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# Leek Town Centre Regeneration Health Impact Assessment

## MAIN HIA REPORT

FINAL

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# 1 Introduction

1.1.1 This Health Impact Assessment is one of four which have been commissioned by RENEW North Staffordshire, North Staffordshire Regeneration Partnership, NHS North Staffordshire, Staffordshire Moorlands District Council, NHS Stoke on Trent and Stoke City Council.

1.1.2 It assesses the potential health and wellbeing impacts of the proposed Leek Town Centre regeneration and identifies opportunities for enhancing the positive health impacts and reducing any negative impacts.

1.1.3 The objectives of this HIA were to:

i. **Identify health and wellbeing impacts of the proposed scheme:**

Specifically, to identify and prioritise the potential direct and indirect health impacts on Leek residents and Leek Town Centre residents, users, workers and visitors during the implementation and the short and long term operation phases of the scheme. The key areas of focus were on the:

- effects on accessibility, transport and connectivity e.g. public transport, walking and cycling provisions particularly for those with no access to a car;
- changes to the quality of the townscape environment through an improved public realm, the better use of open space and the promotion of town centre activities to further encourage physical activity and create opportunities for social interactions and community cohesion;
- effects on the local economy through the provision of a range of additional shops and office/industrial facilities to improve access to affordable services and amenities and employment opportunities; and
- equity issues i.e. who is likely to benefit most from the regeneration, who may be adversely affected e.g. vulnerable groups, and how might the regeneration help reduce social exclusion.

ii. **Develop a set of recommendations for optimising the health and wellbeing impacts:**

Specifically, to develop a range of mitigation and enhancement measures to minimise the negative health impacts and maximise the positive health benefits of the scheme. Identified measures would need to be feasible, financially viable, deliverable and able to be incorporated into the implementation of the proposed scheme.

iii. **Identify possible monitoring and evaluation indicators:**

To identify, where possible, health and wellbeing indicators that could be used to monitor and evaluate the actual health and wellbeing impacts of the Leek Town Centre regeneration during the implementation and short and long term operation phases of the proposed scheme.

iv. **Prepare an innovation and learning research paper on the feasibility, advantages and disadvantages of using HIA to feed into a regeneration scheme once a preferred option has been chosen :**

The original brief wanted to evaluate the feasibility, advantages and disadvantages of using HIA at the very early stages in the masterplanning process. However, given that this was already covered in the Middleport and City Waterside HIAs, it was decided that evaluating the use of HIA when a preferred option for a regeneration scheme was developed would be the most useful learning to come out of this HIA.

1.1.4 The HIA draws on previous and current work on the Leek Town Centre regeneration scheme.

## 2 What is Health Impact Assessment?

### 2.1 Introduction

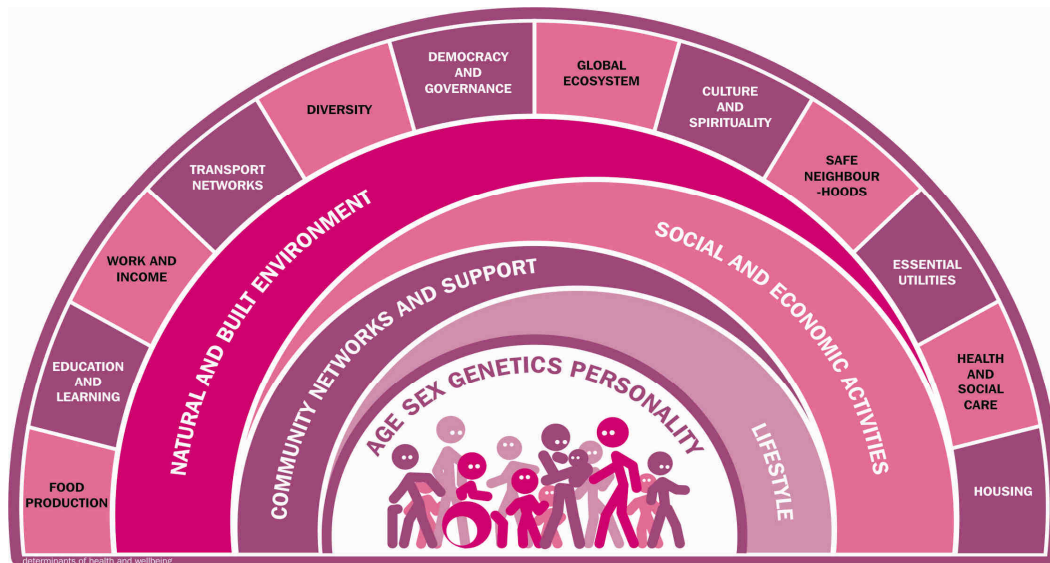
- 2.1.1 This chapter outlines what health impact assessment (HIA) is and the Institute of Occupational Medicine's ethos and approach to HIA.

### 2.2 Health Impact Assessment

- 2.2.1 The international Gothenburg consensus definition of HIA is: "A combination of procedures, methods and tools by which a policy, program or project may be judged as to its potential effects on the health of a population, and the distribution of those effects within the population."<sup>1</sup>
- 2.2.2 HIA is a key systematic approach to predicting the magnitude and significance of the potential health and wellbeing impacts, both positive and negative, of new plans and projects.
- 2.2.3 HIA uses a range of structured and evaluated sources of qualitative and quantitative evidence that includes public and other stakeholders' perceptions and experiences as well as public health, epidemiological, toxicological and medical knowledge.
- 2.2.4 HIA is particularly concerned with the distribution of effects within a population, as different groups are likely to be affected in different ways, and therefore looks at how health and social inequalities might be reduced or widened by a proposed plan or project.
- 2.2.5 The aim of HIA is to support and add value to the decision-making process by providing a systematic analysis of the potential impacts as well as recommending options, where appropriate, for enhancing the positive impacts, mitigating the negative ones and reducing health inequalities.
- 2.2.6 HIA uses both a biomedical and social definition of health, recognising that though illness and disease (mortality and morbidity) are useful ways of understanding and measuring health they need to be fitted within a broader understanding of health and wellbeing to be properly useful (See Figure 2.1).

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<sup>1</sup> WHO European Centre for Health Policy; Health impact assessment: main concepts and suggested approach; Gothenburg consensus paper; WHO Regional Office for Europe; 1999.



**Figure 2.1: The determinants of health and wellbeing<sup>2</sup>**

2.2.7 HIA therefore uses the following World Health Organization psycho-social definition of health in our work: Health is “the extent to which an individual or group is able to realise aspirations and satisfy needs, and to change or cope with the environment. Health is therefore a resource for everyday life, not the objective of living; it is a positive concept, emphasizing social and personal resources, as well as physical capacities.”<sup>3</sup>

2.2.8 This definition builds on and is complementary to the longer established World Health Organization definition that “Health is a state of complete physical, social and mental wellbeing and not simply the absence of disease or infirmity”<sup>4</sup>.

2.2.9 The general methodology is based on established good practice guidance on HIA developed by the Department of Health and the Devolved Regions.<sup>5 6 7 8</sup>

<sup>2</sup> Adapted by Salim Vohra and Dean Biddlecombe from Dahlgren G and Whitehead, Policies and strategies to promote social equity in health; Institute of Future Studies; Stockholm; 1991.

<sup>3</sup> World Health Organization; Health Promotion: A Discussion Document on the Concepts and Principles; WHO Regional Office for Europe; Copenhagen; 1984.

<sup>4</sup> World Health Organization; Preamble to the Constitution of the World Health Organization as adopted by the International Health Conference, New York, 19-22 June 1946, and entered into force on 7 April 1948.

<sup>5</sup> Health Development Agency, Introducing health impact assessment (HIA) informing the decision-making process, England; 2002.

<sup>6</sup> NHS Executive; Resources for HIA: Volumes 1 & 2; England; 2000.

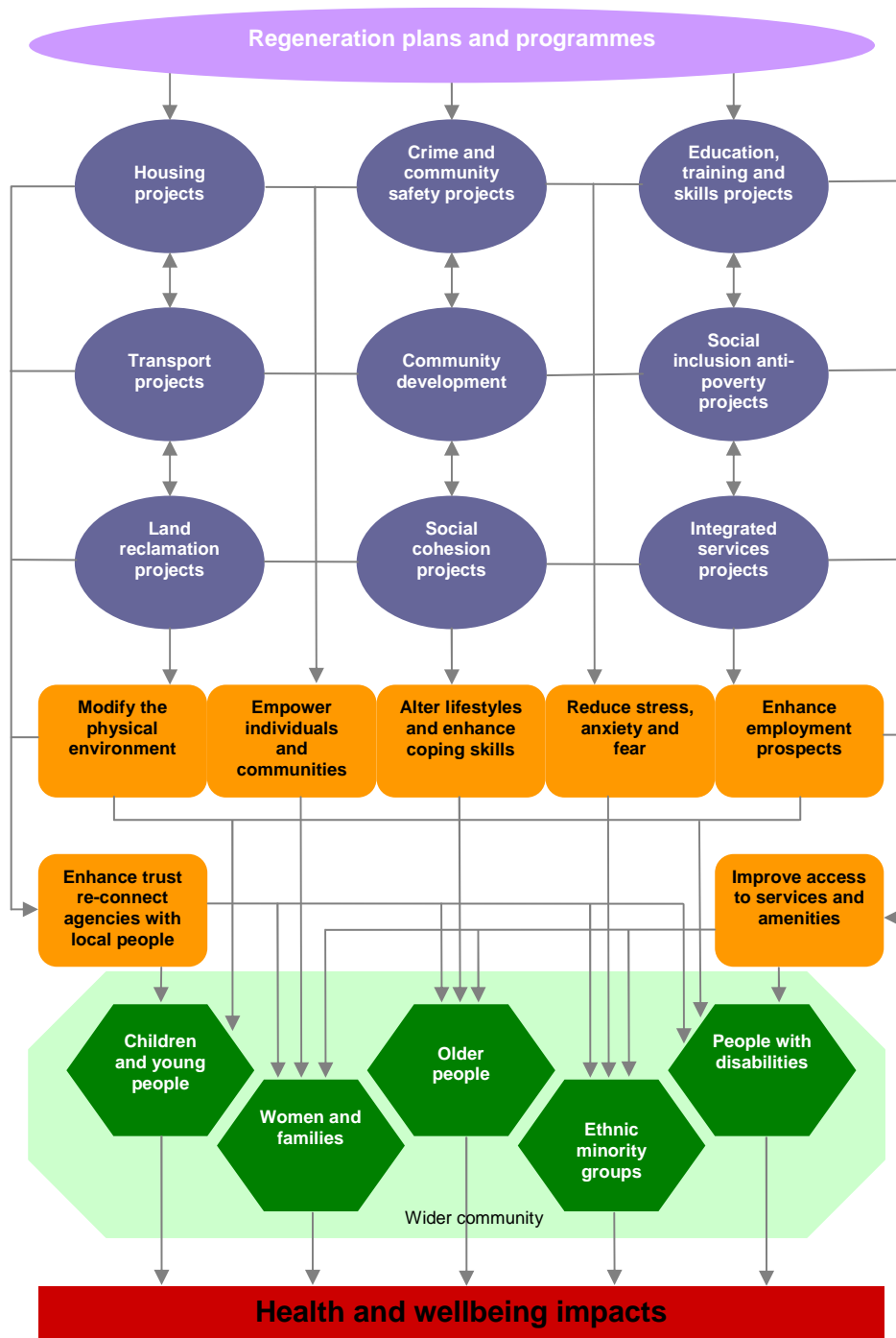
<sup>7</sup> Welsh Assembly Government and Health Challenge Wales; Improving Health and Reducing Inequalities: a practical guide to health impact assessment; 2004.

<sup>8</sup> Public Health Institute of Scotland; HIA: a guide for local authorities; Scottish HIA network; 2001.

## 2.3 A holistic approach to health impacts

2.3.1 This HIA takes a holistic or 'systems view' of potential health impacts and Figure 2.2 shows how this HIA conceptualises the general links between regeneration plans and programmes and health and wellbeing impacts.<sup>9</sup>

**Fig 2.2: A systems view of regeneration and health impacts (adapted from Hirschfield et al, 2001)**



<sup>9</sup> Hirschfield et al; Health impact assessment: measuring the effect of public policy on variation in health; University of Liverpool; 2001.

## 2.4 General steps in HIA

### Screening

- 2.4.1 This stage assesses the value of carrying out a HIA by examining the importance of a plan or project and the significance of any potential health impacts.

### Scoping

- 2.4.2 This stage sets the 'terms of reference' for the HIA i.e. the aspects to be considered, geographical scope, population groups that might need particular focus, what will be excluded from the HIA, how the HIA process will be managed and so on.

### Baseline assessment and community profile

- 2.4.3 This stage uses routine national and local datasets e.g. national census, local surveys, area profiles, and other demographic, social, economic, environmental and health information to develop a community profile with a strong focus on health and wellbeing issues, and identification of vulnerable groups, as a baseline from which to assess the potential positive and negative impacts on health and any health inequalities.

### Stakeholder consultation and involvement<sup>10</sup>

- 2.4.4 This stage applies to intermediate and comprehensive HIAs where no previous consultation on a development has taken place. It uses workshops, questionnaires, interviews, surveys and other methods of consultation and involvement to engage key stakeholders, in particular local people, in the identification and analysis of the potential health and wellbeing impacts, in the development of mitigation and enhancement measures; and in developing options for monitoring and evaluating the identified impacts.

### Evidence and analysis

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<sup>10</sup> **Rapid HIAs** are rapid desktop analyses that take days or weeks to carry out. **Intermediate HIAs** are detailed desktop analyses with some focussed stakeholder consultation or feedback, e.g. stakeholder workshops and interviews, that take weeks and months to carry out. **Comprehensive HIAs** are exhaustive analyses involving comprehensive consultation of stakeholders through representative surveys, workshops and interviews that take a year or more to carry out.

- 2.4.5 This stage involves the collation of key evidence and the systematic analysis of the potential impacts, their significance, the groups likely to be most affected and the strength of the evidence for these impacts through the use of tables, matrices and models.

#### Mitigation and enhancement measures

- 2.4.6 This stage involves the identification of a range of measures to minimise the potential negative health effects and maximise the positive health benefits identified in the previous stages.

#### Health impact statement

- 2.4.7 This stage produces the final HIA report or health statement.
- 2.4.8 It involves summarising the key conclusions, options and recommendations emerging from the assessment including identifying, where appropriate, monitoring indicators to ensure that health and wellbeing are maintained during the whole lifecycle of a project or plan.

#### Follow up

- 2.4.9 This stage involves the active follow up of the project or plan to monitor and/or ensure that mitigation and enhancement measures have been put in place after a project or plan is approved.
- 2.4.10 It can also involve: a) the development of a specific Health Management Plan or Health Action Plan b) presentation of the findings to key professional stakeholders; c) the development and implementation of a health impact communication plan to ensure that local communities fully understand the findings of the HIA and how and why it was carried out; and d) the evaluation of the effectiveness and value of the HIA process itself.

## 3 Methodology and Scope of this HIA

### 3.1 Introduction

- 3.1.1 The following sections outline the methodology applied to this HIA. It describes the scope of the HIA in terms of the study area and population; sources of information consulted; level of stakeholder consultation and involvement; and the assessment criteria and framework used.
- 3.1.2 The HIA used existing data and information from earlier assessment studies and consultations as well as routine data sources such as the Office for National Statistics, Staffordshire Moorlands District Council, NHS North Staffordshire, the West Midlands Public Health Observatory and the Audit Commission.
- 3.1.3 The assessment was an intermediate level in-depth HIA and the analysis was qualitative.
- 3.1.4 The HIA was undertaken between March 2010 and July 2010.

### 3.2 Screening

- 3.2.1 A screening undertaken by the HIA Project Steering Group identified the value of undertaking a HIA on the regeneration of Leek Town Centre in 2008.

### 3.3 Scoping

#### Project Steering Group

- 3.3.1 A HIA project steering group made up of a range of stakeholders provided advice, guidance and support during the 4 Pilot HIAs. A full list of the HIA Project Steering Group members is provided in Appendix A.

#### Study area

- 3.3.2 The two primary geographic zones of impact of this HIA, where any potential negative health and wellbeing impacts are most likely to be experienced were:
- The Leek Town Centre masterplan boundary.



- The areas outside of the town centre masterplan boundary within the four Leek wards: Leek North, South, East and West.

3.3.3 The secondary geographic zone of impact, where the potential positive health and wellbeing impacts are likely to spread to is the sub-region around Leek.

#### Study population

3.3.4 The key groups of people likely to be affected by the regeneration are:

- Leek Town Centre residents;
- Leek Residents;
- Sub region residents who use the town centre (town centre users);
- Leek Town Centre workers (workers);
- Tourists and other visitors (visitors).

3.3.5 In each of these groups the following key vulnerable groups were considered: older people; people with disabilities; women; children and young people; people from minority ethnic backgrounds and those on low incomes/or are unemployed.

#### Determinants of health considered

3.3.6 The key determinants of health and wellbeing that were considered were:

- acute and chronic diseases (including effects from air, water, soil and noise pollution)
- physical injury (including poisoning)
- mental health and wellbeing (including nuisance and annoyance effects)
- jobs and economy
- housing and shelter
- transport and connectivity
- education and learning
- crime and safety
- health and social care services
- shops and retail amenities
- social capital and community cohesion
- arts and leisure
- lifestyle and daily routines
- energy and waste

- land and spatial

### **3.4 Baseline assessment and community health profile**

- 3.4.1 The baseline assessment and community profile was developed using ward level data (Leek North, South, East and West) collected by the Communities Services, Staffordshire Moorlands District Council and the Office for National Statistics.
- 3.4.2 The baseline studies carried out by BE group were also used to inform the profile.

### **3.5 Stakeholder Consultation and involvement**

- 3.5.1 Discussions were held with Staffordshire Moorlands District Council, NHS North Staffordshire and BE Group.
- 3.5.2 Given the existing and wide ranging public consultations carried out by BE group, no HIA specific community consultation or involvement was undertaken as there was likely to be little added value given the extensive earlier consultations and the likelihood of 'consultation fatigue' among local people.

### **3.6 Evidence and analysis**

- 3.6.1 The HIA used past HIA and evidence reviews on the health impacts of town centre regeneration and regeneration in general to inform the analysis of the likely positive and negative health and wellbeing impacts of the proposed regeneration. Appendix B outlines the approach used to collate the evidence.
- 3.6.2 This HIA was qualitative and used a matrix table to identify the potential positive and negative health and wellbeing impacts (See Appendix C). The identified impacts were then classified using the levels of impact defined in Table 3.1.
- 3.6.3 The potential impacts were compared to a 'Do Nothing' option for the implementation, short term operation and long term operation phases of the proposed regeneration.

**Table 3.1: Definition of the levels of potential impact**

Significance Level	Criteria
Major +++/-- (positive or negative)	<p>Health effects are categorised as a major positive if they prevent deaths/prolong lives, reduce/prevent the occurrence of acute or chronic diseases or significantly enhance mental wellbeing would be a major positive.</p> <p>Health effects are categorised as a major negative if they could lead directly to deaths, acute or chronic diseases or mental ill health.</p> <p>The exposures tend to be of high intensity and/or long duration and/or over a wide geographical area and/or likely to affect a large number of people (e.g. over 500) and/or sensitive groups e.g. children/older people.</p> <p>They can affect either or both physical and mental health and either directly or through the wider determinants of health and wellbeing.</p> <p>They can be temporary or permanent in nature.</p> <p>These effects can be important local, district, regional and national considerations.</p> <p>Mitigation measures and detailed design work can reduce the level of negative effect though residual effects are likely to remain.</p>
Moderate ++/-- (positive or negative)	<p>Health effects are categorised as a moderate positive if they enhance mental wellbeing significantly and/or reduce exacerbations to existing illness and reduce the occurrence of acute or chronic diseases.</p> <p>Health effects are categorised as a moderate negative if the effects are long term nuisance impacts, such smell and noise, or may lead to exacerbations of existing illness. The negative impacts may be nuisance/quality of life impacts which may affect physical and mental health either directly or through the wider determinants of health.</p> <p>The exposures tend to be of moderate intensity and/or over a relatively localised area and/or of intermittent duration and/or likely to affect a moderate-large number of people e.g. between 100-500 or so and/or sensitive groups.</p> <p>The cumulative effect of a set of moderate effects can lead to a major effect.</p> <p>These effects can be important local, district and regional considerations.</p> <p>Mitigation measures and detailed design work can reduce and in some/many cases remove the negative and enhance the positive effects though residual effects are likely to remain.</p>

Significance Level	Criteria
Minor/Mild +/- (positive or negative)	<p>Health effects are categorised as minor/mild whether, positive or negative, if they are generally lower level quality of life or wellbeing impacts.</p> <p>Increases or reductions in noise, odour, visual amenity, etc are examples of such effects.</p> <p>The exposures tend to be of low intensity and/or short/intermittent duration and/or over a small area and/or affect a small number of people e.g. less than 100 or so.</p> <p>They can be permanent or temporary in nature.</p> <p>These effects can be important local considerations.</p> <p>Mitigation measures and detailed design work can reduce the negative and enhance the positive effects such that there are only some residual effects remaining.</p>
Neutral/No Effect ~	No health effect or effects within the bounds of normal/accepted variation.

#### 3.6.4 For each potential health impact ten key issues were considered

- Which population groups are affected and in what way?
- Is the effect reversible or irreversible?
- Does the effect occur over the short, medium or long term?
- Is the effect permanent or temporary?
- Does it increase or decrease with time?
- Is it of local, regional or national importance?
- Is it beneficial, neutral or adverse?
- Are health standards or environmental objectives threatened?
- Are mitigating measures available and is it reasonable to require these?
- Are the effects direct, indirect and or cumulative?

### 3.7 Recommendations

3.7.1 A set of recommendations for mitigation and enhancement were developed for the implementation and short and long term operation of the scheme.

### 3.8 Follow up

3.8.1 Health and wellbeing indicators that could be used to monitor and evaluate the scheme were identified.

### **3.9 Limitations of this HIA**

- 3.9.1 The main limitation of this HIA was the lack of detailed data on the demographic background of current and future users of the town centre, how users currently use the town centre and what users needs are from the town centre. This has made it difficult to make accurate predictions on who is likely to benefit most or least in terms of health and wellbeing.

## 4 Background to the Leek Town Centre Regeneration Scheme

### 4.1 Introduction

4.1.1 This chapter provides background details of the Leek Town Centre regeneration scheme and the 15 opportunity sites and interventions proposed as well as the main transport and public realm interventions (see Figures 4.1-4.3 and Table 4.1).

### 4.2 Background to the proposed scheme <sup>11</sup>

4.2.1 Leek is the main town in the Staffordshire Moorlands District with a population of approximately 20,000. It is situated in north east Staffordshire, close to the south west boundary of the Peak District National Park. It lies approximately 10 miles north east of Stoke-on-Trent, the closest major conurbation.

4.2.2 Leek is a market town which has developed into an administrative and primary shopping and service centre that serves a significant rural hinterland. As a textiles manufacturing centre since the industrial revolution, mill buildings still form a significant part of Leek Town Centre's townscape. Leek is also a nationally recognised centre for antiques and fine arts.

4.2.3 Staffordshire Moorlands District Council and Advantage West Midlands have commissioned BE Group in conjunction with Taylor Young and AECOM to produce a masterplan for Leek Town Centre. Figure 4.1 shows the 15 opportunity sites in the town centre.

### 4.3 Aim of the proposal

4.3.1 The vision of the proposal is that:<sup>1112</sup>

*Leek will be an increasingly important civic and service centre for its population and the District and will further strengthen its role as the principal town in the*

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<sup>11</sup> Leek Baseline Report, Staffordshire Moorland District Council, September 2009

<sup>12</sup> Text bolded by IOM for emphasis

*District. The **quantity and quality of the retail offer** in the town centre will have **improved** further, and the **diversity of employment opportunities, facilities and services it offers increased**. It will have **enhanced its role as a tourist attraction**, building on its special character, heritage and built environment assets. Britannia Building Society and other **major employers in the town will grow**, but will be **balanced by new businesses on improved existing and new employment sites**. **Underused and poorer quality areas**, such as Cornhill and the Churnet Works, **will have been regenerated** providing new development opportunities and its mill buildings will have been conserved with new uses. The bus station will be served by a **reliable public transport system** whilst **access and car parking in the town centre will be improved** with the provision of a new multi storey facility.*

4.3.2 Key strategic objectives therefore proposed for the area include:

- Addressing public transport infrastructure improvements
- Improving pedestrian and cycle connections
- Introducing a greater diversity of uses
- Creating green infrastructure in the Town Centre, with improved connections to Brough Park
- Public realm improvements to enhance linkages and smooth transitions between residential and Town Centre areas
- Determining the location of the proposed new Arts/Heritage Centre

#### 4.4 Details of the proposal<sup>13</sup>

4.2.1 The baseline studies produced during the first stage of the masterplanning process identified 15 opportunity sites which were considered to have the potential, through refurbishments or new build, to deliver new facilities and amenities that could enhance the Town Centre (See Figure 4.1).

4.2.2 The second stage of the masterplanning process developed design options of the possible uses of the sites as identified through consultations with the public, local businesses, land and property owners and other key stakeholders. These options considered both the possible minimum and maximum interventions feasible for each of the 15 opportunity sites.

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<sup>13</sup> BE Group, Draft Leek Town Centre Masterplan Summary Report, December 2009

- 4.2.3 A draft Town Centre Plan showing the preferred intervention option for each of the opportunity sites was developed and presented at a series of public workshops and consultation events.
- 4.2.4 This HIA has therefore focused on the 15 opportunity sites and the potential impacts of the minimum and maximum intervention options and the preferred options.
- 4.2.5 Table 4.1 provides details of the minimum and maximum intervention options and the preferred options (Draft Masterplan Decision).



