the Lower Super Output Areas (LSOA) local to the site⁸, however, County and Local Planning Authority statistics are also covered.

Lower Super Output Areas Buntingford

Figure 5.1 Map displaying LSOA's in close proximity to the site.

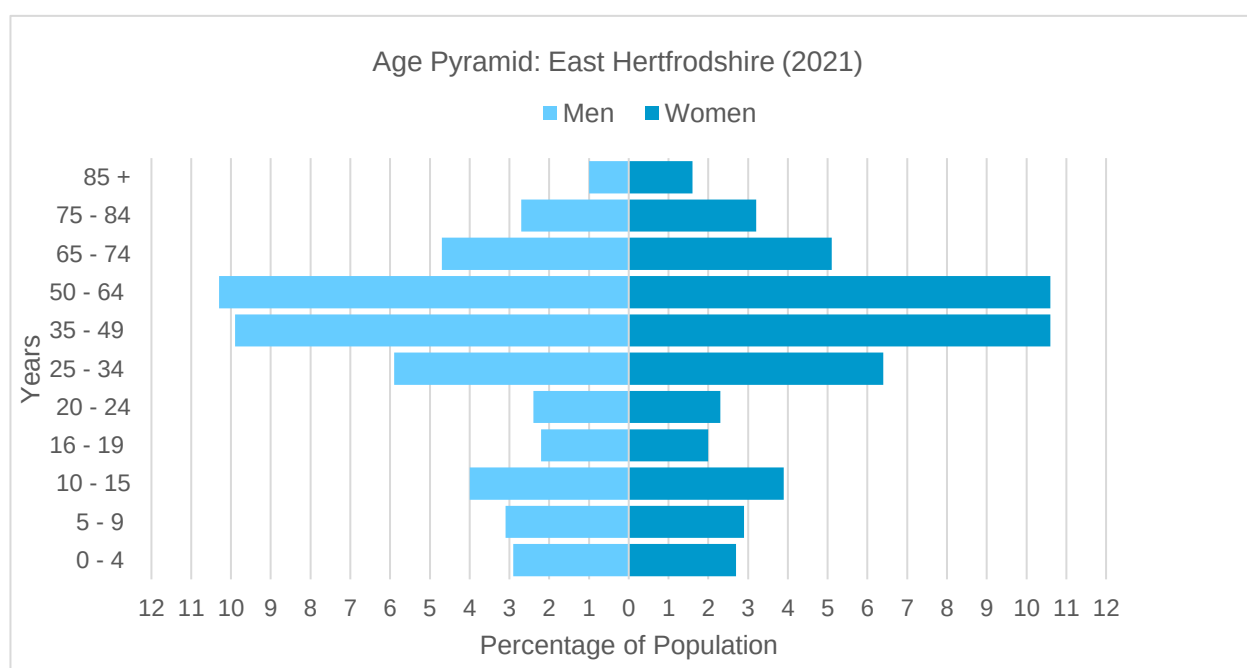


⁸ The site is located within East Hertfordshire 002B E01023494, East to the site is 001C E01023465 and Buntingford urban area is located within 001D.E01023466 (LSOA code, 2011)

Population Growth and Breakdown

- 5.2 The estimated resident population of East Hertfordshire, according to the Office for National Statistics (2021) was 150,166. In terms of population breakdown 19.3% of the population are aged 0-15 (compared to the England average of 18.5%), 8.8% are aged 16-24 years old (compared to the England average of 10.6%) 53.6% are aged 25-64 years old (compared to the England average of 52.4%) 18.2% are aged 65 years and over (compared to the England average of 18.4%)⁹.

Figure 5.2 Age pyramid: male and female numbers (ONS Census, 2021)



- 5.3 In terms of ethnicity, East Hertfordshire comprises a predominately White ethnic population which makes up 95.5% of the population, with 1.9% African/Asian British, Black/African/Caribbean/Black British 0.7% and Mixed/other ethnic groups making up 1.9% of the population.

Life Expectancy

- 5.4 The health of people in East Hertfordshire is generally better than the England average, as shown in the East Hertfordshire Local Authority Health Profile 2019¹⁰ (see Appendix 1). Life expectancy for both men and women is higher than the England average. The profile also outlines that life expectancy is 6.0 years lower for men and 3.6 years lower for women in the most deprived areas of East Hertfordshire than in the least deprived areas.

Deprivation

- 5.5 The Index of Multiple Deprivation is the official measure of relative deprivation at a small local area level (Lower-layer Super Output Areas) across England and have been produced by the Ministry of Housing, Communities and Local Government (2019).

⁹ ONS England Table TS007 and East Hertfordshire TS009.

¹⁰ Local Authority Health Profile, 2019 [E07000242 \(phe.org.uk\)](https://phe.org.uk/e07000242)



- 5.6 The IMD combines information from the seven domains to produce an overall relative measure of deprivation. The domains are combined using the following weights:
- Income Deprivation (22.5%)
 - Employment Deprivation (22.5%)
 - Education, Skills and Training Deprivation (13.5%)
 - Health Deprivation and Disability (13.5%)
 - Crime (9.3%)
 - Barriers to Housing and Services (9.3%)
 - Living Environment Deprivation (9.3%)
- 5.7 For the IMD and each of the domains, every neighbourhood (LSOA) in England is given a score which is then used to rank the LSOAs from 1 (most deprived area) to 32,844 (least deprived area).
- 5.8 East Hertfordshire ranks 307 out of 317 lower tier local authorities in England with rank 1 being the most deprived¹¹. At the LSOA level, the site has an IMD score of 17.2. Buntingford urban area scores 8.3, while area 001C to the east of the site scores 8.6 (in contrast to the England average of 21.7) (2019).
- 5.9 This demonstrates that Buntingford is less deprived than the England average, both at the district and LSOA levels.

House Prices

- 5.10 In December 2023, the average UK house price was £302,164¹². In the same time period, the median house price in Hertfordshire was £436,443. In East Hertfordshire this was £429,874.

Children and Teenagers Health

- 5.11 Regarding the health of children, the East Hertfordshire Local Authority Health Profile also details that in Year 6, 14.0% (215) of children are classified as obese, which is better than the average for England. The rate for alcohol-specific hospital admissions among those under 18 is 15 (rate per 100,000 population). This represents 5 admissions per year. Levels of teenage pregnancy, GCSE attainment (average attainment 8 score - which measures pupils' performance in 8 GCSE-level qualifications), breastfeeding and smoking in pregnancy are better than the England average.

Wider Health and Lifestyle

- 5.12 In relation to adult health, the rate of alcohol-related harm hospital admissions is 525 (rate per 100,000 population). This represents 759 admissions per year. The rate for self-harm hospital admissions is 74 (rate per 100,000 population), better than the average for England. This represents 110 admissions per year. Estimated levels of excess weight in adults (aged 18+), smoking prevalence in adults (aged 18+) and physically active adults (aged 19+) are better than the England average.

¹¹ Source: DLUHC, IMD - Rank of average rank 2019

¹² National Statistics [UK House Price Index England: December 2023 - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/statistics/uk-house-price-index-england-december-2023)



- 5.13 The rates of hip fractures in older people (aged 65+), new sexually transmitted infections, fatalities and seriously injured on roads and new cases of tuberculosis are better than the England average. The rates of violent crime (hospital admissions for violence), under 75 mortality rate from cardiovascular diseases and under 75 mortality rate from cancer are also better than the England average.

Table 5.1 General Health, ONS 2021

Area	Very good Health	Good health	Fair health	Bad health	Very bad health
East Hertfordshire	54.0%	32.5%	10.2%	2.6%	0.7%
East Hertfordshire 001C	50.9%	33.5%	11.4%	3.3%	1.0%
East Hertfordshire 001D	48.6%	32.9%	13.3%	4.1%	1.0%
East Hertfordshire 019A (002B*)	53.0%	32.7%	11.3%	2.4%	0.6%

Source: ONS

Note *: LSOA code for East Hertfordshire denotes equivalent area from 2011 census.

Employment and Skills

- 5.14 East Hertfordshire has a long-term unemployment rate of 0.6 per 1,000 working age population, lower than the England average of 1.9%.

Crime

- 5.15 The crime rate for violence and sexual offences is 20.9 per 1,000 of the population, lower than the Hertfordshire average. 76,806 crimes were reported in Hertfordshire between February-January 2023-2024. Figure 5.2 below illustrates how East Hertfordshire performs against the wider county for all crime rate between February-January 2023-2024¹³. In East Hertfordshire, the crime rate for violence and sexual offences is 20.9 per 1,000 population, lower than the Hertfordshire average.

¹³ Herts Insight Crime and Anti-Social Behaviour Profile in Hertfordshire [Crime and Anti-Social Behaviour Profile - County | Hertfordshire | Report Builder for ArcGIS \(esriuk.com\)](#)



Figure 5.3 All Crime Rate across Hertfordshire for Feb – 23 – Jan-2024.





6. CAPACITY STUDIES

- 6.1 This section outlines the existing provision of education and healthcare services in proximity to the site.
- 6.2 In Hertfordshire there are both a two tier education system of Primary and Secondary schools, and a three tier system, consisting First, Middle and Upper Schools. This section of the report will focus on a two tier system.

