

Cabinet

Tuesday 18 October 2022

11.00 am

Ground Floor Meeting Rooms, 160 Tooley Street, London SE1 2QH

Appendices

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Date: 10 October 2022

APPENDIX ONE – GLA SCHOOL ROLL PROJECTIONS (SRP) FORECAST METHODOLOGY FOR 2022

Data sources

- Greater London Authority (GLA) bespoke Borough Preferred Option population projections
- Pupil level School Census data from National Pupil Database (Spring Census 2019 to 2021)
- School level current roll data by sex and NC year (from Spring Census 2022)
- Data on linked schools and maximum and minimum NC years from Edubase and school census data

Data Processing

The school roll projection model creates a roll projection for each school based on the GLA population projections of the wards where its pupils live.

For each ward of residence in London, National Curriculum (NC) year (R to 11) and sex, the proportion of children of the corresponding age attending each mainstream state school is calculated. These proportions are carried forward as the pupils age through the school in the years being projected.

For new pupils entering a school in future years, for example at reception, proportions are calculated as averages over the latest years of actuals, with 4 being the standard number of years used (2019, 2020, 2021 and 2022). The same approach is used at years 7 and 12, even if the school is an all through school as it is assumed that there will be significant changes in the cohort at this point.

For the current round year (2022), the school level rolls submitted by London Boroughs to the GLA have no information on wards of residence of the pupils. For this year, the number of pupils from the roll attributed to each ward are estimated by averaging over the previous years' patterns, with the default being 3 years (2019, 2020 and 2021), and scaling to ensure that the total numbers at each school for each age and sex match the submitted rolls.

The rolled forward and calculated new intake proportions for future years are then applied to the population projections to give projections of the number of children on roll by school by age and sex. Due to lower retention rates, sixth form projections are calculated using a survival ratio as the cohort ages through sixth form. School level projections are then aggregated to planning areas and borough totals.

Population projections

The GLA population projections are based on a hybrid cohort component and housing unit model. The population is projected forward based on trends in past births, deaths, migration, and household formation. The outputs include age, so the school roll projection model explicitly links to the populations of children. For full methodology see:

<https://data.london.gov.uk/dataset/housing-led-population-projections>

Migration and housing developments.

The effects of migration and housing developments feed into the school roll projection model via the underlying population projections

Housing development

The amount of development projected in a local authority will affect that authority's population projections and in turn its school roll projections. More development generally means that the LA will attract more people and its population will therefore rise. If population increases, there will consequently be more children and so school roll projections will also rise. The impact of new housing development varies by area and is informed by historic levels of housing occupation in the local area and recent demographic trends.

Future housing development trajectories are either provided to the GLA by the local authority for a bespoke population projection, or they use the London Strategic Housing Land Availability Assessment (SHLAA). The SHLAA trajectory has been adjusted in the first 5 years to account for assumed lower housing delivery resulting from pandemic disruption to both supply and demand.

Migration

The GLA provides population projections based on 3 migration variants. It is up to the Local Authority to choose the most suitable variant for their area:

- Scenario 1: standard migration assumptions for the covid period, high domestic out-migration assumptions in the longer-term.
- Scenario 2: standard migration assumptions for the covid period, lower domestic out-migration assumptions in the longer-term. This is a high long-term population scenario.
- Scenario 3: high out migration assumptions for the covid period, high domestic out-migration assumptions in the longer-term. This is a low short-term population scenario

Further information on the migration scenarios can be found [here](#)

In early 2018, the GLA identified problems with the official estimates of population and migration of children for London local authorities. Analysis of the official estimates alongside additional comparator datasets revealed that individual cohorts of children in many boroughs were becoming increasingly inflated over time, indicating an issue with estimated migration flows.

For the 2019, 2020 and 2021 school roll projections, the GLA made comprehensive changes to the past estimates of population and international migration inputs used within the model. The changes were based on a multi-stage modelling process, that sought to identify a timeseries of past population more consistent with observed trends in administrative data sources. A consistent series of international migration flows were then created based on these updated population estimates and the standard birth, death and domestic migration components.

Cross border movement

The GLA model explicitly accounts for cross border mobility by calculating the contribution from all wards that the school draws pupils from, both from inside and outside of the borough. The model does not account for changes in cross border mobility patterns which may happen in the future due to factors such as changes in a school's popularity with parents, or schools opening and closing.

Changes made

The migration assumptions that GLA population projections which feed into the school roll projection model have been updated to reflect new assumptions since the pandemic.

Quality assurance

Comparisons are made with last year and with population and births data. Changes to information about specific schools are identified and flagged for checking.

APPENDIX 2a – PRIMARY SCHOOLS BY PLANNING AREA, PANs, TYPES, OLD AND NEW WARDS 2022

Primary School	PA	PAN	Type	Old Ward	New Ward
Charles Dickens	1	60	Academy	Cathedrals	Borough & Bankside
St Joseph's Borough RC		30	VA RC	Cathedrals	Borough & Bankside
Cathedral School CE		30	VA CE	Cathedrals	Borough & Bankside
Friars		30	Foundation	Cathedrals	Borough & Bankside
ARK Globe Academy		60	Academy	Chaucer	Chaucer
Surrey Square		60	Academy	East Walworth	Faraday
Michael Faraday		60	Community	Faraday	Faraday
St Peters Walworth CE		30	VA CE	Faraday	Faraday
Crampton		30	Community	Newington	Newington
Keyworth		60	Community	Newington	Newington
St Paul's CE		45	Academy (CE)	Newington	Newington
Robert Browning		30	Community	East Walworth	North Walworth
Victory		30	Community	East Walworth	North Walworth
English Martyrs RC		30	VA RC	East Walworth	North Walworth
Cobourg		30	Community	East Walworth	Old Kent Road
St Georges Cathedral RC		30	VA RC	Cathedrals	St George's
St Jude's CE		30	VA CE	Cathedrals	St George's
Charlotte Sharman	30	Foundation	Cathedrals	St George's	
Grange	2	60	Community	Grange	London Bridge & West Bermondsey
Snowsfields		30	Community	Grange	London Bridge & West Bermondsey
Tower Bridge		30	Community	Riverside	London Bridge & West Bermondsey
Riverside		45	Community	Riverside	North Bermondsey
Southwark Park		30	Community	Riverside	North Bermondsey
St James CE		60	VA CE	Riverside	North Bermondsey
St Joseph's George Row RC		45	VA RC	Riverside	North Bermondsey
John Keats Primary		60	Free School	Livesey	Old Kent Road
Ilderton		30	Community	Livesey	Old Kent Road
Pilgrims Way		30	Community	Livesey	Old Kent Road
Phoenix		90	Community	South Bermondsey	Old Kent Road
Albion		60	Community	Rotherhithe	Rotherhithe
Alfred Salter		60	Community	Rotherhithe	Rotherhithe
Rotherhithe		60	Community	Rotherhithe	Rotherhithe
St Joseph's Gomm Road		30	VA RC	Rotherhithe	Rotherhithe
Boutcher CE		30	VA CE	Grange	South Bermondsey
Galleywall		60	Free School	South Bermondsey	South Bermondsey
Peter Hills CE		30	VA CE	Surrey Docks	Surrey Docks
Redriff		60	Academy	Surrey Docks	Surrey Docks
St Johns RC		30	VA RC	Surrey Docks	Surrey Docks
St John's & St Clements CE	60	VA CE	The Lane	Goose Green	
Hollydale	30	Community	Nunhead	Nunhead & Queen's Rd	

Primary School	PA	PAN	Type	Old Ward	New Ward
John Donne	3	60	Academy	Nunhead	Nunhead & Queen's Rd
Camelot		60	Community	Livesey	Old Kent Road
St Francis RC		60	VA RC	Livesey	Old Kent Road
Angel Oak		60	Academy	Peckham	Peckham
Harris Academy Peckham Park		30	Academy	Peckham	Peckham
St James The Great RC		30	VA RC	Peckham	Peckham
Ivydale		90	Community	Nunhead	Peckham Rye
St Francesca Cabrini RC		30	VA RC	Peckham Rye	Peckham Rye
Harris Primary Free Peckham		30	Free School	The Lane	Rye Lane
Bellenden		30	Community	The Lane	Rye Lane
St Mary Magdalene CE		30	VA CE	The Lane	Rye Lane
Rye Oak		60	Community	The Lane	Rye Lane
Lyndhurst	4	60	Academy	Brunswick Park	St Giles
Oliver Goldsmith		60	Community	Brunswick Park	St Giles
St Georges CE		30	VA CE	Brunswick Park	St Giles
Dog Kennel Hill		30	Community	South Camberwell	Champion Hill
Bessemer Grange		90	Community	South Camberwell	Champion Hill
Belham		60	Free School	South Camberwell	Rye Lane
Comber Grove		30	Community	Camberwell Green	Camberwell Green
Crawford		60	Community	Camberwell Green	Camberwell Green
John Ruskin		60	Community	Camberwell Green	Camberwell Green
Brunswick Park		60	Community	Camberwell Green	Camberwell Green
St Joseph's 046 Infants RC	60	VA RC	Camberwell Green	Camberwell Green	
St Joseph's 046 Junior RC	60	VA RC	Camberwell Green	Camberwell Green	
St Anthony's RC	5	60	VA RC	East Dulwich	Dulwich Hill
Goodrich		90	Community	East Dulwich	Dulwich Hill
Judith Kerr Free School		56	Free School	Village	Dulwich Village
Dulwich Hamlet Juniors		90	Academy	Village	Dulwich Village
Dulwich Village Infants CE		90	VA CE	Village	Dulwich Village
Dulwich Wood Primary		60	Community	College	Dulwich Wood
Harris Primary Free East Dulwich		60	Free School	East Dulwich	Goose Green
Heber		60	Community	East Dulwich	Goose Green
Goose Green		60	Academy	East Dulwich	Goose Green
SOUTHWARK		3,491			

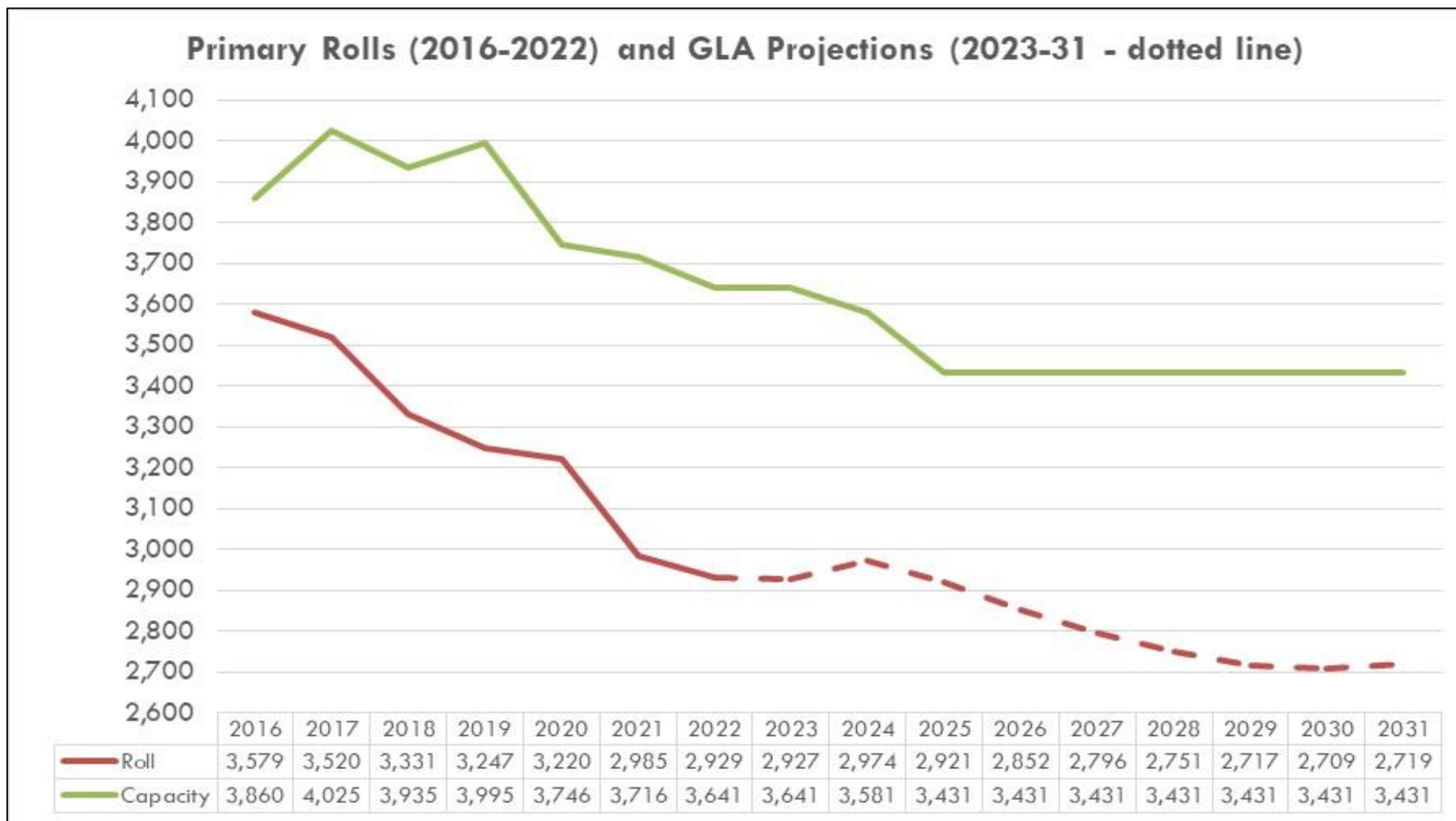
School Type	PAN	Schools	Percentage Schools	Percentage Places
Academies	540	11	13.7%	13.4%
Free Schools	326	6	8.2%	9.1%
VA RC	495	12	16.4%	14.7%
VA CE	465	11	13.7%	12.6%

Primary School	PA	PAN	Type	Old Ward	New Ward
Foundation		60	2	2.7%	1.7%
Community		1,695	32	45.2%	50.7%
SOUTHWARK		3,581	73	100.0%	100.0%

School Type	PAN	Schools	Percentage Schools	Percentage Places
1FE	840	28	38.4%	23.5%
1.5FE	135	3	4.1%	3.8%
2FE	2,100	35	47.9%	58.6%
1.8FE	56	1	1.4%	1.6%
3FE	540	6	8.2%	15.1%
Southwark	3,581	73	100.0%	100.0%

APPENDIX 2b Primary summary

1. Pupil rolls to date and projections are shown below for reception borough-wide, for all Southwark pupils and then by planning area, together with a commentary for each. A planning area summary for each of the Council's five planning areas are given below, together with remarks on the factors affecting provision in the planning area – births, existing vacancies, where the planning area takes children from and projections for the future.

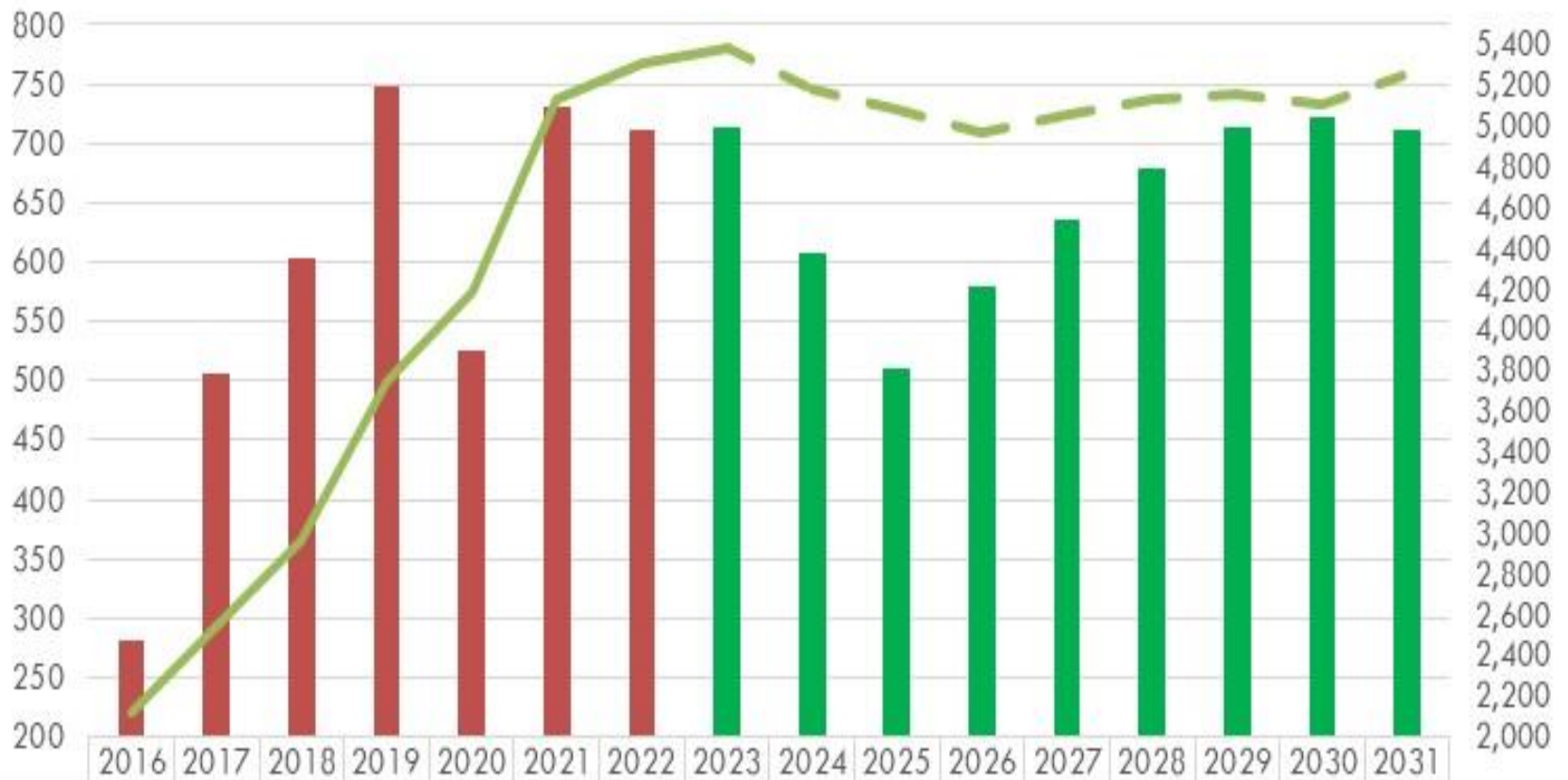


Primary YR to 6 Rolls (2016-2022) and GLA Projections (2023-31 - dotted line)