Figure 4.1 Leek Town Centre Masterplan Boundary with 15 opportunity sites [Source: BE Group Consultation Exhibition Material, November 2009]



Table 4.1: Minimum and maximum intervention options and the preferred decision for each of the 15 opportunity sites [Source: BE Group]

No	Site Name	Minimum Intervention Use	Minimum Intervention Description	Maximum Intervention Use	Maximum Intervention Description	Draft Masterplan Decision
1	California Mill Area	Education	- 0.46 ha of woodland area not included	Arts and Education	- 32,000 sqft of Arts Centre and 27,000 sqft of Education uses. - 0.46 ha of woodland area not included	Max
2	Former British Trimmings Site	Residential (Extra Care)	- 50 Unit Extra Care Home. - 0.2 ha of woodland area retained.	Mixed Residential (Extra Care /Traditional)	- 45 Unit Extra Care Home (3 storey) and 18 traditional houses (mixture of 2,3 and 4 bed @ density of 35 houses/ ha) - 0.2 ha of woodland area retained.	Max
3	Eaton House and Surrounding Areas	Retail	Large format foodstore.	Employment (Industrial/Office) and Residential	-35,000 sqft of offices, 11,000 sqft of industrial uses and 60,000 sqft of houses (mixture of 2, 3 and 4 bed) - approx. 55 houses @ density of 35 houses/ ha.	Max
4	Portland Street Mill Area	Employment (Industrial/Office)- Minimum Refurbishment	- Southern part of the existing building to be refurbished with open courtyard.	Employment (Industrial/Office) -Refurbishment/ New Build	- 32,000 sqft of refurbishment and 17,500 of new build.	Max
5	London Mill/York Mill Area	Hotel and Employment (Offices/ Industrial)	- 22,500 sqft hotel (building west of Well Street facing Ashbourne Road) and 65,500 sqft of office/industrial uses	Residential and Employment (Offices/ Industrial)	- 41,500 sqft of apartments (Both former mill buildings facing Ashbourne Road) and 46,500 sqft of office/industrial uses.	Min

No	Site Name	Minimum Intervention Use	Minimum Intervention Description	Maximum Intervention Use	Maximum Intervention Description	Draft Masterplan Decision
6	War Memorial Area including The Talbot and White Lion	Leisure and Residential – Refurbishment	7500 sqft of leisure uses and 18,000 sqft of apartments/town houses.  - 15 apartments on existing Talbot Hotel site and 8 town houses along Ashbourne Road. - Leisure uses on ground floor of The Talbot.	As Option 1 plus Additional Retail	- 3,200 sqft of retail uses, 5,000 sqft of leisure uses and 18,000 sqft of apartments/town houses. - Number of apartments and houses as Option 1. -Leisure uses on ground floor of The Talbot and the White Lion sites.	Max
7	Smithfield Centre and Bus Station	Retail, Bus Station and Car Parking - Refurbishment/ Extension	Extension around Haywood Street/ Leonard Street Junction	Retail, Bus Station and Leisure/Arts Centre – New Build	52,000 sqft of leisure/arts centre, 3000 sqft new bus station and 20,000 sqft of retail.	Max
8	Compton Mill Area	New Offices and Residential with some Refurbished Retail	- - Refurbishment includes 13,000 sqft of retail, 34,500 sqft of offices and 38,500 sqft of apartments. - New build includes 15,000 of offices and 34,000 sqft of town houses.	New Retail and Car Parking/ Refurbished Residential and Offices	- New build includes 55,000 sqft retail unit. - refurbishment includes building frontage along London Street and Brook Street, provides 17,000 sqft of retail, 25,000 sqft of apartments and 18,000 sqft of offices	Min
9	Pickwood Road Area	Existing Retail Refurbished and Extended and Car Parking	21,000 sqft of new retail and 10,000 sqft of offices - Existing large format retail retained and refurbished.	Leisure/Arts Centre, New Build Retail, Public Square, Offices and Extra Car Parking	50,000 sqft of leisure/arts centre, 30,000 sqft of retail, 15,000 sqft new public square, 10,000 sqft of offices and 105,000 sqft of car parking.	Max
10	Former Broad Street Garage Site	Retail and Residential	5000 sqft of retail and 10,000 sqft of apartments above.	Car Parking	-3 decks	Min



No	Site Name	Minimum Intervention Use	Minimum Intervention Description	Maximum Intervention Use	Maximum Intervention Description	Draft Masterplan Decision
11	Land to rear of St Edward Street (Former Kwik-Fit Site)	Retail and Residential	2,500 sqft of retail with 5000 sqft of apartments above, facing High Street.	Arts Centre	Proposals as previous SMDC feasibility study.	Max
12	High Street Car Park Area	Car Parking	2 decks	Leisure/Arts Centre	- New build leisure uses/arts centre.	Max
13	Market Street West Car Park Area	Arts Centre	Proposals as previous feasibility study.	Retail (In connection with Butter Market and Trestle Market) and Public Square	Potential extended site to the west to make connection with Trestle Market.	Max
14	Existing Foxlowe Site	Arts Centre	Parking on 2 decks.	Leisure and Offices	All accommodated in existing building. - 6500 sqft of leisure on ground floor with 6000 sqft of offices above.	Max
15	Premier Garage	Retail and Offices	- 5000 sqft of retail with 19,000 sqft of offices. - Private parking to rear.	Residential	21,000 sqft of traditional houses (mixture of 2, 3 and 4 bed) and 8000 sqft of apartments.	Min

Figure 4.2 Leek Town Centre key transport interventions [Source: BE Group Consultation Exhibition Material, November 2009]

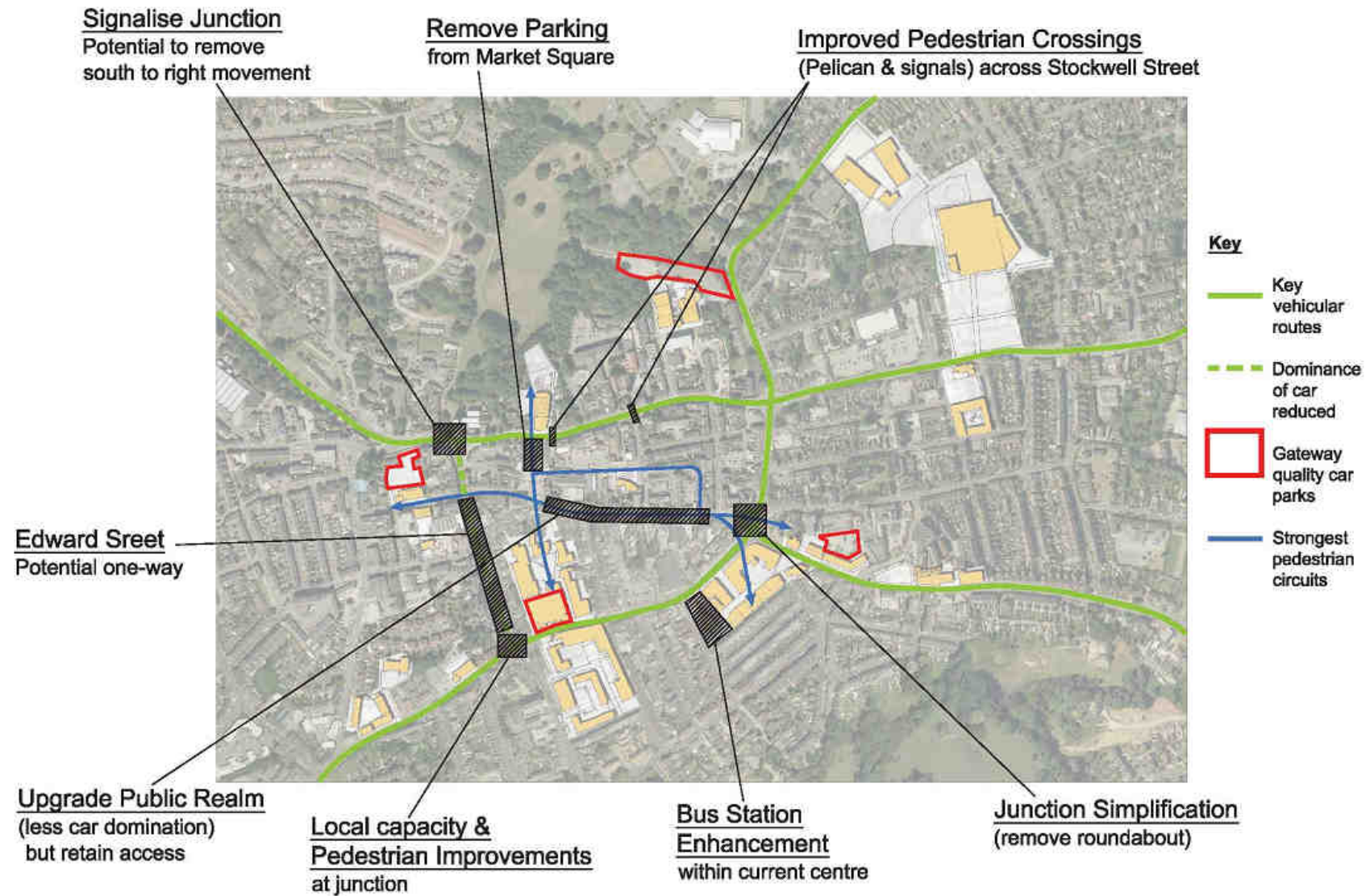
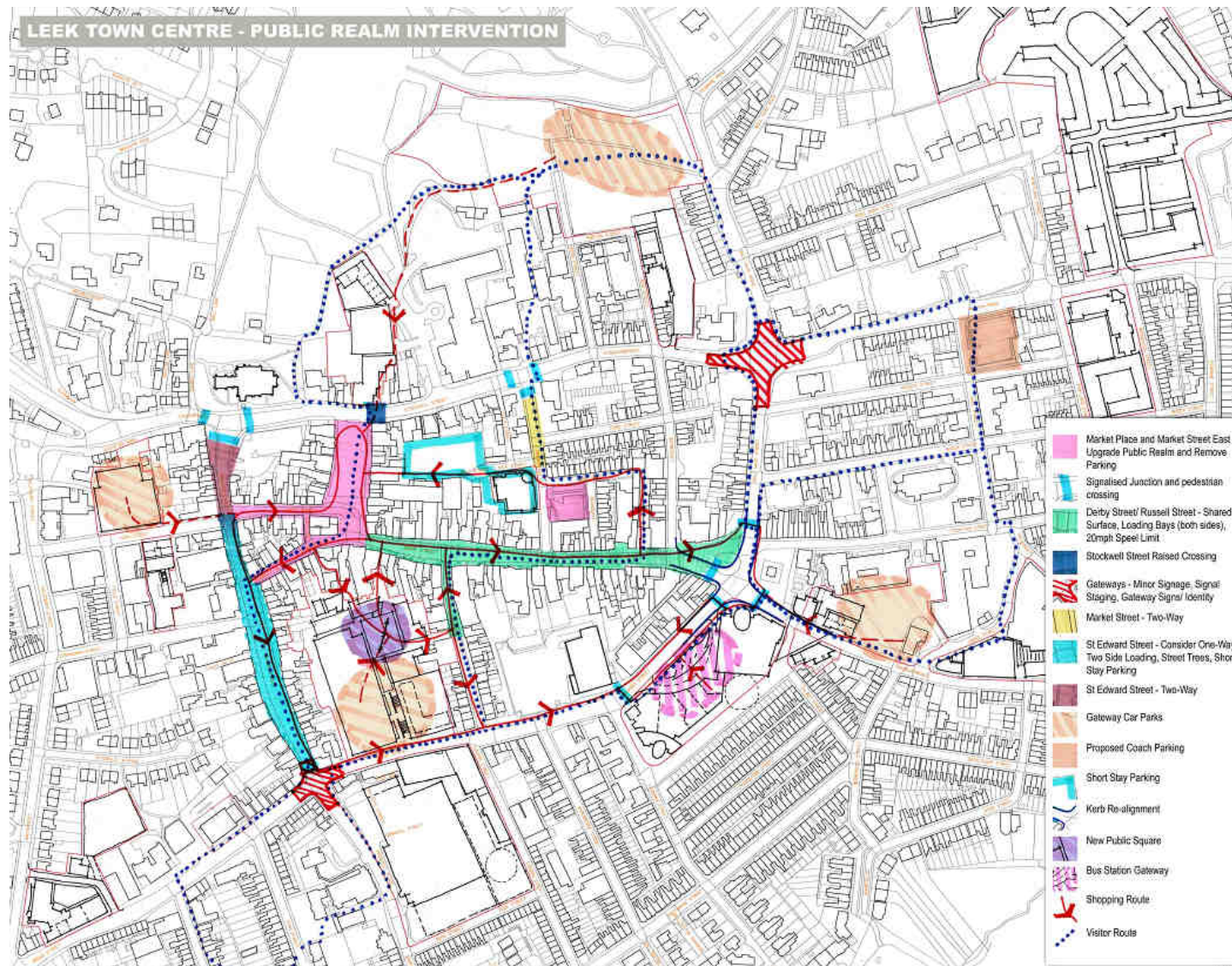




Figure 4.3 Leek Town Centre key transport interventions [Source: BE Group Consultation Exhibition Material, November 2009]



## 5 Policies Relevant to the Leek Town Centre Scheme and Health

### 5.1 Introduction

5.1.1 This chapter summarises the key policy context in relation to the proposed Leek Town Centre Regeneration Scheme.

### 5.2 National policy

#### 5.2.1 Planning Policy Statement 1: Sustainable Development

PPS 1 states that plans and proposals should:

- ensure that the impact of development on the social fabric of communities is considered and taken into account;
- seek to reduce social inequalities;
- address accessibility (both in terms of location and physical access) for all members of the community to jobs, health, housing, education, shops, leisure and community facilities;
- take into account the needs of all the community, including particular requirements relating to age, sex, ethnic background, religion, disability or income;
- deliver safe, healthy and attractive places to live; and,
- support the promotion of health and well being by making provision for physical activity.

#### 5.2.2 Planning Policy Statement 4: Planning for Sustainable Economic Growth<sup>14</sup>

PPS 4 states that planning bodies and authorities (local and regional) should set flexible policies for their centres which are able to respond to changing economic

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<sup>14</sup> Planning Policy Statements (PPSs) set out the Government's national policies on different aspects of land use planning in England. The policies set out in PPSs need to be taken into account by regional planning bodies in the preparation of regional spatial strategies and by local planning authorities in the preparation of local development documents. They can be a material (important) consideration in individual planning applications.

circumstances and encourage, where appropriate, high density development accessible by public transport, walking and cycling.

It also encourages planning bodies and authorities to ensure that any extensions to centres are carefully integrated with existing centres in terms of design e.g. including the need to allow easy pedestrian access and also strengthening the centres by seeking to focus on providing a wider range of services, promoting the diversification of uses and improving the environment.

It also highlights the need to promote centre environments that provide consumer choice by: a) supporting a diverse range of uses which appeal to a wide range of age and social groups including leisure developments and complementary evening and night time uses but also takes into account the impacts of these on the centre, antisocial behaviour, crime and safety issues; and b) recognising that smaller shops can significantly enhance the character and vibrancy of a centre.

Regarding centres in rural areas, local planning authorities should support the conversion and re-use of appropriately located buildings for economic development and seek to remedy, identified deficiencies in local shopping and other facilities to serve people's day to day needs and help address social exclusion.

Opportunities should be taken to support sustainable rural tourism and leisure developments that benefit rural businesses and communities which utilise and enrich the character of the countryside, its towns, villages and other features.

Accessibility and parking standards should take into account amongst other things the need to:

- promote sustainable transport choices e.g. cycling and walking
- reduce carbon emissions and work towards the attainment of air quality objectives
- tackle congestion and public transport accessibility
- provide appropriate disabled access
- cater for different business types and sizes
- the differing needs of rural and urban areas



### 5.2.3 Planning Policy Statement 7: Sustainable Development in Rural Areas

PPS 7 states that planning authorities should support a wide range of economic activity in rural areas and identify suitable sites for future economic development, particularly in those rural areas where there is a need for employment creation and economic regeneration.

People who live or work in rural areas should have reasonable access to a range of services and facilities. Local planning authorities should facilitate and plan for accessible new services and facilities to meet the needs of the whole community. Where possible, new development should be supported through improvements to public transport, walking and cycling facilities; and support mixed and multi-purpose uses that maintain community vitality; and the provision of small-scale, local facilities to meet community needs particularly where they would benefit those rural residents who would find it difficult to use more distant service centres.

Many country towns and villages are of considerable historic and architectural value, or make an important contribution to local countryside character. Therefore planning authorities should ensure that development respects and, where possible, enhances these particular qualities. It should also contribute to a sense of local identity and regional diversity and be of an appropriate design and scale for its location and should take a positive approach to innovative, high-quality contemporary designs that are sensitive to their immediate setting and help to make country towns and villages better places for people to live and work. It also identifies reductions in greenhouse gases, particularly carbon dioxide emissions, as the single most important aspect in the development of transport options at the regional level.

## 5.3 Regional policy

### 5.3.1 West Midlands Spatial Strategy (Government Office for West Midlands (GOWM), 2008)

Policy RR2 on Rural Regeneration Zone states that priority should be given to improvements in traffic management and public transport where necessary to support economic and social regeneration and to improve accessibility.

Policy RR3 on Market Towns states that market towns have a key role in helping to regenerate rural areas as a focus for sustainable economic and housing development

and by providing services and a range of facilities to their rural hinterlands. In fulfilling these roles, it is important that the distinctiveness and character of each individual town is maintained and where possible enhanced. In developing market towns, the following amongst other things, should be taken into account:

- An existing focus for and reasonable balance between employment opportunities, housing provision, community facilities and services
- Existing or potential for a planned and co-ordinated local transport network
- Develop shopping and other key services and facilities within the town centre where suitable sites exist; where no such services are available.

## **5.4 Local policy**

### **5.4.1 Staffordshire Moorlands Priority Outcomes**

Five Priority Outcomes have emerged from the Community Strategy. These are:

- Improved community safety
- Improved health (and reduced health inequalities)
- A protected environment
- A strong economy
- Decent and affordable housing

### **5.4.2 Staffordshire Moorlands Community Strategy 2007 – 2020**

The vision of the community strategy is that “...by 2020 Staffordshire Moorlands will be recognised as a vital part of a regenerated North Staffordshire sub region. All communities will be enjoying an excellent quality of life, including access to affordable housing and excellent public services. Our vibrant ‘market’ towns will be home to a range of successful retail, visitor and knowledge based businesses. We will have a highly skilled and entrepreneurial workforce. Our natural environment will be protected and our carbon emissions reduced.

Two key themes of the strategy are:

- Outcome 2: to support the quality of community life so that communities will be safer and residents will feel a strong sense of community and the ability to influence those things that affect community life.

- Outcome 4: to enhance conditions for business growth and sustainability. This is to ensure that Staffordshire Moorlands plays a unique part in the development of a successful sub regional economy focusing on the key roles of their towns, encouraging more business start-ups and growth and achieving higher levels of income and skills for its population.

The strategy also noted in Key Action 4 that the skills of employees in the district are the lowest in Staffordshire and therefore education providers need to tailor their provision to the needs of current and emerging businesses in order to grow the value of businesses through the increased skills of employees.

#### 5.4.3 North Staffordshire Local Transport Plan (NSLTP) 2006 – 2011

The foundation of the LTP is to improve accessibility for everybody in North Staffordshire whether residents, commuters or visitors and whatever their journey purpose. In the context of the proposed Leek Town Centre regeneration, Chapter 5 on Supporting Regeneration states that transport provision is essential for a successful economy providing good access to jobs and services and contributing to the thriving of local communities.

Objective R2 within the LTP states that the creation of high quality public realm together with attractive access points is important to the overall appearance and attractiveness of the centres. It goes on to say that this improves the vitality and vibrancy of centres and the potential for social and economic exchange. Investment in transport and highway infrastructure helps in this process.

Objective R3 highlights the benefits that can be gained and enjoyed by communities now and in the future by joining up and improving integration between social, economic and environmental components through implementing sustainable development.

Objective R4 identifies that the movement of people and goods is fundamental to an efficient local economy with the availability of well maintained roads being perceived as a key factor in the location of new businesses.

#### 5.4.4 Annual Report of the Director of Public Health (2007/08), NHS North Staffordshire

The report identifies the health issues of significance for North Staffordshire (Newcastle-under-Lyme and Staffordshire Moorlands). The major health issues are long-term conditions such as cardiovascular disease, heart disease, diabetes, kidney disease, and stroke.

Proposals have been developed through the 'Staying Healthy' component of the Primary Care Trust strategy to advance healthy life expectancy and improve the quality of life of the people of North Staffordshire. Among these proposals is the plan to make a huge investment in controlling adult and childhood obesity which are among the growing problems for people in North Staffordshire.

## **5.5 Policy analysis**

5.5.1 Overall, the Leek Town Centre proposal is strongly aligned with national, regional and local policies in relation to:

- Creating sustainable employment opportunities
- Improving the diversity of shops and services
- Improving access to jobs and services
- Use of Leek Town Centre by residents in and around Leek, workers and tourists.

5.5.2 The Leek Town Centre proposal is one important part of the wider agenda to creating a more sustainable and economically vibrant Staffordshire Moorlands.

## 6 Baseline and Community Profile

### 6.1 Introduction

6.1.1 This chapter provides a rapid health and wellbeing focused baseline and community profile of Leek. It is from this baseline understanding that the predictions of the potential health and wellbeing impacts of the proposed regeneration have been considered.

6.1.2 The profile focuses on the four wards Leek North, South, East and West as this area encompasses the people likely to be affected the most, by the proposed regeneration.

### 6.2 Staffordshire Moorlands health and wellbeing profile<sup>15</sup>

6.2.1 The health of the people of Staffordshire Moorlands is generally similar to the England average.

6.2.2 In terms of the 'Our Communities' domain deprivation, children in poverty, statutory homelessness and violent crime are significantly lower than the England average.

6.2.3 In terms of the 'Children's and Young People's Health' domain, breast feeding initiation and obesity in children are significantly worse than the England average. Levels of smoking in pregnancy and physical activity in children are not significantly different from the England average while children's tooth decay and teenage pregnancy rates are significantly lower than the England average. And, GCSE achievement (5 A\* - C) is significantly higher than the England average.

6.2.4 In terms of the 'Adult's Health and Lifestyle' domain, the proportion of obese adults and those with unhealthy eating habits are significantly higher than the England average though the proportion of adults who smoke is significantly lower than the England average. Physical activity in adults and levels of binge drinking are not significantly different from the England average.

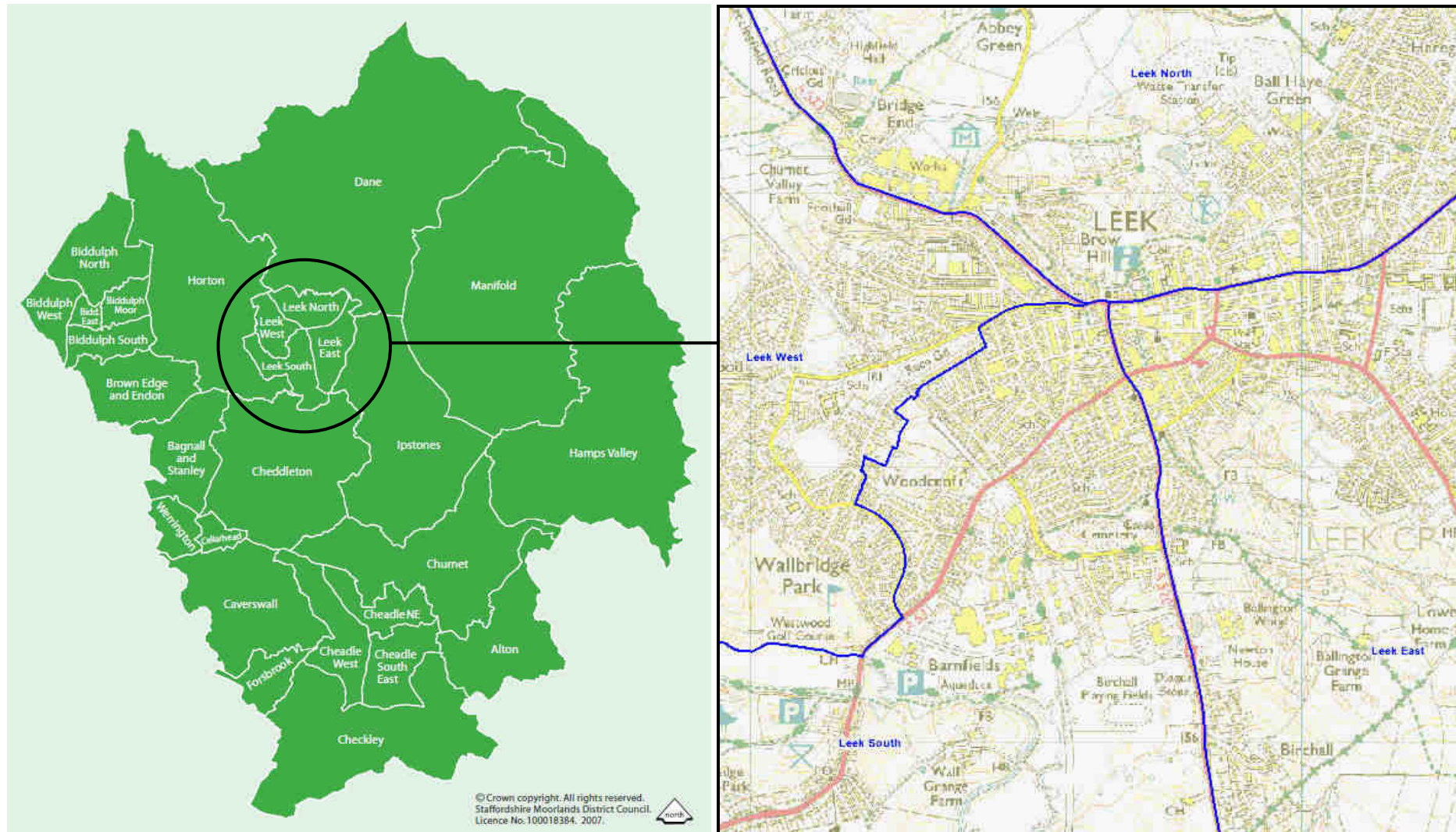
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<sup>15</sup> Association of Public Health Observatories: Staffordshire Moorlands Health Profile, 2009

- 6.2.5 In terms of the 'Disease and Poor Health' domain, the number of people on incapacity benefits because of mental illness is significantly higher than the England average. This is a possible indication that the prevalence of mental illness and poor mental wellbeing is higher in Staffordshire Moorlands. The number of people diagnosed with diabetes is also significantly higher than the England average. Hip fracture rates in the over 65s and the proportion of over 65s 'not in good health' are not significantly different from the England averages. Hospital stays for alcohol related harm and drug misuse is significantly lower than the England average.
- 6.2.6 In terms of the 'Life Expectancy and Causes of Death' domain, life expectancy for men and women are not statistically different from the England averages. However, men and women from the least deprived areas can expect to live almost 8 and 4 years longer, respectively, than men and women in the most deprived areas. Infant deaths and deaths from smoking are significantly lower than the England average. Early deaths from cancers and heart disease are not significantly different from the England averages. Road injuries and deaths are lower than the England averages.
- 6.2.7 Health and wellbeing priorities for Staffordshire Moorlands are to encourage children and adults to maintain a healthy weight and increase physical activity and healthy eating.