Education

Primary Schools

- 6.3 Table 6.1 shows that there are 3 primary schools in a 3.2km search area (Catchment area for School)

Table 6.1 Primary School Capacity

Primary School	Local Authority	Capacity	No. on Roll	Spare Places
Layston Primary School	East Hertfordshire District Council	150	145	5
Buntingford First School	East Hertfordshire District Council	330	Not recorded	-
Mill Mead	East Hertfordshire District Council	240	231	9

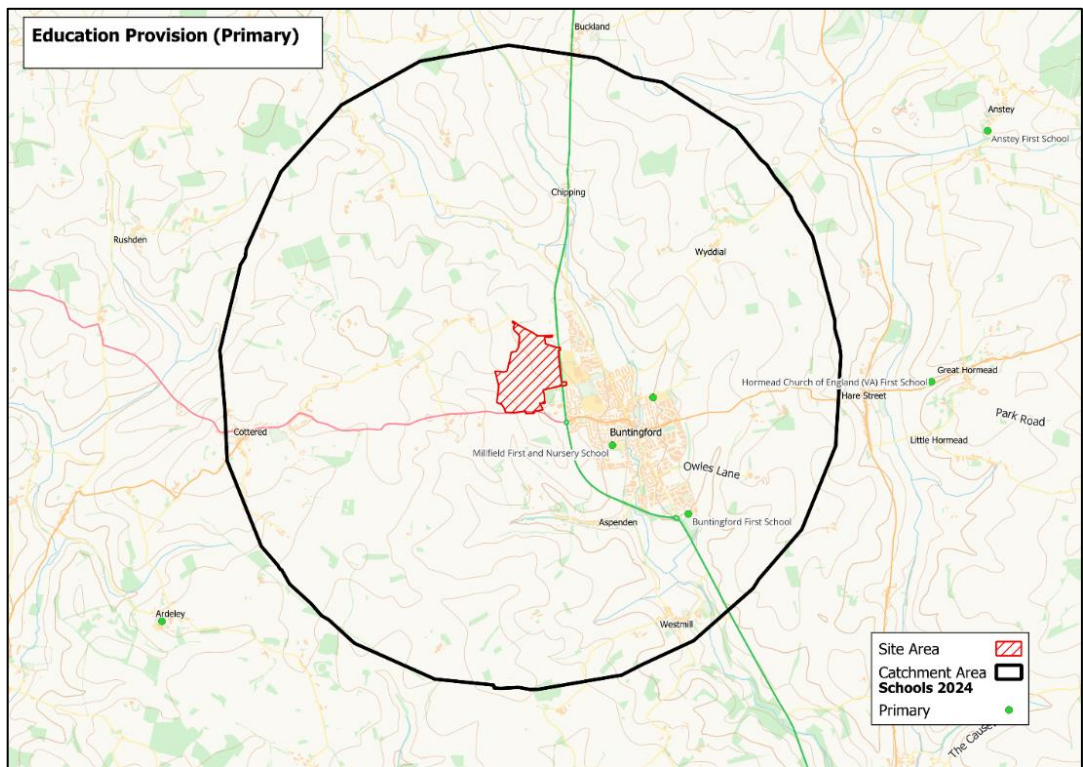
Source GOV.UK¹⁴ - Ofsted

- 6.4 Figure 6.1 below illustrates the location of the primary schools identified in table 6.1 above.

¹⁴ GOV.UK Get information about Schools [Get Information about Schools - GOV.UK \(get-information-schools.service.gov.uk\)](https://www.gov.uk/get-information-schools.service.gov.uk)



Figure 6.1 Primary Schools in 3.2km radius



Source: Ofsted

Secondary Schools

6.5 Table 6.2 shows that there are 2 secondary schools in a 3.2km radius of the site.

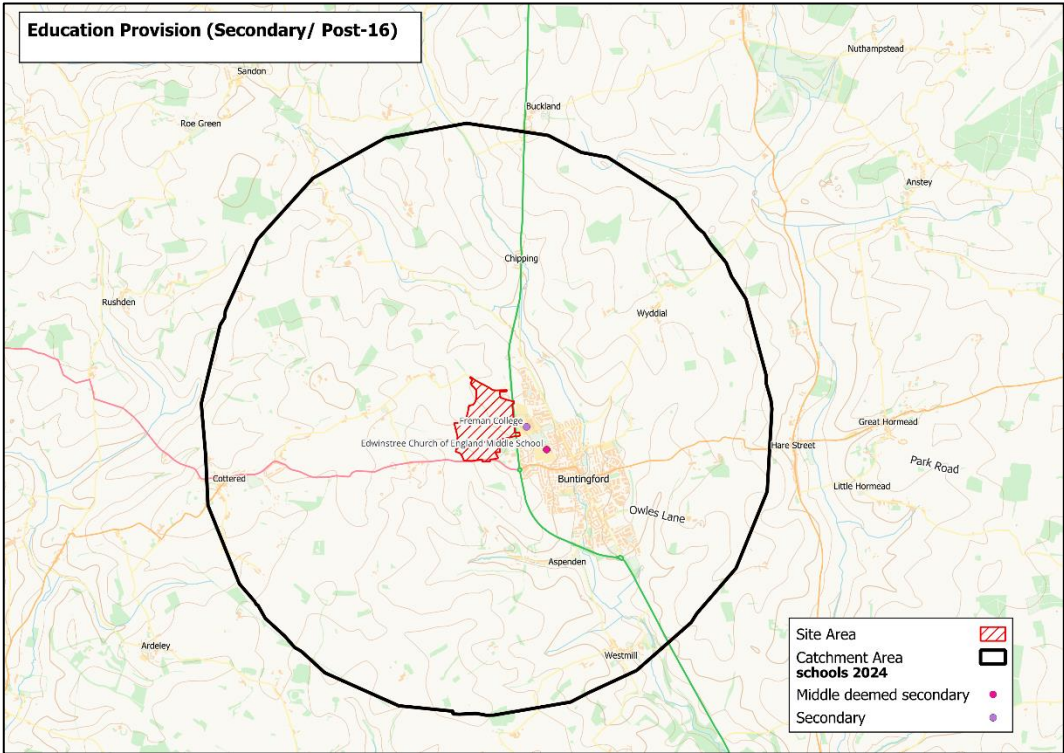
Table 6.2 Secondary School Capacity

Secondary School	Local Authority	Capacity	No. on Roll	Spare Places	Spare Places (under 92.5% occupied)
The Freman College	East Hertfordshire District Council	903	991	-88	N
Edwinstree Church of England	East Hertfordshire District Council	480	477	3	N

6.6 Figure 6.2 below illustrates the location of the secondary schools identified in table 6.3 above.



Figure 6.2 Secondary Schools in 3.2km radius (Catchment area)



Source: Ofsted

Health Related Facilities

6.7 Table 6.4 shows that there are 2 General Practice Surgeries in a 5km search area (Study Area).

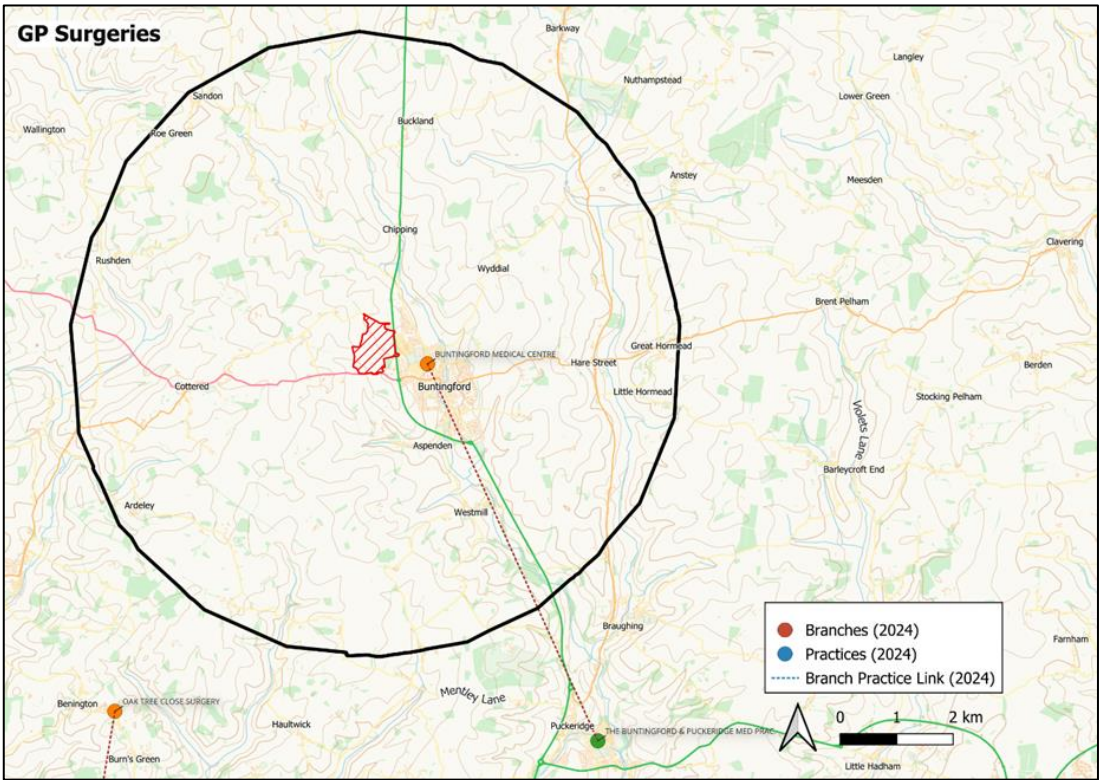
Table 6.4 GP Practices (within Principal Study Area)