	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025	2026	2027	2028	2029	2030	2031
Roll	23,400	23,535	23,486	23,143	22,726	21,808	21,312	21,008	20,704	20,332	19,974	19,575	19,245	19,005	18,758	18,605
Capacity	25,515	26,090	26,455	26,894	26,920	26,941	26,618	26,399	25,895	25,421	24,947	24,632	24,377	24,167	23,867	23,867

Vacancies in Reception and Years R to 6 - Actual (2016-22), projected (2023-31)



■ Vacancies R	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025	2026	2027	2028	2029	2030	2031
	281	505	604	748	526	731	712	714	607	510	579	635	680	714	722	712
— Vacancies R to 6	2,115	2,555	2,969	3,751	4,194	5,133	5,306	5,391	5,191	5,089	4,973	5,057	5,132	5,162	5,109	5,262

APPENDIX 3: MAP OF SECONDARY SCHOOLS IN SOUTHWARK

Map of secondary schools in Southwark

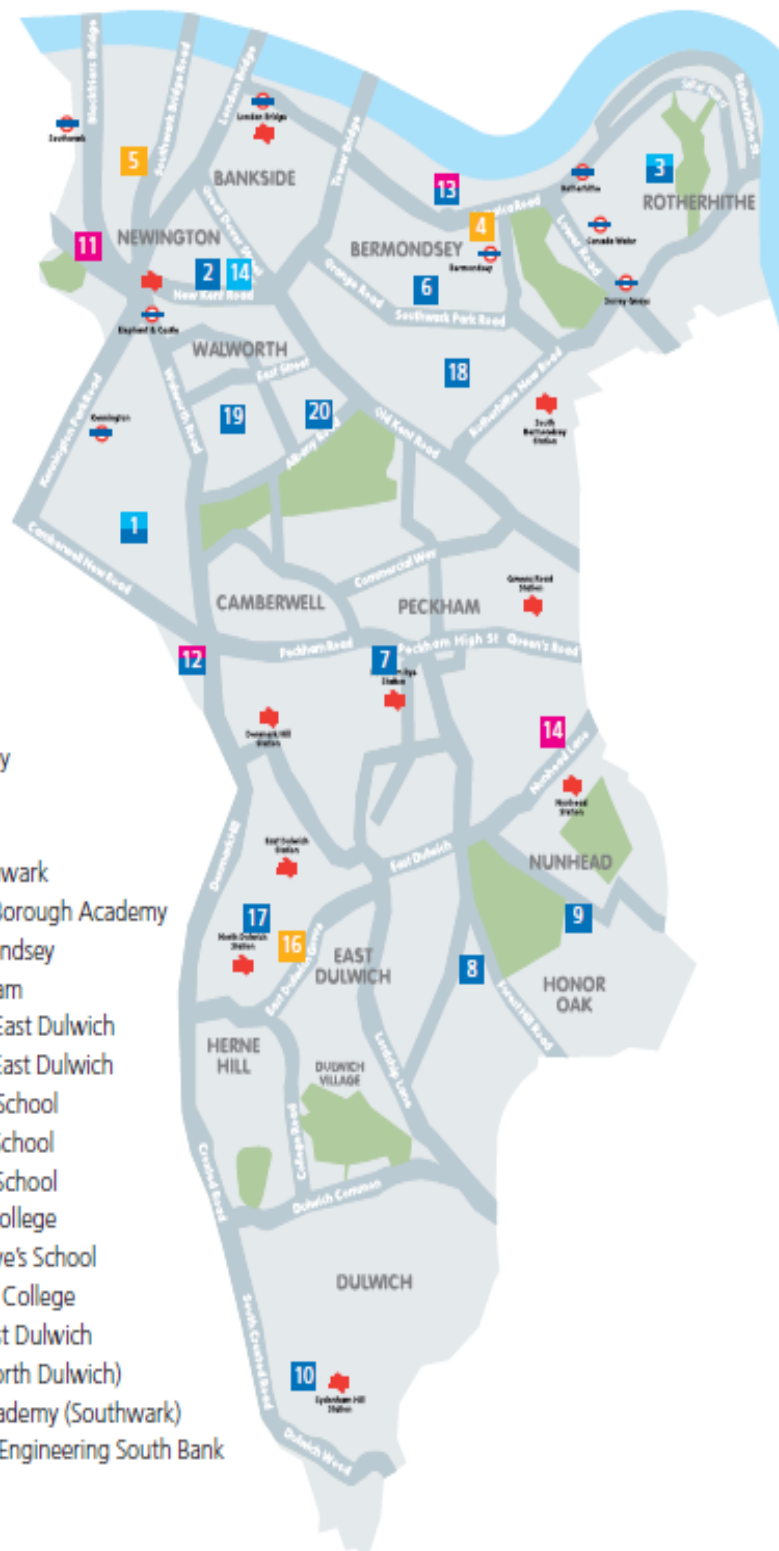
Map of secondary schools in Southwark

Key

- Academies
- Church of England
- Catholic
- Free school academy

The schools

- 1 ARK All Saints Academy
- 2 ARK Globe Academy
- 3 Bacon's College
- 4 Compass School Southwark
- 5 Haberdashers' Aske's Borough Academy
- 6 Harris Academy Bermondsey
- 7 Harris Academy Peckham
- 8 Harris Boys' Academy East Dulwich
- 9 Harris Girls' Academy East Dulwich
- 10 Kingsdale Foundation School
- 11 Notre Dame RC Girls' School
- 12 Sacred Heart Catholic School
- 13 St Michael's Catholic College
- 14 St Saviour's and St Olave's School
- 15 St Thomas the Apostle College
- 16 The Charter School East Dulwich
- 17 The Charter School (North Dulwich)
- 18 The City of London Academy (Southwark)
- 19 University Academy of Engineering South Bank
- 20 Walworth Academy



APPENDIX FOUR – SECONDARY SCHOOLS BY OLD AND NEW WARDS, SEPTEMBER 2021, and PAN (Y7, 2021/2022)

Secondary School	Type	PAN	(New) Council Ward
ARK All Saints Academy	Academy (CE)	120	Camberwell Green
ARK Globe Academy (Secondary)	Academy	180	Chaucer
Bacon's College	Academy (CE)	180	Rotherhithe
The Charter School	Academy	192	Champion Hill
City of London Academy (Southwark)	Academy	240	South Bermondsey
Compass School Southwark	Free School	120	North Bermondsey
Harris Academy Bermondsey	Academy	180	South Bermondsey
Harris Academy Peckham	Academy	180	Rye Lane
Harris Boys' Academy East Dulwich	Academy	150	Dulwich Hill
Harris Girls' Academy East Dulwich	Academy	150	Peckham Rye
Kingsdale Foundation School	Academy	300	Dulwich Wood
Notre Dame Roman Catholic Girls' School	VA RC	124	St George's
Sacred Heart Roman Catholic Secondary	Academy (RC)	124	Camberwell Green
St Michael's Catholic College	Academy (RC)	150	North Bermondsey
St Saviour's and St Olave's C of E School	VA CE	124	Chaucer
The St Thomas the Apostle College	VA RC	152	Nunhead & Queen's Road
ARK Walworth Academy	Academy	180	Faraday
University Academy Engineering South Bank	Free School	150	Faraday
Charter School East Dulwich	Free School	210	Goose Green
Haberbdashers' Aske's Borough Academy	Free School	180	Borough & Bankside
Southwark Total	3,356		
Academies	Academy	2,324	69% of Secondary Y7 places
Free Schools	Free School	630	19% of Secondary Y7 places
VA CE	Free School	124	4% of Secondary Y7 places
VA RC	Free School	278	8% of Secondary Y7 places
Southwark Total	3,356		

APPENDIX FIVE: MAP OF ALL STATE FUNDED MAINSTREAM PRIMARY SCHOOLS IN SOUTHWARK



Community primary schools

- 1 Albion Primary School
- 2 Alfred Salter Primary School
- 3 Bellenden Primary School
- 4 Bessemer Grange Primary School
- 5 Brunswick Park Primary School
- 6 Camelot Primary School
- 7 Cobourg Primary School
- 8 Comber Grove Primary School
- 9 Crampton Primary School
- 10 Crawford Primary School
- 11 Dog Kennel Hill Primary School
- 12 Dulwich Wood Primary School
- 13 Goodrich Primary School
- 14 Grange Primary School
- 15 Heber Primary School
- 16 Hollydale Primary School
- 17 Ilderton Primary School
- 18 Ivydale Primary School
- 19 John Ruskin Primary School
- 20 Keyworth Primary School
- 21 Michael Faraday Primary School
- 22 Oliver Goldsmith Primary School
- 23 Phoenix Primary School
- 24 Pilgrim's Way Primary School
- 25 Riverside Primary School
- 26 Robert Browning Primary School
- 27 Rotherhithe Primary school
- 28 Rye Oak Primary School
- 29 Snowsfields Primary School
- 30 Southwark Park School
- 31 Tower Bridge Primary School
- 32 Townsend Primary School
- 33 Victory Primary School

Academies

- 34 Angel Oak Academy
- 35 ARK Globe Academy
- 36 Charles Dickens Primary School
- 37 Dulwich Hamlet Junior School
- 38 Goose Green Primary School

- 39 Harris Primary Academy, Peckham Park
- 40 John Donne Primary School
- 41 Lyndhurst Primary School
- 42 Redriff Primary
- 43 Surrey Square Primary School

Voluntary aided schools

- 44 Boutcher Church of England Primary School
- 45 The Cathedral School of St Saviour and St Mary Overie
- 46 Dulwich Village C of E Infants' School
- 47 Peter Hills with St Mary's and St Paul's C of E Primary School
- 48 St George's C of E Primary School
- 49 St James' C of E Primary School
- 50 St John's and St Clement's C of E Primary School
- 51 St Jude's C of E Primary School
- 52 St Mary Magdalene C of E Primary School
- 53 St Paul's C of E Primary School
- 54 St Peter's Walworth C of E Primary School
- 55 English Martyrs' Catholic Primary School
- 56 Saint Joseph's Catholic Primary School, The Borough
- 57 St Anthony's Catholic Primary School
- 58 St Francesca Cabrini Primary School
- 59 St Francis Catholic Primary School
- 60 St George's Cathedral Catholic Primary School
- 61 St James the Great Catholic Primary School
- 62 St John's Catholic Primary School
- 63 St Joseph's Camberwell Catholic Schools' Federation (Infants)
- 64 St Joseph's Camberwell Catholic Schools' Federation (Juniors)
- 65 St Joseph's Catholic Primary School, George Row
- 66 St Joseph's Catholic Primary School, Gomm Road

Foundation schools

- 67 Charlotte Sharman Primary School
- 68 Friars Primary Foundation School

Free schools

- 69 Galleywall Primary City of London Academy
- 70 Harris Primary Academy East Dulwich
- 71 Harris Primary Free School Peckham
- 72 John Keats Primary School
- 73 Judith Kerr Free School
- 74 The Belham Primary School

APPENDIX SIX - WARDS AND SCHOOLS

(New) Ward	Primary Schools	Secondary Schools
Borough & Bankside	Charles Dickens, St Joseph's Borough RC, Cathedral School CE, Friars	Haberbdashers' Aske's Borough
Camberwell Green	Comber Grove, Crawford, John Ruskin, Brunswick Park, St Joseph's Infants RC, St Joseph's Junior RC	Sacred Heart Roman Catholic Secondary, ARK All Saints
Champion Hill	Dog Kennel Hill, Bessemer Grange	The Charter School North Dulwich
Chaucer	ARK Globe Academy	St Saviour's & St Olave's CE
Dulwich Hill	St Anthony's RC, Goodrich	Harris Boys East Dulwich
Dulwich Village	Judith Kerr, Dulwich Hamlet Juniors, Dulwich Village Infants CE	No secondaries
Dulwich Wood	Dulwich Wood Primary	Kingsdale Foundation
Faraday	Michael Faraday, St Peters CE, Surrey Square	ARK Walworth, University Academy Engineering South Bank
Goose Green	Harris Primary Free East Dulwich, St John's & St Clements CE, Goose Green, Heber	Charter School East Dulwich
London Bridge & West Bermondsey	Grange, Snowfields, Tower Bridge	No secondaries
Newington	Crampton, Keyworth, St Paul's CE	No secondaries
North Bermondsey	Riverside, Southwark Park, St James CE, St Joseph's George Row	Compass School Southwark, St Michael's Catholic College
North Walworth	Robert Browning, Townsend, Victory, English Martyrs RC	No secondaries
Nunhead & Queen's Rd	Hollydale, John Donne	The St Thomas the Apostle RC
Old Kent Road	Cobourg, John Keats, Ilderton, Pilgrims Way, Phoenix, Camelot, St Francis RC	No secondaries
Peckham	Angel Oak, Harris Academy Peckham Park, St James The Great RC	No secondaries
Peckham Rye	Ivydale, St Francesca Cabrini RC	Harris Girls East Dulwich
Rotherhithe	Albion, Alfred Salter, Rotherhithe, St Joseph's RC	Bacon's College
Rye Lane	Harris Free Peckham, Bellenden, St Mary Magdalene CE, Rye Oak, The Belham School	Harris Peckham Academy
South Bermondsey	Boutcher CE, Galleywall	City of London Academy Southwark, Harris Bermondsey
St George's	St Georges Cathedral RC, St Jude's CE, Charlotte Sharman	Notre Dame RC
St Giles	Lyndhurst, Oliver Goldsmith, St George's CE	No secondaries
Surrey Docks	Peter Hills CE, Redriff, St Johns RC	No secondaries

APPENDIX SEVEN – EXPANSION/CONTRACTION OF SCHOOLS IN NEIGHBOURING BOROUGHES

Table 12 – Out-borough primary school expansions/contractions by borough

Borough	PRIMARY SCHOOLS Expanded/Contracted	Remarks
Bromley	Churchfields Primary School - permanent reduction – -1FE (3FE to 2FE)	For 2021/22
	Trinity Church of England Primary School - permanent reduction – -1FE (3FE to 2FE)	
	Worsley Bridge Primary School – permanent expansion +1FE (2FE to 3FE)	
Croydon	Paxton Academy – new school (+2FE)	For 2021/22
	Krishna Avanti Primary School – permanent expansion +1FE (1FE to 2FE)	For 2021/22
Lambeth	Henry Fawcett Primary School - permanent reduction – -1FE (2FE to 1FE)	For 2021/22
	Kingswood Primary School - permanent reduction – -1FE (4FE to 3FE)	
	Richard Atkins Primary School - permanent reduction – -1FE (2FE to 1FE)	
	Stockwell Primary School - permanent reduction – -1FE (3FE to 2FE)	
Lewisham	Adamsrill Primary School - permanent reduction – -1FE (2FE to 1FE)	For 2021/22
	Harris Lewisham Free School – new school (+3FE) – <i>still seeking a site</i>	For 2022/23 At the earliest
	Closure of St Mary Magdalene RC Primary School s – 1FE (1FE to 0)	For 2021/22 (December)
SECONDARY SCHOOLS Expanded/Contracted		Remarks
Bromley	SHaW Futures Academy – new school – (+6FE)	For 2022/23 at the earliest
	Harris Academy Sydenham – new school – (+10FE) – <i>still seeking a site</i>	For 2022/23 at the earliest
	Harris Girls' Academy Bromley - permanent reduction – -0.3FE (6.3FE to 6FE)	For 2021/22
	Ravens Wood School - permanent reduction – -0.5FE (8FE to 7.5FE)	For 2021/22
	The Ravensbourne School - permanent expansion – +0.4FE – 7.6 FE to 8FE)	For 2021/22
Croydon	Virgo Fidelis RC Secondary – closure (-4FE)	For 2021/22
Greenwich	Harris Academy Avery Hill Boys School – new school - +6FE	For 2022/23

APPENDIX 8 – Births by calendar year in Southwark
 Table 13: Births in Southwark (actuals 2012-2020, projections 2021-2031)