**Figure 6.1: Leek Wards North, South, East and West in relation to Staffordshire Moorlands and Leek Town Centre**  
 [Source: Staffordshire Moorlands and Office for National Statistics]



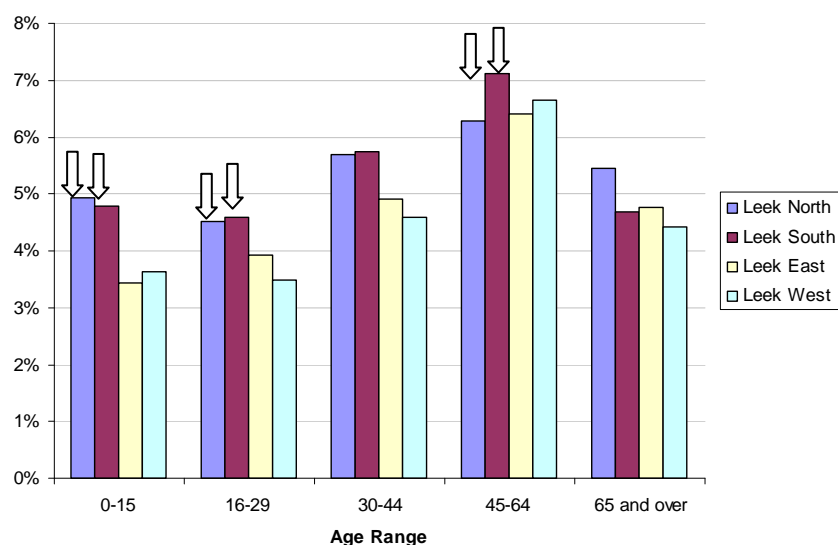
### 6.3 Population characteristics

6.3.1 There are approximately 20,000 residents in Leek compared to 95,000 in Staffordshire Moorlands as a whole (over 20% of the population of Staffordshire Moorlands live in Leek). In terms of the four wards, Leek North and South have approximately 5,400 residents each while Leek East and West have approximately 4,700 each.

6.3.2 The highest proportion of Leek residents, 26%, are between 45-64 years of age. This is similar to Staffordshire Moorlands and England as a whole (26% and 24%). The 45-64 age range also makes up the highest proportion of residents in each of the four wards.

6.3.3 Leek North and South have a higher proportion of under 29 year olds than Leek East and West.

**Figure 6.2 Proportion of Leek residents by age and ward [Source: ONS].**



### 6.4 Ethnic profile

6.4.1 Approximately 98% of Leek residents are from a White British background and 2% are from Black and Minority Ethnic backgrounds. This compares to 99% of Staffordshire Moorlands being from a White British background and 0.7% being from Black and Minority Ethnic backgrounds respectively. This contrasts with England as a whole where 87% of residents are from a White British background



and 8% are from Black and Minority Ethnic backgrounds (4% are from White Irish or Other backgrounds).

## **6.5 Religion**

6.5.1 Approximately 80% of Leek residents are Christians compared to 83% of Staffordshire Moorlands and 72% of England; 8% belong to other religious groups (Buddhist, Hindu, Jewish, Muslim, Sikh, Other) compared to 7% of Staffordshire Moorlands and 13% of England; and 12 % belong to no religion compared to 10% of Staffordshire Moorlands and 15% of England as a whole.

## **6.6 Family Structure**

6.6.1 Marital status and household composition provide a good indication of the family structure and the likely personal and social care networks that residents of an area have (See Figures 6.3 and 6.4).

6.6.2 The proportion of married or remarried residents is highest in Leek West, 60%, compared to 52% in Leek East, 51% in Leek South, 47% in Leek North, 59% in Staffordshire Moorlands and 51% in England as a whole.,

6.6.3 The proportion of widowed residents is also highest in Leek North, 12%, compared to 10% in Leek South, 10% in Leek East, 8% in Leek West, 9% in Staffordshire Moorlands and 8% in England as a whole.

6.6.4 The proportion of separated or divorced residents is highest in Leek South, 13%, compared to 12% in Leek North, 11% in Leek East, 8% in Leek West, 9% in Staffordshire Moorlands and 11% in England as a whole.

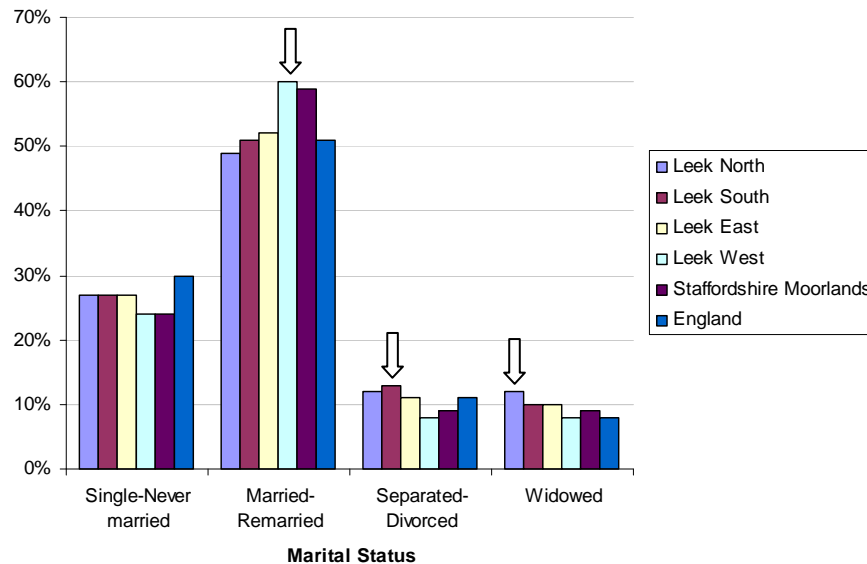
6.6.5 The proportion of lone parent households is highest in Leek North, 11%, compared to 9% in Leek South, 7% in Leek West, 6% in Leek East, 7% in Staffordshire Moorlands and 9% in England as a whole.

6.6.6 The proportion of cohabiting households is highest in Leek North and South, 10%, compared to 8% in Leek East and West, 7% in Staffordshire Moorlands and 8% in England as a whole.

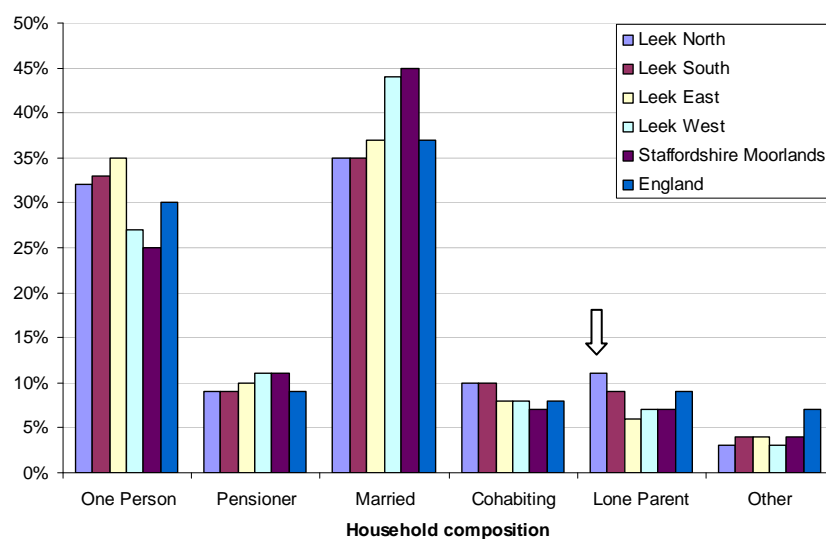
6.6.7 The proportion of one person households is highest in Leek East, 35%, compared to 33% in Leek South, 32% in Leek North, 27% in Leek West, 25% in Staffordshire Moorlands and 30% in England as a whole.

6.6.8 The proportion of pensioner households is highest in Leek West, 11%, compared to 10% in Leek East, 9% each in Leek North and South, 11% in Staffordshire Moorlands and 9% in England as a whole.

**Figure 6.3 Proportion of Leek residents by marital status and ward compared to Staffordshire Moorlands and England as a whole [Source: ONS].**



**Figure 6.4 Household compositions in Leek wards compared to Staffordshire Moorlands and England as a whole [Source: ONS]**

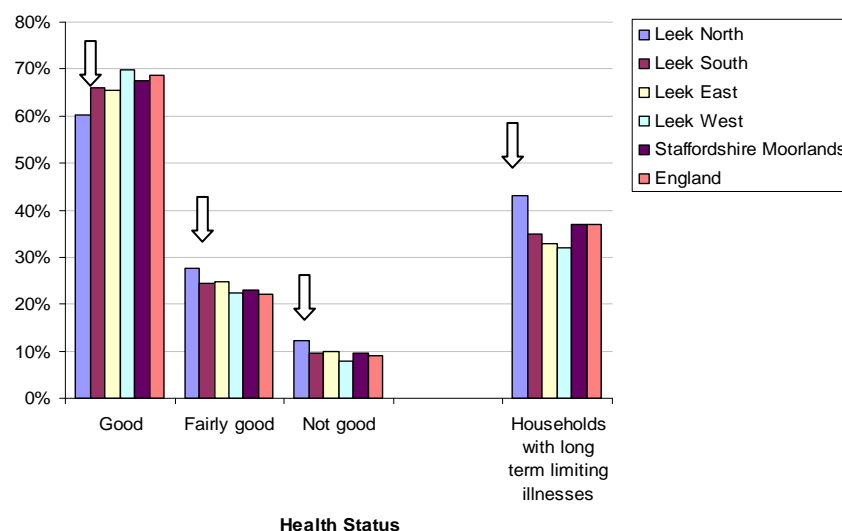


## 6.7 Health and wellbeing status

6.7.1 The proportion of residents who report their health as good is lowest in Leek North, 60%, compared to 65% in Leek East, 66% in Leek South, 70% in Leek West, 68% in Staffordshire Moorlands and 69% in England as a whole.

6.7.2 The proportion of households with long term limiting illnesses is highest in Leek North, 43%, compared to 35% in Leek South, 33% in Leek East, 32% in Leek West, 38% in Staffordshire Moorlands and 37% in England as a whole. This pattern is repeated for residents of working age with long term limiting illness.

**Figure 6.5 Health status and long term limiting illness in Leek wards residents compared to Staffordshire Moorlands and England [Source: ONS]**

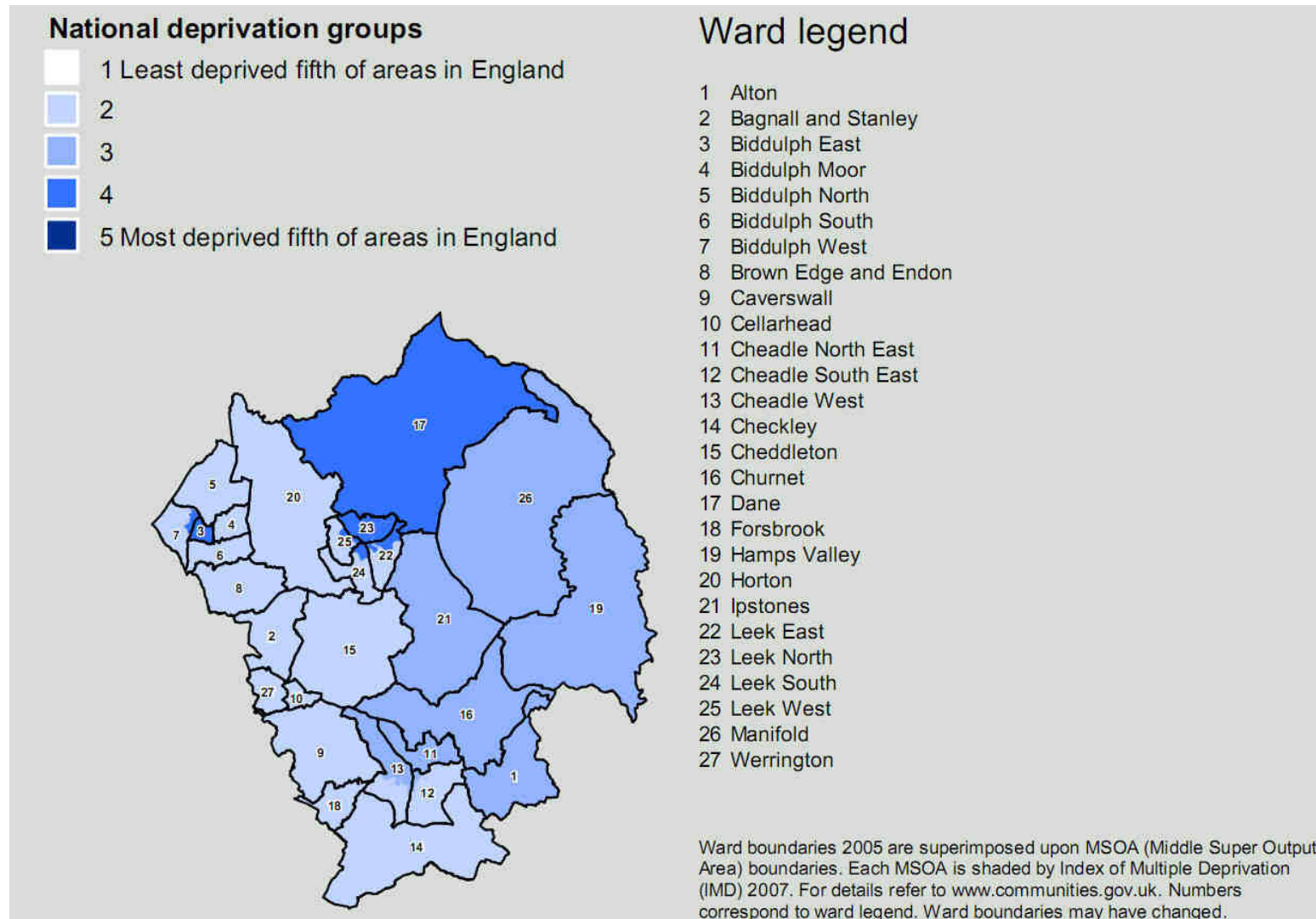


## 6.8 Deprivation, social capital and community cohesion

6.8.1 Deprivation refers to problems caused by a wide ranging lack of resources and opportunities. It is a broader concept than poverty or simply the lack of money because it includes health status, level of education, access to services, living conditions and the state of the local environment.

6.8.2 Though, overall, Staffordshire Moorlands is one of the less deprived areas of England of the four wards, Leek North is the most deprived followed by Leek South, Leek East and Leek West (See Figure 6.6).

Figure 6.6: Staffordshire Moorlands deprivation map [Source: West Midlands Public Health Observatory]

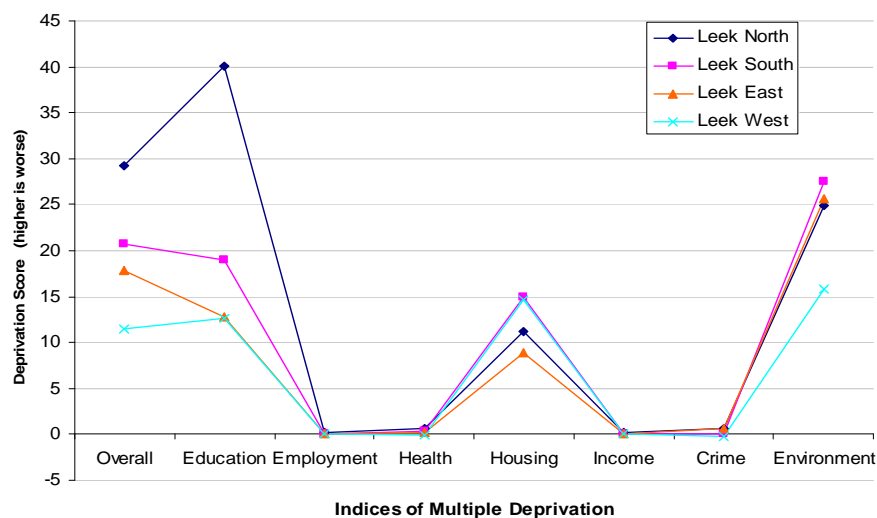


6.8.3 Leek North falls in to the bottom 20% of most deprived wards in North Staffs PCT. Leek North is ranked 8th out of 18 wards, and second behind Biddulph East if only Staffordshire Moorlands wards are considered. In terms of “life years lost” and “healthy life years lost” due to ill health across the North staffs ward populations affected then Leek North is first in Staffordshire Moorlands and second only to the Newcastle Chesterton ward when all North staffs wards are included. “As stated in the NHSNS Strategic Plan 2009/2010 at ward level a baby born in Leek North will die almost 10 years before a baby born in the neighbouring ward of Dane”.

6.8.4 The Communities Services Department of Staffordshire Moorlands District Council has developed average scores of the Indices of Multiple Deprivation for each of the four wards which are shown in Figure 6.7.

**Figure 6.7 Overall deprivation and individual domain scores for the four Leek wards [Source: Staffordshire Moorlands District Council, 2009]**

Lines between domain points are simply to aid understanding



6.8.5 The percentage of Staffordshire Moorlands residents who think that people being attacked because of their skin colour, ethnic origin or religion is a big problem in their local area is low at just over 3%.

6.8.6 The percentage of Staffordshire Moorlands residents who think that, for their local area, community activities have got better is 84%.

6.8.7 Election turnout information can give a good indication of the level of involvement people have in their local areas. The turn out rate at Local elections in

Staffordshire Moorlands is over 60%. However it is low at European elections, 31%

## **6.9 Housing**

- 6.9.1 The proportion of social renting is highest in Leek North 31%, compared to 12% in Leek South, 6% in Leek East, 8% in Leek West and 9% in Staffordshire Moorlands as a whole.
- 6.9.2 In contrast, the proportion of affordable housing being built in relation to new housing is only 16%.
- 6.9.3 In terms of housing types, in all Leek wards, flats are the least common particularly flats in commercial buildings and flat conversions. This is possibly why the price of flats is high compared to other types of housing in Staffordshire Moorlands as a whole.
- 6.9.4 The average house price in Staffordshire Moorlands is £149,000 with terrace houses selling for £110,000, semi-detached houses selling for £122,000, detached houses selling £202,000 and flats selling for £275,000.<sup>16</sup>

## **6.10 Education**

- 6.10.1 Within the town centre masterplan area, there is Leek College which offers course for students aged 14 years and over including higher education and adult education courses.
- 6.10.2 The wider Leek area is well served with schools and has:

### 6 First/Primary Schools (4 to 9 years)

- Leek First School
- All Saints C of E First School
- Westwood First School
- Woodcroft First School
- Beresford Memorial First School

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<sup>16</sup> Land Registry of England and Wales. Figures for England and Wales are for the period January to March 2010

- St Mary's Catholic Primary School

#### 2 Middle Schools (9 to 13 years)

- Churnet View Middle School
- St. Edwards C of E Junior High School

#### 2 High Schools

- Leek High Specialist Technology School
- Westwood College

#### 1 Special School

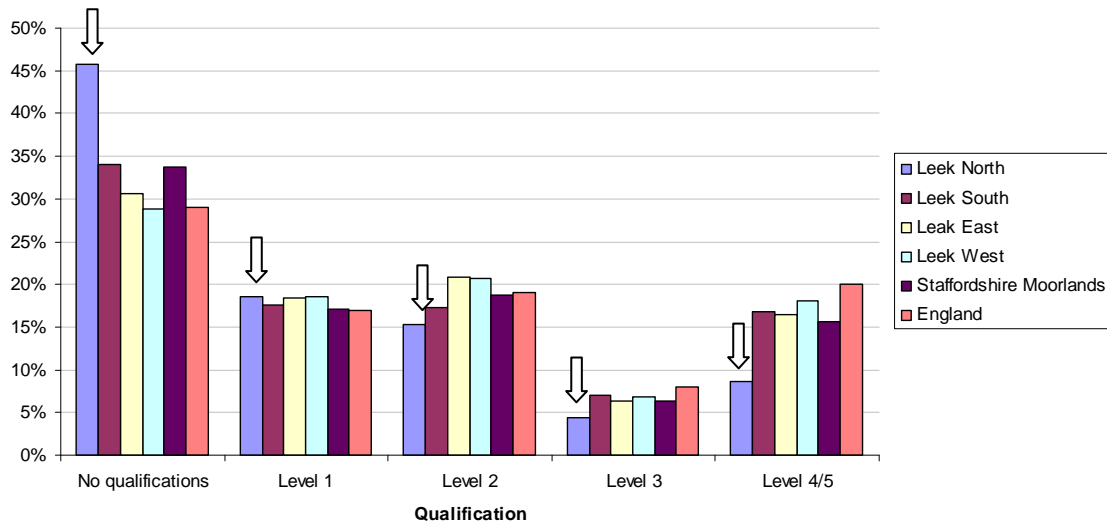
- Springfield Special School

6.10.3 The proportion of residents with no educational qualifications is highest in Leek North, 46%, compared to 34% in Leek South, 31% in Leek East, 29% in Leek West, 34% in Staffordshire Moorlands and 29% in England as a whole (See Figure 6.8).

6.10.4 Leek North has a similar proportion of residents with Level 1 qualifications as the other three wards. However, it has an increasingly lower proportion of residents with level 2, 3 and 4/5 qualifications.

**Figure 6.8 Proportion of Leek residents with qualifications compared to Staffordshire Moorlands and England as a whole [Source: ONS]<sup>17</sup>.**

<sup>17</sup> Level 1: 1+'O' level passes; 1+ CSE/GCSE any grades; NVQ level 1; or Foundation level GNVQ  
 Level 2: 5+'O' level passes; 5+ CSE (grade 1's); 5+GCSEs (grades A-C); School Certificate; 1+'A' levels/'AS' levels; NVQ level 2; or Intermediate GNVQ  
 Level 3: 2+ 'A' levels; 4+ 'AS' levels; Higher School Certificate; NVQ level 3; or Advanced GNVQ  
 Level 4/5: First Degree, Higher Degree, NVQ levels 4 and 5; HNC; HND; Qualified Teacher Status; Qualified Medical Doctor; Qualified Dentist; Qualified Nurse; Midwife; or Health Visitor



## 6.11 Employment and economy

6.11.1 The proportion of unemployed residents is highest in Leek North, 5%, compared to 3% each in Leek South, East and West, 2% in Staffordshire Moorlands and 3% in England as a whole.

6.11.2 The proportion of permanently sick/disabled residents is highest in Leek North, 8%, compared to 6% each in Leek South and East, 4% in Leek West, 6% in Staffordshire Moorlands and 5% in England as a whole.

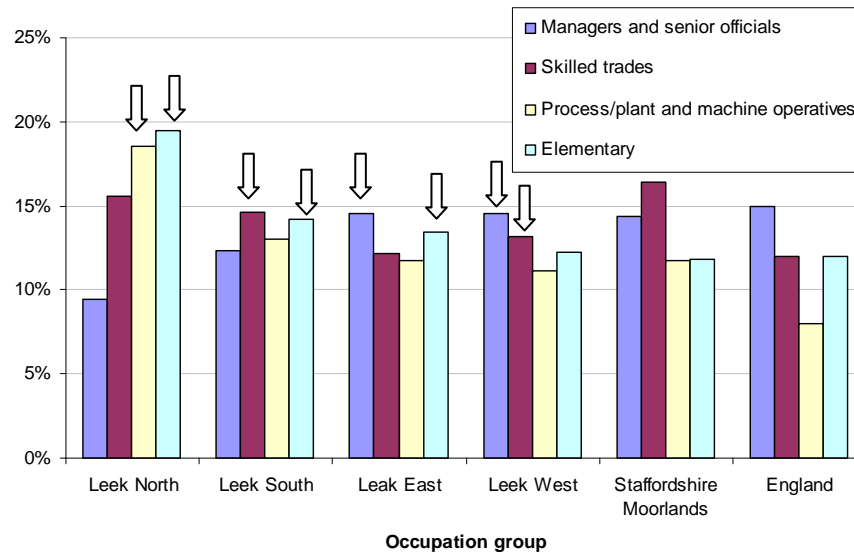
6.11.3 The proportion of residents looking after a family is also highest in Leek North, 7%, compared to 6% in Leek South, 4% each in Leek East and West, 5% in Staffordshire Moorlands and 7% in England as a whole.

6.11.4 The proportion of retired residents is highest in Leek West, 17%, compared to 16% in Leek North, 15% each in Leek South and Leek East, 16% in Staffordshire Moorlands and 14% in England as a whole.

6.11.5 The majority of Leek North residents work in process/plant operation and elementary occupations (38%); in Leek South they work in skilled trades and elementary occupations (29%); in Leek East they work in managerial/senior official and elementary occupations (29%); and in Leek West they work in managerial and senior official and skilled trades operations (28%). This compares to 30% of Staffordshire Moorlands residents working in managerial/senior official and skilled trades occupations and 27% of England residents as a whole.



**Figure 6.9 Occupation groups in the four Leek wards compared to Staffordshire Moorlands and England. [Source: ONS]**



## 6.12 Transport and connectivity

6.12.1 Leek does not have a rail station. All public transport journeys to and from Leek are currently by bus. There are 21 bus routes connecting Leek Town Centre to other parts of Leek and neighbouring towns within the sub-region. However, the services are generally low frequency and irregular. The main bus corridors within Leek Town Centre include Broad Street, Brook Street, Haywood Street, Ball Haye Road, and Ashbourne Road.

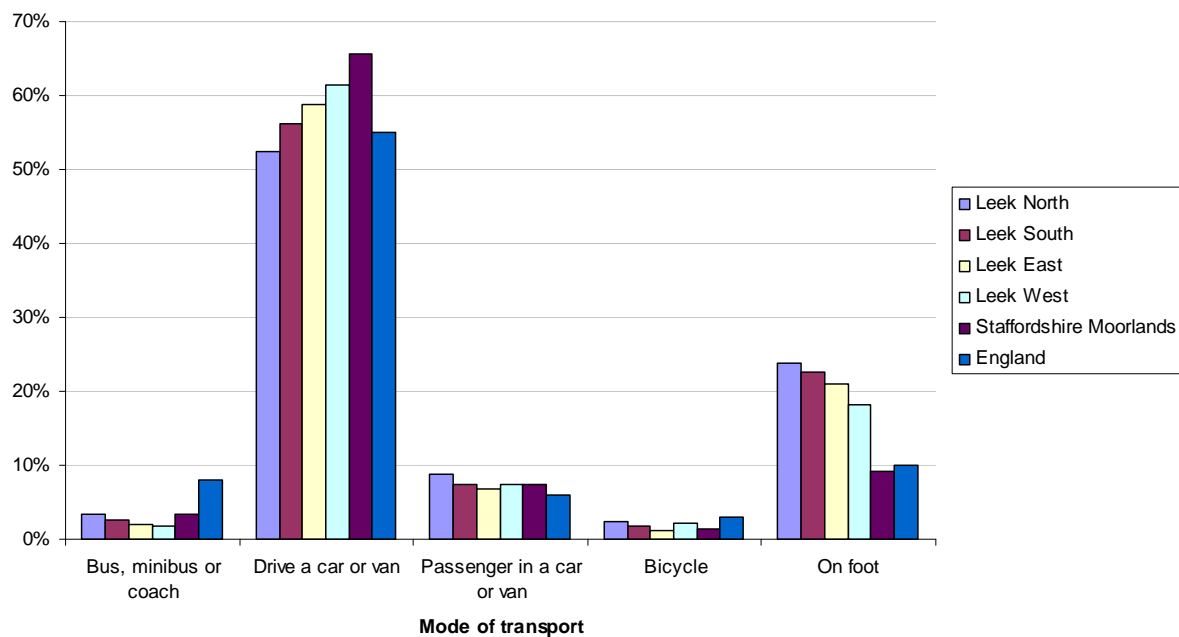
6.12.2 The majority of Leek residents travel to work by car or van (driving or passenger). This is highest for Leek West, 68%, compared to 66% in Leek East, 63% in Leek South, 61% in Leek North, 73% in Staffordshire Moorlands and 61% in England as a whole (See Figure 6.10).