GP Surgery Name	Number of GPs (FTE)	Registered Patients	No of Patients per GP	Accepting New Patients?
Buntingford Medical Centre	9.4	20,122	2,145	Y
The Buntingford & Puckeridge Medical Practice				

6.8 Figure 6.3 below illustrates the location of the GP Surgeries identified in table 3 above.



Figure 6.3 GPs in 5km radius



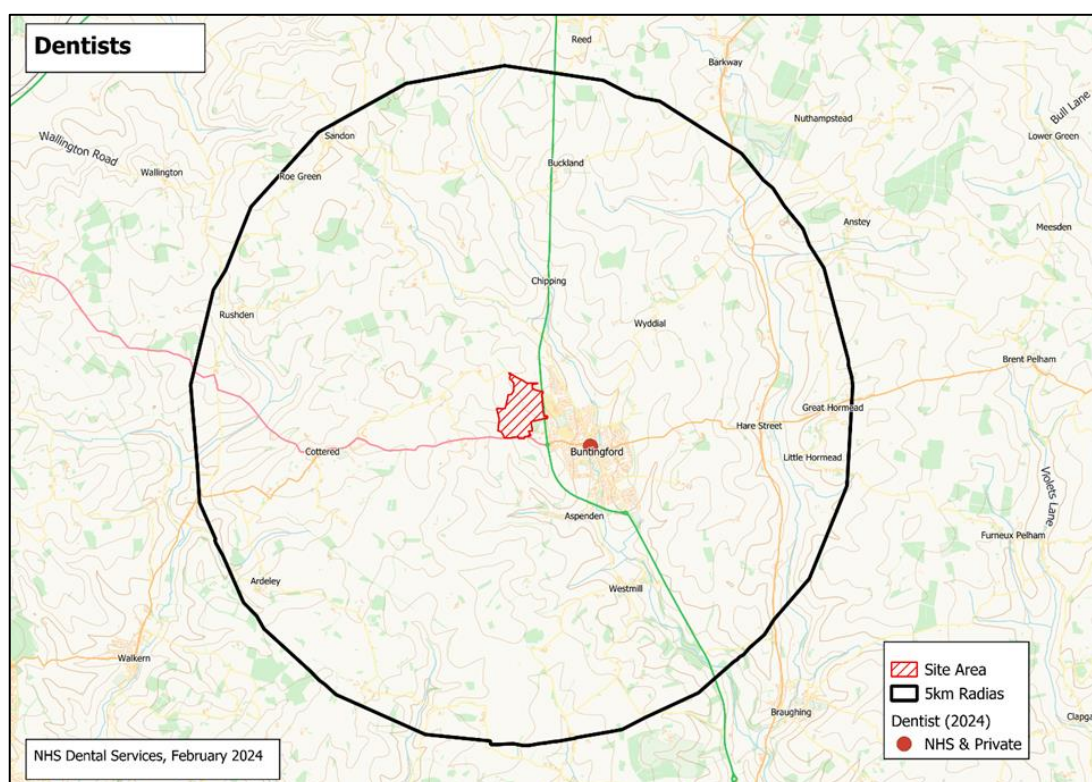
6.9 Table 6.5 shows that there is one dentist in a 5km search area (Study Area).

Table 6.5 Dental Practices (within Principal Study Area)

Dentist Name	Accepting new NHS patients?
Buntingford Dental Clinic	No

6.10 Figure 6.4 below illustrates the location of the dentists identified in table 6.5 above.

Figure 6.4 Dentists in 5km radius



Social and Community Care

- 6.11 Hertfordshire County Council offers a wealth of dedicated support services including advice and support for carers, including young carers, abuse, including physical, domestic, psychological and financial abuse, those with disabilities, and those with mental health conditions, dementia and autism.¹⁵
- 6.12 The Hertfordshire SEND Local Offer lets parents and young people know what special educational needs and disabilities services are available in Hertfordshire, and who can access them.¹⁶
- 6.13 Mind Hertfordshire Network provides essential mental health support in Hertfordshire, providing a diverse range of services from eight Wellbeing Centres and other venues across all ten districts of the county. Funded locally, their services are available to all residents in Hertfordshire over the age of 18 and we offer dedicated services for 5-18 year olds.¹⁷
- 6.14 Carers in Hertfordshire provides advice, information and support to unpaid carers of all ages who live, work or care in Hertfordshire.

¹⁵ [Adult social services | Hertfordshire County Council](#)

¹⁶ [The Hertfordshire SEND Local Offer](#)

¹⁷ [Hertfordshire Mind Network \(hertsmindnetwork.org\)](#)



7. COMMUNITY ENGAGEMENT / WORKSHOPS

- 7.1 As set out in the Statement of Community Involvement submitted with the application, a program of community consultation and engagement has enabled local views and considerations to be shared with the project team. This was a multi-channel approach which included a community newsletter, a consultation website, and a consultation event, providing opportunities for as many people as possible to share their thoughts and opinions.
- 7.2 In advance of the launch of the public consultation, the Applicant met with the following organisations and individuals -
- Aspenden Parish Council (Councillors)
 - Cottered & Throcking Parish Council (Councillors)
 - Buntingford Town Council (Councillors)
- 7.3 The meetings provided an opportunity for the Applicant to present and discuss their proposals in detail with attendees.
- 7.4 During the engagement period, additional groups were reached out to, including:
- Hertfordshire County Council (Councillors)
 - East Herts Council (Councillors)
 - Buntingford ward members (Councillors)
 - Officers at Hertfordshire County Council (Education)
- 7.5 A community newsletter was delivered to properties within the identified consultation zone for each consultation event. A total of 3,855 were issued in January 2024. Two meetings were held with Buntingford Town Council and some members of the Aspenden Parish Council on Wednesday 8th November 2023, and Tuesday 19th December. On Monday 22nd January 2024 a meeting was held with Edwinstree C of E Middle School to discuss capacity needs and how the development of a new First School will impact the wider area. Further to this, a meeting with Hertfordshire County Council was held on Friday 9th February 2024 to discuss in further detail the potential new on-site school.
- 7.6 A community engagement event took place on the following -
- Wednesday 31st January 2023 between 15:00pm and 20:00pm at The Bury, London Rd. Buntingford SG9 9HZ
- 7.7 In total 104 people attended the community engagement event, with a 35 feedback forms being completed at the event, including an Edwinstree student questionnaire. A further 14 completed forms were received after the engagement event (49 responses in total).



8. DETERMINANTS OF HEALTH AND WELL-BEING CHECKLIST

- 8.1 This chapter first identifies the vulnerable groups who have the potential to be more impacted than others by the Proposed Development, before moving on to undertake the Determinants of Health and Well-being Checklist.

Vulnerable Groups

- 8.2 Marrons have had regard to the Population Groups Checklist.⁸ The following were identified as potentially vulnerable groups who have the potential to be more impacted than others by the proposed development.

- Age related groups such as children, young people and older people;
- Socially vulnerable or minority groups such as, but not limited to, those suffering with existing physical or mental health conditions, minority ethnic groups and carers;
- Current school population;
- Faith groups;
- Those who identify as female;
- Income related groups.

Table 8.1 Determinants of Health and Well-being Checklist

Lifestyles		
<i>Positive Impacts</i>	<i>Negative Impacts</i>	<i>Recommendations</i>
The proposed development includes 23.88 (ha) of Green Infrastructure and open space. This includes children's play areas and large recreational areas that promote physical activity to be enjoyed by all residents and the wider community of Buntingford. The public right of way running through the centre of the proposals will be retained and form a 'strong green spine and greenway' enabling residents to walk in nature and amongst new tree planting. Connectivity to the wider area and countryside will also promote physical activity. It is envisaged that existing vegetation 0.32 (ha) will also be retained. Including SuDS	N/A	23.88(ha) of the site area provided will be Green Infrastructure and open space including children's play areas and large recreational areas as well as a central public footpath which will promote physical activity. The future management and maintenance of the public open space can be agreed through the Section 106 Agreement.



primarily focused on the north eastern side of the development. Active travel is also promoted through the close proximity of the site to local services and amenities through the pedestrian upgrade connecting the site to the rest of Buntingford. The proposals will have a positive impact in promoting physical activity.		
Social and Community Influences on Health		
<i>Positive Impacts</i>	<i>Negative Impacts</i>	<i>Recommendations</i>
The proposals provide for 600 dwellings (C3), elderly accommodation (C3), The proposals also plan to provide for 40% affordable dwellings. The proposal fosters an inclusive and mixed community, providing a range of house types and sizes, both market and affordable. A new Locally Equipped Area for Play (LEAP) is proposed. The illustrative masterplan shows how this could be located adjacent to residential areas and connected via the proposed recreational routes, maximising accessibility for all. This will help improve community cohesion in the area. Additionally, a new Neighbourhood Equipped Area of Play (NEAP) is proposed. The illustrative masterplan shows how this could be located adjacent to the first school and health centre. This is also along the Public Right of Way allowing for maximised access and a good opportunity for existing residents and	Although the open space and community facilities will be available to the whole community, there is the potential for a perceived divide between existing Buntingford residents and the new development residents. Social cohesion between existing and new communities needs to be considered.	A pedestrian bridge on top of the A10 will connect Cottered Footpath 041 and Buntingford Footpath 035, connecting to existing facilities in the northern part of Buntingford. This will connect the development with Buntingford, allowing for increased social cohesion. There is also a proposal to upgrade the existing A10 crossing to a TOUCAN crossing benefitting pedestrians and cyclists. This will improve connections to the site. Housing for older residents is included in the proposed development and will make a valuable contribution to an increasingly significant issue for the District generally, and one where the position in Buntingford is even more acute. This will help reduce loneliness in the area.