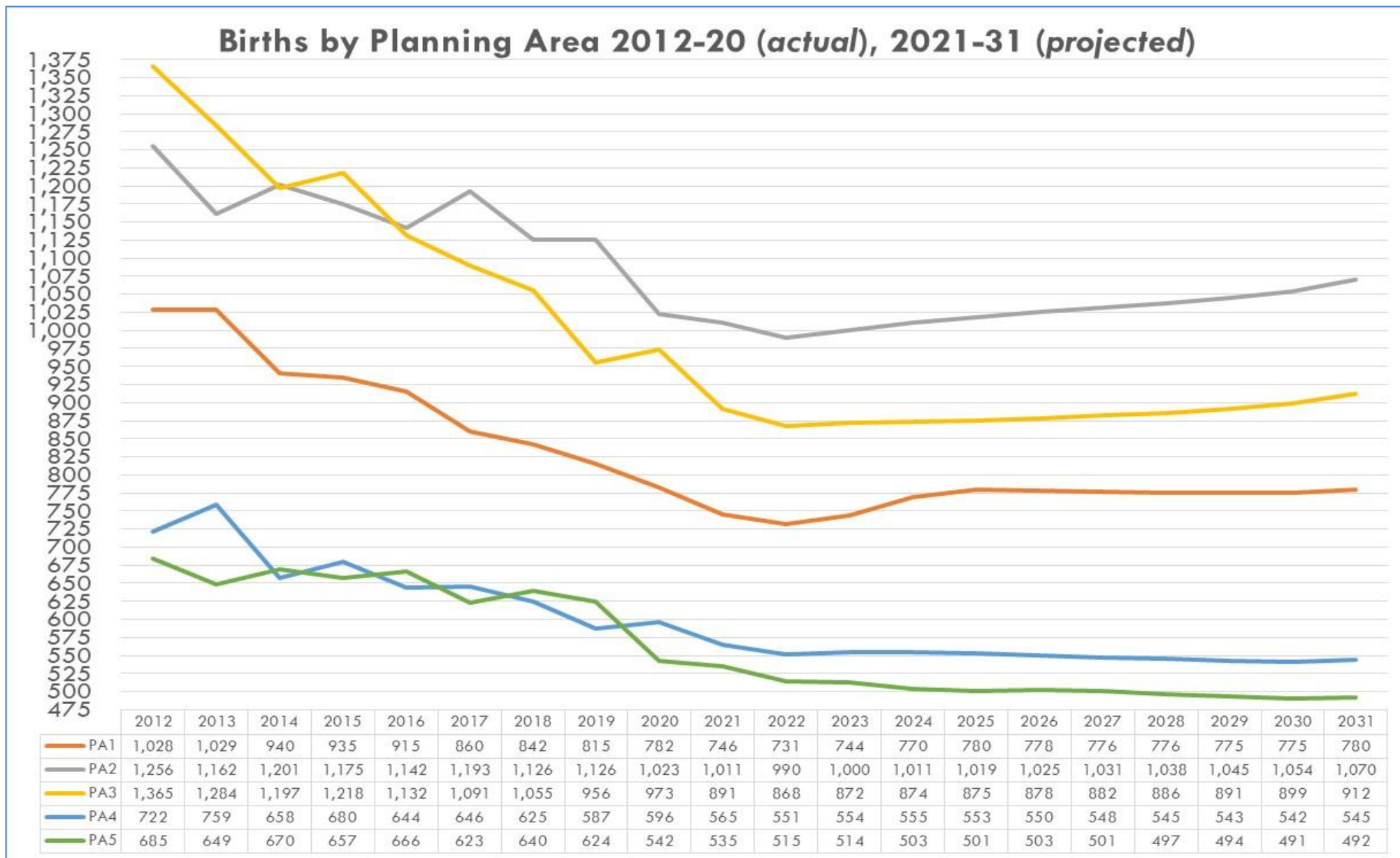
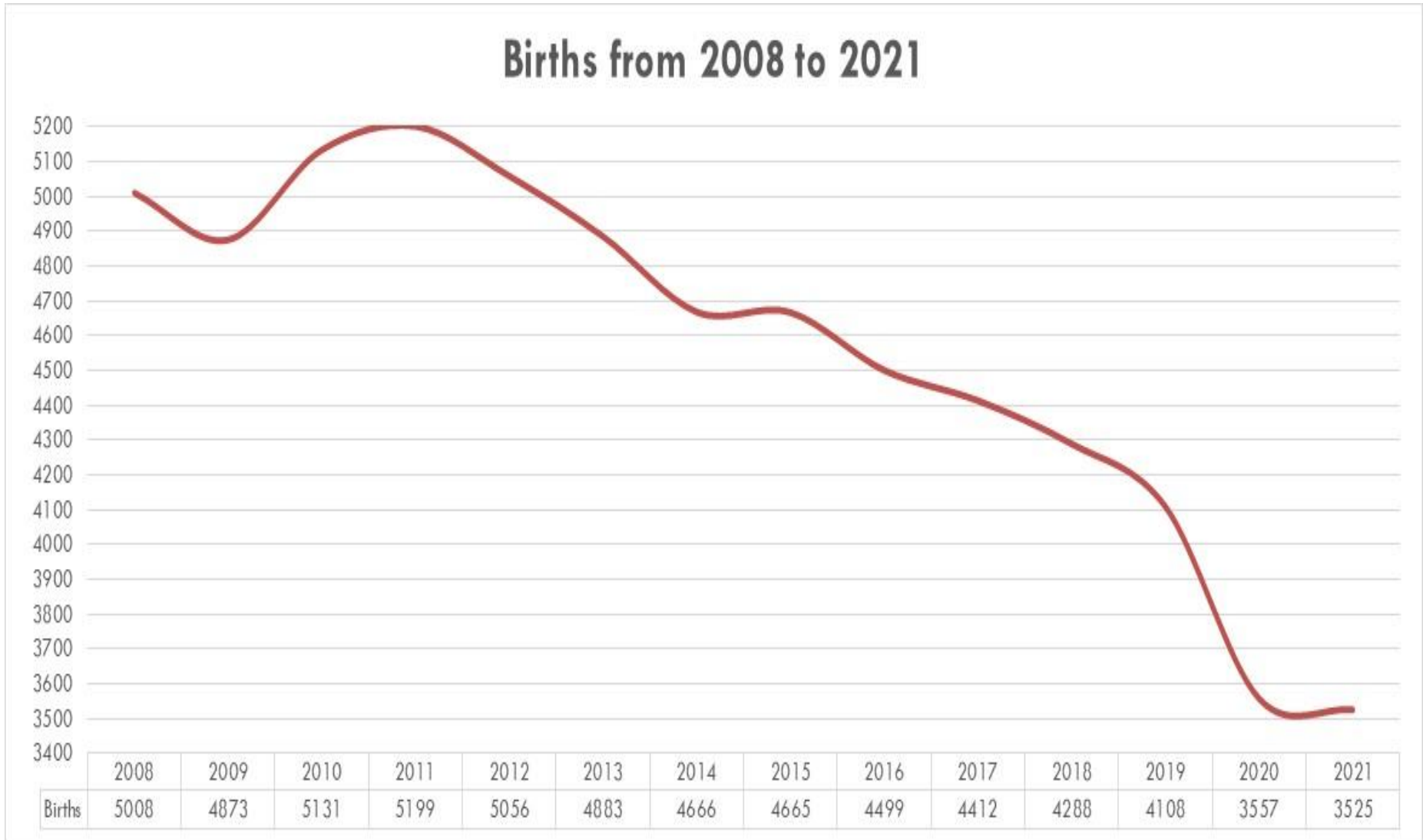


Table 14 Southwark Births (actual 2012-21)

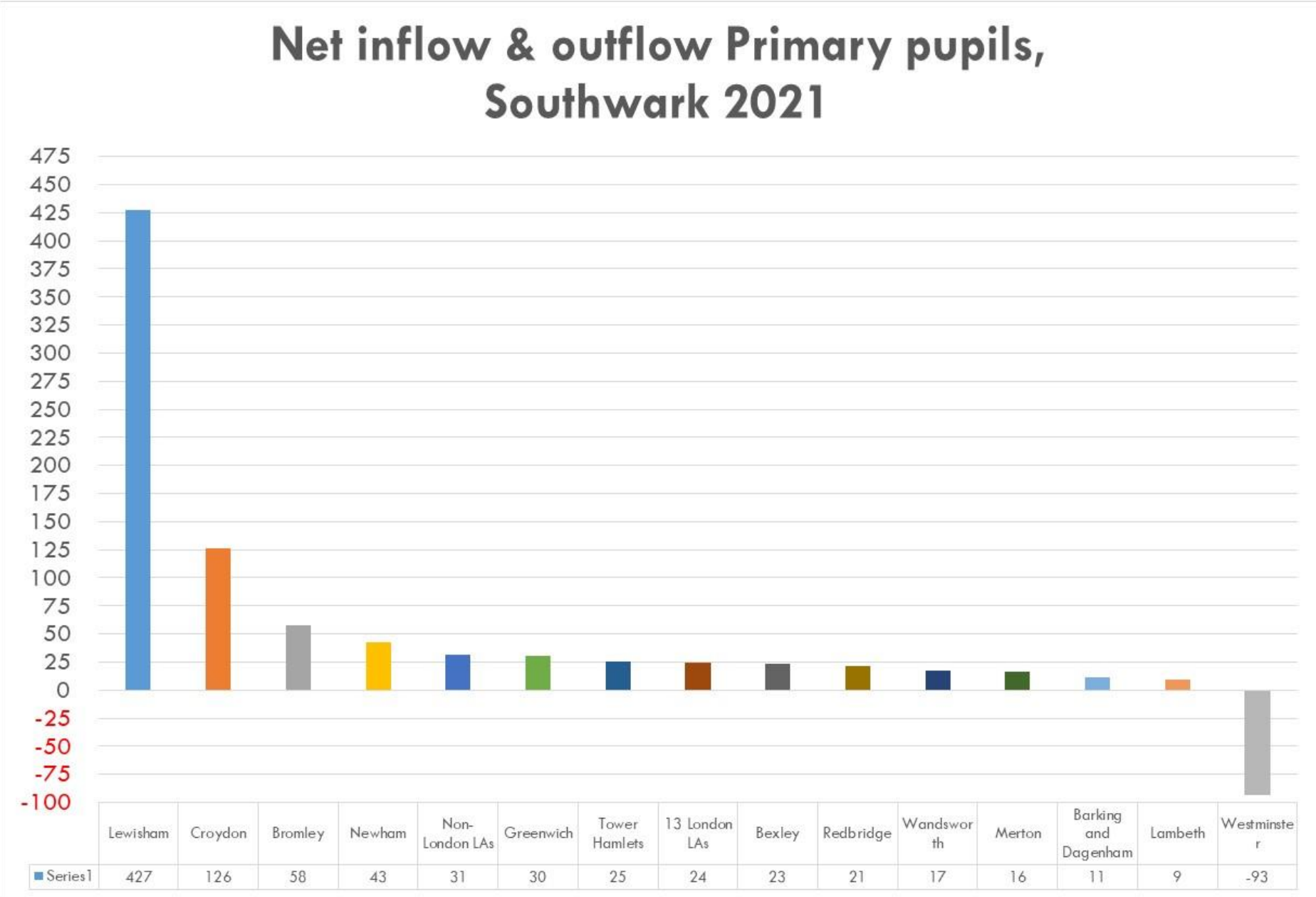


APPENDIX 9a – PRIMARY Cross border flows to and from Southwark

Pupils in Southwark attending primary schools in other LAs/pupils from other LAs attending Southwark schools

LA	Pupils from Southwark attending other LA's schools	Percentage Southwark Outborough pupils	Pupils from other LAs attending Southwark Schools	Percentage Outborough pupils in Southwark	+/- flow
Lambeth	837	49%	861	34%	+24
Lewisham	605	35%	1,069	42%	+464
Westminster	108	6%	5	0%	-103
Greenwich	28	2%	78	3%	+50
Croydon	26	2%	157	6%	+131
Bromley	20	1%	75	3%	+55
Wandsworth	15	1%	22	1%	+7
Tower Hamlets	12	1%	15	1%	+3
Newham	4	0%	42	2%	+38
Bexley	4	0%	25	1%	+19
Merton	3	0%	20	1%	+17
22 other London LAs	39	2%	83	3%	+44
Other non-London LAs	7	0%	88	3%	+81
All Cross borough	1708	100%	2540	100%	+830

Table 15 – Net import and export of primary pupils to and from Southwark 2021

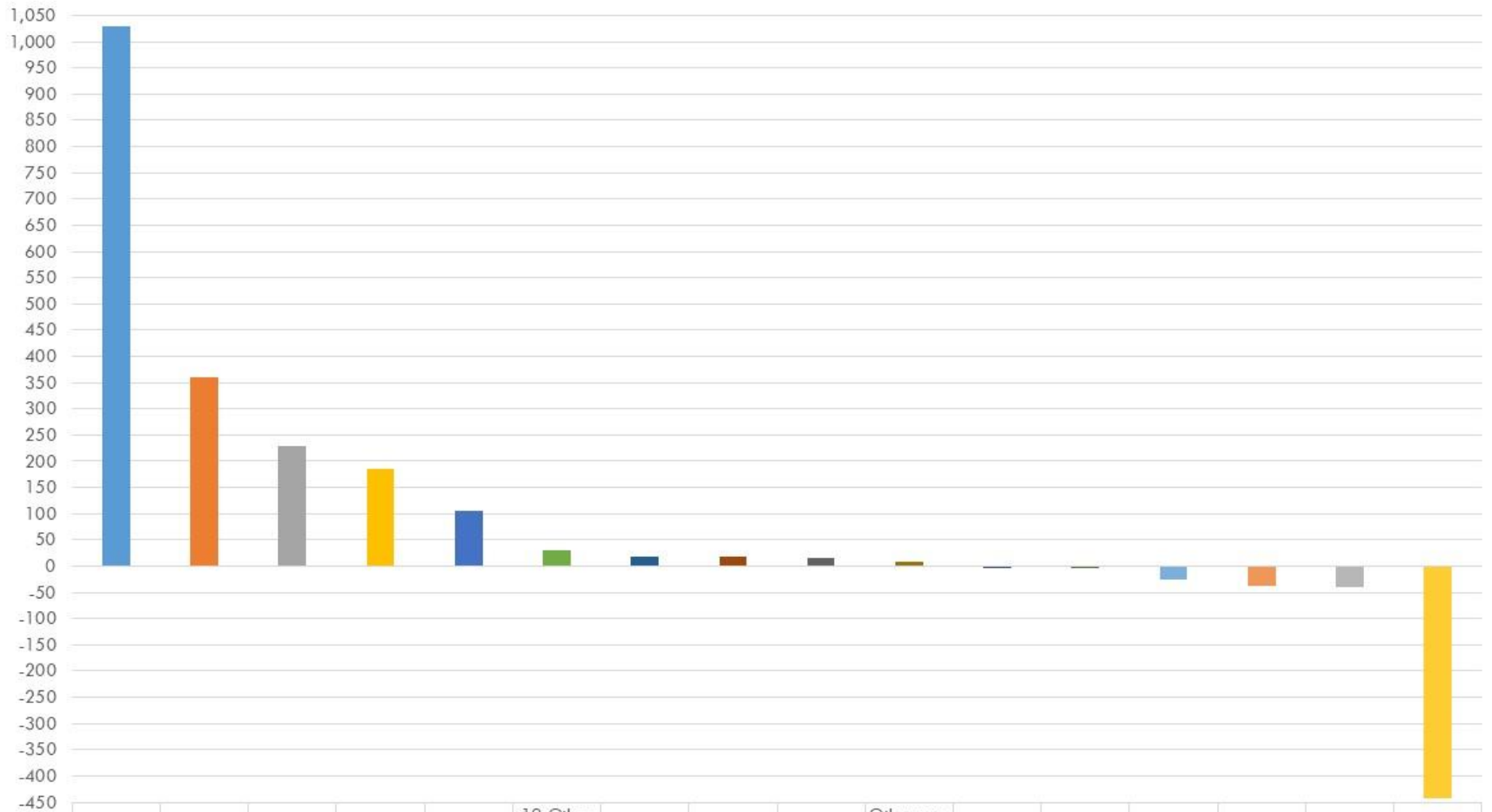


APPENDIX 9b – SECONDARY Cross border flows to and from Southwark

Pupils in Southwark attending secondary schools in other LAs/pupils from other LAs attending Southwark schools

LA	Pupils from Southwark attending other LA's schools	Percentage Southwark Out borough pupils	Pupils from other LAs attending Southwark Schools	Percentage Out borough pupils in Southwark	+/- flow
Lambeth	1,095	40%	1,455	35%	+360
Lewisham	662	24%	1,690	40%	+1,028
Westminster	455	17%	12	0%	-443
Croydon	131	5%	361	9%	+230
Greenwich	75	3%	94	2%	+19
Wandsworth	43	2%	59	1%	+16
Hammersmith & Fulham	42	2%	2	0%	-40
Kensington & Chelsea	39	1%	1	0%	-38
Bromley	32	1%	218	5%	+186
Sutton	29	1%	4	0%	-25
Tower Hamlets	24	1%	130	3%	+106
Merton	21	1%	40	1%	+19
Bexley	18	1%	14	0%	-4
Camden	14	1%	11	0%	-3
19 Other London LAs	32	1%	63	2%	+31
Other non-London LAs	36	1%	45	1%	+9
All cross borough	2,748	100%	4,199	100%	+1,451