6.12.3 The proportion of residents that travel to work on foot is highest in Leek North, 24%, compared to 23% in Leek South, 21% in Leek East, 18% in Leek West, 9% in Staffordshire Moorlands and 10% in England as a whole.

6.12.4 However, the average distances travelled to work are similar across all four wards with Leek North and South residents averaging 9km and Leek East and West averaging a little over 10km. The average distance travelled by residents in Staffordshire Moorlands as a whole is just under 13km.

6.12.5 The top two priorities for residents in Staffordshire Moorlands are the quality of roads and pavements and the quality of public transport. Just over 62% of Staffordshire Moorlands residents think that public transport has got better or stayed the same while just under 38% think that traffic congestion has got better or stayed the same.

**Figure 6.10 Travel to work patterns in Leek compared to Staffordshire Moorlands and England as a whole [Source: ONS]**



## 6.13 Health and social care

6.13.1 There are four health centres within the town centre masterplan boundary area:

- Leek Health Centre, Fountain Street;
- Stockwell Surgery, Ball Haye Road;
- Moorland Medical Centre, Regent Street, and
- The John Kelso Practice, Ball Haye Road.

6.13.2 In 2008/2009, North Staffordshire PCT **fully met** 55%, **almost met** 39% and **partly met** 6% of the 44 compliant healthcare standards set out by the Care Quality Commission.

6.13.3 Social Care Services are provided by Staffordshire County Council. This includes a health development team looking at the wider social determinants of health.

6.13.4 The most recent annual performance assessment for adult social care services rated Staffordshire as a whole on the following outcomes:

Outcome	Performing
Improved health and wellbeing	Well
Improved quality of life	Well
Making a positive contribution	Excellent
Increased choice and control	Adequately
Freedom from discrimination and harassment	Well
Economic wellbeing	Excellent
Maintaining personal dignity and respect	Adequately

## 6.14 Crime and safety

6.14.1 There is no clear pattern emerging from local crime rates (See Figure 6.11). However, one of the top three priorities of residents in Staffordshire Moorlands is reducing levels of crime.

6.14.2 The crime with the highest rate across Leek is anti-social behaviour. In terms of the four wards, Leek North and Leek West have the highest rates of anti-social behaviour, 50%, compared to 45% in Leek South, 40% in Leek East and 54% in Staffordshire Moorlands as a whole (See Figure 6.11).

6.14.3 Vehicle crime rates are highest in Leek South, 12%, compared to 11% in Leek West, 10% in Leek North, 7% in Leek East and 13% in Staffordshire Moorlands as a whole.

6.14.4 House burglaries are highest in Leek West, 6%, compared to 4% of Leek South and Leek East, 3% of Leek North and 4% of Staffordshire Moorlands as a whole.

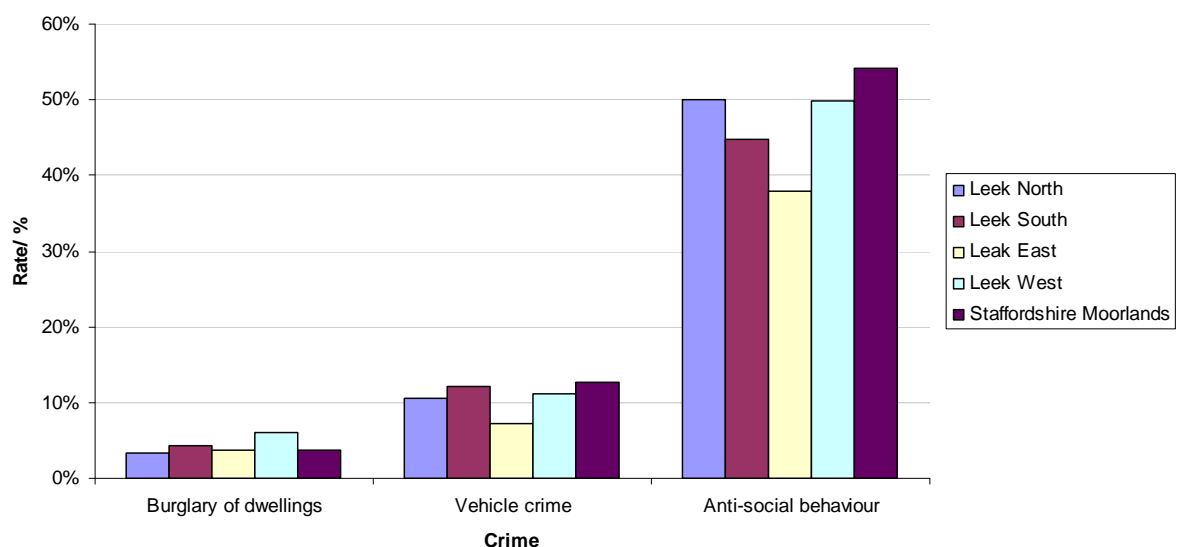
6.14.5 The population of Staffordshire Moorlands residents who feel fairly or very safe outside during the day is almost 98% while almost 68% feel fairly or very safe outside after dark.

6.14.6 The population of Staffordshire Moorlands residents who think that vandalism, graffiti and other deliberate damage to property is a big problem in their local area is 42%.

6.14.7 The population of Staffordshire Moorlands residents who think that people using or dealing drugs is a big problem in their local area is just above 38%.

6.14.8 The population of Staffordshire Moorlands residents who think that people being rowdy or drunk in public spaces is a big problem in their local area is just under 20%.

**Figure 6.11 Crime rates in Leek compared to Staffordshire Moorlands [Source: Staffordshire Police, 2009]**



## 6.15 Shops and retail amenities<sup>18</sup>

6.15.1 There are a wide range of shops, retail services and amenities provided in Leek Town Centre. There are:

- 19 convenience outlets (e.g. supermarkets, butchers, newsagents, grocers).
- 135 comparison outlets (e.g. charity shops, chemists, clothing, hardware and houseware stores, toys and sports shops).
- 55 food/evening economy outlets (e.g. restaurants, pubs, takeaways, clubs and cafes).
- 29 service outlets (e.g. salons, travel agents and laundrettes).

<sup>18</sup> BE Group Baseline Report, September 2009

- 28 financial and professional services (e.g. solicitors, betting office, banks and building societies).

6.15.2 There are four markets held in Leek Town Centre that sell a range of food, furniture, household goods as well as antiques and craft items:

- Butter Market is a permanent indoor market.
- Trestle Market runs on Wednesdays, Fridays and Saturdays.
- Market Place is an outdoor market and operates on Wednesdays and Saturdays.
- A Craft and Antique Market operates on Saturdays.
- A Farmer's Market operates once a month.

6.15.3 Some of the town centre shops are focused on serving tourist and business visitors.

## **6.16 Culture and leisure<sup>17</sup>**

6.16.1 Leek also has a number of community facilities both within and outside the town centre masterplan area. Within the town centre the key ones are:

- Nicholson Institute (which houses a gallery and library)
- Millward Hall Youth Centre
- Britannia Sports and Social Club and Central Club

6.16.2 Located outside the town centre is the Brough Park Leisure Centre. The leisure centre includes:

- swimming and teaching pools
- gym
- sports hall
- indoor and outdoor sports facilities
- café bar
- crèche

6.16.3 The nearest cinemas are in and around Stoke-on-Trent. The charity 'Staffordshire Reels on Wheels' has provided mobile screenings at local venues across the County but it is unclear if this will continue to be the case.

6.16.4 The Leek Arts Festival also runs in May every year.

6.16.5 Evening attractions in Leek include pubs, takeaways and some music and dance clubs.

6.16.6 Rudyard Lake is a popular nearby tourist attraction offering walking, boating, sailing and fishing. It is located three miles north west of Leek and is home to the Rudyard Lake Steam Railway.

6.16.7 The James Brindley Mill and Museum is located in Leek and operates a restored water-powered corn-mill.

6.16.8 Other major attractions outside of Leek include:

- Alton Towers
- The Peak District National Park
- The Churnet Valley Railway
- Blackbrook Zoo

6.16.9 Overall, the proportion of Staffordshire Moorlands residents who, in terms of their local area, think:

- that activities for teenagers have got better or stayed the same is just under 59%.
- that cultural facilities have got better or stayed the same is about 84%.
- that facilities for young children have got better or stayed the same is about 82%.
- that sports and leisure facilities have got better or stayed the same is just under 93%.

## **6.17 Land and spatial**

6.17.1 Only 1% of developed land in Staffordshire Moorlands is derelict.

6.17.2 Only 12% of land and highways in Staffordshire Moorlands is assessed as having unacceptable levels of litter and detritus.

6.17.3 Less than 3% of land and highways in Staffordshire Moorlands have visible, unacceptable levels of flytipping, flyposting and graffiti.



- 6.17.4 21% of rivers in Staffordshire Moorlands are assessed as having poor biological quality and 18% as having poor chemical quality.
- 6.17.5 44% of household waste in Staffordshire Moorlands is sent to landfill with only 14% of household waste being recycled. However, a high level of household waste is composted or used to recover heat and power, 21% and 19% (compared to the national average).
- 6.17.6 Of the approximately 5000 hectares of land in Staffordshire Moorlands designated as a Site of Special Scientific Interest (SSSI), 63% is found to be in an unfavourable condition.
- 6.17.7 The percentage of Staffordshire Moorlands residents who think that parks and open spaces in their local area have got better or stayed the same is about 91%.

## 6.18 Summary of community profile

- 6.18.1 Across all the four Leek Wards, Leek North, South, East and West the **highest proportion of residents are aged 45-64 years**. In addition, there are a **higher proportion of residents under 29 years in Leek North and South** compared to Leek East and West.
- 6.18.2 The majority of residents from Leek are from a **White British** background and **Christians**.
- 6.18.3 Overall, **married and remarried people make up the biggest proportion of residents** with **Leek West having the highest proportion of married or remarried** residents compared to the other three wards.
- 6.18.4 The proportion of **lone parent households is highest in Leek North** while the proportion of **one person households is highest in Leek East**.
- 6.18.5 **Leek North** has the **highest proportion of households with long term limiting illness** as well as the **lowest levels of “good” self reported health status**.
- 6.18.6 In terms of deprivation, **Leek North is the most deprived**. It has the **highest deprivation scores in the education, employment, health and income domains**.

6.18.7 **Leek South** has the **highest deprivation scores in the housing and environment** domains.

6.18.8 **Leek East** has the **highest deprivation score in the crime** domain.

6.18.9 Social renting is highest in Leek North.

6.18.10 There are a **high proportion of residents with no qualifications in Leek North**.

6.18.11 However, Staffordshire Moorlands has a higher number of children achieve grades A\* - C at GCSE than England as a whole.

6.18.12 **Unemployment is also highest in Leek North** compared to Leek South, East and West.

6.18.13 The **majority of Leek North residents work in low income occupations**.

6.18.14 Leek is well served by bus routes however the **services that run are often low frequency and irregular**. Hence, the **majority of residents travel to work by car or van**, followed by residents who travel to work on foot.

6.18.15 The most common crime across all four Leek wards is **antisocial behaviour** with the **highest rates occurring in Leek North and Leek West**.

6.18.16 There are a **variety of shops and other retail amenities** within the town centre.

6.18.17 There are a **range of community facilities and activities** within Leek and other major attractions just outside of Leek.

6.18.18 A poor living environment is a key issue particularly in the deprived parts of Leek.

## 7 Evidence on the Health Impacts of Town Centre Regeneration Schemes

### 7.1 Introduction

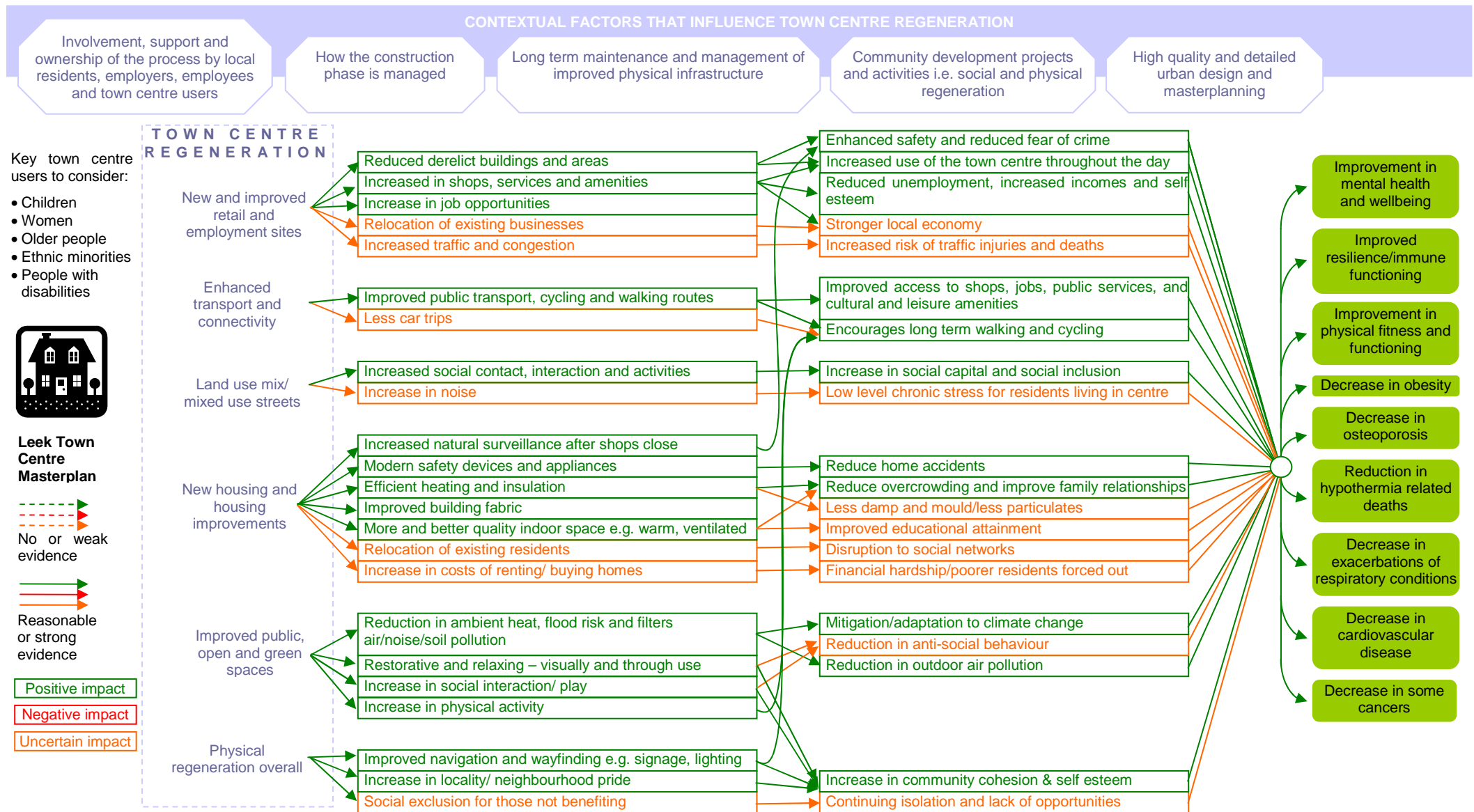
7.1.1 This chapter provides a summary of the key evidence on the health impacts likely to arise from the town centre regeneration scheme.

7.1.2 Based on the types of interventions that will be implemented in the Leek Town Centre regeneration the following are the key elements that are likely to have health and wellbeing impacts:

- Increase in retail and employment related developments
- Greater mix of land uses
- Transport and connectivity improvements
- Improved access and availability of services
- Increase in and improved access to public and open spaces
- Increase in housing (new housing and housing improvements)

7.1.3 Figure 7.1 shows a causal pathway diagram with the likely pathways of health impact for a town centre regeneration scheme with the key elements outlined above.

Figure 7.1 Causal pathway diagram for the potential health impacts of the Leek Town Centre regeneration scheme



## 7.2 Relevant existing HIAs

7.2.1 This review identified 4 relevant existing HIAs. These were:

- Skelmersdale Town Centre HIA
- Dartford Town Centre Area Action Plan HIA
- Kirby Sports Stadium Mixed Use Development HIA
- Lewisham Urban Renaissance Health and Social Impact Assessment.

7.2.2 The Skelmersdale Town Centre HIA analysed a similar type of regeneration scheme to Leek and judged that it was likely to:

- Promote mental well being
- Increase job opportunities, boost local economy, bring new businesses to the area and attract inward economic investment from major employers
- Offer a range of new and affordable housing options
- Improve the leisure and retail offer of the town
- Have the potential to greatly enhance the prosperity and reputation of the town
- Have the potential to reduce poverty, through greater access to training and employment
- Have the potential to impact negatively on issues around harmful alcohol consumption –requires multi-agency proactive responses
- Improving and enhancing the night time environment for all sectors of the community is important to sustain the long term future of the town – a real opportunity exists for multi-agency working to plan and develop a positive night time offer
- Have the potential to develop opportunities for community development and promote community cohesion and wellbeing
- Have the potential to impact positively on wider determinants of health, with long term health gains for those living in the most deprived areas – again a multi-agency approach is recommended in order to maximise opportunities for achieving such health gains

7.2.3 The Dartford Town Centre Area Action Plan HIA also analysed a town centre regeneration scheme and judged that:

- Incomes and employment could be negatively affected over the short term, construction phase, because the current skills base was likely to be low and the increased opportunities might further widen inequalities between those in

work and outside the area and those unemployed and living in the Northern gateway. They could be positively affected over the long term, operation phase, as increased incomes and employment opportunities positively influence physical, mental and socio-economic health. Some employment may be negatively affected as existing industries are relocated because of the regeneration.

- construction phase, on communities living close by and deprived communities are less likely to take up the potential new educational opportunities that a new school would generate. The school could positively impact over the long term, operation phase, by providing additional places and increasing children's aspirations and achievement as well as make houses more attractive in the neighbourhoods around the school and so increase house prices.
- Transport and connectivity could be negatively affected over the short term, construction phase, due to disruption, anxiety and redistribution of road traffic risks as well as impacting on local businesses because of road and pavement closures and parking restrictions. They could be positively affected over the long term, operation phase, as the enhanced transport infrastructure comes into operation improving accessibility to services and amenities; the ability to walk from residential areas to social, recreational and economic areas; reduce traffic injuries and improve access to public transport.
- Crime and safety could be negatively affected during the short term, construction phase, because of the reduced environmental quality and increased criminal activity because those who feel that they are unlikely to benefit feel even more socially excluded. However, more 'eyes on the street' may attract more people to the town centre as streets and pathways feel more safe. They could be positively affected over the long term, operation phase, as an improved urban environment together with a high quality transport network and new open spaces generate more social interaction, enjoyment of the town centre environment and reduced fear of crime.
- Services, amenities and social capital could be positively affected by bringing people together though the phasing of the new service infrastructure needs to be considered carefully to reduce disruption.
- Lifestyle could be positively affected given the current relatively low proportion of residents with healthy lifestyles however the high number of single handed General Practitioners (GPs) may not support all the needs of the local community.

- The local environment could be negatively affected during the short term, operation phase, because of the increase in noise and air pollution however mitigation measures developed through an EIA are likely to minimise these impacts. There also could be significant cumulative health effects from the annoyance generated by the nuisance aspects of the construction phase. There could be beneficial effects over the long term, during the operation phase, due to the significant improvement in the town centre environment, reduction car traffic and enhanced and new open spaces.
- Social cohesion could be positively affected as the regeneration programme removes social and environmental barriers reducing the sense of 'them and us' and generating higher aspirations and reduced helplessness within the deprived communities. This could be further increased through a regular programme of social events.
- Housing could be positively affected with attractive new housing though the housing needs to be suitable for existing residents and developing a community. However, there could be some negative affects from the loss of some industrial or green land.

#### 7.2.4 The Kirby Sports Stadium Mixed Use Retail Development HIA judged that:

- The development should aim to promote and enhance mental wellbeing through: enhancing control; increasing resilience and community assets; facilitating participation and promoting social inclusion.
- There would be an increases in employment opportunities for local people which may lead to potential health gains particularly the local long-term unemployed given the 50% jobs allocation given to this group as part of the development agreement.
- There will be some loss of employment in existing town centre businesses.
- A proportion of jobs may be low paid or poor quality jobs which may lead to poor health (equivalent to unemployment).
- Some of these jobs (in particular construction jobs) will also be filled by people from outside Knowsley.
- Schemes to specifically target long-term unemployed, lone parents, older people and people with low skills could lead to potential health gains and a reduction in health inequalities.



- Increase in economic growth attributed to the proposals will result in improved health outcomes for the region.
- Health gains will be experienced by those with increased per capita income.
- Some aspects of urban design may create barriers to physical activity.
- Some aspects of the urban design of the development may promote physical activity.
- Some aspects of the design including usage after dark could impact on crime and fear of crime.
- The design may create conflicts between pedestrians and traffic in certain locations leading to road traffic accidents.
- The urban design of the development may not enhance civic pride/identity.
- The urban design of the development may affect access to social and community networks and services.
- The loss of green space could reduce levels of physical activity in current and potential future users.
- The loss of green linkages may reduce access to social and community networks and services during construction.
- Loss of green space may lead to reduction in levels of perceived health status in residents close to the development.
- Increased noise levels impact on: annoyance, sleep disturbance, children's learning, cardiovascular health. There will be an increase in noise levels during; construction, operation and match day.
- Construction will cause exposure to noise levels above WHO guidelines in residents and other people in proximity to the site leading to negative impacts on health.
- Operation will cause exposure to noise levels above WHO guidelines in residents and other people in proximity to the site leading to negative impacts on health.
- The development will cause an increase in air pollution. Increases in air pollution could lead to negative impacts on health.
- Lighting may cause annoyance and sleep disturbance in residents living proximal to the development.
- Road traffic will increase with the development. An increase in the number of Road Traffic Accidents (RTAs) may result from increases in the volume of traffic and may lead to an increase in casualties. RTA will disproportionately

impact on children, elderly people, pedestrians, cyclists, motorcyclists, workers, tourists and people in lower socio-economic groups.

- Increases in traffic will act as a barrier to physical activity.
- Current issues around communication with, and engagement of, the local community is causing stress, anxiety, distrust and feelings of lack of control in some local residents.
- Perceptions of low control and low involvement in decision making about the development may heighten perceptions of public health risk from potential pollution.
- Already existing concern in the community about current sources of pollution and health risks may also heighten perceptions of public health risk from potential pollution.
- Increased employment associated with the development may facilitate positive mental health linked to new positive social networks for those moving from unemployment into employment.
- The loss of green space and potential detrimental effects on existing town centre may negatively impact on community pride and identity.
- Forced relocation of residential housing may negatively impact on existing social networks and cause stress and anxiety.
- The development may negatively impact on privacy and safety of residents proximal to the development.
- There may be an increase in the range and availability of healthy food; this will have a marginal impact on health.
- The construction period may increase perceptions of hazards creating barriers to physical activity.
- The operational period may increase perceptions of hazards and create barriers to physical activity (residential areas, transport routes and within the development).
- Interventions to promote physical activity as part of the development may increase physical activity levels.
- Construction and operation may negatively impact on ambulance response times. Construction may hinder access to existing health facilities. Operation and match days may increase demand for walk in services.
- Construction may impact on local resident's ability to access community/ social networks and services. Operation may impact on local resident's ability to access community/ social networks and services.

7.2.5 The Lewisham Urban Renaissance HSIA analysed a mixed use development in Lewisham Town centre that included a public transport interchange (rail, docklands light rail, taxis and bus routes possibly including a new bus facility). It judged that there were likely to be impacts on:

- Air pollution
- Noise
- Crime and community/personal safety
- Access and mobility
- Road traffic injuries
- Physical activity and access to food
- Community severance

### **7.3 Retail and Employment**

7.3.1 There is little research on the health impacts of retail or employment led regeneration schemes.

7.3.2 Research on five retail-led regeneration case studies - with differing socio-economic characteristics, geographical locations and neighbourhood types - identified nine positive impacts on local communities:<sup>19</sup>

- Accessibility to jobs and training for local people
- Living in neighbourhoods
- Better quality of life
- Improved pride of place
- Accessibility
- Connectivity
- Better integration and cohesion
- Cleaner and safer environment
- Opportunity for supporting small to medium sized enterprises and local business

7.3.3 The above research identified six “building blocks” to successful retail-led regeneration:

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<sup>19</sup> Retail-led regeneration why it matters to our communities. DTZ, Business in the Community, BCSC Educational Trust. 2008

- Having an anchor tenant i.e. a major retail business making the decision early on in the design stage to locate in the new development and strong leadership and direction from the public sector.
- Having a clear and simple plan for the proposed development and developing a wide-ranging public, private and voluntary sector partnership.
- Being transparent and having a range of open channels of communications helps to build trust and confidence among all the stakeholders.
- “Fit-for-the-community” urban design as this influences place-making, profitability, image creation, public acceptance and future-proofing – improving pedestrian pathways, public open spaces and opening up developments so that they faced outwards towards the street.
- Planning for long term sustainability through community consultation, having a diversity of sizes of retail spaces for independent retailers and chain stores and succession planning.
- Doing more than the minimum required to address community impacts and making a commitment to working with local communities at the earliest stages.

7.3.4 A recent literature review on policies that support retail sector regeneration and the impact of such regeneration on town centres and high streets found that:<sup>20 21</sup>

- Key dimensions of a healthy town centre include being places with identity and legibility, places which are well connected, convivial and where retailing is conspicuous, compatibility of functions within the place, being competitive and having a coordinated strategy. Within that the key dimensions of a healthy retail sector include good retail mix, choice, diversity, anchor stores and preferred shopper formats and fascias, low vacancy rates, low turnover, good physical fabric, competitiveness and capacity for change.
- There can be potential positive outcomes from retail-led regeneration.
- Retail churn is an outcome of retail regeneration. The extent of churn, the length of time it lasts and the final impact on existing retail structures will depend on the variety, fabric and ‘health’ of existing retail structures. The fit of new developments with existing ones will impact on the regeneration outcome.

<sup>20</sup> Literature Review: Policies adopted to support a healthy retail sector and retail led regeneration and the impact of retail on the regeneration of town centres and local high streets. Scottish Government. 2009.

<sup>21</sup> Retail led urban regeneration. Retail Planning Knowledge Base Briefing Paper No 11. University of Stirling. 2008

- Employment impacts will depend on the employment needs of an area (but aspects such as job security and skills must be part of the equation). The jobs may also provide a stepping stone back into work.
- Retail-led regeneration has a catalyst effect on getting regeneration started through rapid injection of capital and site reclamation.
- There is no guarantee that retail-led regeneration will attract other uses but there are examples where it has done so very successfully.
- Creating confidence is a key (but hard to measure) output from retail-led regeneration.