prospective residents to mix and integrate this is further enhanced by the playing pitches located to the west of the development to the nearby existing Throckington Walk PROW. The site will also gain from having a community hub, manifested as a mixed-use centre which will enhance community cohesion, identity, and local pride. This will establish a supportive and social network within the development, offering a sense of belonging.		
Mental Wellbeing		
<i>Positive Impacts</i>	<i>Negative Impacts</i>	<i>Recommendations</i>
The public realm, open space and play space will be designed to facilitate access by people from all backgrounds, so that they are accessible for all members of the community.	N/A	Residents could receive informational leaflets upon occupying dwellings, offering details about the current array of services and support accessible to them. These could be secured through a planning obligation or condition.
Living and Environmental Conditions affecting health		
<i>Positive Impacts</i>	<i>Negative Impacts</i>	<i>Recommendations</i>
The proposed development would create new public realm and open up the site for the wider community to enjoy, including Local Area of Play and Neighbourhood Equipped Area of Play. The public right of way is a protected feature, and the proposed development will enhance and provide for the continued access to the byway and countryside beyond. The extensive green infrastructure forming the basis of Buntingford Parkside can	N/A	The development has been designed following best practice design guidance. Matters to be agreed at reserved matter stage if appropriate.



deliver biodiversity net gain of 13.85% against the existing conditions. Secure by Design will be taken into consideration (designing crime out). Specifically, the illustrative layout shows how new dwellings can be designed to overlook roads, footpaths and public open spaces providing natural surveillance and active frontages to all public areas in the best practice of Secure by Design philosophy.		
Economic Conditions Affecting Health		
<i>Positive Impacts</i>	<i>Negative Impacts</i>	<i>Recommendations</i>
The scheme will provide temporary construction related jobs throughout the construction phase of the development. Once operational, the development , will host a First School and Mixed Use Centre, which will create employment opportunities. The proposals intend to provide for 40% affordable dwellings, widening the housing choice for those on lower incomes.	N/A	The applicant would enter into a S.106 agreement to secure the affordable dwellings.
Access and Quality of Services		
<i>Positive Impacts</i>	<i>Negative Impacts</i>	<i>Recommendations</i>
The proposed development is located in a sustainable location at the edge of Buntingford, in close proximity to existing services. The provision of additional housing in Buntingford could assist in drawing NHS employees into the local area. In Buntingford, St. Peter's Church and the Roman Catholic Church of Saint Richard of Chichester lie to the east, while Holy Trinity stands to the west.	Potential impact on capacity of local schools and services as addressed in the report. Buntingford is currently served by The Buntingford and Puckeridge Medical Practice operating across two sites and the research indicates that the practice buildings may be undersized. There is potential for the GP provision to be located on-site.	The applicant would be required to enter into a S.106 agreement to ensure that contributions towards necessary provision of services commensurate with the level of development would be met. Information leaflets could be issued to residents on occupation of dwellings, providing details of the existing range of services and support available to them. The Applicant has



However, Hertfordshire offers access to a diverse array of other places of worship, which would be available to prospective residents of the development. Buntingford Public Library is located within the centre of Buntingford and provides access to computers which would allow those without access to internet to access a wealth of online resources and guidance. The library has partial wheelchair access, a hearing loops and disabled parking bays. New Residents will result in additional expenditure locally and support existing businesses and community facilities.		commissioned work to understand the potential need for a medical centre in Buntingford, which could be included as part of the proposed development within the mixed-use area identified comprising of 0.53 (ha). In addition, the mixed-use area should provide for a local centre (including shops and services to meet residents' day-to-day needs) and a mobility hub.
Macro-economic, Environmental and Sustainability Factors		
<i>Positive Impacts</i>	<i>Negative Impacts</i>	<i>Recommendations</i>
Reports concerning energy, air quality, ecological impact, flood risk, and noise have been compiled and submitted to bolster the development. This outlines how the development is located within a sustainable location. A Biodiversity Net Gain Assessment demonstrates the site will deliver a minimum of 10% net gain on site, calculated at the design stage as net gain of 13.85%. The Design and Access Statement for the application explains the design principles and concepts for the proposed development and how these will be taken forward into the detailed design phase. The Housing Need Assessment and economic analysis also lend additional support to the development proposal The submitted Sustainability Strategy summarises the key sustainable design measures	N/A	Sustainability measures can be secured through suitably worded planning conditions.



incorporated into the development as outlined in the Sustainable Construction Energy and Water Statement.		
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Monitoring

- 8.3 It is anticipated that the S.106 agreement or planning conditions attached to any planning consent would secure any monitoring deemed necessary in relation to the proposed recommendations.



9. CONCLUSION

- 9.1 Evaluating the proposed development against the Health and Well-being Checklist outlined in Table 8.1 reveals its potential to bring about positive impacts on health.
- 9.2 By establishing itself on a sustainable site, the proposed development aims to offer a variety of housing tenures, including affordable, alongside initiatives such as new landscaping, public open spaces, and recreational areas. Furthermore, it plans to improve connectivity and sustainable transport methods by fostering pedestrian and cycleway connections.
- 9.3 In light of these considerations, it is evident that the proposed development priorities health and well-being in its planning, thus contributing to the establishment of a vibrant and sustainable community.



Appendices

Appendix 1 Local Authority Health Profile

East Hertfordshire

Published on 03/03/2020

Area type: District

Region: East of England

Local Authority Health Profile 2019

This profile gives a picture of people's health in East Hertfordshire. It is designed to act as a 'conversation starter', to help local government and health services understand their community's needs, so that they can work together to improve people's health and reduce health inequalities.

Visit <https://fingertips.phe.org.uk/profile/health-profiles> for more area profiles, more information and interactive maps and tools.

Health in summary

The health of people in East Hertfordshire is generally better than the England average. East Hertfordshire is one of the 20% least deprived districts/unitary authorities in England, however about 8.2% (2,070) children live in low income families. Life expectancy for both men and women is higher than the England average.

Health inequalities

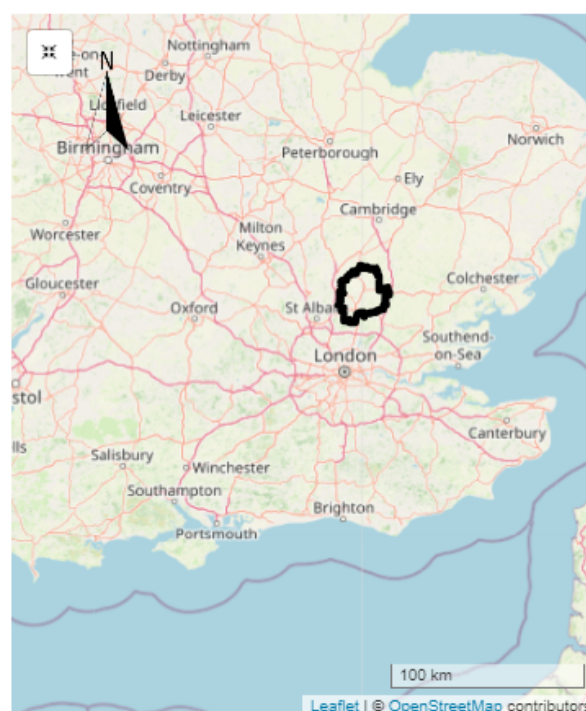
Life expectancy is 6.0 years lower for men and 3.6 years lower for women in the most deprived areas of East Hertfordshire than in the least deprived areas.

Child health

In Year 6, 14.0% (215) of children are classified as obese, better than the average for England. The rate for alcohol-specific hospital admissions among those under 18 is 15*, better than the average for England. This represents 5 admissions per year. Levels of teenage pregnancy, GCSE attainment (average attainment 8 score), breastfeeding and smoking in pregnancy are better than the England average.

Adult health

The rate for alcohol-related harm hospital admissions is 525*, better than the average for England. This represents 759 admissions per year. The rate for self-harm hospital admissions is 74*, better than the average for England. This represents 110 admissions per year. Estimated levels of excess weight in adults (aged 18+), smoking prevalence in adults (aged 18+) and physically active adults (aged 19+) are better than the England average. The rates of hip fractures in older people (aged 65+), new sexually transmitted infections, killed and seriously injured on roads and new cases of tuberculosis are better than the England average. The rates of violent crime (hospital admissions for violence), under 75 mortality rate from cardiovascular diseases and under 75 mortality rate from cancer are better than the England average.