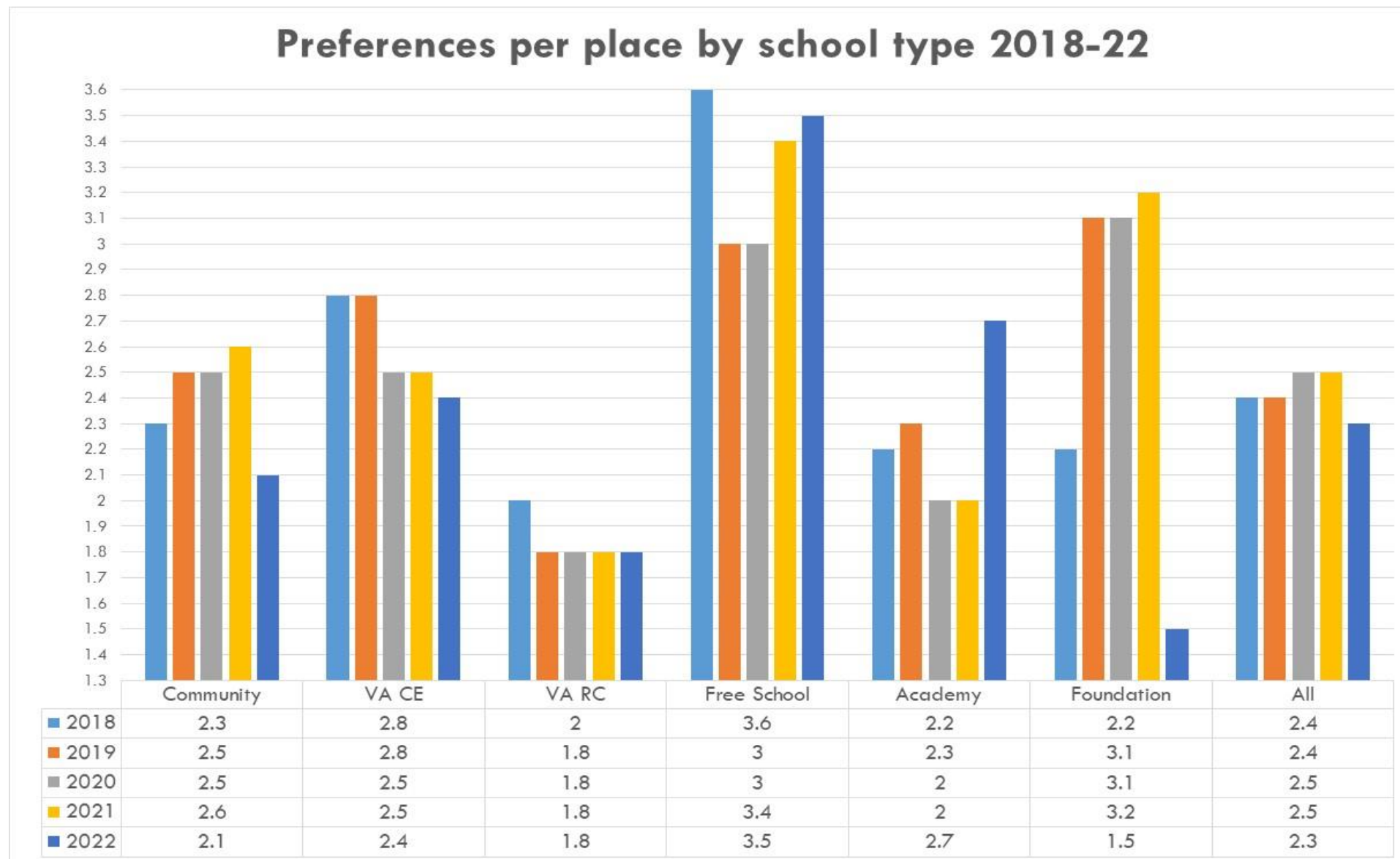
Secondary imports and exports 2020



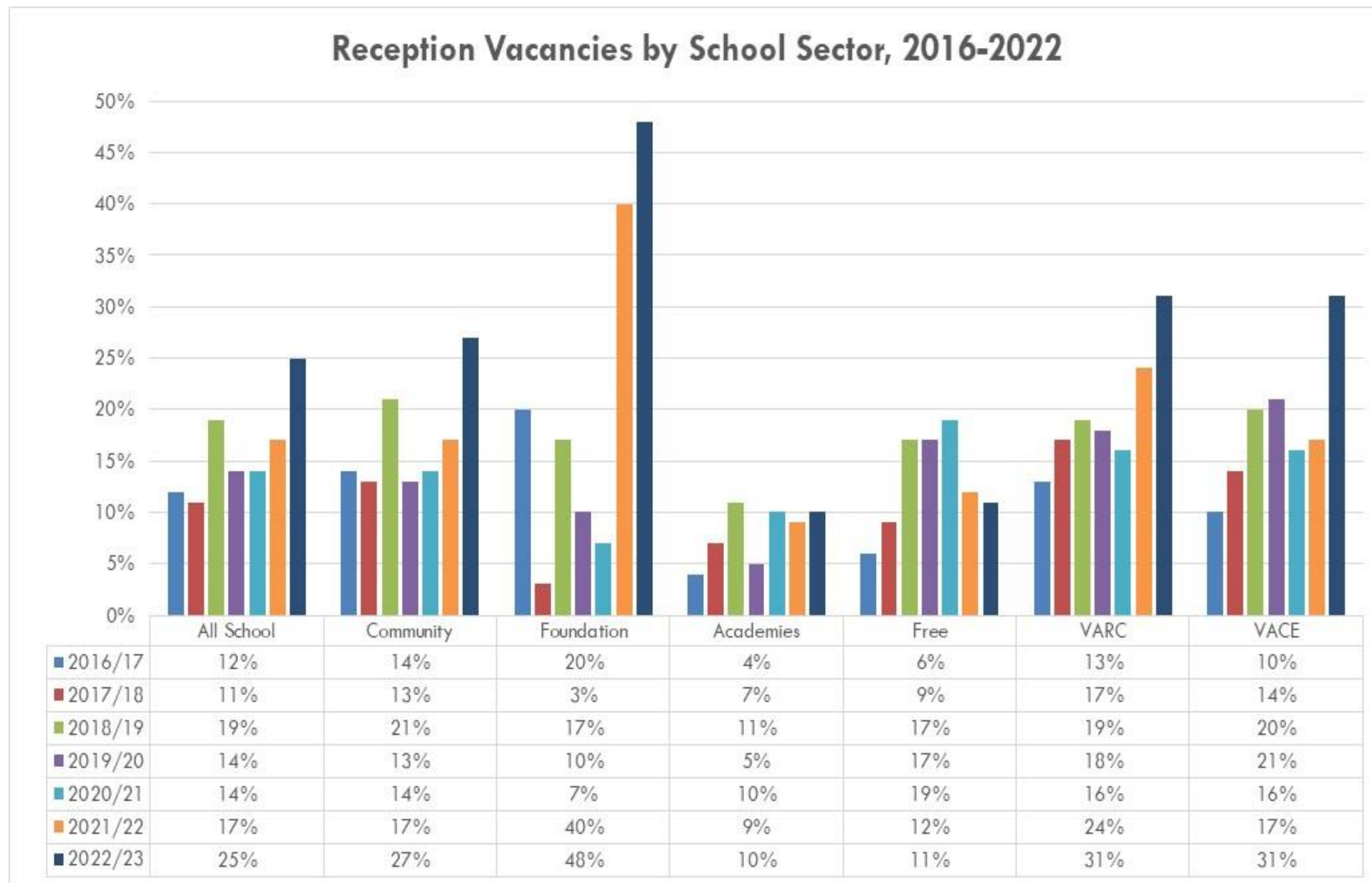
	Lewisham	Lambeth	Croydon	Bromley	Tower Hamlets	19 Other London LAs	Greenwich	Merton	Wandsworth	Other non-London LAs	Camden	Bexley	Sutton	RBKC	Hammersmith & F	Westminster
Series1	1,028	360	230	186	106	31	19	19	16	9	-3	-4	-25	-38	-40	-443

Appendix 10a – Preferences by Sector for Reception Places, 2018 – 2022

Table 16 – Preference per Primary place by school type

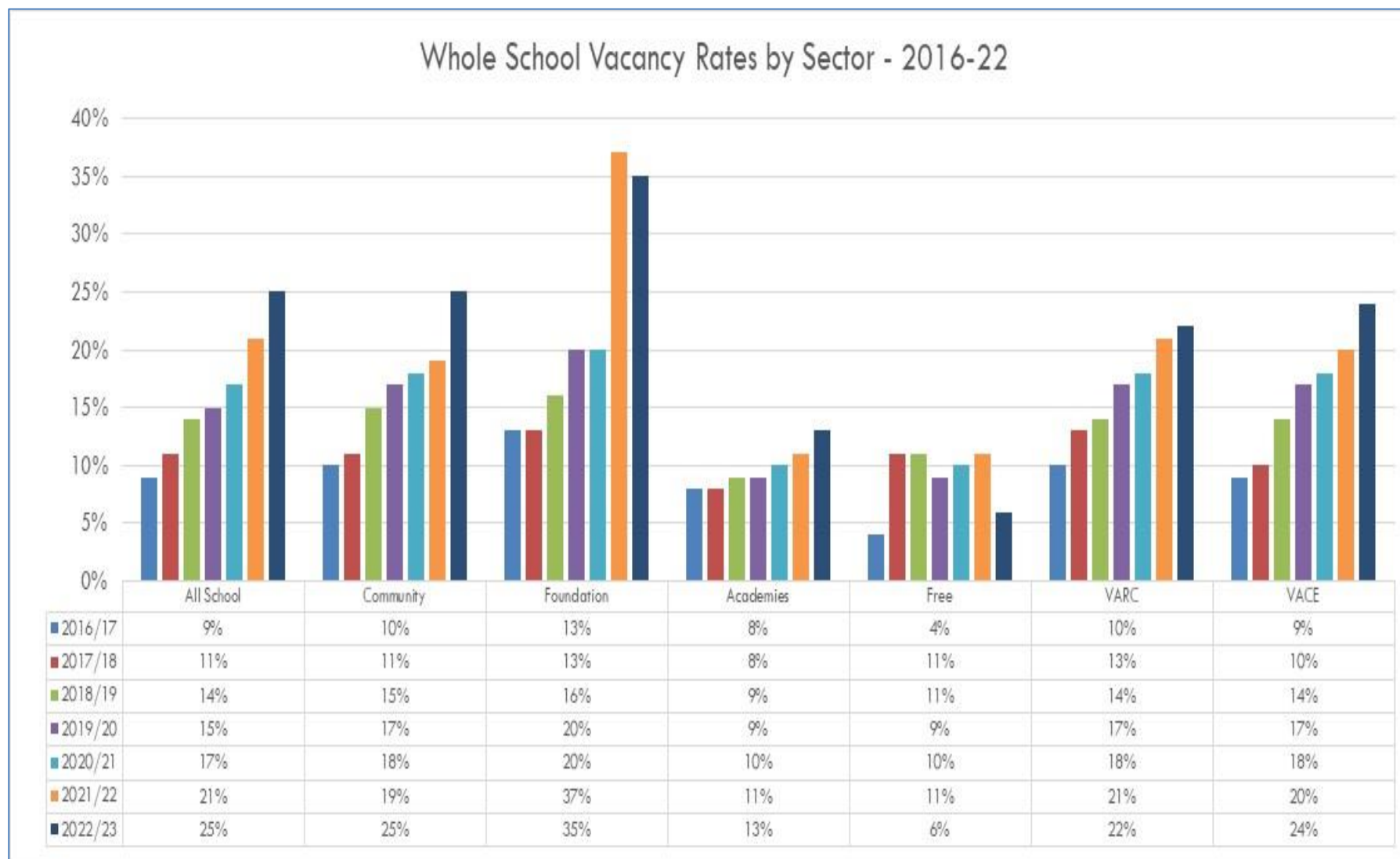


APPENDIX 10b – Primary vacancies by school type – at reception



APPENDIX 10c – OVERALL VACANCY RATES BY TYPE OF PRIMARY SCHOOL – WHOLE SCHOOL VACANCIES

Table 17 Percentage vacancy levels by school type – whole school (Years R to 6)



APPENDIX 11 – AGREED PAN REDUCTIONS FROM SEPTEMBER 2019 TO SEPTEMBER 2023

Table 18 School PAN reductions by school, by planning area – PANs reduced from September 2019 unless otherwise noted

PA	Primary School	Previous PAN	Agreed PAN	Reduction
1	St George's Cathedral RC	60	30	-30
	Cobourg	60¶	30¶	-30¶
	Charlotte Sharman	60	30	-30
	English Martyrs RC	60◇	30◇	-30◇
	Keyworth	90	60	-30
	St John's Walworth‡	30‡	0‡ (closed)	-30‡
	Robert Browning	60	30	-30
2	Phoenix*	120*	90*	-30*
	Ilderton◇	60◇	30◇	-30◇
3	Hollydale	45	30	-15
	Bellenden	60	30	-30
	Camelot	75	60	-15
	Ivydale	120	90	-30
	Harris Peckham Park†	60†	30†	-30†
	St Francesca Cabrini RC†	60†	30†	-30†
4	Brunswick	75	60	-15
	Comber Grove	45	30	-15
	Dog Kennel Hill◇	60◇	30◇	-30
	Crawford	90	60	-30
Total agreed		1,290 (43FE)	780 (26FE)	-510 (17FE)

*PAN reduction agreed from September 2020 onwards

†PAN reduction agreed from September 2021 onwards

¶ PAN reduction agreed from September 2022 onwards

◇ PAN reduction agreed from September 2023 onwards

‡ Closure of school agreed from September 2021

APPENDIX 12 – ACADEMY SCHOOLS BY SPONSOR

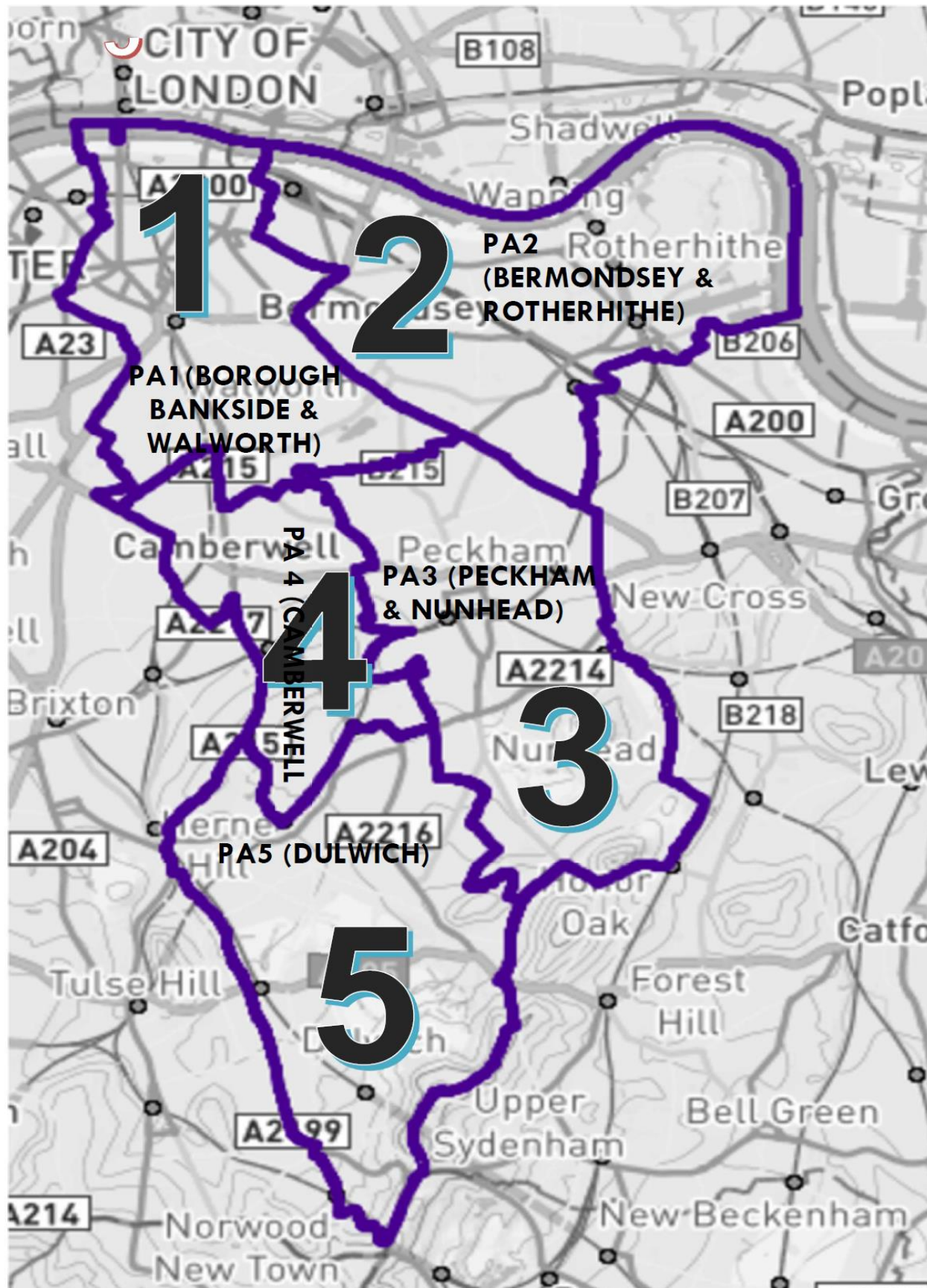
Table 19 Academies and Free Schools in Southwark and their sponsors (*these MATs have schools in other LAs)

Sponsor/Number of Academies (36)	Primary & All through (16)	Secondary & all through (17)	Special (3)
ARK (3)*		ARK All Saints Academy ARK Walworth Academy ARK Globe School (4-19)	
Harris Federation (7)*	Harris Peckham Park Harris Primary Free Peckham Harris Primary Free East Dulwich	Harris Bermondsey Harris East Dulwich Girls Harris East Dulwich Boys Harris Peckham Secondary	
Charter Educational Trust (6)	Charles Dickens Academy Lyndhurst Primary Academy The Belham Primary School Dulwich Hamlet Junior	Charter North Dulwich Charter East Dulwich	
Spa Educational Trust (3)			Spa Bermondsey (11-19) Spa Camberwell (5-19) Park College (19-25)◇
The Kingsdale Foundation (1)		Kingsdale Foundation	
Communitas Education Trust (3)*	John Donne Primary John Keats Free School Goose Green Primary		
City of London Academies Trust (3)*	Redriff Primary School Galleywall Primary School	City of London Academy (COLA) Southwark	
STEP Academy Trust (1)*	Angel Oak Academy		
St Thomas Aquinas C of E Trust (1)*	St Paul's Walworth C of E Academy		
Academies Enterprise Trust (AET) (1)*			Newlands Academy
Anthem Schools Trust (1)*	Judith Kerr Primary		
United Learning Trust (1)*		Bacon's College	
Sacred Heart Catholic Trust (1)*		Sacred Heart Catholic School	
St Michaels Catholic College Trust		St Michael's Catholic College	
Haberdashers' Academies Trust South (1)*		Haberdashers' Borough Academy	
Compass Educational Trust (1)		The Compass School	
South Bank Educational Trust (1)		South Bank University Academy	

◇ Post compulsory age, not counted in total

APPENDIX 13 PRIMARY PLANNING AREA MAP

PRIMARY PLANNING AREA MAP



15 December 2021

Via email

Dear all,

As you are aware, a task and finish group with senior representation from our constituent partner organisations has been meeting regularly since June to co-produce proposed arrangements for our Local Care Partnership (LCP), with outputs feeding formally into the Partnership Southwark Leadership Forum (PSLF) and the Southwark Health and Wellbeing Board. As we approach the holidays, I'd like to update you on positive changes that will bring all parts of our system together with a view to ensuring our partnership collectively makes a difference for, and addresses inequalities within, Southwark's communities.

This letter seeks to update on:

1. The impact of proposals outlined in a recent 'statement of intent' sent on Friday 10th December to Partnership Southwark Chief Executives and PCN Clinical Directors from Andrew Bland, Eleanor Kelly and myself (as enclosed).
2. Immediate changes to Partnership Southwark governance as we transition to LCP shadow governance arrangements within the wider Our Healthier Southeast London Integrated Care System (ICS), and the opportunities to utilise this shadow governance during a time of operational pressures to focus on key priorities for the local system over the next 3-4 months.
3. Partnership development and support to enable this transition and achievement of our ambitions for deeper integrated working across the partnership.

1. Joint Statement of Intent – Local Care Partnership Development in Southwark

On 10 December 2021, a letter was sent via email to partner Chief Executives and PCN Clinical Directors setting out a joint statement of intent for Partnership Southwark. This letter is the result of work the partnership agreed to progress over the summer to build understanding and clarity between the Council and the NHS.

It re-confirms much of what was put forward by the partnership to the ICS in our November letter to Richard Douglas as designate Chair of the Integrated Care Board (ICB). However, it does also signal some developments since our discussions as wider partnership which I felt helpful to expand on here.

The statement of intent sets out only the minimum membership requirements for the Partnership Southwark Strategic Board; as hopefully you recall Partnership Southwark's Leadership Forum have built on this minimum with a wider membership that incorporates Healthwatch and the voice of lived experience and our communities, which is crucially important to place. Further, our existing and future Board will continue to have Community Southwark and wider VCS representation.

As a partnership we had originally indicated consideration of a two-year period for secondment of the LCP Director. The statement of intent sets out that a time limited position initially for 2022/23, enabling further discussions and developments around joint leadership and governance.

- We had discussed and agreed the potential for two LCP senior leadership roles (i.e. a Director + Convener) in addition to chairing arrangements – this statement of intent endorses this position and further clarifies that in the event the successful candidate is part-time or continues to hold another post within their substantive organisation, they would be supported by a Chief Operating Officer.
- We have also discussed the need to undertake work to deepen our integrated working arrangements and clarify within this what we mean by, and how we facilitate, ‘joint’ leadership and governance. The statement of intent sets out a structured approach for this, which we hope is seen as a helpful enabler to us moving forward in line with our ambitions.
- Following discussions between the ICS and Southwark Council, the statement of intent sets out an opportunity for joint leadership and governance arrangements between the ICB and Council as part of this options appraisal, noting that this would facilitate greater alignment between health and care in line with ambitions for ICS’ nationally and would not prohibit additional delegations from other statutory partners.
- The statement of intent proposes a co-chair arrangement comprising of an elected Cabinet member and either a health leader or current independent chair. I appreciate this extends beyond our discussions at the Partnership Southwark Leadership Forum, where we agreed on a Chair and Associate Chair arrangement to develop a pipeline of diverse leadership. Having discussed this with the task and finish group, we believe there remain opportunities to consider an Associate Chair alongside the proposed co-Chair arrangements.