7.3.5 A study of a food retail-led regeneration scheme involving a hypermarket development in a deprived and 'under-served' community found that the opening of a supermarket does not have to have a deleterious effect on the retail mix of an area.<sup>22</sup> The historical morphology of the area, the shape and use of the retail structure itself, the age and fitness of the retail units and population movements in and out of the area, all influence the impact of a new development. Achieving improvement in health and diet is a complex task, and small changes in diet may be less important than other social changes a major new store may bring. For example, the new jobs brought to an area in need of jobs; new employment opportunities may therefore have greater health impacts on an area than the goods provided by the new store. It may also offer opportunities for physical activity as there is evidence of increased walking to a store and more independence in reaching the store than formerly. However, the potential negative impacts possible increased access to an unhealthy diet. A new supermarket can broaden choice but people also need to be empowered to make the 'right' choices. The study also found that the supermarket did not impact negatively on existing local food choices within the locality but on broader shopping patterns outside the locality. Lastly, the success of the regeneration is likely to rest on the retail development's 'relational' success in attracting sufficient custom from outside the local area and the perception of the area as a better place to shop and live as a result of the regeneration initiative.

7.3.6 There is little evidence about whether new retail developments create new employment or merely displaces it; case study findings show that there is some success in cases where retailers specifically set out to provide employment

opportunities for long-term unemployed local residents.<sup>23</sup> There is also a suggestion that training and employment schemes with strong retailer commitment have the potential to contribute to a reduction of unemployment.

7.3.7 Environmental improvements and quality urban design in retail areas in the form of refurbishments and new developments improve retail vitality as well as contribute to enhanced quality of life through the creation of quality public spaces and community facilities.<sup>19</sup> However, in many cases developments achieve retail vitality at the expense of environmental improvements and quality urban design.

7.3.8 Retail vitality that does not incorporate and promote sustainable modes of transport, such as walking, cycling and public transport but draws in a majority of shoppers who come by car, increases traffic and air pollution.<sup>23</sup>

7.3.9 There is some evidence that the economic sustainability of retail areas can only be maintained when they are easily accessible from outside the neighbourhood and can draw on potential customers from a wider population catchment area.<sup>24</sup>

7.3.10 A 2003 UK government review of the research on business-led regeneration in deprived areas showed that with the possible exception of one project, there was little evidence to show what the contribution was of different types of enterprise to economic development and reduced social exclusion in deprived areas.<sup>25</sup> Most research had not been explicitly concerned with deprived areas. Moreover, where studies had considered the local impacts of the growth and survival of small business, or the attraction of inward investment, the definition of 'local' which was used was too wide for the identification of the effects upon deprived neighbourhoods.

7.3.11 A separate follow up study examined four case studies and found that:<sup>26</sup>

- Even in relatively strong regional economies areas of extreme poverty can lie next to very prosperous areas, and fail to benefit from any 'trickle down' from

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<sup>22</sup> Cummins S, Findlay A, Petticrew M and Sparks L. Healthy Cities: the impact of food retail-led regeneration on food access, choice and retail structure. Built Environment. Vol 31, pages 288-301. Winter 2005.

<sup>23</sup> Carley M, Kirk K and McIntosh S. Retailing, sustainability and neighbourhood regeneration, 2001

<sup>24</sup> Jones P, Roberts, M. and Morris, L. Rediscovering mixed-use streets: the contribution of local high streets to sustainable communities. 2007

<sup>25</sup> Business-led regeneration of deprived areas: a review of the evidence base. Research Report No 5. ODPM. 2003

<sup>26</sup> Business-led regeneration: case studies of four urban areas. ODPM. 2005

economic growth. Considerable wealth may pass through an area without rubbing off on its residents.

- The economy is not just more complex than it was fifty years ago. Many people are using cars to get to work and to shop. Many former industrial areas have lost their identity, their residents have lost confidence in their future, and links between business and the community have broken down, leading to low or unrealistic expectations and social malaise, which are passed on from one generation to the next.
- The lack of identity and sense of purpose of local people reinforces the poverty cycle of poor health, low levels of attainment, and erratic employment. A sense of purpose is essential to self-respect as well as neighbourhood pride.
- Securing business led regeneration is key to achieving the goals of either neighbourhood renewal, productivity growth or sustainable communities. However issues associated with the decline of industries and neighbourhoods can work against the very social and economic investment that may serve them.
- Deprived areas appear to have too few firms and raising the firm birth rate in them to the regional average is an insufficiently ambitious target to address this.
- The areas are more manufacturing oriented than the UK generally and conversely, the service sector is poorly represented.
- Businesses (in deprived areas) are not parochial, they do trade (often internationally).
- Businesses (in deprived areas) do not appear to innovate enough and they are not involved sufficiently with organisations that might help them do so.
- Property related factors are of central importance in improving the business performance in deprived areas.
- The links between businesses and the other key players in their local area (including local authorities but also the full range of business related support agencies and Local Strategic Partnerships) is often very weak. Deprived areas do not tend to house enough support agencies: Business Link, Job Centres, and Centres of Manufacturing Excellence.
- Businesses (in deprived areas) are often involved with their communities to some extent but they often appear to recruit their employees from adjoining areas.



- People who live and work in deprived areas appear to have little sense of the industrial structure or business strengths of the area.

## **7.4 Land use mix**

- 7.4.1 Land use mix refers to how residential, commercial, public and recreational land uses are spatially located with each other. This mix can either be vertical within a single, large multi-storey development or horizontally across several different developments.
- 7.4.2 It has been shown that the same amount of land used for multiple amenities produces fewer trips than when it is divided into separate pockets located some distance from each other. The benefits are through enabling people to walk to nearby amenities and socialise when they would otherwise drive to the amenities. A modelling exercise carried out by the Institute of Transport Engineers suggested that a 100,000 sq ft office development when split into 25,000 sq ft of office space, 25,000 sq ft of research and development space, 40,000 sq ft of family apartments and 10,000 sq ft of retail, would see rates of daily vehicle trips fall by almost 20%.<sup>27</sup>
- 7.4.3 Mixed land use generally results in reduced car trips, reduced traffic congestion, reduced air pollution, greater physical activity and greater social interaction.<sup>21</sup>
- 7.4.4 However, on the negative side though there is reduced vehicle use, land use mix because they create higher density neighbourhoods can lead to greater overall levels of local air pollution because of the increased number of cars and other vehicles in the area.<sup>21</sup>
- 7.4.5 In mixed land use settings, as the density increases per person hours and miles of car travel tend to decline and walking, cycling and the public transport use tends to increase.<sup>21</sup>
- 7.4.6 Case study evidence in the UK suggests that neighbourhoods and centres that work best are those where retail facilities are combined and linked with a range of community and health facilities including employment centres, education facilities and health centres.<sup>19</sup>

- 7.4.7 Traditional mixed use streets can act as an agent of social cohesion, however compared to privatised spaces such as shopping malls and out of town retail developments, mixed use streets offer 24 hours open access public spaces and some studies have pointed out that traditional high streets in urban areas may perform a significant role as spaces of social inclusion.<sup>20</sup>
- 7.4.8 Developing a “night time economy” alongside the day time economy in a town centre regeneration scheme have positive economic benefits for local communities and negative impacts from youthful drinking, anti-social behaviour and violence. This has tended to result in older people avoiding town centres at night.<sup>20</sup> In addition to socially excluding older people these behaviours can lead to physical injury and acute and chronic physical and mental health problems as well as putting a strain on public services such as hospitals and the police.
- 7.4.9 The prevention of crime through natural surveillance is also a benefit of mixed use streets where there is functional diversity that sees the streets being used by people throughout the day, and most of the night, and informal surveillance from the overlooking windows of local residents.<sup>20</sup>

## **7.5 Transport and Connectivity**

- 7.5.1 There is evidence that the availability of public transport makes it possible for people to access jobs further away.<sup>28</sup>
- 7.5.2 Provision of subsidised, frequent and reliable public transport, and improved road connectivity, provides improved access to a range of opportunities and services such as retail, education, recreational activities and health and social care services. These in turn can improve individual quality of life and reduce social isolation.<sup>29 30</sup>
- 7.5.3 However, improved connectivity can bring with it increased risks of injuries and casualties particularly for cyclists and pedestrians especially when major roads are

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<sup>27</sup> Lawrence D Frank, Mr. Peter Engelke; How Land Use and Transportation Systems Impact Public Health: A Literature Review of the Relationship between Physical Activity and Built Form

<sup>28</sup> Kjellstrom T, and Hill S. New Zealand evidence for health impacts of transport: background paper prepared for the Public Health Advisory Committee, 2002

<sup>29</sup> On the move, Informing transport health impact assessment in London October 2000

<sup>30</sup> Central Lancashire Primary Care Trust, West Lancashire District Council. Skelmersdale Town Centre Re-Design Proposals Health Impact Assessment. 2008

close to houses and schools. Though overall, studies have shown that the provision of cycle and footpaths reduces cycle and pedestrian casualties and can lead to long term increase in levels of cycling and walking and thus an increase physical fitness and functions.<sup>31</sup>

7.5.4 Inaccessible and unreliable public transport tends to be found in deprived areas leading to greater social and health inequality. Those who benefit most from improved public transport and connectivity are women, children and disabled people, people from minority ethnic groups, older people and people on low incomes.<sup>32</sup>

7.5.5 Major roads running through housing communities can result in severance. Severance is the physical presence of traffic, as well as the perceived risks of accidents, which creates a barrier to social interaction and community cohesion particularly for children and older people. There is evidence which indicates that increased social contact can result in lower overall death rates.<sup>24</sup>

7.5.6 In the UK, children in the poorest families are 4 times more likely to die in road accidents than those in the richest social class because they are more exposed to motor vehicle traffic.<sup>24</sup>

7.5.7 A number of studies point to the negative health impacts of noise levels associated with transport. Key noise effects include annoyance, sleep disturbance and in children lower educational performance.<sup>24 33</sup>

7.5.8 Increased connectivity however can also lead to congestion. Congestion causes motor vehicles to travel at low speeds which increase local levels of exhaust emissions.

7.5.9 The adverse health effects of air pollution from vehicles have been well documented and include small but measurable increases in:<sup>34</sup>

- Premature deaths from cardio-respiratory disease
- Exacerbation of existing respiratory illnesses
- Increase in respiratory symptoms e.g. coughing, shortness of breath

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<sup>31</sup> Physical activity and the environment Review One: TRANSPORT NICE Public Health Collaborating Centre – Physical activity 2006

<sup>32</sup> Cave B, Cooke A, Benson K. Urban Renaissance Lewisham health and social impact assessment; March 2004

<sup>33</sup> Thomson, H. Jepson, R. Hurley, F. Douglas, M. Assessing the unintended health impacts of road transport policies and interventions: translating research evidence for use in policy and practice

<sup>34</sup> World Health Organization. 2005. Health effects of transport related air pollution

## **7.6 Access to and availability of services and amenities**

- 7.6.1 Amenities and services have been identified as channels for creating and maintaining social networks and interactions through the promotion and facilitation of informal meetings and social cohesion. This in turn can help relieve stress and enhance mental health and wellbeing.<sup>35</sup>
- 7.6.2 Research shows that wellbeing in older age is a function of personal choice and determination hence the quality of life, especially for older people, is partly dependent on the availability and accessibility of opportunities for social interaction/community participation. The same factors also influence children's wellbeing.<sup>29</sup>
- 7.6.3 Providing a cluster of local services and amenities increases the opportunity for multi-use trips, social interactions, active travel and physical activity.<sup>36</sup>

## **7.7 Public, open and green spaces**

- 7.7.1 Public spaces (including high streets, street markets, shopping precincts) play a vital role in the social life of communities. They act as a 'self-organising public service', a shared resource in which experiences and value are created.<sup>37</sup>
- 7.7.2 Public spaces offer many benefits for different groups of people such as the 'feel-good' buzz from being part of a busy street scene or the therapeutic benefits of quiet time spent on a park bench. Public spaces create opportunities for social inclusion and interaction and contribute to people's attachment to their locality.<sup>31</sup>
- 7.7.3 Poor design and management of public spaces such as poor signposting, poor lighting can cause people to under utilise public spaces as these suggest that there is little of interest around the area and can create a lower sense of security especially for vulnerable groups and pedestrians.<sup>31</sup>

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<sup>35</sup> Thomson H, Kearns A, Petticrew M. Assessing the health impact of local amenities: a qualitative study of contrasting experiences of local swimming pool and leisure provision in two areas of Glasgow *J Epidemiol Community Health* 2003;57;663-667

<sup>36</sup> H. Barton, and C. Tsourou. *Healthy Urban Planning*. 2000. World Health Organisation. Spon Press. pp 132-135

<sup>37</sup> Joseph Rowntree Foundation, The social value of public spaces.

- 7.7.4 Direct and indirect contact with nature e.g. gardens and greenery in general can have restorative effects that improve wellbeing either through direct or indirect contact.<sup>38 39</sup>
- 7.7.5 It has been suggested that the likelihood of being physically active can be up to three times higher in environments that contain high levels of greenery and the likelihood of being overweight or obese can be up to 40% less.<sup>40</sup>
- 7.7.6 A variety of landscape features and its attractiveness encourages higher levels of walking.<sup>41</sup>
- 7.7.7 Apart from encouraging higher levels of walking other reported impacts of attractive and well maintained greenspaces include reducing stress and mental fatigue; pleasurable sensory experiences and increased social interactions.<sup>34 35</sup>
- 7.7.8 There is also evidence of the ability of greenspace to provide direct protection from environmental exposures, for example providing shade from hot weather conditions, improving air quality through their uptake of particles and to reduce the risk of flooding by reducing surface water runoff especially in flood prone areas.<sup>42</sup>

## **7.8 New housing and housing improvements**

- 7.8.1 The health impacts of new housing and housing improvements are similar except in the case of housing improvements, the need to temporarily or permanently relocate residents.
- 7.8.2 The number of people living in Decent Homes has been recognised as being not just of benefit to the occupiers but also to the wider community and to society.<sup>43</sup>
- 7.8.3 However, housing relocation is considered to be a stressful event and it has been linked to the loss of community cohesion and the disruption of social networks.<sup>44</sup>

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<sup>38</sup> Hartig T, Mang M, Evans G. Restorative Effects of Natural Environmental Experiences, Environment and Behaviour; 1991 23: 3-26

<sup>39</sup> Murphy L, Mental Capital and Wellbeing: Making the most of ourselves in the 21<sup>st</sup> century, National Institute for Occupational Safety and Health

<sup>40</sup> Ellaway A, Macintyre S, Xavier B. Graffiti, greenery, and obesity in adults: secondary analysis of European crosses sectional survey. BMJ 2005; 331:611-612.

<sup>41</sup> Greenspace Scotland :The links between greenspace and health: a critical literature review, October 2007

<sup>42</sup> Forestry Commission. Determining the benefits of woodland on air quality:  
<http://www.forestry.gov.uk/website/forestresearch.nsf/ByUnique/INFD-62DFHK>

- 7.8.4 Improvements in physical housing conditions particularly in relation to central heating systems and improved insulation usually improves thermal comfort and reduces heating bills.<sup>27</sup>
- 7.8.5 There is a well established link between improved housing design and a reduction in home accidents through better location of appliances and the installation of safety devices such as smoke alarms and child safe windows.<sup>45</sup>
- 7.8.6 Housing costs and/or rents can increase with new and improved housing. This can affect people on low income when the added financial strain which in turn can affect diet, recreational activities and buying clothes/materials for home/school/work.<sup>46</sup> In addition it can lead to gentrification of an area where poorer people are forced out as higher income groups move in.
- 7.8.7 Poor indoor air quality from short term increases in indoor particulates produced from environmental tobacco smoke, cooking gases and certain heating appliances are associated with increased mortality and morbidity and acute cardio-pulmonary diseases particularly in vulnerable groups such as the elderly or people with asthma.<sup>47</sup>
- 7.8.8 Dampness is associated with encouraging the growth of mites and moulds which can act as allergens and immuno-suppressors that can lead to sneezing, coughing and exacerbation of asthma. People living in damp homes have been known to suffer from persistent respiratory symptoms e.g. sneezing, runny nose, coughing which reduces general health and wellbeing.<sup>48</sup> In old homes this can be as a result of poor damp proofing and too little ventilation. In new housing it can be a result of too little ventilation.
- 7.8.9 Children can be particularly affected by living in overcrowded housing. The effects of overcrowding can include increased irritability and aggression. In children it can also lead to poor educational attainments and poor mental health due to the lack of play space and privacy.<sup>42</sup>

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<sup>43</sup> Chartered Institute of Environmental Health. Good housing leads to good health: a toolkit for environmental health practitioners. September 2008

<sup>44</sup> Teresa Lavin et al Institute of Public Health in Ireland. Health Impacts of the Built Environment a review. July 2006

<sup>45</sup> Thomson H, Petticrew M, Morrison D. Housing Improvement and Health Gain: A summary and systematic review. MRC Social and Public Health Unit. January 2002

<sup>46</sup> Moloughney B. Housing and Population Health: The State of Current Research Knowledge. Department of Public Health. University of Toronto. June 2004

<sup>47</sup> WHO. Guidelines for Air Quality. December 1997

7.8.10 There is also the possibility of increased social exclusion and divisions between existing and new residents when existing residents in or near a regeneration area see no improvements to their own homes or neighbourhoods.<sup>49</sup>

## **7.9 Climate Change<sup>50 51</sup>**

7.9.1 Increasing levels of carbon dioxide and other greenhouse gases is likely to produce significant long term changes to local, regional and global weather patterns. In the context of the UK these are likely to be:

- Warmer summer (with the strong potential for heatwaves)
- Milder wetter winters
- Floods and droughts
- Extreme weather events e.g. thunderstorms and hurricanes

7.9.2 All of the above are likely to affect health and wellbeing directly.

7.9.3 In temperate countries like the UK, deaths rates during the winter season have tended to be higher than those in the summer however this may/is likely to change with more deaths related to heat stroke.

7.9.4 Changes in air quality from air pollutants and intense pollen seasons may exacerbate existing cardio-respiratory diseases.

7.9.5 Increased incidence of floods and droughts is likely to affect agricultural land use which can affect the quality and availability of affordable food production. This has impacts on levels of nutrition – malnutrition and over nutrition.

7.9.6 Issues surrounding water shortage and quality are likely to intensify in situations where there is drought or reduced rainfall. This is likely to have an impact on sanitation and transmission of water borne diseases.

7.9.7 There is a link between climate change and disease transmission as increasing temperatures may provide opportunities for disease vectors, such as mosquitoes

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<sup>48</sup> Page A. Journal of Environmental Health Research Volume 1, Issue 1; Poor housing and mental health in the United Kingdom: Changing the focus for Intervention, 2002

<sup>49</sup> Douglas M, Thomson H, Gaughan M. Health Impact Assessment of Housing Improvements: A Guide, Public Health Institute of Scotland, Glasgow, 2003

<sup>50</sup> WHO. Climate change and human health. [http://www.searo.who.int/en/Section260/Section2468\\_14932.htm](http://www.searo.who.int/en/Section260/Section2468_14932.htm)

<sup>51</sup> Health Protection Agency. Health effects of climate change in the UK. 2008



and malaria, to increase replication rates and change their infection and survival patterns.

7.9.8 This means that the kinds of buildings and neighbourhoods in the UK will need to reflect the potential changes that climate change is likely to bring in localities.

## **7.10 Conclusion**

7.10.1 Judging from the evidence gathered, the town centre regeneration has the potential to be beneficial to residents, workers and visitors of the town centre from a health and wellbeing perspective.

7.10.2 However, revitalising a town centre should not just involve increasing the number and choice of shops but should include:

- making access to the shops easier through proper signposting and increased transport connectivity (including pedestrian and cycle networks as well as public transport access);
- making the vistas (green, public and open spaces) around the retail areas attractive so that people are likely to use the area more often;
- providing high quality inclusive urban design; and
- developing other services and amenities to create a mixed use development or set of developments.

## 8 Community & Other Stakeholder Views and Perspectives

### 8.1 Introduction

8.1.1 A range of public and other stakeholders were consulted mostly Aug-Dec' 2009.

8.1.2 For details please see the Leek Masterplan, Appendix 1: Consultation Report, May 2010.

### 8.2 Key issues identified

8.2.1 There was a generally positive response for the idea of Leek undergoing a transformation with support for the consultant team's proposals.

8.2.2 The community agreed that although the range of independent shops contributed positively to the attractiveness of Leek, it needs to offer more in the way of ladies and children's clothing.

8.2.3 There was opposition against out-of-town retail given the potential impact of independent retailers. A major theme was additional and improved parking with improvements to traffic flow through and around the town.

8.2.4 The community felt strongly about retaining the Foxlowe as an Arts Centre due to its prominent location fronting Market Place. The need to preserve the character of Leek such as historic buildings and the need for more accommodation, cafes and restaurants were highlighted as important for attracting visitors to Leek.

8.2.5 The key issues identified were:

- Enhancing the retail offer (range of shops and services)
- Managing traffic and parking
- Improving links and movements in and around Leek
- Enhancing the townscape of Leek
- Broaden the visitor and cultural offer
- Identification of additional opportunity sites

# 9 Health Impacts of the Final Preferred Options

## 9.1 Introduction

9.1.1 The analysis of health impacts examined the likely effects during the implementation, and short and long term operation phases. The main areas of focus were:

- effects on accessibility, transport and connectivity
- changes to the quality of the townscape environment
- effects on local employment opportunities
- equity issues

9.1.2 Two summary health impact tables are provided at the end of this chapter (See Tables 9.1 and 9.2).

9.1.3 Appendix C provides detailed health impact tables.

## 9.2 Mix of proposed interventions

9.2.1 Overall the mix of interventions proposed for the 15 opportunity sites is good from a health and wellbeing perspective. The interventions include a mix of land uses across Leek Town Centre:

- Retail (related to shops and markets)
- Residential (traditional houses, apartments and extra care houses)
- Employment (industrial and office)
- Education (Leek College refurbishment)
- Arts and Leisure (an arts centre, commercial leisure facility, public square)
- Transport and Connectivity (refurbished bus station, car parking and junction and improved pedestrian crossings)

9.2.2 The fifteen opportunity sites are spread across four main quadrants namely:

- Town Centre North

- Town Centre East
- Town Centre Core (War Memorial)
- Town Centre Core (Market Place) and Town Centre West

9.2.3 Within each of these four quadrants and also on each of the fifteen opportunity sites, the interventions generate a mix of land uses – residential, employment, retail and in some cases green and open spaces – these are likely to contribute to increasing physical activity through walking and increased social interactions and use of the town centre.

9.2.4 The proposed interventions for each of the opportunity sites within each quadrant appear to have taken into account uses that are limited or lacking within the quadrants. For example, the proposal for office/industrial uses on Opportunity Site 5 (London Mill/York Mill Area) will supplement the limited existing employment sites in the Town Centre Core (War Memorial) quadrant.

### **9.3 Factors influencing the implementation phase**

9.3.1 The implementation phase will include demolition and construction on the 15 opportunity sites depending on the preferred intervention for the opportunity sites (See Table 4.1 and Figures 4.1-4.3).

9.3.2 The regeneration is likely to be a phased project with work on some opportunity sites being started and completed before others depending on which developments are brought forward for planning consent.

9.3.3 In addition to the developments proposed on the 15 opportunity sites, public realm improvements and major access and movement interventions such as the removal of a roundabout and putting in a signalled junction control will also be implemented. These are likely to further increase disruptions to transport and connectivity in addition to the disruption due to increased construction lorry traffic associated with development of the opportunity sites.

### **9.4 Factors influencing the operation phase**

9.4.1 The regeneration will help to improve the choice of services, amenities, facilities and general attractiveness of the public realm. Residents are therefore likely to

use the town centre more often than they do at the moment and reduce the shopping they do in Stoke-on-Trent, Buxton and Macclesfield.

- 9.4.2 In addition to improved retail provision including potentially another supermarket, there will be an increase in the number of good quality homes and the range of culture and leisure facilities through the development of a multi-use Arts Centre and a commercial leisure facility.
- 9.4.3 New residents moving into the town centre will have good quality new homes that are built to the latest standards.
- 9.4.4 The proposed Arts Centre, leisure facility, employment (office and industrial) and retail sites are likely to provide a focal point for community activities, social interaction and local employment opportunities.
- 9.4.5 Increased influx of people into the town centre both as residents, workers and visitors may mean increased vehicular traffic as well as some pressure on existing amenities and services such as health centres.
- 9.4.6 Over the long term public buildings and public realm within the town centre e.g. the Arts Centre, will need to be maintained and after 10 years, some refurbishment and renovation will be needed to avoid them becoming rundown.
- 9.4.7 Over the long term there is a possibility that local employers, particularly existing small businesses, might move out of the town centre or close down if rents and leases become too high because of the popularity of Leek as a shopping destination. This will need careful monitoring to ensure that the diversity and affordability of the retail and leisure amenities is maintained.

## 9.5 Health impacts – implementation phase

- 9.5.1 Overall, the **implementation phase is likely to have minor to moderate negative health and well being impacts**. This depends on how the construction/ refurbishment related traffic is managed and also how accessibility to the town centre is protected. Existing residents within the town centre (particularly those close to opportunity sites, children, the elderly, those with disabilities and long term limiting illnesses) during the implementation phase may feel the impacts of the

development more than those living on the boundaries of the town centre or in other parts of Leek and the sub-region.

9.5.2 There are two potential positive health and wellbeing impacts of the implementation phase.

9.5.2.1 In terms of *jobs and economy*, opportunities for employment for local people, particularly men, for construction related work on the opportunity sites and the stimulation of the wider economy that these jobs are likely to bring may have positive impacts. This however is dependent on a) whether strategies are in place that will ensure that local residents are given preference in taking up employment and b) how much of the building materials and equipment are sourced from businesses within Leek and Staffordshire Moorlands. For *most Leek residents and town centre residents, workers, users and visitors*, this is likely to have **no effect**. For *unemployed people especially those with construction work related skills (and their families)* this is likely to have a **minor to moderate positive health and wellbeing impact**.

9.5.2.2 In terms of *education and learning*, there may be opportunities for on-the-job construction training. If links are established with the college there may also be opportunities for students from Leek College participating in apprenticeship schemes to gain their work experience from the construction work going on in Leek Town Centre. For *most residents*, this is likely to have **no effect**. For those *who get training and experience through work on the opportunity sites* this is likely to have a **minor to moderate positive health impact**.

9.5.3 There are ten potential negative health and wellbeing impacts of the implementation phase.

### HEALTH OUTCOMES

9.5.3.1 In terms of *chronic disease and pollution effects*, there is likely to be some dust generated during construction/refurbishment work and an increase in air pollution due to construction/refurbishment related traffic. For *most Leek residents and town centre residents, workers, users and visitors* this is likely to have **no effect or a minor negative health and wellbeing impact**. For *residents living in the town centre especially around the*

*opportunity sites and those with existing respiratory and long term limiting illness* this is likely to have either **no effect or a minor to moderate negative health and wellbeing impact**.