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Contains OS data © Crown copyright and database right 2019
Local authority displayed with full resolution clipped boundary

* rate per 100,000 population

Health summary for East Hertfordshire

Key

Significance compared to goal / England average:

Significantly worse	Significantly lower	↑ Increasing / Getting worse	↑ Increasing / Getting better
Not significantly different	Significantly higher	↓ Decreasing / Getting worse	↓ Decreasing / Getting better
Significantly better	Significance not tested	↑ Increasing	↓ Decreasing
		↑ Increasing (not significant)	↓ Decreasing (not significant)
		— Could not be calculated	→ No significant change

Life expectancy and causes of death

Indicator	Age	Period	Count	Value (Local)	Value (Region)	Value (England)	Change from previous
1 Life expectancy at birth (male)	All ages	2016 - 18	n/a	81.9	80.3	79.6	↑
2 Life expectancy at birth (female)	All ages	2016 - 18	n/a	84.9	83.7	83.2	↓
3 Under 75 mortality rate from all causes	<75 yrs	2016 - 18	972	252.3	302.1	330.5	↑
4 Mortality rate from all cardiovascular diseases	<75 yrs	2016 - 18	201	52.1	63.4	71.7	↑
5 Mortality rate from cancer	<75 yrs	2016 - 18	419	108.9	126.0	132.3	↑
6 Suicide rate	10+ yrs	2016 - 18	25	6.57	9.96	9.64	↑

Injuries and ill health

Indicator	Age	Period	Count	Value (Local)	Value (Region)	Value (England)	Change from previous
7 Killed and seriously injured (KSI) rate on England's roads	All ages	2016 - 18	145	32.9	46.7	42.6	—
8 Emergency hospital admission rate for intentional self-harm	All ages	2018/19	110	73.9	173.1	193.4	↑
9 Emergency hospital admission rate for hip fractures	65+ yrs	2018/19	125	459.0	563.5	568.4	↓
10 Percentage of cancer diagnosed at early stage	All ages	2017	351	57.0	54.7	52.2	↑
11 Estimated diabetes diagnosis rate	17+ yrs	2018	n/a	67.1	76.7	78.0	↑
12 Estimated dementia diagnosis rate	65+ yrs	2019	991	59.0 *	65.7 *	68.7 *	↑



Behavioural risk factors

Indicator	Age	Period	Count	Value (Local)	Value (Region)	Value (England)	Change from previous
13 Hospital admission rate for alcohol-specific conditions	<18 yrs	2016/17 - 18/19	15	15.3	23.4	31.6	↓
14 Hospital admission rate for alcohol-related conditions	All ages	2018/19	759	525.0	633.6	663.7	↑
15 Smoking prevalence in adults	18+ yrs	2018	11443	9.93	14.0	14.4	↑
16 Percentage of physically active adults	19+ yrs	2017/18	n/a	70.9	65.4	66.3	↓
17 Percentage of adults classified as overweight or obese	18+ yrs	2017/18	n/a	54.0	62.1	62.0	↓

Child health

Indicator	Age	Period	Count	Value (Local)	Value (Region)	Value (England)	Change from previous
18 Teenage conception rate	<18 yrs	2017	21	7.78	16.0	17.8	↓
19 Percentage of smoking during pregnancy	All ages	2018/19	109	7.46	9.68	10.6	↓
20 Percentage of breastfeeding initiation	All ages	2016/17	1282	80.8	76.1	74.5	↑
21 Infant mortality rate	<1 yr	2016 - 18	11	2.25	3.36	3.93	↓
22 Year 6: Prevalence of obesity (including severe obesity)	10-11 yrs	2018/19	215	14.0	18.0	20.2	↑

Inequalities

Indicator	Age	Period	Count	Value (Local)	Value (Region)	Value (England)	Change from previous
23 Deprivation score (IMD 2015)	All ages	2015	n/a	8.14	-	21.8	=
24 Smoking prevalence in adults in routine and manual occupations	18-64 yrs	2018	n/a	19.9	25.7	25.4	↓

Wider determinants of health

Indicator	Age	Period	Count	Value (Local)	Value (Region)	Value (England)	Change from previous
25 Percentage of children in low income families	<16 yrs	2016	2070	8.20	14.1	17.0	↑
26 Average GCSE attainment (average attainment 8 score)	15-16 yrs	2018/19	79779	52.5	47.0	46.9	↓
27 Percentage of people in employment	16-64 yrs	2018/19	71300	77.2	78.4	75.6	↓
28 Statutory homelessness rate - eligible homeless people not in priority need	Not applicable	2017/18	n/a	-	0.65	0.79	=
29 Violent crime - hospital admission rate for violence (including sexual violence)	All ages	2016/17 - 18/19	115	27.0	33.6	44.9	↑

Health protection

Indicator	Age	Period	Count	Value (Local)	Value (Region)	Value (England)	Change from previous
30 Excess winter deaths index	All ages	Aug 2017 - Jul 2018	65	17.2	30.9	30.1	↑
31 New STI diagnoses rate (exc chlamydia aged <25)	15-64 yrs	2018	549	585.0	614.9	850.6	↑
32 TB incidence rate	All ages	2016 - 18	17	3.85	5.65	9.19	↓

For full details on each indicator, see the [definitions tab of the Local Authority Health Profiles online tool](#).

For a full list of profiles produced by Public Health England, see the fingertips website: <https://fingertips.phe.org.uk/>

For a full list of profiles produced by Public Health England, see the fingertips website: <https://fingertips.phe.org.uk/>

Indicator value types

1,2 Life expectancy - years 3,4,5 Directly age-standardised rate per 100,000 population aged under 75 6 Directly age-standardised rate per 100,000 population aged 10 and over 7 Crude rate per 100,000 population 8 Directly age-standardised rate per 100,000 population 9 Directly age-standardised rate per 100,000 population aged 65 and over 10 Proportion - % of cancers diagnosed at stage 1 or 2 11 Proportion - % recorded diagnosis of diabetes as a proportion of the estimated number with diabetes 12 Proportion - % recorded diagnosis of dementia as a proportion of the estimated number with dementia 13 Crude rate per 100,000 population aged under 18 14 Directly age-standardised rate per 100,000 population 15,16,17 Proportion 18 Crude rate per 1,000 females aged 15 to 17 19,20 Proportion 21 Crude rate per 1,000 live births 22 Proportion 23 Index of Multiple Deprivation (IMD) 2015 score 24 Proportion 25,26 Slope index of inequality 27 Proportion 28 Mean average across 8 qualifications 29 Proportion 30 Crude rate per 1,000 households 31 Directly age-standardised rate per 100,000 population 32 Ratio of excess winter deaths to average of non-winter deaths 33 Crude rate per 100,000 population aged 15 to 64 (excluding Chlamydia) 34 Crude rate per 100,000 population

*	Value compared to a goal (see below)
~	Value suppressed for disclosure control due to small count
\$	Aggregated from all known lower geography values

Thresholds for indicators that are compared against a goal

Indicator Name	Green	Amber	Red
12 Estimated dementia diagnosis rate (aged 65 and over)	>= 66.7% (significantly)	similar to 66.7%	< 66.7% (significantly)

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Appendix 2 Local Policy

Policy DE32 – Landscape Character

- 1.1 Development proposals must demonstrate how they conserve, enhance or strengthen the character and distinctive features of the district's landscape. For major applications, or applications where there is a potential adverse impact on landscape character, a Landscape and Visual Impact Assessment and/or Landscape Sensitivity and Capacity Assessment should be provided to ensure that impacts, mitigation and enhancement opportunities are appropriately addressed.
- 1.2 Appropriate mitigation measures will be taken into account when considering the effect of development on landscape character/landscaping.
- 1.3 Where relevant, development proposals will have regard to the District Council's currently adopted Landscape Character Assessment Supplementary Planning Document.

Policy CFLR9 - Health and Wellbeing

- 1.4 All development shall be designed to maximise the impact it can make to promoting healthy communities and reducing health inequalities. In particular, regard shall be had to providing the necessary infrastructure to encourage physical exercise and health, including accessible open space, vegetation and landscaping, sport and recreation facilities, cultural facilities and safe, well promoted, walking and cycling routes.
- 1.5 Where new health facilities are planned, these should be located where there is a choice of sustainable travel options and should be accessible to all members of the community.
- 1.6 Contributions towards new or enhanced health care facilities will be sought to ensure the health care requirements arising from new developments are met and to prevent a shortfall or worsening of provision.
- 1.7 Where new facilities for community use, including for the practice of faith, are planned, these should be of a flexible design to enable multiple uses throughout the day and should be located where there is a choice of sustainable travel options.

Policy CFLR10 - Education

- 1.8 Development that creates a potential increase in demand for education will be required to make appropriate provision for new facilities either on-site or by making a suitable contribution towards the improvement or expansion of nearby existing facilities.

Policy WAT1 – Flood Risk Management

- 1.9 The functional floodplain will be protected from inappropriate development and where possible developed flood plain should be returned to Greenfield status with an enhanced level of biodiversity.
- 1.10 Development proposals should neither increase the likelihood or intensity of any form of flooding, nor increase the risk to people, property, crops or livestock from such events, both on site and to neighbouring land or further downstream.

Policy CFLR7 - Community Facilities

- 1.11 The provision of adequate and appropriately located community facilities will be sought in conjunction with new development.



- 1.12 Proposals should aim to provide for the dual or multiple use of facilities for wider community activities
- 1.13 Developments should support and enhance community services and facilities, where appropriate. This includes provision of new community services and facilities as well as provision of accessible green-space.

Policy CFLR1 - Open Space, Sport and Recreation

- 1.14 Residential developments will be expected to provide open spaces, indoor and outdoor sport and recreation facilities to provide for the needs arising from the development.