Following this letter, the task and finish group will continue to work through the leadership roles for the Partnership including time commitment, remit/role profile and remuneration before bringing proposals back to the wider partnership in advance of commencing recruitment in January.

Immediate changes as we move into LCP shadow governance arrangements

Following endorsement at the Partnership Southwark Leadership Forum on the 4th of November, an agreement was made to formally move to shadow leadership and governance arrangements in December. As a result, existing forums will need to be stood down and new boards/groups stood up with immediate effect.

We appreciate that this is a transition period so it will take time for new ways of working to bed down, and we are still working through what we want our partnership to look and feel like and the functions we will need to deliver. However, it is best that we do this through doing and evolve as we develop.

We are also mindful of the significant operational pressures that all partners are currently under and the need to ensure our governance and ways of working are configured in such a way that enables the partnership to be used as an effective vehicle for addressing key priorities for our local health and care system over the next 3-4 months (e.g. covid response, winter pressures, vaccination roll-out and hesitancy).

Existing governance arrangements – what will be stood down

- a) **Partnership Southwark Leadership Forum** – final meeting Nov 21
- b) **Partnership Southwark Delivery Group** – final meeting Dec 21
- c) **Partnership Southwark Task and Finish Group** – final meeting Jan 22
- d) **Current ‘Well’ workstream Senior Responsible Officer (SRO) arrangements** – Dec 21

- We would like to express our thanks to those members of the leadership team who have fulfilled these roles to date. From January 2022, we will be seeking to allocate SRO portfolios within the Partnership Southwark Strategic Board. Multi-agency leadership teams supporting the workstreams will therefore collectively share decision making and responsibility for driving forward their workstreams in line with Partnership Southwark objectives and priorities.

New governance arrangements – what will be stood up

Further details of each group including purpose, remit and proposed membership can be found [here](#).

a) Partnership Southwark Strategic Board (PSSB) from Mid-December 2021

The Partnership Southwark Strategic Board (PSSB) will be stood up in shadow form through three workshop style sessions in December, January, and March 2022. Once the ICS is formalised the PSSB will meet in public every two months with the ability to have a closed session as a Part B. The PSSB will operate in tandem with the borough-based board until the ICS/LCP is constituted formally. The current working date for this is 1 April 2022; however, this is subject to legislation currently going through parliament.

b) Partnership Southwark Delivery Executive from Mid-January 2022

The Partnership Southwark Delivery Executive (the Executive) will launch in mid-January and meet on a fortnightly basis initially to transact strategic direction from the PSSB into operational delivery. A starter for ten on membership for the Executive is currently being populated by representatives of the task and finish group and will be reviewed with partners in December.

It is expected that the Executive will include members of the wider borough leadership team in line with guidance from the ICS as set out in the letter to Partnership Southwark partners from the Chair of the ICS in September, alongside clinical and professional leads as and when these are recruited to at a later date.

c) Population-based Programme Boards (x4) From March 2022

Population-based Programme Boards for our 'Well' workstreams will be stood up in March 2022. The Programme Boards will meet quarterly to ensure oversight of delivery and development for all workstreams in line with agreed objectives and outcomes and serve as a point of escalation for solving workstream barriers and risks preventing delivery.

Leadership Groups will continue to meet outside of these meetings (at a frequency determined by them) and bring together core delivery teams to operate as delivery engine rooms for each workstream, with continued support from the Programme Team.

d) Clinical and Professional Advisory Group Early 2022

A refreshed Partnership Southwark Clinical and Professional Advisory Group will reconvene in early 2022 (this has been paused since the start of the COVID-19 pandemic) to work hand in hand with the PSSB on specific proposals, improve integrated service delivery, inform service redesign and improvement, and have oversight of functions such as population health management and clinical effectiveness.

We are also currently waiting on whether ICS-level funding will be made available to further develop our local Clinical and Professional Leadership model for Partnership Southwark. A proposal around

what this might look like has been developed and will be discussed at the task and finish group in January before being shared back with the wider partnership.

e) **Lived Experience Assembly Q1 22/23**

Options to develop a Lived Experience Assembly (working title) are currently being developed with input from service users/carers and communities supported by our communication team. Our ambition is to have a high-level proposal developed and endorsed by the PSSB in March, with a view to standing this forum up during quarter 1 of 22/23.

2. Partnership development support

Recognising the ambition and the changes ahead, support has been brought in to enable our partners to co-design and develop Partnership Southwark as an effective place-based Local Care Partnership (LCP) to deliver the best possible outcomes for our population and address inequalities within our communities:

- Attain will be providing support to deliver the functional mapping approach we have agreed at the task and finish group and leadership forum with a view to completing the following 3-stage development plan working with conveners and nominated leads from across the partnership:
 1. A functional review for 'safe landing' on 5 areas initially¹
 2. Future thinking of what good would look like and how this function could be delivered in the future (over 12-24 months)
 3. A Gap Analysis following stages 1 and 2 to inform our development plan.

We have revised the timelines for this work appreciating the operational pressures senior leaders and teams are under within the Partnership.

- NHS England and Improvement, NHSX and the Local Government Association will be supporting Southwark as the SEL-ICS 'place' to be part of a national population health and place development programme from mid-February 2022. The programme will support Partnership Southwark through flexible, action focused support and on the following 4 key areas:
 1. Ambition, vision, and leadership
 2. Governance, functions, and finance
 3. Population health management and integrated health and care transformation
 4. Digital, data and analytics

Our relationship manager for this work will be Katrina Percy from the National Association for Primary Care (NAPC), and we will be able to draw on the support and expertise of a consortium including IBM, The Nuffield Trust, PA Consulting, Sollis, Collaborate, UHS, NAPC and the SCIE.

The involvement of Partnership Southwark was endorsed by the task and finish group on the 29th of November. Further information will be emailed out to partners in January.

¹ *Improving Population Health Inequalities, Care pathway Transformation, Understand and working with communities, workforce and PCN Development*

If you require further information or have any questions, please do not hesitate to contact me directly.

Best wishes,

A handwritten signature in black ink, appearing to read 'Anu Singh', is displayed on a white background. The signature is fluid and cursive, with a small dot at the end.

Anu Singh

Independent Strategic Chair – Partnership Southwark

Southwark Council all-Member briefing note

Introducing the Health and Care Act: what are Integrated Care Systems and how will they affect the Council and our residents?

June 2022

Introduction

The health and wellbeing of Southwark's residents is a key priority for the Council. We have a longstanding ambition to support the integration of health and care services for our residents, working with NHS and other local partners on a place-based approach to improve health outcomes and reduce health inequality. The introduction of the Health and Care Act opens up space for the next phase of this journey. As with all changes, there will be opportunities to advance the health and wellbeing of residents and also new risks to manage.

This briefing note sets out details of the new South East London Integrated Care System, how it will work with the existing bodies including the Health and Wellbeing Board, and how the Council can work with the Integrated Care System as a key partner to continue to ensure our residents get the best from the system as a whole.

The Council's role and priority must be to ensure that all services covered by the changes in these new arrangements continue to be accountable to local people, and to meet the needs of the local population. We will do this through the Health and Wellbeing Board, managed through Southwark's Joint Health and Wellbeing Strategy.

It is essential that the Council is embedded in these new structures, to ensure the voices of our residents are at the heart of discussion here in Southwark and across South East London. The COVID-19 pandemic has shown us more clearly than ever the importance of local decision-making in response to the different needs of individuals and local populations. This is an important opportunity to ensure that care is designed and built around the needs of each individual and family. This must be the test of success for these new integrated care arrangements.

The aim of the new Integrated Care System is for the NHS, Council and local health partners to collectively plan health and care services to meet the needs of their local population. Improving population health and reducing inequalities is at the heart of that.

Our role as a Council is to make these changes work for Southwark and our residents. The Health and Wellbeing Board will have an important role in holding the Integrated Care System to account, as will the Council's Overview and Scrutiny Commission and various scrutiny committees. We will work closely with the NHS and our other local health partners to ensure that these new arrangements improve health services and outcomes for our residents, and reduce inequality in our borough.

Executive Summary

1. The Health and Care Act (the Act) received Royal Assent April 2022, establishing Integrated Care Systems (ICSs) which, in London, will operate at the sub-regional level. These new systems will replace clinical commissioning groups.
2. Key features of the ICS:
 - a. Integrated Care Partnerships – non-statutory groups to hold the Integrated Care Boards to account.
 - b. Integrated Care Boards – statutory NHS bodies making plans and delegating non-acute funds to Local Care Partnership (LCP) Directors in each borough. Note – this is a change to the existing arrangements with delegations made to boards.
 - c. A strong emphasis on partnership working across the system with ambition to increase alignment and pooling not only of budgets but also of plans, embedding ‘place’ at the heart of all decisions.
3. The implementation of the ICS will necessitate a number of changes to governance arrangements. In Southwark, local health arrangements from July 2022 will include:
 - a. Interim Place Executive Lead - this is the local ‘LCP Director’ role and will initially have sole Integrated Care Board delegations, being employed by the South East London (SEL) Integrated Care Board for a duration of 12 months. This role will be part time (0.5 FTE) and will be supported by a full time chief operating officer.
 - b. The Partnership Southwark Strategic Board – a sub-committee of the Integrated Care Board, a sub-group of the Health and Wellbeing Board and the strategic leadership group for Partnership Southwark.
 - c. The Partnership Southwark Delivery Executive – a leadership team providing operational advice and coordinating partner contributions to Partnership activities.
4. These arrangements represent a real opportunity for residents through coordinated and aligned planning and commissioning, building on the Council’s well established arrangements through the Better Care Fund and our existing joint-commissioning team.
5. Through Partnership Southwark, and wider longstanding relationships, the Council has an excellent foundation of partnership and coordination on which to build.

The Health and Care Act

6. The Health and Care Act (the Act) received Royal Assent April 2022. It sets out legislation to reform the delivery and organisation of health services in England. The core ambition is to promote more joined-up services and to ensure more of a focus on *improving* health.
7. The Act supports collaboration. It also contains new powers for the Secretary of State over the health and care system, and targeted changes to public health, social care, and quality and safety matters.

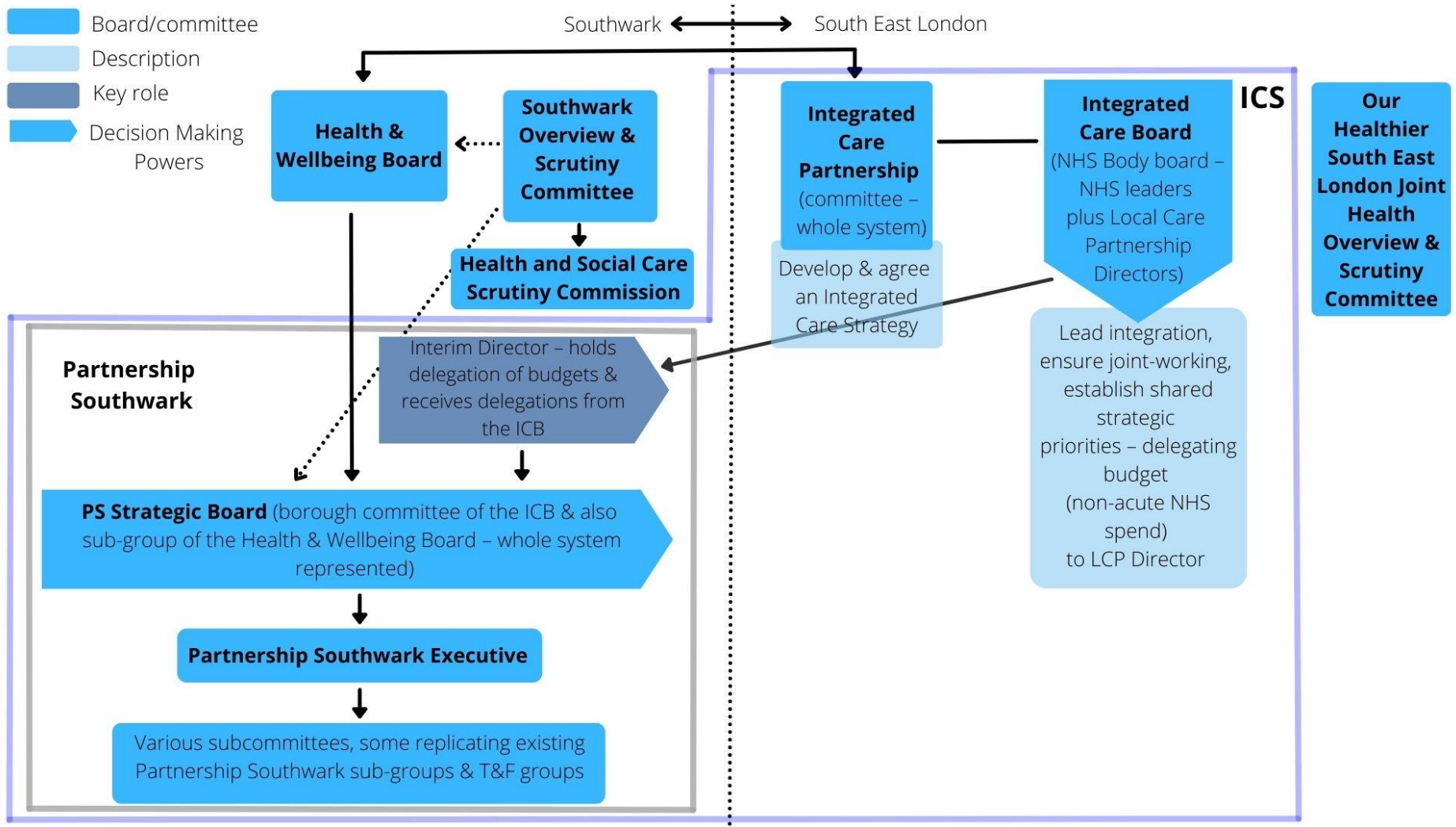
Integrated Care Systems

8. The Act replaces Clinical Commissioning Groups (CCGs) with Integrated Care Systems (ICSs). ICSs will bring together providers and commissioners of NHS services across a geographical area together with local authorities and other local partners to collectively plan health and care services to meet the needs of their local population. Southwark will be part of the newly formed South East London (SEL) ICS.
9. ICSs are comprised of an Integrated Care Board, responsible for NHS strategic planning and allocation decisions, and an Integrated Care Partnership, responsible for bringing together a wider set of system partners to develop a plan to address the broader health, public health and social care needs of the local population.
10. Together, Integrated Care Boards and Integrated Care Partnerships will set the strategic direction for systems in an area, identifying priorities and, in the case of Integrated Care Boards, allocating resources within the NHS to deliver those.
11. Integrated Care Boards and Integrated Care Partnerships will work with Local Care Partnerships (LCPs), which will continue to coordinate partnerships at the borough level. Southwark's LCP is Partnership Southwark.
12. Integrated Care Boards will delegate non-acute funds to LCP Directors, who will be required to execute delegations through a LCP Committee, a formal sub-committee of the Integrated Care Board. Where a suitable statutory partner is available, both the LCP Director role and the committee can be joint between the NHS and that statutory partner.
13. More detail on ICSs can be found in Appendix 1.

The ICS in South East London

14. Image 1 describes the planned ICS structure for SEL and Southwark. Point of information: the LCP Director will, in Southwark, be called the 'Partnership Southwark Place Executive Lead'. For the purposes of formatting, it is simply termed 'Director' in image 1.

Image 1: SEL ICS



Key Roles

15. The Council's representation across the SEL ICS governance is as follows:

- Integrated Care Partnership
 - Leader of the Council (Chair, subject to agreement)
 - Cabinet Member for Health and Wellbeing (Southwark representative)
 - Strategic Director, Children's and Adults' Services in capacity as Director of Adult Social Services (representing all SEL DASSs)
- Integrated Care Board
 - Interim Partnership Southwark Place Executive Lead (Place Executive Lead)
 - 1x local authority Chief Executive
- Health and Wellbeing Board
 - Leader of the Council (Chair)
 - Cabinet Member for Health and Wellbeing
 - Cabinet Member for Children, Young People and Education
 - Strategic Director, Children's and Adults' Services
 - Strategic Director, Environment and Leisure
- Partnership Southwark Strategic Board
 - Cabinet Member for Health and Wellbeing (co-Chair)
 - Strategic Director, Children's and Adults' Services (DASS)
 - Director, Public Health
 - Director, Children's Services (DCS)
- Partnership Southwark Executive
 - Director, Adults' Social Care
 - Director, Commissioning
 - Deputy Director, Public Health

Governance within the Council

16. The Strategic Director, Children's and Adults' Services is the strategic lead for ICS matters on behalf of Chief Officer Team.

17. The Leader and Member for Health and Wellbeing are updated periodically.

Local Health Governance – interim arrangements

18. In July 2022 the SEL ICS will take on its statutory roles, functions and delegations, replacing the SEL CCG.

19. At that time, the SEL Integrated Care Board will make significant delegations to SEL boroughs through each of the six SEL LCP Directors. The exact nature of those delegations is to be confirmed but will include non-acute NHS budgets allocated to the borough.

LCP Director

20. In Southwark there is general agreement among partners that a joint Director appointment and committee will deliver the best outcomes for residents in the long term.
21. A joint statement of intent was issued from the Council's Chief Executive, the Integrated Care Board Chief Executive Designate and the Partnership Southwark Chair setting out a shared preference for a joint approach between the Council and the Integrated Care Board in Southwark.
22. Partners welcomed the intent but are in agreement with the Council that more time is required to develop a solution for a joint appointment that works for Southwark.
23. There is, however, an immediate need for a LCP Director appointment in time for the implementation of the ICS. This role will, at minimum, be in receipt of all non-acute delegations from the Integrated Care Board for the borough and the post must be filled to enable the operation of health services in Southwark.
24. It was, therefore, agreed that an interim Place Executive Lead role would be created by the SEL Integrated Care Board.
25. The role has been set for an initial 12 month period and will be an appointment of the SEL Integrated Care Board. The Council's Section 151 Officer – Strategic Director, Finance and Governance – represented the Council on the appointment panel.
26. The post-holder will be accountable to the SEL Integrated Care Board Chief Executive and responsible for working with and through the Partnership Southwark Strategic Board.
27. Appointments have been confirmed for both the Place Executive Lead on a 0.5 FTE basis and a Chief Operating Officer full time to support. This arrangement enabled the interim appointment to be from within the Southwark system which was the preferred option of partners.
28. The interim Place Executive Lead will be Partnership Southwark's representative on the SEL Integrated Care Board.