9.5.3.2 In terms of *physical injury*, there is the potential for incidents to occur in and around the construction sites if the sites and related traffic are not satisfactorily managed. For *most Leek residents and town centre workers, users and visitors* there is likely to have **no effect or a minor negative health and wellbeing impact**. For *town centre residents especially around opportunity sites (particularly children, older people, those with disabilities) and construction workers* this is likely to have **a minor to moderate negative health and wellbeing impact**.

9.5.3.3 In terms of *mental health and wellbeing*, there will be nuisance and annoyance associated with the construction activities and the construction traffic (mainly noise and dust) particularly for those close to a cluster of opportunity sites. For *most Leek residents and town centre residents, users and visitors* there is likely to have **no effect or a minor negative health and wellbeing impact**. For *town centre residents and workers living and working very near to the opportunity sites (including babies and pre-school children, older people and those with disabilities and their carers)* this is likely to have **a minor to major negative health and wellbeing impact**.

#### HEALTH DETERMINANTS

9.5.3.4 In terms of *education and learning*, refurbishment of the Leek college buildings and possibly extending it to include an Arts Centre and other educational uses is likely to cause disruption to existing students. For *most Leek residents and town centre residents, workers, users and visitors* this is likely to have **no effect**. For *students attending the college* this is likely to have a **minor to moderate negative health and wellbeing impact**.

9.5.3.5 In terms of *transport and connectivity*, the movement of the construction/refurbishment traffic may add to the already congested roads within the town centre and cause disruptions, restrictions or diversions to bus services. It may also cause some physical severance and reduce time spent in the town centre because the roads may be seen as being



dangerous and difficult to cross. For *most Leek residents* this is likely to have a **minor to moderate negative health and wellbeing impact**. For *residents who depend on public transport* this is likely to have a **minor to major negative health and wellbeing impact**. For *town centre residents, workers, users and visitors* this is likely to have a **minor to moderate negative health and wellbeing impact**.

- 9.5.3.6 In terms of *shops and retail amenities*, there may be some disruption to shops in terms of deliveries and opening hours this likely to have **no effect or a minor negative health and wellbeing impact on customers and workers**.
- 9.5.3.7 In terms of *social capital and community cohesion*, this is likely to depend on the level of disruption and concerns generated by the construction and refurbishment. For *most Leek residents and town centre residents, workers and visitors* there is likely to be **no effect or a minor negative health and wellbeing impact**. For *town centre residents in the town centre and regular users especially older people, children and those (generally women) caring for young children* it is likely a **minor to moderate negative health and wellbeing impact**.
- 9.5.3.8 In terms of *arts and leisure*, there may be some disruption and potential barriers to accessing Brough Park and Brough Park Leisure Centre, the various community facilities and tourist/visitors shops. Access to the museum on Mill Street may be affected as it is close to the Town Centre Core, Market Place and Town Centre West segment where there are seven opportunity sites. For *most Leek residents* this is likely to have a **minor negative health and wellbeing impact**. For *children and adults regularly using the park, community facilities and for visitors/tourists* this is likely to have a **minor to moderate negative health and wellbeing impact**.
- 9.5.3.9 In terms of *lifestyles and daily routines*, there will be disruption to daily activities and events in the town centre area such as going to the shops and taking children to school. There is also a potential for increased levels of traffic to be displaced to other parts of Leek. For *most Leek residents*, this is likely to have **no effect or minor negative health and wellbeing impact**. For *residents living in the town centre especially those close to*

*opportunity sites* it is likely to have a **minor to moderate negative health impact**.

- 9.5.3.10 In terms of *land and spatial effects*, parts of the town centre area and the wider neighbourhood would be visually unattractive because of construction activities. For *most Leek residents and town centre, workers, users and visitors* this is likely to have **no effect or a minor negative health and wellbeing impact**. For town centre residents especially those close to the opportunity sites this is likely to have a minor to moderate negative health and wellbeing impact.

## 9.6 Health impacts – short term/long term operation phase

- 9.6.1 Initially the start of the operation phase will be alongside continuing construction work due to the phased nature of the regeneration programme with work on some opportunity sites being started and completed at different times over a period of years.
- 9.6.2 Overall, for most Leek residents and town centre residents, workers, users and visitors including children, older people and those with disabilities, as well as new residents who move into new housing the operation phase is likely to have a **minor to major positive health and wellbeing impact**.
- 9.6.3 There are nine potential positive health and wellbeing impacts of the operation phase.

### HEALTH OUTCOMES

- 9.6.3.1 In terms of *chronic disease and pollution effects*, the improved cycle and pedestrian networks and attractive and the enhanced greenspace and public realm is likely to encourage people to be more physically active potentially reducing the rise in obesity. Also improved traffic conditions may reduce the air pollution from vehicles and thus improve air quality. For *most Leek residents and town centre residents, workers, users and visitors* this is likely to have a **minor to moderate positive health and wellbeing impact**.

## HEALTH DETERMINANTS

- 9.6.3.2 In terms of *jobs and economy*, there is likely to be an increase in the number of employment opportunities created with the new Arts centre, a commercial leisure facility, the wider range of shops and retail amenities and new and existing employment sites. For *most Leek residents and town centre residents, users and visitors* this is likely to have **no effect**. For *those residents looking for work and getting jobs*, this is likely to have a **minor to moderate positive health and wellbeing impact**. For existing businesses this is likely to have a **minor to moderate positive health and wellbeing impact**. For town centre workers this is likely to have a minor positive health and wellbeing impact.
- 9.6.3.3 In terms of *housing and shelter*, the new good quality housing in the town centre is likely to be a mixture of private and affordable housing of various types, (traditional houses and apartments) and likely to meet the Decent Homes, Code for Sustainable Homes and Lifetime Homes standards. For *most Leek residents and town centre residents, workers, users and visitors* this is likely to have **no effect**. For *people looking for homes and for residents moving into the new homes* this is likely to have a **minor to moderate positive health and wellbeing impact**.
- 9.6.3.4 In terms of *transport and connectivity*, Leek Town Centre is likely to have a better network of footpaths/cycleways and will be easier to access from the rural area surrounding Leek. The public realm will also be improved and made more attractive. In addition, transport interventions such as lower speed limits on Derby Street and Russell Street, new shared surfaces, pedestrian crossings and traffic light controlled junctions are all likely to make the town centre more accessible especially for older people, those with young children, and those with disabilities. This is likely to promote and increase physical activity as well as social interaction. For *most residents* this is likely to have a **minor to moderate positive health and wellbeing impact**. For *older people, those with young children and those with disabilities* this is likely to have a **moderate to major positive health and wellbeing impact**.
- 9.6.3.5 In terms of *education and learning*, the improved quality of the college buildings and the conditions under which the students that attend Leek

College learn, is likely to improve academic performance. For *students attending the college or looking for education opportunities at the college* this is likely to have a **minor to moderate positive health and wellbeing impact**.

9.6.3.6 In terms of shops and other retail amenities, the additional numbers of shops and retail amenities may provide a wider range of produce, goods and services depending on the kinds of shops and their locations. The potential for another large supermarket may also increase the choice of affordable and healthy foods and other goods. For *most Leek residents and town centre residents, workers, users and visitors* this is likely to have a **minor to moderate positive health and wellbeing impact**.

9.6.3.7 In terms of *social capital and community cohesion*, improved public and open spaces, reduced dereliction, increased provision of leisure and community facilities will provide opportunities for people to stay in the town centre for longer and use it for other activities besides shopping. This is likely to encourage more social interactions. This is likely to have a **minor to moderate positive health and wellbeing impact**.

9.6.3.8 In terms of *arts and leisure*, there will be an increase in the choice of activities available through the provision of the multi purpose Arts Centre and commercial leisure facility which will include cinema screens, a theatre and bowling alley. For *most Leek residents and town centre residents, workers, users and visitors* this is likely to have a **minor to moderate positive health and wellbeing impact**.

9.6.3.9 In terms of *land and spatial*, the enhanced streets, new squares and improved public realm are likely to enhance the visual appeal of the area. For *most Leek residents* this is likely to have a **minor to moderate positive health and wellbeing impact**. For town centre residents, workers, users and visitors this is likely to have a **minor to moderate positive health and wellbeing impact**.

9.6.4 The **main potential negative health and wellbeing impacts of the regeneration during the long term operation phase** are linked to the long term investment in the maintenance of the town centre. If over the long term the services, facilities and amenities are not maintained, renovated and invested in, then the positive

impacts identified above will be lost and negative health and wellbeing impacts will emerge especially affecting older people, women, those with disabilities, children and young people and those looking for work. This means it is important to develop a plan now for how the services, facilities and amenities will be maintained 10-20 years after implementation.

- 9.6.5 The main positive health and wellbeing impacts would be similar to those for the short term operation phase.

## 9.7 Health impacts on Leek and Town Centre residents

- 9.7.1 During the implementation phase, the potential negative health and wellbeing impacts will be on **Leek and Leek town centre residents** and to a lesser extent town centre workers and users. They are likely to be from:

- 9.7.1.1 *Mental health and wellbeing:* the nuisance impact of dust, noise, smell and unattractive sites is likely to lower wellbeing to a greater or lesser extent depending on how near people are living, working and/or using services near to the construction work.
- 9.7.1.2 *Transport and connectivity:* disruption and increase in journey times to local bus and car users and potential road closures limiting the ability to walk in and around the town centre.
- 9.7.1.3 *Lifestyle and daily routines:* disruptions to residents' daily routine particularly if they live close to opportunity sites. Noise disruptions may also affect residents' sleep patterns (especially babies, preschool children and the elderly who are likely to have naps in the daytime).

- 9.7.2 During the operation phase, the potential positive health and wellbeing impacts will be on both **existing and new Leek residents and Leek town centre residents, workers, users and visitors**. They are likely to be from:

- 9.7.2.1 *Jobs and economy:* With an increase in the number of opportunities created with the additional retail shops, new employment sites, Arts Centre and the commercial leisure facility, both existing and new residents seeking employment are likely to benefit particularly if local residents are

given priority in filling vacancies. The provision of new facilities and amenities is likely to increase town centre users and tourist visitors.

- 9.7.2.2 *Transport and Connectivity:* Better transport networks including improved roads, cycle and pedestrian networks and crossings are likely to increase accessibility across the town centre and encourage active travel.
- 9.7.2.3 *Shops and retail:* There will be an increase in the number and range of shops available therefore increasing the choice available.
- 9.7.2.4 *Land and spatial:* Environmental improvements, including enhanced public realms, squares and greenspace are likely to improve the visual appeal of the town centre and encourage social interactions and more time spent outdoors.

## **9.8 Health impacts on children and young people**

9.8.1 During the implementation phase, the potential negative health and wellbeing impacts on children and young people are likely to be from:

- 9.8.1.1 *Transport and connectivity:* disruption to access especially when getting to and from schools and colleges within and outside the town centre. This is likely to increase journey times.
- 9.8.1.2 *Education and learning:* the noise from the construction work which may have a slight negative impact on children's learning particularly if work and traffic are close to the schools they attend or they live near opportunity sites. Students at Leek College are likely to face the most disruptions from the refurbishments to the college buildings.
- 9.8.1.3 *Physical injury:* there are potentially higher risks of physical injury because of the construction work and lorry traffic moving in and around the town centre. For example, children and young people who attend Leek College on Stockwell Street, Buckingham's Nursery School on Buxton Road and Leek School of Dance on Brook Street are on roads that are existing accident hotspots with poor or no pedestrian crossings and footpaths.

9.8.2 During the operation phase, the potential positive health and wellbeing impacts on children are likely to be from:

- 9.8.2.1 *Transport and connectivity:* improved road, pedestrian and cycle networks, which will make the area more accessible thus children and young people can easily go to and make better use of Brough Park and there will be easier access for children to get to school and access leisure facilities.
- 9.8.2.2 *Arts and Leisure:* The provision of new facilities such as the Arts Centre and the commercial leisure centre is likely to increase the choice of activities available to children and young people.
- 9.8.2.3 *Land and spatial:* the provision of some potentially enhanced greenspace and public realm which will offer new things to explore and be attractive for children to visit.

## 9.9 Health impacts on women

9.9.1 During the implementation phase, the potential positive health and wellbeing impacts on women are likely to be from:

- 9.9.1.1 *Transport and connectivity:* disruption to their access to buses and walking to and from the town centre. Those who rely on public transport and have responsibility for taking children to and from after school activities are likely to face the most disruptions.
- 9.9.1.2 *Lifestyle and daily routines:* disruption to their daily routine, in that things are likely to take longer to do, e.g. going to the bank, shopping etc leaving less time for other things. The town centre activity may also reduce on-street social interactions.
- 9.9.1.3 *Mental health and wellbeing:* the perceived unsafeness of the town centre especially in the evening and at night and the disruption to access identified above may also impact on mental health and wellbeing.

9.9.2 During the implementation phase, the potential positive health and wellbeing impacts on women are likely to be similar to those experienced by most Leek and town centre residents. In addition to those impacts, high quality design of the



public realm, a diverse range of shops and well used streets will further enhance the benefits to women by making the town centre more attractive to visit during the day and evenings.

## **9.10 Health impacts on older people**

9.10.1 Older people are likely to have a similar set of health and wellbeing impacts to women though the significance of the negative impacts in particular are likely to be greater for this group of residents particularly if they live, work or use services close to the opportunity sites and transport and public realm improvements.

9.10.2 They are also more likely to reduce going outdoors, find it more difficult to shop for themselves and more easily lose contact with friends and family during the implementation phase because of the general disruption and difficulties in terms of going by bus and walking across and around the town centre.

## **9.11 Health impacts on people with disabilities**

9.11.1 People with disabilities (including those with long term limiting illnesses) would also have a similar set of health and wellbeing impacts to women and older people and again depending on their disability the significance of the negative impacts in particular is likely to be greater on this group of residents during the implementation phase particularly if they live, work or use services close to opportunity sites and transport and public realm improvements.

## **9.12 Health impacts on low income/unemployed people**

9.12.1 Provided there is a policy in place that local residents will be targeted first and supported to take on locally generated jobs, the new jobs created during both the implementation and operation phases are likely to have a positive impact on health and wellbeing.

### **9.13 Health impacts on black and minority ethnic groups**

9.13.1 Residents from black and ethnic minority backgrounds are likely to have a similar set of health and wellbeing impacts to most residents in Leek.

### **9.14 Long term and cumulative impacts**

9.14.1 Due to the nature of the redevelopment being phased, long term impacts may arise from an extended and sequential construction phase as different opportunity sites start development at different times alongside cumulative impacts from opportunity sites being developed at the same time.

9.14.2 These long term impacts are likely to be minor to moderate negative health impacts for residents and workers who live and work around those opportunity sites where construction work is ongoing for long periods of time.

9.14.3 Cumulative impacts are likely to be on town centre residents, workers and visitors of the 'Town Centre Core' (Market Place) and 'Town Centre West' quadrant where there is a big cluster of opportunity sites with most of the transport and public realm interventions proposed also concentrated in this quadrant.

9.14.4 In addition, more cumulative impacts are likely to arise from other proposed developments that may be carried out in and around the town centre area. One possible development is for a large supermarket. Such developments could increase the duration by which residents, workers and visitors are exposed to the negative impacts associated with the implementation phase.

### **9.15 Equity impacts**

9.15.1 The opportunity areas will provide services and amenities that will be accessible to all e.g. Arts Centre, leisure facility, refurbished Leek College and new shops and employment sites.

9.15.2 The key equity issues are in relation to residents of Leek North who are the most deprived residents in Leek. The town centre regeneration has the potential to narrow health inequalities by:

- 9.15.2.1 providing a wider range of mixed skill jobs for Leek North residents both during the implementation and operation phases;
- 9.15.2.2 providing shops and retail amenities that balance high quality and affordability;
- 9.15.2.3 providing a range of arts and leisure amenities that are inclusive in the activities that they offer and their affordability;
- 9.15.2.4 ensuring the public transport, cycle and foot accessibility is greatest between Leek North and the town centre.

## **9.16 Conclusion**

- 9.16.1 The proposed redevelopment has overall positive health impacts for most residents, workers, users and visitors to Leek Town Centre.
- 9.16.2 However, those living close to opportunity sites; older people, children and young people, those with disabilities and those with young children are likely to be most adversely affected during the implementation phase.
- 9.16.3 Over the long term, if there is no maintenance, investment and renovation then the positive health and wellbeing benefits of the regeneration are likely to be lost.
- 9.16.4 The next chapter recommends some key mitigation and enhancement measures to minimise the potential negative health and wellbeing impacts and maximise the potential positive impacts.

**Table 9.1 Implementation phase (the majority of these health and wellbeing impacts are temporary and reversible)**

**red = negative impact**, **amber = uncertain impact (could be +ve or -ve)**, **green = positive impact**, **white = no separate impact or not identifiable**

(This table summarises the detailed health impact tables and identifies the possible moderate to major impacts and those groups that would be affected.)

People affected		Overall	Chronic diseases & pollution	Physical injury	Mental health & wellbeing	Jobs and economy	Housing & shelter	Transport & connectivity	Education and learning	Crime & safety	Health and social care services	Shops & retail	Social capital and community cohesion	Arts and leisure	Lifestyle and daily routines	Energy and waste	Land and spatial
	Leek Residents																
	Town Centre residents																
	Town Centre workers																
	Town Centre users																
	Town Centre visitors																
Gender	Women																
	Men																
Age	Black and other ethnic backgrounds																
	White British																
	Older people																

People affected		Overall	Chronic diseases & pollution	Physical injury	Mental health & wellbeing	Jobs and economy	Housing & shelter	Transport & connectivity	Education and learning	Crime & safety	Health and social care services	Shops & retail	Social capital and community cohesion	Arts and leisure	Lifestyle and daily routines	Energy and waste	Land and spatial
Disability	Children and young people																
	Physical																
	Sensory																
	Learning																
Faith	Christian																
	Other																
Other	Unemployed people																
	Those with respiratory problems																
	Leek College students																
	Construction students apprentices																
	Regular leisure/community facility users																

**Table 9.2 Operation phase**

**red = negative impact**, **amber = uncertain impact (could be +ve or -ve)**, **green = positive impact**, **white = no separate impact or not identifiable**

(This table summarises the detailed health impact tables and identifies the possible moderate to major impacts and those groups that would be affected.)

People affected		Overall	Chronic diseases & pollution	Physical injury	Mental health & wellbeing	Jobs & economy	Housing & shelter	Transport & connectivity	Education and learning	Crime & safety	Health and social care services	Shops & retail	Social capital and community cohesion	Arts & leisure	Lifestyle and daily routines	Energy and waste	Land and spatial
Leek residents																	
Town Centre residents																	
Town Centre workers																	
Town Centre users																	
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Gender	Women																
	Men																
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	White British																
	Older people																
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People affected		Overall	Chronic diseases & pollution	Physical injury	Mental health & wellbeing	Jobs & economy	Housing & shelter	Transport & connectivity	Education and learning	Crime & safety	Health and social care services	Shops & retail	Social capital and community cohesion	Arts & leisure	Lifestyle and daily routines	Energy and waste	Land and spatial
Disability	Physical																
	Sensory																
	Learning																
	Mental health																
Faith	Christian																
	Other																
	Unemployed people																
	Leek College students																



# 10 Measures to Optimise the Potential Health Outcomes

## 10.1 Introduction

10.1.1 The recommendations described in this chapter if properly applied and reviewed will ensure that the majority of the negative health and wellbeing impacts of the town centre regeneration scheme are mitigated and the positive health and wellbeing benefits enhanced.

10.1.2 The measures are likely to ensure that health inequalities are not widened especially as Leek North is the least well off of the four wards and among the most deprived areas in England compared to Leek West which is better off and among the least deprived areas in England. The measures could potentially also help to reduce some of these inequalities over the longer term.

10.1.3 The recommendations also take into account cumulative effects that could arise due to other developments being implemented around the same time as the Leek Town Centre regeneration.

10.1.4 This set of mitigation and enhancement measures should inform, be read alongside and implemented in conjunction with measures suggested by other assessments.

10.1.5 The regeneration of Leek Town Centre has a very strong potential to:

- increase job opportunities and enhance the local economy,
- encourage the town centre to be used for a diverse range of activities (including shopping and leisure activities),
- improve public transport provisions,
- increase connectivity through the provision of footpaths and cycle ways,
- enhance access to new and improved greenspace, and
- make the public realms and the built environments safer and attractive.

## 10.2 Design aspects

### 10.2.1 Active Design integrates with a number of converging agendas: <sup>52</sup>

10.2.2 Design Agenda – the promotion of high quality inclusive design of buildings and public spaces is a key principle of the planning system.

10.2.3 Health Agenda – physical activity is fundamental to the overall health and wellbeing of the nation and is central to arresting increasing trends in obesity among adults and children and is a key public health objective in Staffordshire Moorlands.

10.2.4 Transport Agenda – the promotion of active travel modes reflects Government transport policy seeking to promote more sustainable and environmentally friendly modes of transport.

10.2.5 The Active Design principles are relevant to the Leek Town Centre Scheme and are related to Everyday Activity Destinations – accessibility, amenity and awareness (AC, AM, AW); the specific principles :

- AC5 Are Active Travel Routes to Everyday Activity Destinations prioritised ahead of car linkages in terms of distance and directness?
- AC6 Does the design and layout of Everyday Activity Destinations help prioritise pedestrian, cycle and public transport access through providing:
  - Direct and welcoming pedestrian access from the street?
  - Public transport stops?
  - Well designed and conveniently located cycle parking?
  - Controlled car parking?
- AC7 Is provision made for **public conveniences**<sup>53</sup>, **drinking fountains** and changing facilities at Everyday Activity Destinations?
- AC8 Is appropriate access provided for disabled users and those with impaired mobility?

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<sup>52</sup> Sport England. 2007. Active Design: promoting opportunities for sport and physical activity through good design.

<sup>53</sup> This includes development of specific free public toilets or the creation of a town centre scheme where local cafes and restaurants provide their customer toilets for general members of the public and that this is advertised widely for locals and visitors.

- AC9 Has **cycle storage** been integrated into the design of new homes, workplaces and Everyday Activity Destinations?
- AM1 Are Active Travel Routes between Everyday Activity Destinations:
  - Direct and **well-lit** without blind corners?
  - Fronted and overlooked by development and/or other road-users to create natural surveillance?
  - **Integrated with open spaces and accessible play spaces** to create a variety of experiences along a route?
- AM4 Are high quality durable materials and street furniture employed throughout to define a strong identity for Active Travel Routes?
- AW2 Are Active Travel Routes to and between Everyday Activity Destinations:
  - Direct, unobstructed and legible as to their function and destination?
  - Offer a more direct route than car routes?
  - Clearly signed to communicate the potential for day to day trips to achieve physical activity targets?
- AW3 Are developers/occupiers of buildings using health promotion measures to inform residents, staff, pupils, customers of the opportunities that exist for physical activity?
- AW4 Has cycle storage been integrated into the design of new homes, work places and Everyday Activity Destinations, and has this been advertised and highlighted as a feature of the development?

#### 10.2.6 Design of the Extra care Housing

- 10.2.6.1 The design of the extra care housing facilities should be adapted to the needs of elderly people and people with disabilities and ensure they can maintain their independence and ability to do things for themselves.
- 10.2.6.2 Such designs should include ramps to the buildings to enable wheelchair access. In cases where there are steps or stairs designed into the facilities, there should be provision of hand railings or stair lifts.

10.2.6.3 Security and health devices that will enable older people to alert internal staff, the police and emergency services should also be considered. This can help reduce the perception of fear amongst older people.

10.2.6.4 Rooms should also be designed to facilitate ease of use through incorporating of support rails and possible hoist facilities that are user friendly and could be easily operated by the residents.

#### 10.2.7 Designing and investing in high quality housing

10.2.7.1 **All the new housing should meet Code for Sustainable Homes (a minimum of Level 4) and Lifetime Homes standards.** There are some potential differences between these standards in some specific areas e.g. most notably in relation to car parking and the different requirements for flats and homes generally. However, the additional costs attached to meeting these standards are very likely to be offset by the greater desirability, value and comfort provided by these homes to residents who move into these new homes.

10.2.7.2 There has been discussion of a more ambitious Decent Homes Plus Standard to supersede the current 2010 standard. Any Decent Homes Plus or similar Standard should be better aligned to the wishes and expectations of residents and should include:

- An ambitious thermal comfort criterion (insulation).
- Accessibility standards for elderly and disabled people.
- Internal noise insulation within and between dwellings.
- Standards for the external environment (i.e. communal areas) that integrates the Decent Homes Plus or similar Standard with the Sustainable Communities policy.

10.2.7.3 All homes should enable wheelchair (and hence push chair) access without modification.

10.2.7.4 Ensuring that the new housing caters for single people, couples and families and that there is a range of housing including 1, 2, 3 and ideally 4 bedroom housing.

- 10.2.7.5 Ensure that there is a proportion of new housing allocated as affordable housing.

10.2.8 Design of diverse and flexible employment buildings

- 10.2.8.1 The development of an **Employment Space Allocations Policy and Communication Plan** which would set the broad strategic direction for the kinds of uses that would be favoured e.g. no proliferation of fast food takeaways.
- 10.2.8.2 The range of shops should be high quality, diverse and affordable.
- 10.2.8.3 An indication of how much the retail space would be rented out for and the likely leasehold obligations should be discussed early so that market interest is generated early.
- 10.2.8.4 It will be important to ensure local grocery and butcher stores who source fresh local produce are encouraged and supported.
- 10.2.8.5 The design of the retail spaces needs to ensure that the buildings are suitable for modern retailers and are flexible in terms of their different potential uses over a 10-20 year period.

10.2.9 Ensuring safe, diverse and high quality open public and green spaces

- 10.2.9.1 There should be provision of useable biodiverse greenspace. Include play areas for children and young people and sheltered seating for adults and older people in Brough Park. Create public open spaces that are inviting and attractive for people to gather, stand and sit in.
- 10.2.9.2 Develop an integrated landmark use around Market Place to attract people to and encourage them to make more use of the town centre.
- 10.2.9.3 Integrate the management and maintenance of the public open and green space into the existing **Public Open and Greenspace Management and Maintenance Plan** for the area.

10.2.10 Home Zones and Secure by Design approach to design

- 10.2.10.1 A commitment to developing the majority of the development using Home Zone design principles to create a safer co-location of housing, retail,

services and amenities as well as an active and walkable mixed use development, that allows local people - especially children, older people and those with disabilities - to be physically active, to use street spaces and reduce the potential for road traffic incidents and injuries. This could be through a range of crossing points e.g. zebra crossings, paved raised areas that help slow down traffic, pedestrianisation, etc.

10.2.10.2 Using Secure by Design principles in the development of the final design that works with the concept of a walkable neighbourhood.

10.2.11 Ensuring safe, accessible, well lighted and well connected footpaths/pavements, cycle ways and bus stops

10.2.11.1 It will be important to have a range of crossing points in and around the 15 opportunity sites.

10.2.11.2 There should be good lighting during the evening and night with the street lighting linking into the existing street lighting programme in the area.

10.2.11.3 Proper signposting that makes it easier for people to navigate the town centre and easily discover things of interest is essential in ensuring good use of the town centre.