Policy DEL1 - Infrastructure and Service Delivery

- 1.15 The District Council will work in partnership with providers of infrastructure and services to facilitate the timely provision of infrastructure necessary to support sustainable development.

Policy HOU6 Specialist Housing for Older and Vulnerable People

- 1.16 The Council will encourage the provision of specialist housing, across all tenures, for older and vulnerable people. Proposals for new housing for older and vulnerable people will be expected to:
 - (a) Provide a range of accommodation size, tenure and type with the opportunity to attain additional or specialist care as needed within the one development;
 - (b) Be in a suitable location where access to a choice of sustainable travel options is available;
 - (c) Be within walking distance, on a safe and level route or within easy reach by passenger transport, to town centre shops and services;
 - (d) Be well integrated with existing communities through the sharing of space and public access to services where appropriate;
 - (e) Consider the integration of healthcare facilities within the development. II. In addition to the overall housing target, a gross increase of at least 530 bed-spaces to help meet the accommodation needs of those who need specialist (Use Class C2) residential or nursing care will be supported in the District's towns

Policy HOU1– Housing type and Mix of Housing

- 1.17 On new housing developments of 5 or more gross additional dwellings, an appropriate mix of housing tenures, types and sizes will be expected in order to create mixed and balanced communities appropriate to local character and taking account of the latest Strategic Housing Market Assessment and any additional up-to-date evidence, including the latest East Herts Housing and Health Strategy; local demographic context and trends; local housing need and demand; and site issues and design considerations.
- 1.18 Housing development should provide a mix of dwelling sizes and tenures to cater for current and forecast accommodation needs and to assist in the creation of sustainable, mixed and inclusive communities.
- 1.19 Housing will be expected to balance communities appropriate to local character.
- 1.20 The mix of housing types within a development should reflect the existing housing stock in order to address any gaps in provision and to avoid an over-concentration of a single housing type.
- 1.21 Where appropriate, provision of specialist housing will be encouraged for older people and vulnerable



groups in accordance with policy HOU6.

BUNTINGFORD COMMUNITY AREA NEIGHBOURHOOD PLAN

- 1.22 The Buntingford Community Area Neighbourhood Plan (BCANP)¹⁸ is intended to guide the future development of the town up to 2031, supporting strategic policies of the Local Plan (p.1).
- 1.23 The vision for Buntingford is set out in several identified themes such as environment & sustainability, transport, health, leisure & recreation, education, business & employment, housing and design. It builds on current and future planned activity and says what the Town and Parish Councils who have been involved in the preparation of the BCANP and their partners will work towards. (p.3)
- 1.24 The BCANP goes on to outline the importance of preserving and sustaining, health and wellbeing facilities as well as leisure and open space and the importance this has in improving the health and wellbeing of residents.

EAST HERTS SUSTAINABLE SPD

- 1.25 The Sustainability Supplementary Planning Document¹⁹ was adopted as a material consideration by East Herts Council on the 2nd March 2021.
- 1.26 This Supplementary Planning Document (SPD) supports the implementation of policies in the District Plan and sets out detailed, technical guidance on how to mitigate and adapt to climate change, to minimise resource use and protect and enhance biodiversity (paragraph 2.1).
- 1.27 Section 2 outlines a Design Led Approach to sustainable design. All of which are important in achieving sustainable development. Principles included are character; continuity and enclosure; ease of movement; legibility; adaptability, resilience and environmental sustainability; diversity; and quality of the public realm.
- 1.28 The SPD uses guidance from Recent Homes England, Building for a Healthy Life, explains how the integration of nature, blue and green infrastructure and pedestrian and cycle connections underpins high quality design and healthy, attractive places.

EAST HERTS OPEN SPACE, SPORT AND RECREATION SPD

- 1.29 The Open Space, Sport and Recreation SPD²⁰ was adopted by the council on 12th May 2020.
- 1.30 The Purpose of the SPD is to: Deliver a wide range of high-quality open space, sport and recreation across the district that is fit for purpose, with an appropriate balance between the provision of new facilities and the enhancement of existing ones, so as to improve the health and wellbeing of the district's population (page. 3)

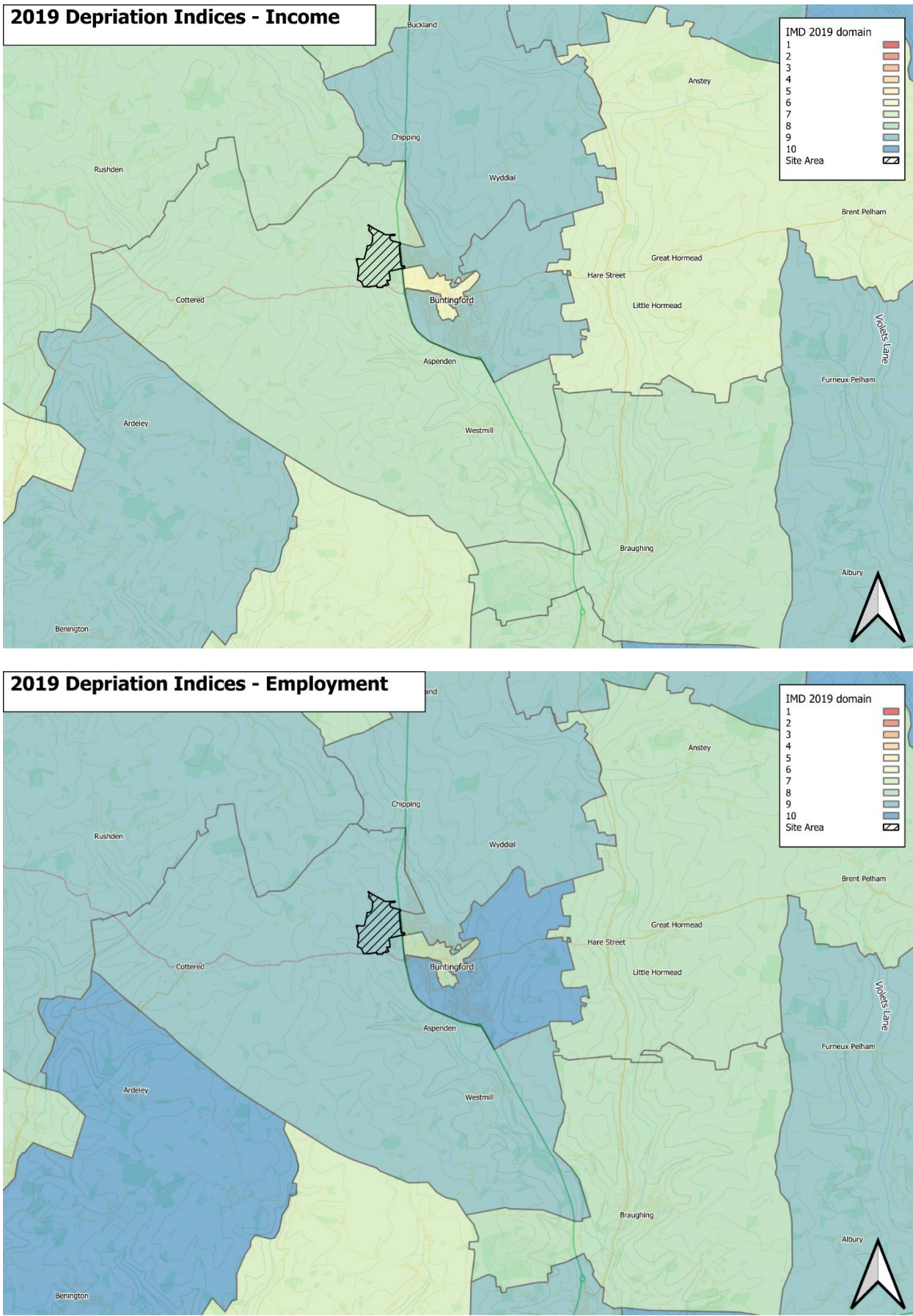
¹⁸ Buntingford Community Area Neighbourhood Plan <https://www.buntingford-tc.gov.uk/uploads/bcanp-april-2016-amended-version-jan-2017-compressed.pdf>

¹⁹ [Sustainability SPD \(onwebcurl.com\)](https://www.eastherts.gov.uk/sites/default/files/2021-03/Sustainability%20SPD.pdf)

²⁰ [Open Space, Sport and Recreation SPD \(eastherts.fra1.digitaloceanspaces.com\)](https://www.eastherts.gov.uk/sites/default/files/2021-03/Open%20Space%20Sport%20and%20Recreation%20SPD.pdf)