LCP Committee

29. For the financial year 2022/23 Partnership Southwark will constitute itself as a sub-committee of the SEL Integrated Care Board – the Partnership Southwark Strategic Board – and will be delegated the authority to shape and take decisions about the use of Integrated Care Board resources only.
30. Membership will include Southwark Council, GSTT, KCH, SLAM, borough primary care networks and Community Southwark at minimum. The committee will be co-Chaired by the Cabinet Member for Health and Wellbeing and an independently appointed individual.

31. The Council co-Chair was on the appointments panel for the Independent co-Chair role. This appointment has been made.
32. The following appointment have been made to the leadership team of Partnership Southwark:
- a. Interim Partnership Executive Lead, James Lowell (also Chief Operating Officer, SLAM)
 - b. Interim Chief Operating Officer, Martin Wilkinson (currently Director of Integrated Care and Commissioning in Lewisham, SEL CCG)
 - c. Independent co-Chair, Nancy Kuchemann (GP Clinical Lead, SEL CCG)
 - d. Political co-Chair, Cabinet Member for Health and Wellbeing

Issues

33. Meetings between political leaders and officials from across SEL to discuss the implications of the SEL ICS continue. A number of issues are under consideration by system partners. These include:
- a. How will we ensure residents are at the heart of all plans and decisions?
 - b. How will we ensure governance is genuinely underpinned by partnership?
 - c. How will we ensure that sub-regional plans are informed and shaped by *local* joint plans, including the joint Health and Wellbeing Strategy, and not the reverse?
 - d. How will we ensure the SEL Integrated Care Partnership is an authentic part of a meaningful system of governance with tangible impact, rather than a performative meeting of ‘the usual suspects’?
34. There are also some more localised issues to hold in mind:
- a. The interim Place Executive Lead will have control over local spend including decisions around the resourcing and allocation of NHS budgets. The budgets delegated to this post will be significant and, as is usual, bear close relationship to the Council’s own budget planning.
 - b. The SEL Integrated Care Board will be developing approaches to review NHS demand across the SEL patch, including allocation to the Better Care Fund and wider resourcing.
 - c. Partnership governance at the SEL level, in the form of the Integrated Care Partnership, will from inception be responsible for holding the Integrated Care Board to account. The lag between

developing a cohesive strategy and approach for the Integrated Care Partnership, and decision making within the Integrated Care Board represents a possible period of weaker oversight within the system.

35. The Council has taken the following steps to address these issues:
- a. Designated the Section 151 Officer as Council lead for the recruitment and appointment of the interim Place Executive Lead.
 - b. Designated the Cabinet Member for Health and Wellbeing to the SEL Integrated Care Partnership.
 - c. Maintained close communication between the Council's new Chief Executive and the SEL Integrated Care Board Chief Executive Designate.
 - d. Supporting the development of a Lived Experience Assembly which will support the Partnership Southwark Executive Board, ensuring residents are at the heart of local arrangements.
36. There will also be wider implications for both the constitution of the Council and the terms of reference for the Health and Wellbeing Board. The Monitoring Officer is undertaking to review the impact as detail is released.

Conclusion

37. Despite the challenges ahead, the Council is well placed to support NHS colleagues in the development of new systems and structures.
38. We have a long-established record of working in partnership and are building on existing joint-commissioning and budget pooling arrangements.
39. We have good relationships with colleagues across the system in teams from Children's and Adults, Public Health and Strategy and Economy.
40. Our Communities team is working closely with Partnership Southwark to help establish a Lived Experience Assembly to get residents voices in to the heart of the governance as well as the conversation.
41. Finally, we continue to voice the views of residents through the Health and Wellbeing Board, and will bring that experience to bear as a key member of the new SEL Integrated Care Partnership.
42. While challenges remain, we look forward to working together with NHS, community and voluntary sector, and provider partners to make the most of this new opportunity. Together we will ensure health and social care provision reaches individual residents and families when, where and how they need it, now and in to the future.

Appendix 1

Some more detail on Integrated Care Systems

Integrated Care Boards

Integrated Care Boards will take on the NHS planning role currently held by NHS Clinical Commissioning Groups and some functions from NHS England. Integrated Care Board membership will include, at minimum, a chair, chief executive and representatives from local NHS providers, primary care services and local authorities. In consultation with local system partners, Integrated Care Boards will produce a five-year forward plan for how NHS services will be delivered to meet local needs (with the plan refreshed annually). Integrated Care Boards will be accountable to NHS England for local services' operational and financial performance and will be required to work with Health and Wellbeing Boards (HWB) on their forward plans.

Integrated Care Partnerships

Integrated Care Partnerships will sit alongside Integrated Care Boards as a joint committee focusing on broader health and care services. An Integrated Care Partnership will include representatives from all the local authorities in its geography and representation from the Integrated Care Board. It can also include representatives from other partners such as public health teams, housing services and the voluntary and community sector. Integrated Care Partnerships will be responsible for developing an integrated care strategy, which sets out how the needs of the local population will be met (informed by local authorities' joint strategic needs assessments), but will not hold any delegations.

Health and Wellbeing Boards

HWBs will continue with current duties, and have a key role in the planning of local health and care services with the new Integrated Care Board, Integrated Care Partnership, and LCP.

HWBs must be consulted on whether the Integrated Care Board forward plans take account of the local Health and Wellbeing strategy.

Integrated Care Boards must consult local HWBs when preparing their annual reports, and give a copy of their Capital Resource Use Plan to the HWB. HWBs must also provide a copy of their Joint Strategic Needs Assessment to the Integrated Care Partnership.

The Health and Care Act also states that NHS England must consult each relevant HWB when assessing the performance of each Integrated Care Board.

London Borough of Southwark

Integrated Care System / Integrated Care Partnership
Strategic Implications - Private and Confidential

16 July 2022

Strategic Options Analysis

- **Requirement 1** - A risk and opportunity analysis
- **Requirement 2** -An options appraisal / 'art of the possible'

Requirement 1

Implications for how the Council commissions, manages and controls budgets and what the wider impact on council services and residents might be.

National Policy on Health and Care.....direction of travel

- **Health and Social Care Act 2022**
- Integrated - Systems (ICS), Board (ICB) and Partnership (ICP) with a duty to co-operate and improve information sharing and make joint plans
- Supports collaborative commissioning and partnership working to integrate services for patients
- Joint committees, appointments and ability to make joint funding arrangements and pool budgets
- Requirement for a clearly identified person to be responsible for delegated budget allocations
- Better Care Fund (BCF) and Improved Better Care Fund (IBCF) to aid integration between health and social care
- Duty on the Care Quality Commission (CQC) to conduct reviews of the ICS
- Gives the Secretary of State powers to intervene in local service reconfigurations
- **White Paper February 2022** - 'Joining up social care for people, places and populations'
- **White Paper September 2021** (Updated February 2022) - 'People at the heart of care'
- Underpinning a lot of the above are the core themes from the **Marmot Review 2010**

But beyond this there is a growing recognition that ...

' proper prevention is impossible without active, participating individuals and communities. This is because prevention is not something that can be done to people in the traditional service delivery sense, rather it must be achieved with them. This means health institutions need to be capable of working alongside communities, responding to their insights, and investing in them so they can actively participate in shaping better places and services.'

Community Powered NHS, New Local, July 2022

Key thrust of recent policy development

- *“No organisation can deliver this change alone. Change requires collaboration across commissioners and providers of health, adult social care, housing and homelessness support services, as well as planning functions and voluntary organisations. Underpinning them all is the need for strategic leadership that sees the provision of health, care and housing services not as separate systems, but as a coherent system that seeks to deliver the best outcomes for people using all the tools available in a joined up way to deliver the best possible outcomes for their communities.”* **HM Government People at Heart of Care White Paper September 2021**
- We and others argue that added to the list of services in the above quote should be education, welfare support, regeneration etc
- Dialogue and engagement with communities is crucial to co-design, develop and deliver services that meet their needs now and in the future
- How best to ensure this is done in a way that achieves a ‘win win’ solution and builds on the democratic mandate of local government as well as the skills and expertise it has?

Crucially there is some flexibility

- *“We are therefore setting the expectation that, by spring 2023, all places within an ICS should adopt either a governance model, as outlined, **or an equivalent one that achieves the same aims.**”*
- *“We will empower effective leaders at place level to deliver the shared outcomes that matter for their populations by setting an expectation that by spring 2023, all places within an ICS should adopt a model of accountability, with **a clearly identified person responsible for delivering outcomes, working to ensure agreement between partners and providing clarity over decision making.**”*
- *“The Act does not mandate a one-size-fits-all approach or contain granular detail about how improved collaboration should be achieved, particularly at the place level, as this would risk undermining the local flexibility that is critical for integrated working” **Kings Fund 2022***

- Thriving Places - NHS / LGA, September 2021
- The State of Integrated Care Systems - NHS Confederation, February 2022
- Developing Place Based Partnerships - Kings Fund, April 2021
- Delivering Together for Residents - SOLACE, September 2021
- The Fuller Stocktake Report (Next steps for integrating primary care), May 2022
- Health and Wellbeing Boards and Integrated Care Systems - Kings Fund, November 2019
- A Community Powered NHS, making prevention a reality - New Local, July 2022
- Shifting the Centre of Gravity (Making place based, person centred health and social care a reality), LGA, ADASS, ADPH, NHS Confederation, NHS Providers and NHS Clinical Commissioners 2018
- We have considered over 20 relevant references in addition to those above
- Note also the National Audit Office is conducting a study due to be published this autumn 'Introducing Integrated Care Systems'

Key themes from the literature review

- Importance of place to residents and patients as well as commissioners and providers of services - places are 'the engine of delivery'
- Need for meaningful dialogue (co-design, co-develop and co-produce) with communities including the local Healthwatch and voluntary sector. Ensure the harder to reach groups are heard.
- Increasing public expectations and a move towards personalisation
- Ensure health and well being is embedded in all policies (noting the contribution it can make to social and economic development etc but also the impact of climate change etc on it)
- Workforce alignment and co-location important
- Funding and asset alignment / pooling increasing
- Leaders need to lead in an '*inclusive, compassionate and respectful way*' (Fuller Report)

Practical concerns raised

- Need for continued work on the 'wiring diagram' to make it fit for purpose and resolve anomalies
- Differences of opinion view between sub region level and council as to what is the 'local share' of the budget and role of democratically elected councillors in determining that
- Lack of transparency and timeliness in NHS budget setting / allocation making (also non- alignment with council tax setting)
- Collaboration is easier when funding is increasing rather than when it is being cut
- Is there such as thing as a 'Joint' appointment? ie whoever pays equals who they are accountable to
- Level of support / structures are needed below the Place Lead to make things happen
- Where do HWB, Health Scrutiny and Health Commissions fit? How do they align with the ICB and ICP and not get sidelined?
- Do not reinvent things unnecessarily
- Requires effective programme and transition management (who is doing the real joining up?)

- The policy / legislation is moving in a way that the Council supports in terms of seeking to address long standing health, economic, social and racial inequalities and do so more in a preventative way that best supports wellbeing, personalisation and independence. Build on Lived Experience Assembly work
- Alignment with the Council Leaders vision for a wider Southwark place based approach
- The ICP / Place Lead role in Southwark matches the Council boundary (this is not so everywhere outside London)
- The Councils work on community engagement / co-production as well as the Joint Strategic Needs Analysis (JSNA) and the Joint Health and Wellbeing Strategy (JHWBS) provide a solid foundation
- Partnership Southwark in situ and functioning and has agreed council senior representation. Can it be improved with greater clarity on who is making what decision and with what authority via new MOU and plan for 23/24?
- There is £145 million 'allocation' in 2022/23 from the ICS to Partnership Southwark (but note £1.84m savings)
- Also health inequality funding of £781,000 recently agreed
- BCF and IBCF plus Public Health Grant of £29m (what is the total council controlled element?)
- There is flexibility in how the requirements in the Act are implemented. Exploit those as a **'stimulus for change'**

But there are barriers and unknowns

- Start from 'a slightly reserved place' regarding partnership working and pooling of budgets between the Council and local NHS providers
- Wariness between key local leaders of large scale 'anchor' institutions
- The health and care needs of the residents are getting more complex and constantly changing
- How much will actually be delegated from ICS to ICP level and when?
- Lot of changes at key leadership positions in the 'system' - how will new relationships develop?
- How will national assurance frameworks change and develop?
- Shortages in care staff workforce locally?
- Whilst no 'burning platform' in Council finance terms there are pressures and unknowns
- Timescales are pressured too

And risks....

- Risk of disruption to outcomes, funding and public perception / satisfaction
- Not capitalising on gains around joining up / digital investment from the Covid-19 pandemic
- Loss of clear accountability (especially the democratic mandate of councillors)
- Loss of control over budgets and issues re timeliness and transparency of decision making
- Deeper entrenchment between organisations and 'levels' in the system
- Impact on existing governance structures and arrangements (potentially conflicting priorities and activities between organisations)
- Impact on the wider council - service departments and support services
- Not having the key enablers in place around information. data sharing, IT, programme management

Other factors to consider

- Trying to do too much too quickly while the new system is still evolving but equally not being considered to be 'behind the curve' in national, London wide and SELICS terms
- Not actively managing the 'agenda' especially where culture, values and ways of working need to change
- The fear of change and instability causing inertia and 'talk not action' prevails
- Recent quote from London Councils lead member on Health and Care “***Our main issue with the set up is you can't have a load of people sitting in one room all of the money, and local government people sat next door talking about how wonderful it is to work together.***”

A suggested 7 Point Framework that might assist debate

- **Clear vision.** What are the citizen focused outcomes needed? What better looks and feels like to citizens / patients? How do we set our objectives?
- **Priorities and requirements.** What are the JSNA/ JHWBS / ICP/ ICS priorities - are they aligned? Ensure that all groups/voices are considered including those who are not accessing services now (do we know?)
- **Trust.** Do all the key players at ICP level agree on what recent improvements have been and what needs to change now? Are the critical working relationships open and transparent. Money and movement of money is a key indicator of trust.
- **Human capacity and capability.** Do we have enough of the people with the right skills to make the changes at all levels? How do we deploy resources to make the agreed decisions happen?
- **Other resources.** Do we have the revenue and capital resources to make the changes needed in time required? Are their other assets that can be better co-located? Do we have the right data, information and analysis?
- **Governance and accountability.** Is decision making at the right level (subsidiarity) and aligned across the place / organisations? How do we make decisions and who makes them? Are the basics (constitution, TOR, schemes of delegation, procedures) appropriate for new set up? How do we assure ourselves that we are meeting our vision / objectives?
- **Clarity and communication.** Are we collectively clear what we are changing? Do we have a shared local language? Have we communicated it widely to the right audiences?

Requirement 2

Options appraisal exploring the 'art of the possible' in terms of a joint Director of Place appointment. Also implications / impact on other Council functions.

- The requirements in the Act for a '**single person accountable for delivery**' are not specifically set out so as with other aspects of the new arrangements there is some for flexibility
- Across the country different approaches are being adopted
- Language varies too - Place Executive Director, Place Director, Director of Place Based Delivery, Place Lead or Place Based Lead are all used
- But a common point is that the vast majority come from within the local system ie very few have come from outside the ICS area (let alone the wider region) immediately before their appointment
- In a number of places (Nottingham, Sheffield etc) there are / have been interim arrangements for the Place Executive Lead role while others are still in the process of recruiting

Outline options for the Place Lead role

- A full time role employed by the NHS - the person already being employed elsewhere within the local health sector
- A full time role employed by the Council - the person already being employed within Southwark Council
- A part time role by someone who also holds another role within the local health sector (ie a **'joint'** role)
- A part time role by someone already employed by Southwark Council (ie an **'additional'** role as the part time element will be an NHS post)
- Open competition (or secondment) seeking to bring in someone outside the local system but with a wide range of relevant similar experience
- Also need to consider if a part time role what additional support to that post is required and what 'backfilling' to their current post is required

- Many have been appointed to the new ICP Place Lead role who were a former CCG Chief Executive or Strategic Director
- Some hold a single place based ICP position while others have a **'joint'** role. That is they have another senior part time post within the local NHS as well
- In some ICP's the Council Chief Executive, Deputy Chief Executive or the Strategic Director responsible for Adult Social Care has taken on the Place Lead. This is as an **'additional'** role
- We see a distinction between 'joint' and 'additional' positions based on accountabilities
- The person appointed to the Place Based role is accountable to the ICB and is paid by the NHS so if it were someone who also continues in a council position at the same time it would be an 'additional' position
- On the next slide we have included a number of examples where senior council officers have taken on the Place Based role

Examples where Senior Council Officers have taken on the role



- Greenwich's Place Executive Director is also the Council Deputy Chief Executive and Director of Adult Social Care (She is also the new President of ADASS)
- Bexley's Place Executive Director is also the Council Director of Social Care and Health (His post includes commissioning and public health)
- In Greater Manchester 7 of the 10 Council Chief Executives now also hold a Place Based Lead / Director role with the ICP. The exceptions are Bolton, Bury and Oldham
- In Cheshire and Merseyside 3 of the 9 Place Directors also have council roles. However rather than being the Chief Executive it is the statutory Director / Deputy Chief Executive responsible for social care that has been appointed. The 3 are Cheshire West, Sefton and St Helens
- In West Yorkshire 2 out of the 5 Place Based Leads are from the Council. These are in Calderdale where the Chief Executive holds the role and in Wakefield where it is the Director of Adult Social Care
- Nottingham City Place Based Partnership announced recently that the Council Chief Executive would also take on the Place Lead role taking over from the Interim Lead who had been from the CCG

Southwark specific options

- Probably the additional Place Lead role could only be taken on by the Chief Executive or the Strategic Director for Adults and Children (or possibly the Director of Adults or Director of Adults and Children Commissioning)?
- Need to consider which of the above options is likely to be best received within the ICP / ICS and be accepted as being better than the current agreed interim arrangement?
- The scope of the Chief Executive and Strategic Director roles is very wide in any case so is it feasible to do an 'additional' role and would either of them wish to take on the additional responsibility?
- What is the level of 'backfilling' needed for the part of the current role that could not be carried out if the additional role is taken on? Is an Assistant / Deputy Chief Executive or another Director in social care required?
- What support would be needed with the NHS for the person taking on the additional Place Lead role, would they need a Chief Operating Officer similar to the interim arrangement?
- Within Southwark how do you join up across the other Directorates with a large impact on the determinants of health especially housing, regeneration and communities?