10.2.11.4 Any new cycleways and footpaths should be integrated into existing ones.

10.2.12 Sustainable management of waste and recycling

10.2.12.1 Ensure appropriate provision of both residential and business waste bins, bin sheds and recycling provision.

10.2.12.2 Ensure appropriate provision of public litter bins and consider the provision of smaller public recycling bins alongside litter bins.

10.2.12.3 Ensure the provision of attractive larger collective recycling bins for paper, glass and aluminium cans in the area.

10.2.12.4 Consider the provision of cigarette smoking and chewing gum poles.

### 10.3 Implementation phase

### 10.3.1 Health and safety in and around the redevelopment site

- 10.3.1.1 Appoint a Main Contractor and Sub-Contractors with excellent safety records, low complaints record and a good history of working with residents living nearby.
- 10.3.1.2 Ensure that the Main Contractor and Sub-Contractors are part of the Considerate Constructors Scheme and the project is registered with the Scheme ([www.considerateconstructorsscheme.org.uk](http://www.considerateconstructorsscheme.org.uk)).
- 10.3.1.3 Develop and agree on a site specific Code of Construction Practice (CoCP) to deal with potential nuisance issues resulting from the construction site and its operation. This should include a clear line of communication, for example a dedicated helpline phone number, to enable local people to report issues and clear responsibilities for how the main construction contractor will respond to these issues.
- 10.3.1.4 Ensure adherence to the Construction (Design & Management) Regulations 2007 (CDM 2007) and aim to integrate health and safety into project management process. The Health and Safety Executive has produced an accompanying Approved Code of Practice document '*Managing Health and Safety in Construction*' which sets out the implications of the new legislation for developers, contractors, designers and workers.
- 10.3.1.5 Secure the perimeter of the construction sites and consider regular patrols after dark either by local police/community wardens or a private security company. This is particularly important given the high incidence of antisocial behaviour and vehicle crime in Leek.
- 10.3.1.6 Loss of access to public open spaces should be marked out in the designs and plans for the implementation (construction) phase.
- 10.3.1.7 Having a named Contractor Community Liaison Lead from the main contractor who has responsibility for listening to any community issues/complaints and the authority to resolve them will enhance the relationship between them and local residents and town centre workers and users.



- 10.3.1.8 Set up monthly meetings between residents and business representatives and the Contractor Community Liaison Lead.

10.3.2 Dust and noise from the site and lorries

- 10.3.2.1 Ensure that best practice is used in dealing with construction related noise, dust and materials. Also ensure the appropriate removal of asbestos or other hazardous material found on site using approved contractors and equipment.
- 10.3.2.2 It is important to ensure that dust minimising measures such as constant wetting of rubble (and other dust generating materials) is done.
- 10.3.2.3 It is also important to reduce noise from site activity and site equipment using noise barriers, switching off machinery and enclosing certain activities to reduce sound travel.
- 10.3.2.4 Pavements and roads in and around the area should be kept clean and dirt, soil and materials should be regularly swept away. Pedestrian routes should enable scooters, push chairs and wheelchairs to be used along them without difficulty.

10.3.3 Local recruitment of construction workers

- 10.3.3.1 **Ensure recruitment for the construction jobs starts locally through the local job centres before being advertised more widely.** This will also reduce the potential pressures on local housing due to an influx of workers and be more sustainable in transport terms.
- 10.3.3.2 Develop a plan for dealing with the accommodation and healthcare needs of construction workers moving into the area from elsewhere. This will need to be developed once construction recruitment has started and there is a clearer idea of the number of workers likely to move into the area. Housing construction workers in existing permanent dwellings is always preferable to temporary 'porta cabin' type accommodation even for a short period.

#### 10.3.4 Protecting access to public transport, pedestrian routes and emergency vehicles

- 10.3.4.1 Develop a **Construction/Refurbishment Phase Bus, Pedestrian and Emergency Access Management and Communication Plan** in liaison with local bus operators identifying alternative safe bus routes and alternative safe sheltered bus stops in, and near to, the town centre area depending on the boundaries of construction/refurbishment activities.
- 10.3.4.2 Ensure that pedestrian routes (footpaths and pavements) are maintained and that there is good access through and around the town centre.
- 10.3.4.3 Have discussions with Staffordshire Moorlands Fire and Rescue Service, Ambulance Service and the Main Contractor to ensure that emergency vehicle access is maintained to all parts of the town centre.
- 10.3.4.4 Ensure regular, wide and early communication, including large print and audio material where appropriate of any new route and temporary new bus stops (including a location map), any potential changes to the route times and alternative walking routes in and around Leek Town Centre targeting residents both in Leek Town Centre and in Leek as a whole, as well as workers and other users of the town centre.

#### 10.3.5 Reducing crime and enhancing safety

- 10.3.5.1 Ensure that construction/refurbishment workers have specific contractor ID and branded clothing e.g. high visibility jackets with the name of the contractor.
- 10.3.5.2 Ensure additional police and community warden patrols in and around the town centre especially the opportunity sites during the construction phase both during the day and especially in the evening and at night. This could be additional to the private security arrangements provided by the Main Contractor.
- 10.3.5.3 Ensure that there is adequate street or temporary lighting around the opportunity sites.
- 10.3.5.4 Set up regular monthly meetings between Police, Community Wardens, the Main Contractor and resident representatives to ensure that crime and safety issues are dealt with promptly.

## **10.4 Operation phase**

### **10.4.1 Ongoing maintenance and supervision of the new and improved Leek Town Centre**

10.4.1.1 Critical to the long term success of the Leek Town Centre will be a detailed and fully funded maintenance programme to include the landscaped areas and the refurbished street furniture and lighting. If possible, local residents, businesses and users of the town centre should be involved in developing and helping to take ownership for ensuring that the area is well maintained and that issues are reported to those with responsibility for dealing with repairs and maintenance.

10.4.1.2 Having additional community warden and police patrols in the early stages of the operation phase are likely to ensure that any potential anti-social behaviour is prevented early and where it does occur is dealt with appropriately to prevent recurring incidents.

### **10.4.2 Ongoing communication and community governance**

10.4.2.1 It will be important to ensure that community magazines as well as services information sheets, that provide details of all the services and activities that are occurring in the area, are distributed and that the future community governance structures e.g. residents, workers and business associations are supported over the short to medium terms to become viable and embedded parts of the local community.

## **10.5 Health activities allied to the operation phase**

10.5.1 In the wider regeneration scheme, alongside plans for the physical redevelopment of Leek Town Centre, it is important that the community development aspects and the redevelopment of the built environment are linked and jointly considered and addressed. This is likely to be the key way of drawing people to use the town centre and better enhance potential benefits especially in terms of social capital and community cohesion.

10.5.2 These considerations could include investment in joint programmes that will enable local residents, workers, businesses, groups and organisations to a) increase their physical activity through the development of individually tailored plans that include public transport and the green links (cycleways and footpaths) in

and around Leek Town Centre; b) help organise and take part in community events and activities e.g. in Brough Park; c) better access culture, leisure and recreational amenities; and d) better access health, social care and other services.

## **10.6 Climate change considerations in design, implementation and operation phases**

- 10.6.1 One of the important wider considerations at the heart of the Leek Town Centre regeneration scheme is to create a sustainable shopping hub that serves the wider hinterland. Therefore there are implications for climate change in ensuring that the regeneration is sustainable.
- 10.6.2 All building design should take into account the likelihood of hot summer, milder winters and more heavy rainfall.
- 10.6.3 All building designs should take into account measures to ensure energy efficient lighting and maximise the possibility of incorporating natural lighting throughout. Other energy efficient measures include energy efficient supply and distribution as well as use of energy efficient electrical appliances. The possibility of renewable micro-generation should be explored.
- 10.6.4 Brough Park should be properly managed in order to contribute towards reducing greenhouse effects, providing the natural filtering of air pollutants, acting as a heavy downpour/flood sink and reducing the 'heat island' effect and providing shade.
- 10.6.5 The level, frequency and use of public transport, alongside walking and cycling should be supported over the life of the regeneration scheme – implementation and operation.

# 11 Monitoring and Evaluation of the Potential Health Impacts

## 11.1 Introduction

11.1.1 This Chapter identifies some useful indicators that could be used to monitor and evaluate the health impacts of the Leek Town Centre Regeneration Scheme.

11.1.2 In general, it is difficult to identify routine monitoring indicators that are:

- a) sensitive enough to detect the localised changes due to the implementation and operations phases of the development and
- b) easy to collect.

11.1.3 This report therefore identifies some possible indirect as well as direct health indicators though some may not be sensitive enough to detect changes while others will require financial, time and staff resources to collect.

## 11.2 Monitoring and evaluation

Indicator	Phase	Data collected	Recommended Lead Agencies
Residents, workers and user complaints about nuisance/annoyance and perceived danger from construction/road works	Implementation	Number, frequency and geographical distribution of complaints across the town centre Number of satisfactory resolutions of complaints	Main Contractor Staffordshire Moorlands District Council (SMDC)
Residents, workers and user complaints about disruption to access to bus services.	Implementation	Number, frequency and geographical distribution of complaints across the town centre Number of satisfactory resolutions of complaints	Bus Service Operators SMDC
Employment	Implementation	Number of local contractors/residents doing the construction/road works	Main Contractor SMDC
Employment	Operation	Survey of Leek Town Centre businesses and number of Leek residents they employ	SMDC
Crime and anti-social behaviour statistics	Implementation Operation	Number of crime/graffiti/vandalism/incivilities/anti-social behaviour incidents	Police SMDC
Air pollution	Operation	Air monitoring in Leek Town Centre	SMDC
Greenery and litter	Operation	Level of cleanliness and maintenance of Leek Town Centre	SMDC
Leek Town Centre usage figures	Operation	Numbers and types of users and destinations Satisfaction with quality and range of amenities	SMDC
Bus use	Operation	Number of passengers coming into the town centre	Bus Service Operators SMDC

## 12 Conclusion

12.1.1 Overall, the Leek Town Centre scheme is likely to have moderate to major potential positive health and wellbeing impacts both at a local and sub-regional level and over the medium and long terms.

12.1.2 It has a few potential negative health and wellbeing impacts the majority of which are likely to be minor to moderate in nature and short term, temporary and localised mostly during the implementation phase.

12.1.3 However, some Town Centre residents are faced with having to live near a 'building site' given the phased development that may go on for a number of years. This includes other developments which have been proposed in surrounding neighbourhoods such as a large supermarket development. Therefore, some detailed planning needs to be carried out to ensure that the implementation phase considers the potential cumulative negative impacts of noise, dust, lorry traffic and physical severance through Leek Town Centre.

12.1.4 The current plan is limited to a spatial layout of the 15 opportunity sites and a description of the proposed intervention options on each site. Key issues that also need to be considered are:

- Standards to which the buildings will be built (depending on their uses i.e. housing, employment, leisure facilities etc.).
- The mix of tenure in new housing and the allocation of affordable housing.
- Development of management plans for the community spaces being developed.
- Detailed plans outlining public transport i.e. routing plans and access routes around the town centre especially, near the opportunity sites

12.1.5 It is important to note that there will need to be a continuing investment in publicly (and privately) owned amenities in 5-10 years time and ongoing maintenance. This includes street furniture, lighting and open spaces to ensure that the positive benefits of the regeneration carry on long term.

12.1.6 In the long term there will also need to be ongoing review of the needs of the local community and whether the regeneration is achieving its objectives and to identify when and what further developments may be required within the town centre.



# **Appendix A:**

## **HIA Project Steering Group Members**



**Members of the HIA project Steering Group**

Tamsin Hartley (Chair)	Head of Strategy & Policy, NSRP/North Staffordshire RENEW
Judy Kurth (Project Coordinator)	LSP Strategic Coordinator, WHO Healthy City Partnership
Dr Zafar Iqbal	Deputy Director of Public Health, Stoke NHS
Harmesh Jassal	Development Manager, NSRP/North Staffordshire RENEW
John Nichol	Group Transport Manager, NSRP/North Staffordshire RENEW
Brian Davies	Planning Policy Manager, NSRP/North Staffordshire RENEW
Sarah Humphreys	Leek Town Centre Coordinator, Staffordshire Moorland Dist Council
Jacqueline Small	Head of Health Promotion, North Staffordshire NHS
Jacqui Ginnane	Interim Manager, NSRP/North Staffordshire RENEW



# **Appendix B: Search Strategy for the Evidence Review**



**Aims of review**

The review was conducted to identify the positive and negative health impacts of town centre regeneration, retail-led regeneration schemes and regeneration in general.

**Background**

We identified little literature on the health and wellbeing impacts of town centre regeneration and some literature on retail-led regeneration.

4 HIAs were identified:

- Skelmersdale Town Centre Health Impact Assessment
- Dartford Town Centre Area Action Plan Health Impact Assessment
- Kirby Sports Stadium Mixed Use Development Health Impact Assessment
- Lewisham Urban Renaissance Health and Social Impact Assessment.

**Review methods**

1. Search for past HIAs on town centre regeneration in the UK
2. Search for reviews via Google on the health and social impacts of town centre regeneration and retail led regeneration.
3. Review of key bibliographic databases and health journals on the health impacts of town centre regeneration

**Key search terms**

The following terms were used in various combinations in PubMed, the Journal of Epidemiology and Community Health and Journal of Public Health:

Health impacts

Town centre regeneration

Retail led regeneration

**Search Years**

Literature since 1990.

**Language**

Only English language documents were considered.

### **Inclusion or exclusion criteria**

Given the lack of literature in the area we did not apply inclusion or exclusion criteria but reviewed the abstracts to identify relevant literature.

### **Evaluation of quality**

We did not conduct a formal quality review of the studies and articles identified as this was beyond the scope of this rapid HIA. However we did focus on impacts that were identified as important by more than one report.



# Appendix C: Detailed Health Impact Tables

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## Health impact tables for the implementation and operation phases of the Leek Town Centre scheme compared to no development taking place

(there is also a short discussion on the maintenance/refurbishment and closure scenarios)

### Definition of the levels of potential impact

Significance Level	Criteria
Major +++/-- (positive or negative)	Health effects are categorised as major if the effects may lead directly to mortality/death or acute or chronic disease/illness. The exposures tend to be of high intensity and/or long duration and/or over a wide geographical area and/or likely to affect a large number of people e.g. over 500 or so and/or sensitive groups e.g. children/older people. They can affect either or both physical and mental health and either directly or through the wider determinants of health and wellbeing. They can be temporary or permanent in nature. These effects can be important local, district, regional and national considerations. Mitigation measures and detailed design work can reduce the level of negative effect though residual effects are likely to remain.
Moderate ++/-- (positive or negative)	Health effects are categorised as moderate if the effects are long term nuisance impacts from odour and noise, etc or may lead to exacerbations of existing illness. The exposures tend to be of moderate intensity and/or over a relatively localised area and/or of intermittent duration and/or likely to affect a moderate-large number of people e.g. between 100-500 or so and/or sensitive groups. The negative impacts may be nuisance/quality of life impacts which may affect physical and mental health either directly or through the wider determinants of health. The cumulative effect of a set of moderate effects can lead to a major effect. These effects can be important local, district and regional considerations. Mitigation measures and detailed design work can reduce and in some cases remove the negative and enhance the positive effects though residual effects are likely to remain.
Minor/Mild +/- (positive or negative)	Health effects are categorised as minor/mild if they are generally nuisance level/quality of life impacts e.g. noise, odour, visual amenity, etc. The exposures tend to be of low intensity and/or short/intermittent duration and/or over a small area and/or affect a small number of people e.g. less than 100 or so. They can be permanent or temporary in nature. These effects can be important local considerations. Mitigation measures and detailed design work can reduce the negative and enhance the positive effects such that there are only some residual effects remaining.
Neutral/No Effect ~	No effect or effects within the bounds of normal/accepted variation.

## Implementation Phase (5-10 years)

Implementation Phase	No development	Impact	Leek Draft Masterplan Option	Direction, Magnitude and Likelihood of Impact without mitigation
<b>Overall</b>	<ul style="list-style-type: none"> <li>No change from existing trends in health and wellbeing. Likely to continue improving.</li> <li>However, unhealthy eating and obesity in children and adults are worse than the national average.</li> <li>The number of people with diabetes is higher than the national average.</li> <li>There is a heavy reliance on the car in Leek in general, though car ownership is low in Leek North.</li> <li>Current set of shops may reduce over time if the rate of dereliction continues and any reduction in the economic vitality of the town centre.</li> </ul>	~/-	<ul style="list-style-type: none"> <li>The regeneration is likely to be <u>phased</u> with developments being carried out as and when developers express interest.</li> <li>For residents living within the town centre, the construction work associated with the proposed developments is likely to have some negative impacts. These negative impacts depend on and will vary according to:               <ul style="list-style-type: none"> <li>a) whether the proposed developments on the opportunity sites are refurbishments or new builds;</li> <li>b) how construction/refurbishment related traffic is managed; and</li> <li>c) how accessibility to services, retail, employment and other amenities within the town centre is managed.</li> </ul> </li> <li>The major issues are likely to be a) the potential significant nuisance level impacts on residents living around opportunity sites e.g. noise, dust and disruption to daily routines; b) lesser disruption impacts to other residents living outside the town centre boundary area from lorry traffic; difficulties in accessing the shops and difficulty faced getting through the town centre to other outside destinations especially with potential disruptions to public transport services due to the major transport interventions proposed.</li> </ul>	<p>For most residents in Leek -</p> <p>Town centre residents, workers and users -/--</p> <p>Small businesses ~/-/--</p>

Implementation Phase	No development	Impact	Leek Draft Masterplan Option	Direction, Magnitude and Likelihood of Impact without mitigation
<i>Infectious diseases</i>	<ul style="list-style-type: none"> <li>Levels of infectious disease are low and likely to remain so.</li> </ul>	~	<ul style="list-style-type: none"> <li>The implementation phase is unlikely to cause or spread infectious diseases in residents or construction workers.</li> <li>Workers coming into contact with sewage and contaminated water may be affected by micro-organisms e.g. leptospirosis.</li> <li>The extent of hazard to workers will depend on the management of the construction; strict adherence to health and safety protocols; and availability and use of safety equipment and protective clothing.</li> </ul>	<p>For most Leek residents and town centre residents, workers, users and visitors</p> <p>~</p>
<i>Non-infectious/chronic diseases (including pollution effects)</i>	<ul style="list-style-type: none"> <li>Overall, though health is likely to continue improving, the rate of improvement is likely to be lower given the current levels of unhealthy eating and obesity.</li> <li>Leek North ward has higher levels of long term limiting illnesses compared to Leek South, East, West and the region.</li> <li>Life expectancy will continue to be lower in Leek North because of this.</li> </ul>	~	<ul style="list-style-type: none"> <li>The construction/refurbishment work is unlikely to cause non-infectious/chronic diseases in residents or construction workers. However increase in construction/refurbishment related traffic is likely to temporarily increase levels of air pollution.</li> <li>There is likely to be low levels of dust generated but the levels of these are unlikely to lead to respiratory or other health problems however this could lead to an exacerbation of some symptoms in some people with existing respiratory illness.</li> <li>The disruption to access may make walking and using the bus less attractive and so reduce physical activity for a number of years.</li> <li>In addition the mental health and wellbeing impacts may exacerbate existing physical health problems.</li> <li>The extent of the hazard to construction/refurbishment workers will depend on the management of the work; adherence to health and safety protocols; and availability and use of safety equipment and protective clothing.</li> </ul>	<p>For most Leek residents and town centre residents, workers, users and visitors</p> <p>~/-</p> <p>Residents living within the town centre and close by opportunity sites or those with existing respiratory illness</p> <p>~/-/--</p>

Implementation Phase	No development	Impact	Leek Draft Masterplan Option	Direction, Magnitude and Likelihood of Impact without mitigation
<i>Physical injury (including poisoning)</i>	<ul style="list-style-type: none"> <li>Overall levels of traffic collisions and traffic injuries are low.</li> <li>However, there are accident hotspots within the town centre which account for 29% of total collisions in the town centre: <ul style="list-style-type: none"> <li>The signalised junction of the A53 Broad Street/Brook Street with the A520 St Edward Street/Compton.</li> <li>The signalised junction of the A523 Stockwell Street and A53 Ball Haye Road/Buxton Road.</li> <li>Along the A53 Brook Street/Haywood Street.</li> <li>Along the A523 Ashbourne Road.</li> </ul> </li> </ul>	~	<ul style="list-style-type: none"> <li>There is a potential for the increased lorry traffic to and from construction sites to result in an increase in road traffic related physical injury particularly in the accident hotspot areas. However, this will depend on whether a traffic plan/route strategy is being implemented to manage major traffic movements.</li> <li>In addition to increased lorry traffic to and from construction sites, implementing the planned transport interventions to include new traffic light controlled junctions, a one way system on Edward Street, removal of the roundabout at Derby Street, Fountain Street, Haywood Street, Ball Haye Street and Ashbourne Road and improving pedestrian access can add to access and movement disruptions and increase the potential for road traffic related physical injury during the construction phase.</li> <li>There is a potential for a big supermarket development in Leek. Should the supermarket development go ahead, there is a potential for additional traffic and potential for road traffic related physical injury during the construction phase.</li> <li>This additional major development may potentially prolong the length of the construction phase that Leek is likely to face.</li> <li>The presence of construction structures such as scaffoldings, the possibility of load slippage from cranes and other construction machinery could pose an increased risk in physical injuries to construction workers and residents living very close to the opportunity sites (particularly children, older people and people with disabilities).</li> </ul>	<p>For most Leek residents and town centre residents, workers, users and visitors</p> <p>~/-</p> <p>Residents living in the town centre especially around opportunity sites and children, older people and those with disabilities and their carers</p> <p>-/--</p>

Implementation Phase	No development	Impact	Leek Draft Masterplan Option	Direction, Magnitude and Likelihood of Impact without mitigation
			<ul style="list-style-type: none"> <li>The extent of the hazard to construction workers will depend on the management of the construction process; the strict adherence to health and safety protocols; safe storage and usage of chemicals and availability and use of safety equipment and protective clothing.</li> <li>The hazard to residents, town centre users and workers especially children, older people and those with disabilities, will depend on how secure the sites are, ensuring no unauthorised access and good safety practice around the opportunity site along people's routes to public transport, shops, services and amenities.</li> </ul>	
<i>Mental health and wellbeing</i>	<ul style="list-style-type: none"> <li>General health and wellbeing in Staffordshire Moorlands is similar to the England average. However, the number of people on incapacity benefits because of mental illness is significantly higher in Staffordshire Moorlands than the national average and this could be a possible indication of low levels of mental health and wellbeing.</li> </ul>	~	<ul style="list-style-type: none"> <li>Due to the phased nature of the regeneration, some residents particularly those close to a cluster of opportunity sites e.g. those living within the 'Town Centre Core and Town Centre West' quadrant and those living within 'Town Centre Core (War Memorial)' quadrant, are likely to be exposed longer to the potential nuisance effects (e.g. noise, dust, traffic and visual impacts) depending on the duration of the implementation phase.</li> <li>This may affect sleep patterns especially for residents likely to sleep in the daytime such babies, pre-school children, older people and those working night shifts.</li> <li>Workers on the sites could have psycho-social stress related to their work depending on the quality of the contractors used and the terms and conditions under which they are employed.</li> </ul>	<p>For most residents, Leek town centre residents, workers, users and visitors</p> <p>~/-</p> <p>Residents living near opportunity sites, workers near the sites and small children, older people and those with disabilities and their carers</p> <p>-/--/---</p>

Implementation Phase	No development	Impact	Leek Draft Masterplan Option	Direction, Magnitude and Likelihood of Impact without mitigation
<i>Population demography</i>	<ul style="list-style-type: none"> <li>Majority of the population of Leek fall into the 45-64 age range.</li> <li>A higher proportion of under 29 year olds are in Leek North and South.</li> <li>Over time this is likely to mean that there will be a higher proportion of people over 65 years and over.</li> </ul>	~	<ul style="list-style-type: none"> <li>The implementation phase will not influence the population profile of the area though it may lead to some increase in the day-time population if construction and demolition workers are recruited from outside the local area.</li> </ul>	<p>For most Leek residents and town centre residents, workers, users and visitors</p> <p>~</p>



Implementation Phase	No development	Impact	Leek Draft Masterplan Option	Direction, Magnitude and Likelihood of Impact without mitigation
<i>Jobs &amp; economy</i>	<ul style="list-style-type: none"> <li>Highest proportion of unemployment is in Leek North.</li> <li>Proportion of retired residents is highest in Leek West.</li> <li>Majority of Leek North residents work in low income occupations.</li> <li>Given the rural character of Staffordshire Moorlands the urban centres are likely to continue to be the economic and employment drivers.</li> </ul>	~	<ul style="list-style-type: none"> <li>It is unclear how many of the implementation related employment will go to local residents seeking employment.</li> <li>How much the local area, Leek and sub-region benefits, is dependent on whether a local recruitment policy which gives priority to local people has been drafted, agreed and implemented.</li> <li>The main positive impact is likely to be on those in the local area with construction skills and experience and those who are currently unemployed or under-employed.</li> <li>Private landlords in the town centre and the wider Leek area may experience benefits if construction workers from outside the area decide to live in and around Leek for the duration of their contracts.</li> <li>There may be disruptions to some commercial shops and services and this may impact negatively on these businesses. Though the impact is likely to be temporary.</li> </ul>	<p>For most Leek residents and town centre residents, workers, users and visitors ~</p> <p>Those looking for work and those with existing construction skills ~+/++</p> <p>Small shops and businesses ~-</p>

Implementation Phase	No development	Impact	Leek Draft Masterplan Option	Direction, Magnitude and Likelihood of Impact without mitigation
<i>Housing and shelter</i>	<ul style="list-style-type: none"> <li>The highest proportion of social renting is in Leek North.</li> <li>Provision of affordable housing in relation to new builds is low across Staffordshire Moorlands and could potentially be low for Leek.</li> </ul>	~	<ul style="list-style-type: none"> <li>The implementation phase is unlikely to affect the levels of social renting or provision of affordable housing.</li> <li>For residents, particularly those living near opportunity sites, lorry traffic may cause some vibration effects.</li> <li>The construction work could disrupt utility services – water, gas, electricity, waste and sewage disposal for residents living around the opportunity sites.</li> </ul>	<p>For most Leek residents and town centre residents, workers, users and visitors</p> <p>~</p> <p>Town centre residents particularly those living close to opportunity sites.</p> <p>~/-</p>