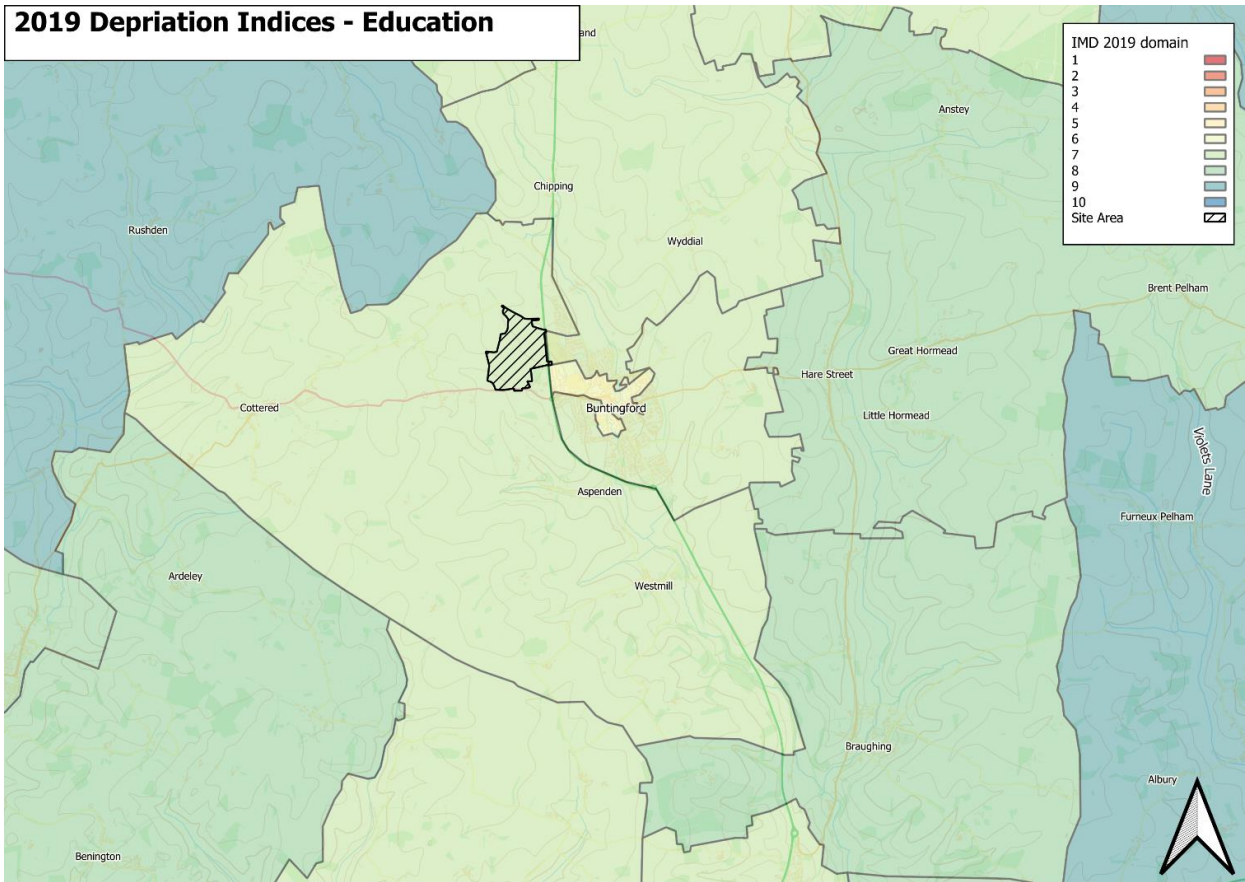


Appendix 3: IMD Maps

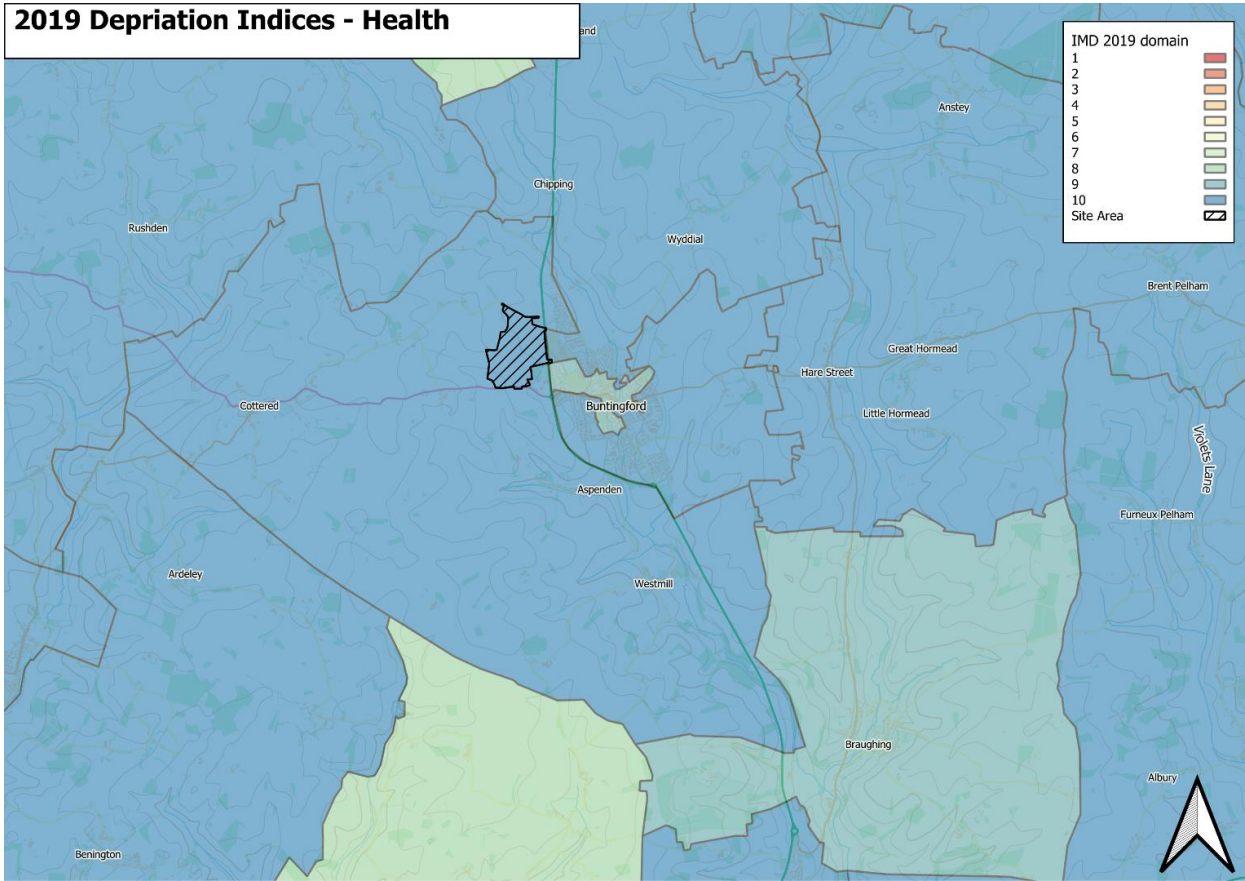


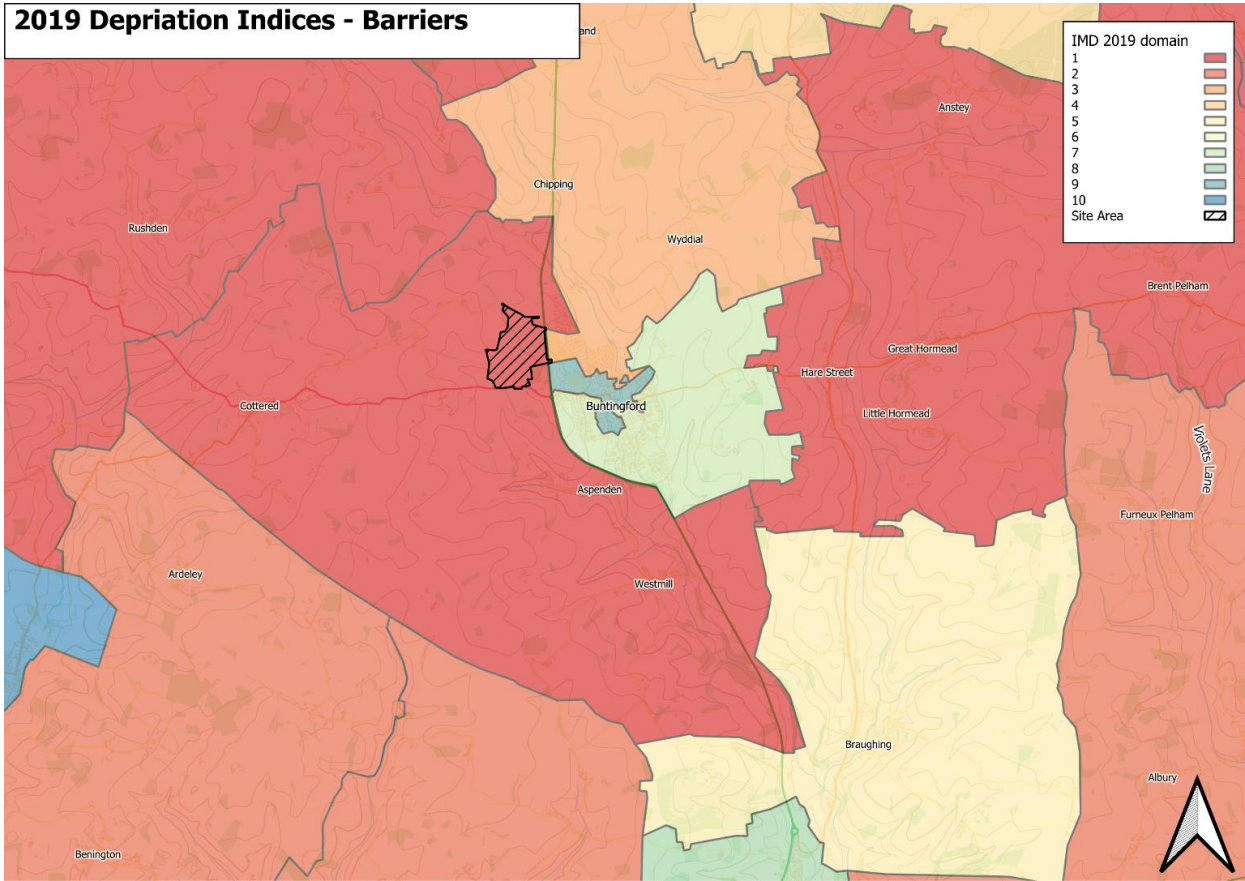
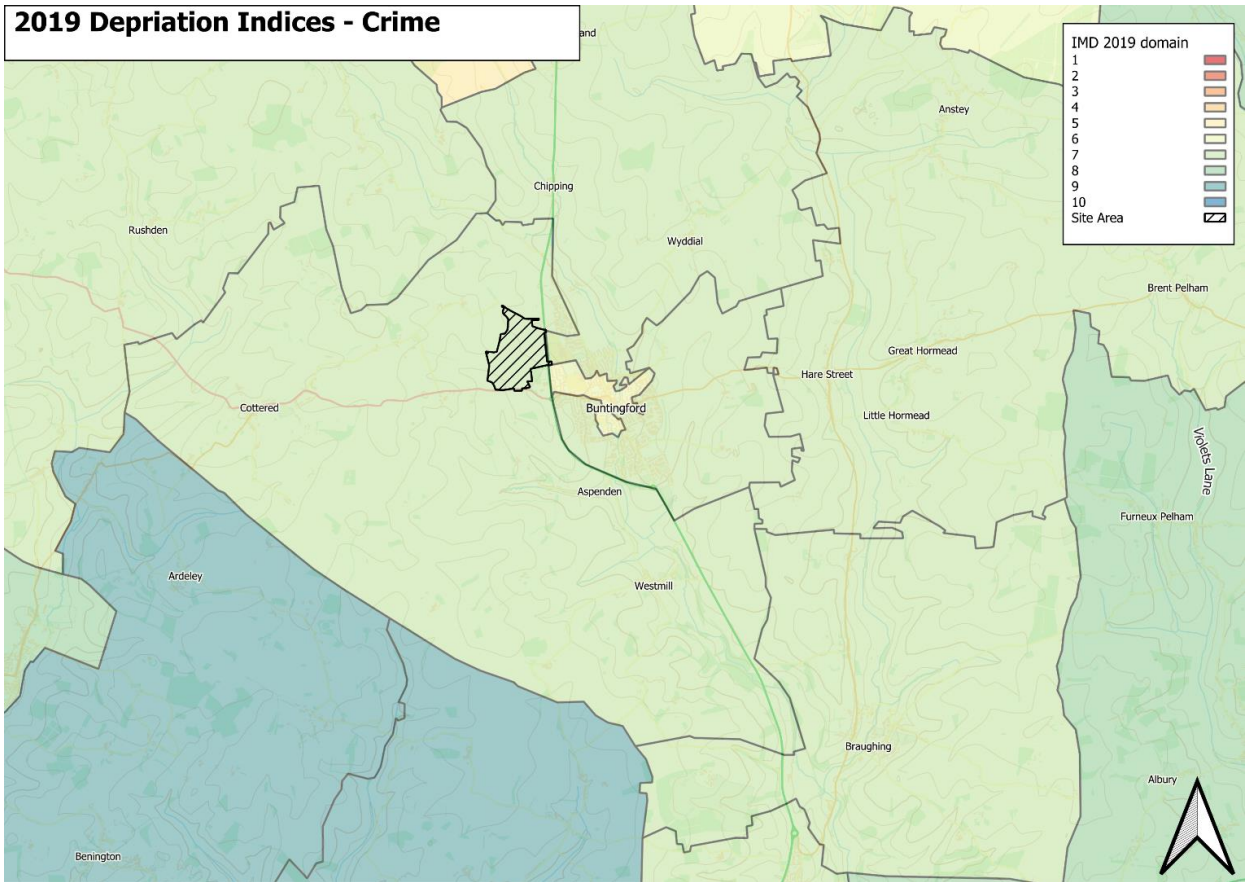


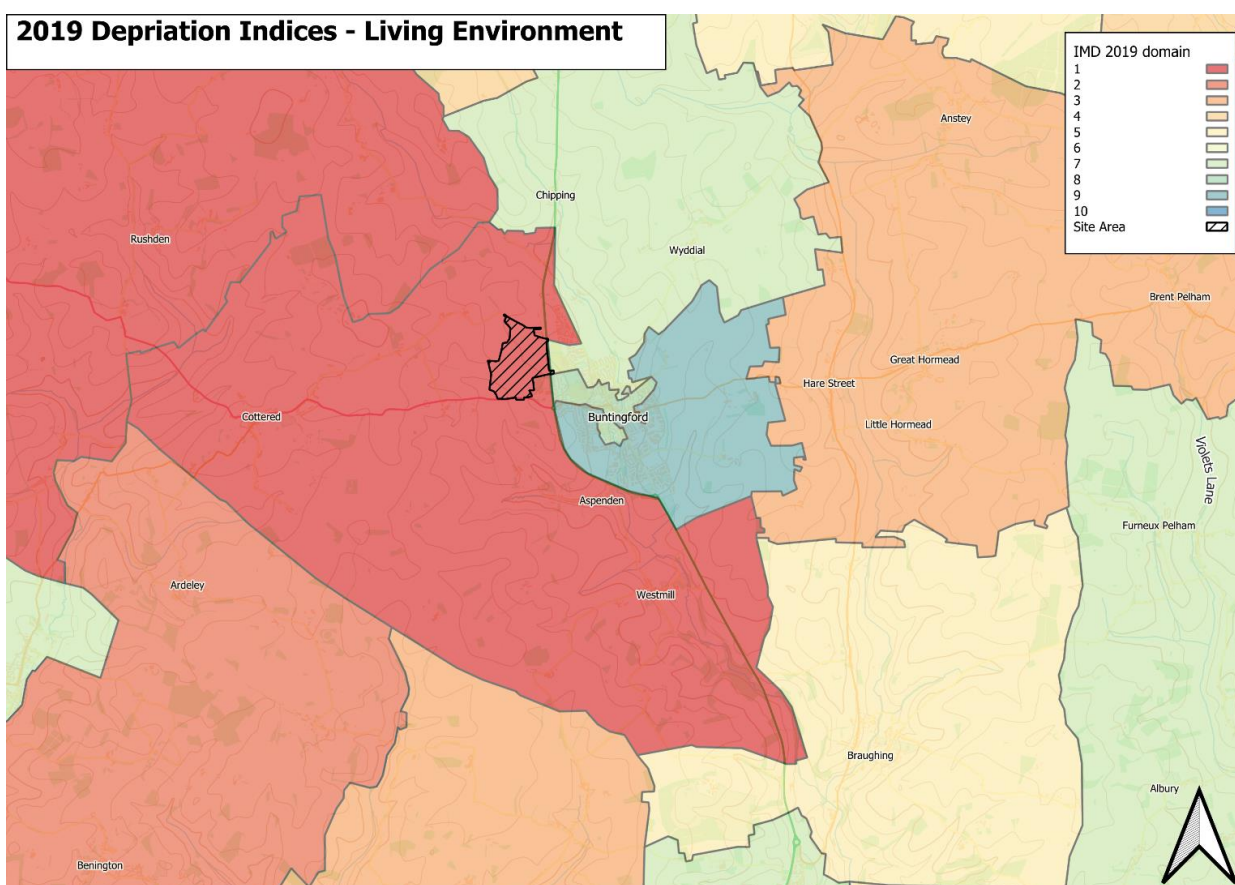
2019 Depriation Indices - Education



2019 Depriation Indices - Health







Decile	Decile description	Ranks
1	10% most deprived	1 to 3,284
2	10% to 20%	3,285 to 6,568
3	20% to 30%	6,569 to 9,853
4	30% to 40%	9,854 to 13,137
5	40% to 50%	13,138 to 16,422
6	50% to 60%	16,423 to 19,706
7	60% to 70%	19,707 to 22,990
8	70% to 80%	22,991 to 26,275
9	80% to 90%	26,276 to 29,559
10	10% least deprived	29,560 to 32,844



Appendix 4: Hertfordshire Council Email Regarding HIA

Buntingford HIA

 Charlie Thompson <Charlie.Thompson@hertfordshire.gov.uk>
To: Richard Cooke

 Reply  Reply All  Forward 
Tue 23/01/2024 12:00

This Message originated outside your organization.

Hi Richard,

Thank you for your phone call last week.

I have been provided with some information online which is available at: [The role of Public Health in planning | Hertfordshire County Council](#)

It may be more relevant to an application than an ES, but I will leave that to you to determine.

If you have any further questions please let me know.

Best wishes,



Charlie Thompson
Senior Planning Officer (East Herts, St Albans, and Hertsmere) |
Growth & Infrastructure Unit | Growth & Environment
Hertfordshire County Council, County Hall, Pegasus Lane, Hertford SG13 8DE.
Postal Point: CHN114
T: 01992 556407 (Internal: 26407) E: charlie.thompson@hertfordshire.gov.uk



Our vision is to create a cleaner, greener and healthier
Hertfordshire, guided by our RISE values

			
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