Beyond the Place Based Lead position / role

- Given the requirement in the Act for a single person accountable for delivery and managing the delegated NHS / ICB budget to Southwark It is necessary to think about the wider partnership governance deeply
- This is where more 'joint' working can take place and evolve going forward
- Thriving places outlines 3 possible leadership roles in place based partnerships ('partnership convenor', 'executive lead' and 'programme lead')
- If the council identified specific areas within its services and budgets that could most benefit residents / patients by being aligned / joint with the ICB delegated funding and NHS staff resource could there be 'programmes' under Partnership Southwark auspices?
- Is there a group of specific borough wide services or around particular neighbourhoods in the borough that could be joint / aligned?
- Could the HWB and Lived Experience Assembly be more closely allied to Partnership Southwark so there is one point of debate and decision making? (Committee in Common type arrangement to start with rather than a Joint Committee?)
- What is the link with the Health and Social Care Scrutiny Commission going forward?

Next steps ...questions to explore

- What is the impact in councils where the Chief Executive or Strategic Director responsible for care services has taken on the Place Lead role (ie backfilling arrangements, impact on relations internally and externally, or are unexpected benefits emerging)?
- How are those councils 'joining up' health and care with housing, regeneration, economic development, benefits, community engagement etc)?
- How are they using their HWB and scrutiny functions etc in the new landscape, have they introduced new arrangements other than the ICP? What governance changes have they had to make?
- How are they joining up their front line health and care workforce? What have been the training and development requirements?
- What further alignment of funding across the system have they been able to achieve?
- What has been the impact on their central support services of the changes?

About Mutual Ventures

Our approach is based on our knowledge and commitment to public services. We work across all areas including children's services, health and social care, culture services and more.

Wide range of expertise and experience

- ❑ Strategy and options development
- ❑ Design of new delivery models
- ❑ Business and transition planning/implementation
- ❑ Organisational development and culture change

Wide range of clients

- ❑ 150+ clients over the past 10 years
- ❑ Supporting LAs, NHS services and the third sector
- ❑ DCMS Mutual Support Programme
- ❑ DfE Children's Services Innovation and Regional Adoption Agency Programme leads



Item No.	Classification: Open	Date: 15 November 2021	Meeting Name: Strategic Director of Housing and Modernisation
Report title:		Gateway 2 - Contract Award Approval Procurement of a Delivery Partner (Developer Contractor) for the Tustin Estate Low Rise Redevelopment Programme	
Ward(s) or groups affected:		Old Kent Road	
From:		Director of New Homes	

RECOMMENDATION(S)

That the Strategic Director of Housing and Modernisation, in consultation with the Cabinet Member for Council Homes and Homelessness:

1. Approves the appointment of BY Development Ltd (trading as Linkcity) to provide pre-construction services through a Pre-Construction Services Agreement (PCSA) in the sum of £300,000 commencing on 22 November 2021 for an estimated period of 18 weeks.
2. Notes that, subject to successful conclusion of the PCSA, the council would have the option to award the Development Agreement to BY Development Ltd (trading as Linkcity) to deliver the Tustin Estate Low Rise Redevelopment Programme, subject to future Cabinet approval of a further Gateway 2 report.

BACKGROUND INFORMATION

3. The Tustin Estate Low Rise Redevelopment Programme is the outcome of a resident-led investment decision into low-rise homes on the Tustin Estate following a feasibility process and a resident ballot.
4. The programme comprises:
 - Demolition of 249 homes (200 council rented and 49 leasehold)
 - Construction of an estimated 689 homes including 200 replacement council homes, 220 additional homes made up of council rented and keyworker homes, 49 shared equity homes and 220 homes for private sale
 - Retention of the houses in Manor Grove
 - Refurbishment of 18 refurbished homes in Manor Grove
 - Development of a new park in the centre of the estate
 - Demolition and redevelopment of Pilgrims' Way School
 - New retail and business spaces

5. Further background information on the Tustin Estate Low Rise Redevelopment Programme is detailed in the Gateway 1 report dated 13 July 2021.
6. Cabinet agreed the procurement strategy for the Tustin Estate Low Rise Programme in July 2021, approving the use of a two-stage procurement process using the Pagabo framework. The two-stage process comprises of a PCSA to cover the pre-construction services, followed by a Development Agreement to cover the construction period. The PCSA period covers RIBA Stages 2 & 3 and concludes on planning submission.

Procurement project plan (Non Key decisions)

Activity	Completed by/Complete by:
Briefed relevant cabinet member (over £100k)	20/05/2021
Approval of Gateway 1: Procurement Strategy Report	13/07/2021
Completion of tender documentation	20/08/2021
Date contract advertised	23/08/2021
Closing date for expressions of interest	07/07/2021
Completion of short-listing of applicants	23/07/2021
Invitation to tender	06/08/2021
Closing date for return of tenders	17/09/2021
Completion of evaluation of tenders	11/10/2021
DCRB Review Gateway 2: Contract award report	18/10/2021
CCRB Review Gateway 2: Contract award report	28/10/2021
Approval of Gateway 2: Contract Award Report	12/11/2021
Debrief Notice	15/11/2021
Contract award	16/11/2021
Add to Contract Register	16/11/2021
Publication of award notice on Contracts Finder	16/11/2021
Contract start	22/11/2021
Contract completion date	31/03/2022

KEY ISSUES FOR CONSIDERATION

Description of procurement outcomes

7. The intended outcome of this procurement is for the council to obtain a robust contractor's proposal and pricing document in order to move to the second stage of the process.
8. In line with the Gateway 1 report, this outcome will be based on the council's detailed requirements that were set out in the tender documents, which included the Landlord Offer document approved by Cabinet on 19 January 2021 that sets out the commitments made to the community including around resident support, rehousing assistance, design quality and community engagement.
9. The scope of the PCSA is summarised below:
 - Contribute to design development and ensure its deliverability
 - Advise on buildability, sequencing, and construction risk
 - Advise on the packaging of the works (and the risks of interfaces between packages)
 - Advise on the selection of specialist contractors
 - Develop the cost plan and construction programme in consultation with the council
 - Develop the method of construction in consultation with the council
 - Obtain prices for work packages from sub-contractors or suppliers on an open book basis
 - Prepare a site layout plan for the construction stage showing temporary facilities
 - Draft the preliminaries for specialist and trade contractor bid documents
 - Assist with any planning requirements on matters concerning the build phase
10. During the PCSA period, the council will look to negotiate a Development Agreement with BY Development (trading as Linkcity) for the construction phase. It is not mandatory for the council to enter into such an agreement. The council reserves the right not to enter into a Development Agreement should the price for the main works contract not be acceptable and instead to commence a new tender process.

Key/Non Key decisions

11. This report deals with a non key decision.

Policy implications

12. The procurement of pre-construction services for the Tustin Estate Low Rise Redevelopment Programme is a critical step in delivering the redevelopment voted for by a majority of eligible residents in the resident ballot in early 2021.
13. The programme is aligned with 2020-22 Borough Plan commitments to deliver new council homes and ensure high standards.

14. The investment in the low-rise homes and the wider estate and the approach taken will help to deliver the following commitments within the council's long term Housing Strategy:

- Continue to deliver 11,000 new council homes at council rents
- Maximising the supply of other forms of genuinely affordable intermediate homes
- Reducing the environmental impact of delivering new homes to help deliver a carbon neutral and biodiverse Southwark
- Ensuring all new homes are of a high quality, including a mix of different types and sizes which respond to people's changing needs over time

15. The Fairer Future Procurement Framework commitments were applied to this procurement.

Tender process

16. London Lot 3c of the Pagabo developer framework was used for this procurement as the lot relates to primarily residential developments with a development value of over £40m.

17. In line with the Pagabo framework procurement process, an expression of interest exercise was undertaken to confirm the capacity and interest of the developers on the lot. Based on this exercise, four developers were proposed for shortlisting. This shortlist was reviewed and agreed by a panel consisting of the Tustin project manager, a representative from the council's external Project management team, a resident representative, the Head of Regeneration South and Director of New Homes. Four developers were invited to tender on 6 August 2021.

18. The tender process was managed by Pagabo and the council's external Project management team, in consultation with the council.

19. The quality questions were designed to test the approach to both the PSCA stage, as well as longer term commitments to the delivery stage of the project, and included key issues such as resident engagement processes, social value commitments and sustainability requirements.

20. For the cost submission, tenders were required to submit fees for the PSCA period, as well as developer's profit and financial rates for the delivery period.

21. During the tender period one developer withdrew their interest in submitting a bid due to resource issues across existing schemes which was unforeseen at the time of the Expression of Interest.

22. The remaining three developers submitted a tender by the deadline on 17 September 2021. Based on the scores outlined below, one developer was invited to a clarification interview. The interview panel included resident representatives.

Tender evaluation

23. As set out in the Gateway 1 report, the assessment of tenders was based on 50% / 50% quality / cost ratio. 10% of the quality score is attributed to social value.
24. The below evaluation panel was established to ensure the range of skills and experience required to effectively evaluate all elements of the tenders:

Organisation	Members	Evaluation area
Southwark Council	Head of Regeneration South, Senior Regeneration Manager and Tustin Project manager	All
Tustin Resident Project Group	Two residents	Quality submissions: Resident involvement, social value Interview
Open Communities	Independent Tenant and Homeowner Advisor	Quality submissions: Resident involvement, social value Interview
Pulse Consult	Founding Director and Director	All
Arup	Environmental Consultants	Quality submissions: Emissions
Greengage	Associate	Quality submissions: Sustainability

25. Training for residents was provided ahead of the evaluation process by Open Communities, the Independent Tenant and Homeowners Advisor.
26. Each member of the panel independently evaluated and scored the relevant questions. A series of meetings then took place, moderated by Pagabo, to agree a consensus score for each question.
27. The tender submissions were evaluated in line with the requirements of the Pagabo framework.
28. Quality submissions covered a range of areas and scores were weighted as below:
- Resident engagement (18%)
 - Social value (18%)
 - Contractor procurement (5%)
 - Programme (5%)
 - Adding value (18%)

- Experience (10%)
- Quality (5%)
- Rehousing (5%)
- Sustainability (16%)

29. Quality submissions were scored according to the following criteria:

0	No response is provided or the response is not relevant to the question.
1	The response significantly fails to meet the standards required, contains significant shortcomings and/or is inconsistent with other proposals.
2	The response falls short of achieving the expected standard in a number of identifiable respects.
3	The response meets the requirement in certain material respects and provides certain information which is relevant, but which is lacking or inconsistent in material respects.
4	The response meets the requirement in most material respects, but is lacking or inconsistent in some minor respects.
5	The response meets the requirement in all material respects and is extremely likely to deliver the required output/outcome.

30. For the cost evaluation, 25% of the mark was allocated to the most economical return for the PSCA period and 25% of the return was allocated to the developer's profit and financial rates for the delivery period

31. The outcome of the panel's evaluation of the submissions is provided below:

	Weighting	Bidder 1	Bidder 2	Linkcity
Quality including social value	50%	32.60%	29.10%	40.30%
Cost	50%	41.54%	24.68%	41.95%
TOTAL	100%	74.14%	53.78%	82.25%

32. Linkcity had the highest quality score and the highest cost score.

33. A full breakdown of both quality and cost scores for all tenderers is provided in the closed report and associated appendices.

34. The council's appointed Quantity Surveyor reviewed the commercial submissions to ensure costs submitted reflected current market rates and provided value for money.

35. The highest scoring tenderer was invited for interview for final clarification points. As set out in the framework, the interview is not a scored element and does not affect the scores. The interview included resident representatives and consisted of a number of members of the evaluation panel: the two residents, three council officers, two directors from the project management team and the Independent Tenant & Homeowner Advisor.
36. The panel was satisfied with the recommendation of Linkcity to be awarded the contract based on the final score.

Plans for the transition from the old to the new contract

37. Not applicable

Plans for monitoring and management of the contract

38. The council's contract register publishes the details of all contracts over £5,000 in value to meet the obligations of the Local Government Transparency Code. The Report Author will ensure that all appropriate details of this procurement are added to the contract register via the eProcurement System.
39. The Tustin project manager will monitor and manage the contract through regular contract meetings, with the support of the council's externally appointed project management team.
40. Progress will be reported to the Tustin Resident Project Group and the Tustin Community Association.

Identified risks for the new contract

No.	Identified Risk	Likelihood	Risk Control
1	Procurement challenge	Low	<p>The procurement has been conducted in accordance with procurement the Public Contracts Regulations 2015. The council will comply with the framework terms to reduce the risk of challenge.</p> <p>Quality submissions were assessed individually and scores then agreed by consensus by all members of the evaluation panel.</p> <p>A thorough cost analysis has been carried out by the Quantity Surveyor and clarifications were issued to ensure costs could be effectively compared and scored. Cost submissions were also separately reviewed by the</p>

			external project management team's Quantity Surveyor.
2	The procurement process leads to excessive development and construction costs during the delivery phase	Low	<p>There are a number of safeguards within the PCSA to control costs for the delivery phase and ensure best value. These include:</p> <ul style="list-style-type: none"> • Open book clause in the PCSA requires the developer to obtain three quotes for each supply chain element. • The PSCA requires an independent surveyor to verify future sales values. These sales values will drive the Gross Development Value and the subsequent land value. • Overhead and profit margins are provided as part of the PCSA tender and cannot be exceeded at a later stage. <p>Additionally, the council's appointed Quantity Surveyor will witness the supply chain quotes and verify the value for money. The Quantity Surveyor will also verify construction costs.</p>
3	Conclusion of the PSCA process is delayed, causing delays to progression to Development Agreement stage and subsequent delays to start on site.	Low	The pre-construction process will be closely monitored and carefully managed by the internal council team and its external project managers. Pre-construction services can be delivered remotely and therefore are unlikely to be substantially affected by COVID-19.
4	Service provider becomes insolvent or no longer has the capacity to deliver scheme	Low	Robust financial assessments have been undertaken by Pagabo for framework appointment including independent financial and credit checks. Pagabo also tracks each developer's finances on a daily basis through a credit report service.

5	Following the completion of the PCSA, the council is not able to negotiate a satisfactory Development Agreement with the delivery partner, requiring re-procurement of a delivery partner	Medium	<p>A template Development Agreement is included within the framework so the terms of the agreement are understood, reducing legal timescales and costs.</p> <p>Quality submissions provided plans for the Development Agreement stage and the council therefore has a level of confidence that it is possible for a satisfactory Development Agreement to be negotiated. The council has assembled an experienced team to negotiate a Development Agreement.</p> <p>Additionally, as the council has directly appointed a design team to develop designs up to planning submission, the council will retain Intellectual Property for design. This enables the council to progress design outside of a Development Agreement if required.</p>
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41. Risks and mitigations for a future Development Agreement will be considered in detail in a future Cabinet report. These risks include potential delays to construction due to COVID-19 and potential increases in cost pressures due to Brexit.

Community, equalities (including socio-economic) and health impacts

Community impact statement

42. The procurement of pre-construction services, with a view to securing a delivery partner in the next stage, is a crucial step towards meeting the council's commitment to result of the resident ballot in which residents voted in favour of redevelopment. This will help to deliver high quality replacement council homes, additional homes and community facilities.

43. The tender documentation included the Tustin Resident Manifesto, which sets out what residents see as necessary to make sure residents benefit from the redevelopment. The Landlord Offer, which sets out commitments from the council to residents, was also included. Evaluation of tenders included an assessment of tenderers' understanding of and plans to deliver on these commitments across the quality submissions.

44. Residents have been involved throughout the procurement process as set out in the above paragraphs with residents participating in shaping evaluation criteria, scoring submissions and interviewing bidders. The tenderer's ability to ensure and coordinate meaningful resident engagement was a key element of the evaluation criteria in order to ensure that residents continue to be able to actively participate in the pre-construction process.

45. The impact of the construction process on the community and mitigations in place will be considered as part of the report presented to Cabinet to approve the Development Agreement.

Equalities (including socio-economic) impact statement

46. The council launched Southwark Stands Together (SST), a borough wide initiative in response to the injustice and racism experienced by Black, Asian and minority ethnic communities and to the inequalities exposed by COVID-19 pandemic. The redevelopment programme will align to the principles set out under SST and incorporate representation, inclusion and diversity throughout.
47. Section 149 of the Equality Act, lays out the Public Sector Equality Duty (PSED) which requires public bodies to consider all individuals when carrying out their day-to-day work – in shaping policy, in delivering services and in relation to their own employees. It requires public bodies to have due regard to the need to eliminate discrimination, advance equality of opportunity, and foster good relations between different people when carrying out their activities. The council's Approach to Equality ("the approach") commits the council to ensuring that equality is an integral part of our day-to-day business.
48. The redevelopment programme is informed by the Equalities and Health Impact Assessment (December 2020) at Appendix 1 and the pre-construction services element will be delivered in accordance with the action plan in this document.

Health impact statement

49. The redevelopment programme is informed by the Equalities and Health Impact Assessment (December 2020) at Appendix 1 and the pre-construction services element will be delivered in accordance with the action plan in this document.
50. The health impacts of the construction process on the community and mitigations put in place will be considered as part of the report presented to Cabinet to approve the Development Agreement.
51. The Tustin redevelopment has been selected by Arup, as part of a project funded by the Urban Health Initiative, to become an exemplar construction development in tackling of air pollution and improving air quality. This includes setting a target for a 30% reduction in emissions from Non-Road Mobile Machinery. Arup designed a quality question focused on emissions during the construction phase that was included in the tender process. The successful tenderer has made a commitment to meet this target and set out how this will be achieved.

Climate change implications

52. Given the impact of the construction industry on the climate emergency, the council has set high sustainability and carbon reduction ambitions for the Tustin development, in line with the council's Climate Change Strategy. The delivery partner will play a key role in delivering these ambitions as part of the design process.

53. The successful tenderer has set out the following commitments related to carbon emissions during the construction phase:

- Meeting London Energy Transformation Initiative (LETI) and UK Green Building Council (UK GBC) best practice
- Meeting the council's target of 1.9t per resident of operational carbon emissions
- A minimum of 25% reduction on baseline embodied carbon, aiming for 40%
- As set out above, 30% reduction in emissions from Non-Road Mobile Machinery

54. These commitments will be formally agreed and become contractually binding as part of a Development Agreement and specifications stipulated within the employers requirements will ensure that development activity is controlled in a way that positively contributes to achieving a reduction in emissions.