Implementation Phase	No development	Impact	Leek Draft Masterplan Option	Direction, Magnitude and Likelihood of Impact without mitigation
<i>Transport and connectivity</i>	<ul style="list-style-type: none"> <li>There are several bus routes that serve Leek however most are low frequency and irregular.</li> <li>Majority of Leek residents travel to work by car or van.</li> <li>The average distances travelled to work are between 9 and 10km across all four wards.</li> <li>There are accident hotspots within the town centre which account for 29% of total collisions in the town centre: <ul style="list-style-type: none"> <li>The signalised junction of the A53 Broad Street/Brook Street with the A520 St Edward Street/Compton</li> <li>The signalised junction of the A523 Stockwell Street and A53 Ball Haye Road/Buxton Road</li> <li>Along the A53 Brook Street/Haywood Street</li> <li>Along the A523 Ashbourne Road</li> </ul> </li> <li>Some of these hotspots do not have or have poor pedestrian crossings and footpaths.</li> </ul>	~/-	<ul style="list-style-type: none"> <li>There is unlikely to be any direct effects on people's access to private transport.</li> <li>There is likely to be some disruption to local bus services and routes with possible limited or no access to some bus stops. This increases the likely negative impacts given the services are not frequent and irregular. Temporary stops or diversion routes may be needed for bus users.</li> <li>Movement of private and public transport vehicles is likely to be restricted to some areas because of construction related traffic, road closures and transport/access interventions on some routes.</li> <li>This may cause some physical severance and reduce physical activity and time spent in the town centre for older people and children in particular as town centre roads may become or be seen as being dangerous and difficult to cross.</li> <li>As discussed previously, there may be some negative nuisance impacts from the noise and vibration from lorries.</li> <li>There is likely to be a small increase in air pollution from influx of construction vehicles. Peaks in air pollution concentrations can exacerbate the symptoms of those with existing respiratory and cardiovascular difficulties and long term limiting illnesses especially in older people and children. However, this increase is unlikely to cause physical health effects in most residents.</li> </ul>	<p>For most Leek residents -/--</p> <p>Residents dependent on public transport to get to and from the Town Centre -/--/---</p> <p>For town centre residents, workers, users and visitors -/--</p>

Implementation Phase	No development	Impact	Leek Draft Masterplan Option	Direction, Magnitude and Likelihood of Impact without mitigation
<i>Education and learning</i>	<ul style="list-style-type: none"> <li>Leek is well served with educational establishments however it has a high proportion of residents with no qualifications in Leek North.</li> <li>The Leek College buildings are in a deteriorating state.</li> <li>There are a good number of primary and secondary schools in and around Leek.</li> <li>GCSE levels are improving across Staffordshire Moorlands however it is unclear whether the achievement gap between Leek North and other wards is closing.</li> <li>Education is the most important deprivation domain for all the four wards.</li> </ul>	~/-	<ul style="list-style-type: none"> <li>Refurbishing the college buildings as well as possibly co-locating it with the proposed Arts Centre is likely to cause some disruption to existing students.</li> <li>Construction/refurbishment workers are likely to gain experience and on-the-job training.</li> <li>Linking into the college (Leek College offers students apprenticeship schemes in carpentry/joinery) and other construction training schemes is likely to increase the chances of local people being recruited for construction/refurbishment jobs as well as young people gaining work experience on employment-linked apprenticeship training schemes. This depends on whether a local recruitment policy is implemented.</li> </ul>	<p>For most Leek residents and town centre residents, workers, users and visitors</p> <p>~</p> <p>For students attending the college</p> <p>-/--</p> <p>For those who get training and experience through work on the opportunity sites</p> <p>+ /++</p>
<i>Crime and safety</i>	<ul style="list-style-type: none"> <li>Anti-social behaviour is high across Leek with Leek North and West having the highest rates.</li> <li>Vacant and derelict buildings can be a target for crime and anti-social behaviour.</li> <li>There is a vacancy rate of 14% in Leek Town Centre.</li> </ul>	~	<ul style="list-style-type: none"> <li>There may be a potential risk of trespass, vandalism/criminal damage or theft of construction/refurbishment vehicles; machinery; equipment or tools.</li> <li>The perception of fear and crime may increase especially in women, older people and those with young children in and around the opportunity sites particularly if there is an influx of construction workers from outside of Leek.</li> </ul>	<p>For most Leek residents and town centre residents, workers, users and visitors</p> <p>~/-</p>

Implementation Phase	No development	Impact	Leek Draft Masterplan Option	Direction, Magnitude and Likelihood of Impact without mitigation
<i>Health &amp; social care services</i>	<ul style="list-style-type: none"> <li>Leek is well served with health centres.</li> <li>However access to primary care professionals and GPs is an issue.</li> <li>Adult social care has been rated as performing reasonably/well overall.</li> </ul>	~	<ul style="list-style-type: none"> <li>The implementation phase is likely to affect ease of access to some of the health centres and social care services in the area because of increased lorry traffic, road closures and restrictions</li> <li>It may also make it more difficult for staff to get to and from work.</li> </ul>	For most Leek residents and town centre residents, workers, users and visitors ~/-
<i>Shops and other retail amenities</i>	<ul style="list-style-type: none"> <li>Leek Town Centre is the primary shopping and service centre for Leek and the surrounding rural hinterland.</li> <li>It offers various convenience outlets, markets, financial services and other services and amenities.</li> </ul>	~	<ul style="list-style-type: none"> <li>Some shops may be disrupted and this may affect deliveries and opening hours.</li> <li>This may particularly apply to older people and people with disabilities or existing health conditions and those with children.</li> <li>However, phasing of the redevelopment is likely to ensure that access at any given time is maintained to key services and amenities.</li> </ul>	For most residents, Leek town centre residents, workers, users and visitors ~/-

Implementation Phase	No development	Impact	Leek Draft Masterplan Option	Direction, Magnitude and Likelihood of Impact without mitigation
<i>Social capital and community cohesion</i>	<ul style="list-style-type: none"> <li>▪ Social capital and cohesion is generally good in Staffordshire Moorlands as a whole.</li> <li>▪ Leek North is the most deprived ward though overall Leek is less deprived than many other areas in England.</li> <li>▪ Housing and the environment are the other major factors influencing deprivation (alongside education).</li> </ul>	~	<ul style="list-style-type: none"> <li>▪ The construction/refurbishment work in itself will not have any negative or positive effect on social capital and community cohesion.</li> <li>▪ Construction work on opportunity sites such as the Smithfield Centre and Bus Station, Market Street West park area where there are current community facilities e.g. leisure centres, may reduce social capital and cohesion.</li> <li>▪ For example, mother and toddler groups and other children groups that use Bucks Kids Club on Buxton Road may be negatively affected during construction work on the Portland Street Mill opportunity site which is close by.</li> </ul>	<p>For most Leek residents and town centre residents, workers, users and visitors</p> <p>~/-</p> <p>For residents who use existing community facilities to which access might be reduced (mothers and toddlers/children, older people)</p> <p>-/--</p>

Implementation Phase	No development	Impact	Leek Draft Masterplan Option	Direction, Magnitude and Likelihood of Impact without mitigation
<i>Arts and leisure</i>	<ul style="list-style-type: none"> <li>There are a number of community facilities including the Nicholson Institute Library, and the leisure centre in Brough Park.</li> <li>Other provisions for leisure in neighbouring towns include amenities in Stoke-on-Trent, Alton Towers and The Peak District.</li> <li>Within Leek, there are a number of shops targeted to visitors and tourists. There is also the James Brindley Mill and Museum.</li> <li>It is likely that there will be no change from existing trends.</li> </ul>	~	<ul style="list-style-type: none"> <li>The arts and leisure facilities are unlikely to be directly affected though access may be disrupted because of the construction vehicles and the fencing off of the opportunity sites.</li> <li>Construction/refurbishment traffic may lead to a reduction in children coming to the community facilities if parents/guardians perceive the area as unsafe.</li> </ul>	<p>For most Leek residents and town centre residents, workers, users and visitors</p> <p>~/-</p> <p>Residents and visitors (children and adults) using the arts and leisure facilities</p> <p>-/--</p>

Implementation Phase	No development	Impact	Leek Draft Masterplan Option	Direction, Magnitude and Likelihood of Impact without mitigation
<i>Lifestyle and daily routines</i>	<ul style="list-style-type: none"> <li>It is likely that there will be no change from existing trends.</li> </ul>	~	<ul style="list-style-type: none"> <li>This will be dependent on the amount of construction traffic and the days and hours of construction work.</li> <li>It will also be dependent on how the opportunity sites and associated traffic are managed and the adherence to the constructor's code of conduct by the contractors and sub-contractors working on the sites.</li> <li>There is likely to be some disruption of movement due to the construction traffic and movement and access interventions with displacement of traffic to other parts of Leek.</li> <li>The disruption is likely to increase journey time for some. Longer journeys are likely to leave less time for other daily activities.</li> <li>Residents living near opportunity sites are likely to be the most affected.</li> </ul>	<p>For most Leek residents and town centre residents, workers, users and visitors ~/-</p> <p>Residents living near opportunity sites -/--</p>
<i>Energy and waste</i>	<ul style="list-style-type: none"> <li>Current energy generation and distribution and waste disposal methods will continue to be in place.</li> <li>Levels of waste composted or used to recover heat and power are higher than the national average.</li> <li>There will continue to be a greater move towards energy efficiency and more recycling in the future.</li> </ul>	~	<ul style="list-style-type: none"> <li>This will depend on:</li> <li>Whether waste from the site is reused and recycled and the amount of construction waste sent elsewhere and hence lorry movements into and out of the area.</li> <li>The types of construction vehicles used i.e. low emission lorries</li> <li>The energy and waste strategy developed for the implementation phase.</li> </ul>	<p>For most Leek residents and town centre residents, workers, users and visitors ~</p> <p>Climate change --/-/+ / ++</p>



Implementation Phase	No development	Impact	Leek Draft Masterplan Option	Direction, Magnitude and Likelihood of Impact without mitigation
<i>Land and spatial</i>	<ul style="list-style-type: none"> <li>Vacant buildings in the town centre have reduced some of the visual appeal of the town centre.</li> <li>There is a steep topography in some areas e.g. around the California Mill Area and the Brough Park.</li> <li>The living environment is the second most important deprivation domain in all four Leek Wards.</li> </ul>	-/--	<ul style="list-style-type: none"> <li>The construction is likely to make the site visually unattractive. Construction work is likely to compact soils and leave building debris which may affect local greenspace, flora and fauna.</li> <li>The removal of solid and liquid waste will need to be managed carefully especially if it is contaminated with heavy metals, asbestos or other chemicals.</li> <li>The local utility companies will need to be involved to ensure that there is no accidental disruption to residents in Leek and surrounding areas because cables and pipes are dug through and to ensure that appropriate connections are made to the new housing and retail amenities.</li> </ul>	<p>For most Leek residents and town centre workers, users and visitors ~/-</p> <p>For town centre residents especially those close to opportunity sites -/--</p>

## Short Term Operation Phase (0-5 years after the implementation phase)

Short Term Operation Phase	No development	Impact	Leek Draft Masterplan Option	Direction, Magnitude and Likelihood of Impact without mitigation
<b>Overall</b>	<ul style="list-style-type: none"> <li>No change from existing trends in health and wellbeing. Likely to continue improving.</li> <li>However, unhealthy eating and obesity in children and adults are worse than the national average.</li> <li>The number of people with diabetes is higher than the national average.</li> <li>There is a heavy reliance on the car in Leek in general, though car ownership is low in Leek North.</li> <li>Current set of shops may reduce over time if the rate of dereliction continues and any reduction in the economic vitality of the town centre.</li> </ul>	~/-	<ul style="list-style-type: none"> <li>The regeneration of the town centre is likely to increase the number of Leek residents who use it and the provision of community type facilities may draw more residents and residents outside of Leek into the town for other types of shopping and activities.</li> <li>There will be an increase in the number of good quality homes – houses and flats – plus a range of retail shops including potentially another supermarket.</li> <li>There are likely to be more people living in this area which may mean some pressures on existing retail and health and social care services.</li> </ul>	<p>For most Leek residents and town centre residents, workers, users and visitors + / + / + + +</p> <p>For existing small businesses ~ / + / + +</p>

Short Term Operation Phase	No development	Impact	Leek Draft Masterplan Option	Direction, Magnitude and Likelihood of Impact without mitigation
<i>Infectious diseases</i>	<ul style="list-style-type: none"> <li>Levels of infectious disease are low and likely to remain so.</li> </ul>	~	<ul style="list-style-type: none"> <li>The operation phase is unlikely to cause or spread infectious diseases to local residents or people working in the area.</li> </ul>	<p>For most residents, and town centre residents, workers, users and visitors</p> <p>~</p>
<i>Non-infectious/chronic diseases (including pollution effects)</i>	<ul style="list-style-type: none"> <li>Overall, though health is likely to continue improving, the rate of improvement is likely to be lower given the current levels of unhealthy eating and obesity.</li> <li>Leek North ward has higher levels of long term limiting illnesses compared to Leek South, East, West and the region.</li> <li>Life expectancy will continue to be lower in Leek North because of this.</li> </ul>	~	<ul style="list-style-type: none"> <li>The operation phase is unlikely to cause non-infectious/chronic diseases to local residents or people working in the area.</li> <li>Improvement to pedestrian and cycle networks and attractive and enhanced greenspace and public realm may encourage physical activity and help reduce obesity.</li> <li>Air pollution levels may be reduced due to improved traffic conditions however it may also increase if there is a greater influx of cars due to Leek town Centre becoming a more popular destination for residents in and around Leek and visitors.</li> <li>However, the increase is unlikely to lead to chronic illness or exacerbation of existing conditions.</li> </ul>	<p>For most Leek residents and town centre residents, workers, users and visitors</p> <p>+ / ++</p>

Short Term Operation Phase	No development	Impact	Leek Draft Masterplan Option	Direction, Magnitude and Likelihood of Impact without mitigation
<i>Physical injury and poisoning</i>	<ul style="list-style-type: none"> <li>Overall levels of traffic collisions and traffic injuries are low.</li> <li>However, there are accident hotspots within the town centre which account for 29% of total collisions in the town centre: <ul style="list-style-type: none"> <li>The signalised junction of the A53 Broad Street/Brook Street with the A520 St Edward Street/Compton.</li> <li>The signalised junction of the A523 Stockwell Street and A53 Ball Haye Road/Buxton Road.</li> <li>Along the A53 Brook Street/Haywood Street.</li> </ul> </li> <li>Along the A523 Ashbourne Road.</li> </ul>	~	<ul style="list-style-type: none"> <li>The operation phase is unlikely to cause physical injury and poisoning in Leek residents, workers or users of the town centre.</li> <li>Influx of people into the area may cause a small potential increase in cars which may in turn increase the risk of road traffic related injuries however current levels of traffic injuries are low and are likely to continue being so.</li> </ul>	<p>For most Leek residents and town centre residents, workers, users and visitors</p> <p>~</p>
<i>Mental health and wellbeing</i>	<ul style="list-style-type: none"> <li>General health and wellbeing in Staffordshire Moorlands is similar to the England average. However, the number of people on incapacity benefits because of mental illness is significantly higher in Staffordshire Moorlands than the national average and this could be a possible indication of low levels of mental health and wellbeing.</li> </ul>	~	<ul style="list-style-type: none"> <li>The additional community facilities provided e.g. leisure facilities and the Arts Centre will provide a wider range of activities for local residents (adults and children) and encourage greater local social interaction and community cohesion.</li> <li>The reduction in dereliction, improved streetscape and diversity of employment opportunities and retail amenities is likely to enhance wellbeing in Leek residents.</li> </ul>	<p>For most Leek residents and town centre residents, workers, users and visitors</p> <p>++/+++</p>

Short Term Operation Phase	No development	Impact	Leek Draft Masterplan Option	Direction, Magnitude and Likelihood of Impact without mitigation
<i>Population profile</i>	<ul style="list-style-type: none"> <li>Majority of the population of Leek fall into the 45-64 age range.</li> <li>A higher proportion of under 29 year olds are in Leek North and South.</li> <li>Over time this is likely to mean that there will be a higher proportion of people over 65 years and over.</li> </ul>	~	<ul style="list-style-type: none"> <li>Given the likely increase in new housing there is likely to be a small increase in the residential population and other services and amenities such as the new Art Centre, commercial leisure facility and employment sites are also likely to increase the day-time working and visitor populations.</li> </ul>	<p>For most Leek residents and town centre residents, workers, users and visitors</p> <p>~/+</p>

Short Term Operation Phase	No development	Impact	Leek Draft Masterplan Option	Direction, Magnitude and Likelihood of Impact without mitigation
<i>Jobs &amp; economy</i>	<ul style="list-style-type: none"> <li>Highest proportion of unemployment is in Leek North.</li> <li>Proportion of retired residents is highest in Leek West.</li> <li>Majority of Leek North residents work in low income occupations.</li> <li>Given the rural character of Staffordshire Moorlands the urban centres are likely to continue to be the economic and employment drivers.</li> </ul>	~	<ul style="list-style-type: none"> <li>The new office, industrial and retail spaces alongside the new Arts Centre and leisure facility are likely to enhance employment in the town centre and the wider economy of Leek.</li> <li>The overall regeneration may attract more people from Leek and neighbouring towns and villages to spend in the town centre and boost the local economy.</li> <li>Enhance the long term viability of existing employment opportunities.</li> </ul>	<p>For most Leek residents and town centre residents, users and visitors ~</p> <p>For town centre workers +</p> <p>For those looking for work and getting jobs + / ++</p> <p>Existing businesses + / ++</p>

Short Term Operation Phase	No development	Impact	Leek Draft Masterplan Option	Direction, Magnitude and Likelihood of Impact without mitigation
<i>Housing and shelter</i>	<ul style="list-style-type: none"> <li>The highest proportion of social renting is in Leek North.</li> <li>Provision of affordable housing in relation to new builds is low across Staffordshire Moorlands and could potentially be low for Leek.</li> </ul>	~	<ul style="list-style-type: none"> <li>There will be a greater mix of housing types from traditional houses, apartments, town houses and extra care units. This is likely to encourage a mix of people within the town centre and may encourage greater social interaction between different age ranges.</li> </ul>	<p>For most Leek residents and town centre residents, workers, users and visitors</p> <p>~</p> <p>People looking for homes and for new residents</p> <p>+ / ++</p>

Short Term Operation Phase	No development	Impact	Leek Draft Masterplan Option	Direction, Magnitude and Likelihood of Impact without mitigation
<i>Transport and connectivity</i>	<ul style="list-style-type: none"> <li>There are several bus routes that serve Leek however most are low frequency and irregular.</li> <li>Majority of Leek residents travel to work by car or van.</li> <li>The average distances travelled to work are between 9 and 10km across all four wards.</li> <li>There are accident hotspots within the town centre which account for 29% of total collisions in the town centre: <ul style="list-style-type: none"> <li>The signalised junction of the A53 Broad Street/Brook Street with the A520 St Edward Street/Compton.</li> <li>The signalised junction of the A523 Stockwell Street and A53 Ball Haye Road/Buxton Road.</li> <li>Along the A53 Brook Street/Haywood Street.</li> <li>Along the A523 Ashbourne Road.</li> </ul> </li> <li>Some of these hotspots do not have or have poor pedestrian crossings and footpaths.</li> </ul>	~/-	<ul style="list-style-type: none"> <li>Improvements to pedestrian access (foot and cycle path networks) the public realm, lower speed limits on Derby and Russell Streets, new shared surfaces, pedestrian crossings will make the town centre more accessible and may encourage increased physical activity.</li> <li>The provision of a new bus station and improvement in public transport may encourage more sustainable forms of travel into the town centre.</li> <li>Major access and movements interventions including the removal of the roundabout and a signalised junction as well as reorganising and coordinating car parking may improve traffic.</li> </ul>	<p>For most Leek residents and town centre residents, workers, users and visitors + / ++</p> <p>For older people, those with children those with disabilities and those without cars ++ / +++</p>



Short Term Operation Phase	No development	Impact	Leek Draft Masterplan Option	Direction, Magnitude and Likelihood of Impact without mitigation
<i>Education and learning</i>	<ul style="list-style-type: none"> <li>Leek is well served with educational establishments however it has a high proportion of residents with no qualifications particularly in Leek North.</li> <li>The Leek College buildings are in a deteriorating state.</li> <li>There are a good number of primary and secondary schools in and around Leek.</li> <li>GCSE levels are improving across Staffordshire Moorlands however it is unclear whether the achievement gap between Leek North and other wards is closing.</li> <li>Education is the most important deprivation domain for all the four wards.</li> </ul>	~/-	<ul style="list-style-type: none"> <li>Improving the quality of the college buildings and the conditions under which the students that attend Leek College learn is likely to improve academic performance and increase the College's intake potentially of local student e.g. from Leek North.</li> </ul>	<p>For most Leek residents and town centre residents, workers, users and visitors</p> <p>~</p> <p>For young people and adults looking for education/ learning opportunities</p> <p>+ / ++</p>

Short Term Operation Phase	No development	Impact	Leek Draft Masterplan Option	Direction, Magnitude and Likelihood of Impact without mitigation
<i>Crime and safety</i>	<ul style="list-style-type: none"> <li>Anti-social behaviour is high across Leek with Leek North and West having the highest rates.</li> <li>Vacant and derelict buildings can be a target for crime and anti-social behaviour.</li> <li>There is a vacancy rate of 14% in Leek Town Centre.</li> </ul>	~	<ul style="list-style-type: none"> <li>There is unlikely to be any increase in crime during the operation phase.</li> <li>The reduction in dereliction and increase in housing is likely to increase daytime and evening town centre users and residents windows overlooking the town centre streets.</li> </ul>	<p>For most Leek residents and town centre residents, workers, users and visitors</p> <p>~</p>
<i>Health &amp; social care services</i>	<ul style="list-style-type: none"> <li>Leek is well served with health centres.</li> <li>However access to primary care professionals and GPs is an issue.</li> <li>Adult social care has been rated as performing reasonably/well overall.</li> </ul>	~/-	<ul style="list-style-type: none"> <li>The potential increase in population that the regeneration could bring may place some additional pressures on local services.</li> </ul>	<p>For most residents, Leek town centre residents, workers, users and visitors</p> <p>~</p>

Short Term Operation Phase	No development	Impact	Leek Draft Masterplan Option	Direction, Magnitude and Likelihood of Impact without mitigation
<i>Shops and other retail amenities</i>	<ul style="list-style-type: none"> <li>Leek Town Centre is the primary shopping and service centre for Leek and the surrounding rural hinterland.</li> <li>It offers various convenience outlets, markets, financial services, and other services and amenities.</li> </ul>	~	<ul style="list-style-type: none"> <li>New shops and other retail amenities are likely to provide residents and users with a wider range of goods and services though this is dependent on the kind of shops that locate here.</li> <li>The new shops and amenities may affect the viability of existing shops and amenities within the town centre.</li> </ul>	For most Leek residents and town centre residents, workers, users and visitors + / ++
<i>Social capital and community cohesion</i>	<ul style="list-style-type: none"> <li>Social capital and cohesions is generally good in Staffordshire Moorlands as a whole.</li> <li>Leek North is the most deprived ward though overall Leek is less deprived than many other areas.</li> <li>Housing and the environment are the major factors influencing deprivation (alongside education).</li> </ul>	~	<ul style="list-style-type: none"> <li>Improved access and spaces and reduced dereliction is likely to increase social capital and community cohesion.</li> <li>Improved public transport and provision of leisure facilities etc is likely to increase the use the town centre.</li> <li>The provision of community facilities, the Arts Centre and commercial leisure facilities will also provide an opportunity for people to meet within the town and thereby strengthen social capital and community cohesion.</li> </ul>	For most Leek residents and town centre residents, workers, users and visitors + / ++

Short Term Operation Phase	No development	Impact	Leek Draft Masterplan Option	Direction, Magnitude and Likelihood of Impact without mitigation
<i>Arts and leisure</i>	<ul style="list-style-type: none"> <li>There are a number of community facilities including the Nicholson Institute Library, and the leisure centre in Brough Park.</li> <li>Other provisions for leisure in neighbouring towns include amenities in Stoke-on-Trent, Alton Towers and The Peak District.</li> <li>Within Leek, there are a number of shops targeted to visitors and tourists. There is also the James Brindley Mill and Museum.</li> <li>It is likely that there will be no change from existing trends.</li> </ul>	~	<ul style="list-style-type: none"> <li>Provision of a new multi purpose Arts centre and a commercial leisure facility including cinema screens, theatre and bowling alley within the town centre will increase the choice of activities available.</li> </ul>	<p>For most Leek residents and town centre residents, workers, users and visitors</p> <p>+ / ++</p>
<i>Lifestyle and daily routines</i>	<ul style="list-style-type: none"> <li>It is likely that there will be no change from existing trends.</li> </ul>	~	<ul style="list-style-type: none"> <li>There is unlikely to be any disruption of movement due to the operation phase. The improved transport and connectivity and retail amenities may have positive impact on lifestyle and daily routines by enhancing accessibility and providing choice.</li> </ul>	<p>For most Leek residents and town centre residents, workers, users and visitors</p> <p>~ / +</p>

Short Term Operation Phase	No development	Impact	Leek Draft Masterplan Option	Direction, Magnitude and Likelihood of Impact without mitigation
<i>Energy and waste</i>	<ul style="list-style-type: none"> <li>Current energy generation and distribution and waste disposal methods will continue to be in place.</li> <li>Levels of waste composted or used to recover heat and power are higher than the national average.</li> <li>There will continue to be a greater move towards energy efficiency and more recycling in the future.</li> </ul>	~	<ul style="list-style-type: none"> <li>This will depend on:               <ul style="list-style-type: none"> <li>The energy efficiency and sustainability built into the new buildings (housing, arts centre, employment sites and public areas e.g. lighting.</li> <li>The provision of communal recycling facilities in the area.</li> </ul> </li> </ul>	<p>For most Leek residents and town centre residents, workers, users and visitors</p> <p>-/~/+</p>
<i>Land and spatial</i>	<ul style="list-style-type: none"> <li>Vacant buildings in the town centre have reduced some of the visual appeal of the town centre.</li> <li>There is a steep topography in some areas e.g. around the California Mill Area and the Brough Park.</li> <li>The living environment is the second most important deprivation domain in all four Leek Wards.</li> </ul>	~/-	<ul style="list-style-type: none"> <li>The refurbishments, new design and layout are likely to be an improvement on what is there currently.</li> <li>The improvements to the public realm, greenspace and overall visual appeal are likely to be enhanced.</li> </ul>	<p>For most Leek residents</p> <p>+</p> <p>For town centre residents, workers, users and visitors</p> <p>+/&gt;++</p>

### Long Term Operation Phase (5-15 years after the implementation phase)

Long Term Operation Phase	No development	Impact	Leek Draft Masterplan Option	Direction, Magnitude and Likelihood of Impact without mitigation
<b>Overall</b>	<ul style="list-style-type: none"> <li>No change from existing trends in health and wellbeing. Likely to continue improving.</li> <li>However, unhealthy eating and obesity in children and adults are worse than the national average.</li> <li>The number of people with diabetes is higher than the national average.</li> <li>There is a heavy reliance on car in Leek in general though car ownership is low in Leek North.</li> <li>Current set of shops may reduce over time if the rate of dereliction continues.</li> </ul>	~/-	<ul style="list-style-type: none"> <li>Investment in maintenance, renovation and renewal during the long term operation phase will be crucial to ensuring that the positive benefits of the town centre regeneration are not lost.</li> <li>Ensuring that existing local businesses are not pushed out because of increases in rents and other commercial pressures thereby reducing the diversity of goods and services available.</li> </ul>	-/+ / ++



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