Social Value considerations

55. The Public Services (Social Value) Act 2012 requires that the council consider, before commencing a procurement process, how wider social, economic and environmental benefits that may improve the well-being of the local area can be secured. The social value considerations included in the tender (as outlined in the Gateway 1 report) are set out in the following paragraphs in relation to the tender responses, evaluation and commitments to be delivered under the proposed contract.

56. At stage two the delivery partner will provide a social value offer that would be delivered during the construction phase. These commitments will be discussed with residents and will be agreed as part of a Development Agreement.

Economic considerations

57. The successful tenderer has set out a number of commitments to support the local economy during the construction phase. These commitments will be agreed as part of a Development Agreement.

Social considerations

58. As set out above, the successful tenderer has made commitments to support the use of local supply chain and create local employment opportunities as part of a construction programme.

59. The council is an officially accredited London Living Wage (LLW) Employer and is committed to ensuring that, where appropriate, contractors and subcontractors engaged by the council to provide works or services within Southwark pay their staff at a minimum rate equivalent to the LLW rate. The successful tenderer has made a commitment to the payment of LLW to all directly and sub-contracted staff on the project.

Environmental/Sustainability considerations

60. Across the whole redevelopment project, the council's approach to procurement of the design, development and construction processes ensures a requirement to maintain and improve sustainability at each stage in the project.

61. The successful tenderer has set out the following commitments to ensuring sustainability during the construction phase:

- 90% (by weight) of non-hazardous construction, demolition and excavation waste will be diverted from landfill
- Minimising embodied carbon through bespoke Circular Economy bespoke approach
- 100% of timber products from legal and sustainable sources
- 100% of finishing elements with low Volatile Organic Compound (VOC) content to improve indoor air quality
- Use of Airlite paint, which purifies air by neutralising pollutants and harmful chemicals
- Designing buildings and public space to reduce the urban heat island effect
- Potable water use of no more than 105L/day per person in homes through reducing demand and use of low flow fittings and appliances, aiming for 60L/day where possible
- All homes to have smart meters to collect energy consumption data to make more efficient use of resources

62. These commitments will be formally agreed and become contractually binding as part of a Development Agreement and specifications stipulated within the employers requirements will ensure that development activity is controlled in a way that positively contributes to achieving sustainability.

Market considerations

63. The successful tenderer is a private organisation that operates out of the UK and is part of Bouygues UK that is wholly owned by Bouygues Bâtiment International, a subsidiary of Bouygues Construction which is based in France.

64. The successful tenderer has under 50 employees. Its international parent group has over 50,000 employees.

65. The successful tenderer has a national area of activity.

66. The successful tendered has made commitments to implement local labour and supply commitments which would be formally agreed as part of a future Development Agreement.

Staffing implications

67. There are no additional staffing implications. Staffing needs will be met through existing structures.

68. External project management and Quantity Surveyor services have been appointed to support the delivery programme.

Financial implications

69. The fee for pre-construction services is £300,000. This is considerably lower than the anticipated value of £1.5m as set out in the Gateway 1 report which was based on an early estimate of potential costs. As the council has separately procured design services for RIBA Stages 2 & 3, the PCSA costs will be lower than a typical PCSA which would usually include design fees.

70. Costs will be incurred across financial years 2021-22 and 2022-23. The schedule of fees will be established within the contract agreement.

71. The spend profile for financial years 2021-22 and 2022-23 is as below:

2021-22 - £50,000
2022-23 - £250,000

72. As set out in the Gateway 1 report, there is a framework fee of 1% of the PCSA cost to Pagabo, equating to £3,000. This fee is payable by the council to Linkcity, which would be subsequently passed onto Pagabo. Further to this, there is a fixed fee of £150,000 payable to Pagabo upon successfully entering into a Development Agreement with the preferred contractor. The council is not committed to this fee at this stage and the treatment of this will be agreed as part of the detailed Development Agreement terms and set out within a future Gateway 2 report to Cabinet to approve the Development Agreement.

73. The costs of this procurement will be met from the Tustin Estate Low Rise Redevelopment Programme approved at Cabinet on 13 July 2021, which secured funding from the Housing Investment Programme of an estimated £14.14m.

Investment implications

74. Please see advice from the Strategic Director of Finance and Governance below.

Legal implications

75. Please see advice from the Director of Law and Governance below.

Consultation

76. Consultation on the delivery partner tender process took place with the Tustin Resident Project Group and the Tustin Community Association. Residents were members of the evaluation and interview panel and took a prominent role in evaluating submissions.

Other implications or issues

77. None.

SUPPLEMENTARY ADVICE FROM OTHER OFFICERS

Strategic Director of Finance and Governance (H&M 21/094)

78. This report seeks the approval Strategic Director of Housing and Modernisation, in consultation with the Cabinet Member for Council Homes and Homelessness to appoint BY Development Ltd to provide pre-construction services for the Tustin Estate Low Rise Redevelopment Programme at cost of £300,000. The Strategic Director of Finance and Governance notes that this award provides the council with the option to award the Development Agreement to BY Development Ltd (to deliver the Tustin Estate Low Rise Redevelopment Programme, subject to future Cabinet approval of a further Gateway 2 report. The financial implications section of the report sets out how the cost of the procurement will be met.

Head of Procurement

79. This report seeks approval from the Strategic Director of Housing and Modernisation, in consultation with the Cabinet Member for Council Homes and Homelessness, to award the Tustin Estate Low Rise Redevelopment Programme to BY Development Ltd (trading as Linkcity) to provide pre-construction services through a Pre-Construction Services Agreement (PCSA) at a cost of £300k commencing on 22 November 2021 for a period of 18 weeks.

80. The Strategic Director of Housing and Modernisation, in consultation with the Cabinet Member for Council Homes and Homelessness, notes the tender process is detailed in paragraphs 16 to 26 via the Pagabo Framework which is allowable under the Public Contract Regulations 2015 and the councils Contract Standing Orders (CSO), management and monitoring of the contract are detailed in paragraphs 38 to 40, risks are detailed in the table between paragraphs 40 to 41, impacts on equalities, health and

climate are detailed in paragraphs 46 to 54. There no social value commitments.

Director of Law and Governance

81. The Director of Law and Governance notes the contents of this report which seeks the approval of the Strategic Director of Housing and Modernisation to the award of a preconstruction services agreement (PCSA) to BY Development Limited, (trading as Linkcity) using Lot 3c of the Pagabo Developer Led Framework in the sum of £300,000 commencing 16 November 2021 for an estimated period of 18 weeks.
82. The Strategic Director for Housing and Modernisation is requested to note that subject to successful conclusion of the PCSA, the council would have the option to award a development agreement to BY Development (trading as Linkcity) to develop the Tustin Estate Low Rise redevelopment Programme, subject to a future Cabinet approval of a further Gateway 2 report.
83. On the basis of the information contained in this report it is confirmed that this procurement was carried out in accordance with the council's Contract Standing Orders (CSOs) and the Public Contracts Regulations 2015.
84. As this procurement is based on a two-stage tender, this Gateway 2 report seeks approval for stage 1 of the tender process, i.e. the pre-construction stage. As noted in paragraph 2 of this report, a separate Gateway 2 report will be sought for stage 2 of the tender process in the event that the council decides to award a development agreement to the successful tenderer for the construction of the Tustin Low Rise Redevelopment Project. As highlighted in paragraph 10 of this report, the council reserves the right not to enter into a development agreement if the price for the main works is not acceptable and instead to commence a new tender process
85. The description of the tender procurement outcomes are outlined in paragraphs 7 to 9 of this report, which include a summary of the scope of the PCSA. Details of the tender process are set out in paragraphs 16 to 22 of this report. How the tenders were evaluation are set out in paragraphs 23 to 35.
86. Paragraph 31 and 32 confirms that Linkcity has the highest score for both quality and price and paragraph 36 states that the evaluation panel were satisfied with the recommendation to award the contract to Linkcity based on the final score.
87. Plans for monitoring and management of the contract are outlined in paragraph 38 to 40 of this report.
88. CSO 2.3.1 provides that a contract may only be awarded if the expenditure has been included in approved revenue or capital estimates or has been otherwise approved by, or on behalf of the Council. Paragraph 73 of this

report confirm how the proposed contract will be funded.

Director of Exchequer (for housing contracts only)

89. Not applicable

PART A – TO BE COMPLETED FOR ALL DELEGATED DECISIONS

Under the powers delegated to me in accordance with the council's Contract Standing Orders, I authorise action in accordance with the recommendation(s) contained in the above report (and as otherwise recorded in Part B below).



18 November 2021

Signature Date.....

Michael Scorer, Strategic Director of Housing and Modernisation

BACKGROUND DOCUMENTS

Background documents	Held At	Contact
Gateway 1 - Procurement Strategy Approval Procurement of a Delivery Partner (Developer Contractor) for the Tustin Estate Low Rise Redevelopment Programme	Constitutional Team / Tooley Street	Paula Thornton Paula.thornton@southwark.gov.uk
https://moderngov.southwark.gov.uk/documents/s99985/Report%20Tustin%20Low%20Rise%20Re-development%20Delivery.pdf		

APPENDICES

No	Title
Appendix 1	Equalities and Health Impact Assessment (December 2020)

AUDIT TRAIL

Lead Officer	Head of Regeneration South	
Report Author	Susan du Toit, Tustin Project Manager	
Version	Final	
Dated	15 November 2021	
Key Decision?	No	
CONSULTATION WITH OTHER OFFICERS / DIRECTORATES / CABINET MEMBER		
Officer Title	Comments Sought	Comments included
Strategic Director of Finance and Governance	Yes	Yes
Head of Procurement	Yes	Yes
Director of Law and Governance	Yes	Yes
Director of Exchequer (for housing contracts only)	No	No
Cabinet Member	Yes	Yes
Contract Review Boards		
Departmental Contract Review Board	Yes	Yes

Corporate Contract Review Board	Yes	Yes
Cabinet	No	No
Date final report sent to Constitutional/Community Council/Scrutiny Team		n/a

Tustin Estate Regeneration: Equality and Health Impact Assessment

21 March 2022



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Tustin Estate Regeneration: Equality and Health Impact Assessment

21 March 2022

Issue and Revision Record

Revision	Date	Originator	Checker	Approver	Description
A	28/02/2022	Emma Will, Jemima Addae	Sarah Marshall	James Beard	Draft reflecting 'Hybrid' Planning Application option
B	21/03/2022	Emma Will, Jemima Addae	Sarah Marshall	James Beard	Final

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Information class: Standard

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Executive summary

Overview of the commission

Mott MacDonald has been commissioned by Southwark Council to undertake an Equality and Health Impact Assessment (EHIA) of the improvement programme (“the Programme”) for Tustin Estate, in the London Borough of Southwark.

Summary of the EHIA

The EHIA process is focussed on the potential effects, including health effects, likely to be experienced by those living and working in the community in light of their ‘protected characteristics’ under the Equality Act 2010. It identifies any differential or disproportionate effects (both positive and negative) on those with protected characteristics that may arise from the Programme and sets out potential mitigation or enhancement measures that the Council can put in place to address them.

This EHIA presents summary equality and health findings for the ‘Hybrid’ Planning Application of the Estate, which has progressed following a vote on the outline masterplan by residents in a ballot held in February 2021.

‘Hybrid’ Planning Application is set out in more detail in Table 2.2 in Chapter 2.

Findings

The process of research and analysis for this ‘Hybrid’ Planning Application EHIA has identified several impacts that could arise from the renewal programme, split into three broad categories: potential impact on residents and community resources during renewal; potential impact on businesses during renewal; and potential impact on the community following the renewal process.

The assessment considers the impacts of the renewal process—particularly the impact on residents and businesses. The assessment also explores the impact of the delivery of the renewed Estate on the current and future Estate community. The table below sets out findings from the assessment. Potential impacts in the first column have been identified through a review of published literature, the scope of which is based on an understanding of the context and proposed activities associated with the Estate redevelopment.

Assessment of equality effects has been undertaken in light of the characterisation of the effects –including sensitivity of the affected parties to the renewal, distribution of those groups on the Estate, nature of the effect and mitigation measures in place to address the effect. This includes reference to COVID-19 where relevant. Recommendations have been made for addressing any potential residual effects on these groups.

The assessment found that the regenerated Estate has the potential to provide improved living conditions, housing quality, accessibility, public realm and community facilities. This, coupled with the majority vote in the February 2021 ballot for the redevelopment to go ahead means there is a compelling case in the public interest for the redevelopment. Whilst this must be weighed against the acknowledged potential risks, the Council has sought to mitigate these through a range of reasonable and proportionate measures focused on engagement, rehousing assistance and compensation options in order to improve the outcomes of the redevelopment for the current and future Estate community.

1 Introduction

This 'Hybrid' Planning Application EHIA outlines the findings of the impact assessment for the chosen renewal option and provides recommendations for mitigation and further enhancement where appropriate.

This chapter sets out the purpose and scope of the 'Hybrid' Planning Application Equality and Health Impact Assessment (EHIA) of the improvement programme ('the Programme') of Tustin Estate, in the London Borough of Southwark. The chapter also sets out requirements of the Equality Act 2010 ('the Equality Act'), the approach to EHIA, and tasks undertaken throughout this process.

1.1 Purpose of the EHIA

The purpose of the EHIA is to help Southwark Council ('the Council') understand the potential risks and opportunities of the illustrative masterplan of the chosen renewal option, with a particular focus on people with characteristics protected under the Equality Act and the health of the local population (including on health inequalities).

Protected characteristics include the following (as defined by the Equality Act):¹ age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion and belief, sex, and sexual orientation.

This 'Hybrid' Planning Application EHIA outlines the findings of the impact assessment for the chosen renewal option and provides recommendations for mitigation and further enhancement where appropriate.

1.2 The Equality and Health Impact Assessment

This 'Hybrid' Planning Application EHIA sets out the key potential equality and health impacts of the chosen renewal option for Tustin Estate. The approach to this report includes components of both Equality Impact Assessment (EqIA) and Health Impact Assessment (HIA).

1.2.1 Equality Impact Assessment

1.2.1.1 The Public Sector Equality Duty

This EHIA has been undertaken as part of a process supporting the fulfilment of the Council's obligations under current UK equality legislation, and in particular the Equality Act. The Equality Act sets out a Public Sector Equality Duty (PSED), at section 149 and is set out in Figure 1.1 below.

Figure 1.1: Article 149 of the Equality Act: The Public Sector Equality Duty

- (1) A public authority must, in the exercise of its functions, have due regard to the need to—
- (a) eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under this Act;
 - (b) advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it;
 - (c) foster good relations between persons who share a relevant protected characteristic and persons who do not share it.
- (2) A person who is not a public authority but who exercises public functions must, in the exercise of those functions, have due regard to the matters mentioned in subsection (1).
- (3) Having due regard to the need to advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it involves having due regard, in particular, to the need to—
- (a) remove or minimise disadvantages suffered by persons who share a relevant protected characteristic that are connected to that characteristic;
 - (b) take steps to meet the needs of persons who share a relevant protected characteristic that are different from the needs of persons who do not share it;
 - (c) encourage persons who share a relevant protected characteristic to participate in public life or in any other activity in which participation by such persons is disproportionately low.

Source: Equality Act 2010

The PSED is intended to support good decision-making. It encourages public authorities such as the Council to understand how different people will be affected by their activities. This means services and policies are appropriate and accessible to all and meet different people's needs. The Council must demonstrate that it has shown due regard to the aims of the PSED throughout the decision-making process to deliver the Programme. The process used to do this must take account of the protected characteristics which are identified below in section 1.1.1.1.

¹ Government Equalities Office/Home Office (2010): 'Equality Act 2010' Available at: www.legislation.gov.uk

1.2.1.2 Protected characteristics

An EqIA provides a systematic assessment of the likely or actual effects of policies or proposals on social groups with the following protected characteristics (as defined by the Equality Act):²

Protected characteristic	Equality and Human Rights Commission (EHRC) definition
Age	A person belonging to a particular age (for example 32-year olds) or range of ages (for example 18 to 30-year olds).
Disability	A person has a disability if she or he has a physical or mental impairment which has a substantial and long-term adverse effect on that person's ability to carry out normal day-to-day activities.
Gender reassignment	The process of transitioning from one gender to another.
Marriage and civil partnership	Marriage is a union between a man and a woman or between a same-sex couple. Couples can also have their relationships legally recognised as 'civil partnerships'. Civil partners must not be treated less favourably than married couples (except where permitted by the Equality Act).
Pregnancy and maternity	Pregnancy is the condition of being pregnant or expecting a baby. Maternity refers to the period after the birth, and is linked to maternity leave in the employment context. In the non-work context, protection against maternity discrimination is for 26 weeks after giving birth, and this includes treating a woman unfavourably because she is breastfeeding.
Race	Refers to the protected characteristic of race. It refers to a group of people defined by their race, colour, and nationality (including citizenship) ethnic or national origins.
Religion and belief	Religion has the meaning usually given to it but belief includes religious and philosophical beliefs including lack of belief (such as Atheism). Generally, a belief should affect someone's life choices or the way they live for it to be included in the definition.
Sex	A man, woman or non-binary person.
Sexual orientation	Whether a person's sexual attraction is towards their own sex, the opposite sex or to both sexes.

An EqIA does this through the following approaches:

- Assessing whether one or more of these groups could experience disproportionate effects (over and above the effects likely to be experienced by the rest of the population) as a result of the proposed renewal option. An EqIA includes examining both potential positive and negative effects.
- Identifying opportunities to promote equality more effectively.
- Developing ways in which any disproportionate negative effects could be removed or mitigated to prevent any unlawful discrimination and minimise inequality of outcomes.

1.2.1.3 Assessing equality impacts

While the PSED does not specify a particular process for considering the likely effects of policies, programmes and projects on different sections of society for public authorities to follow, this process is usually undertaken through some form of equality analysis, which can include EHIA's.

Undertaking an EHIA helps to demonstrate how a public authority is complying with the PSED by:

- providing a written record of the equality and health considerations which have been taken into account;

- ensuring that decision-making includes a consideration of the actions that would help to avoid or mitigate any negative impacts on particular protected groups; and
- supporting evidence-based and more transparent decision-making.

By understanding the effect of their activities on different people, and how inclusive delivery can support and open opportunities, public bodies can be more efficient and effective. The EHIA process therefore helps public bodies to deliver the Government's overall objectives for public services.

1.2.1.4 Local Planning Policy

As well as meeting the requirements of the Equality Act (see section 1.2), the following local planning policy and strategy documents have a bearing on this assessment'

Southwark Plan 2022 Policy

- SP2 Southwark Together
- SP5 Thriving Neighbourhoods and tackling health inequalities
- P1 Social rented and intermediate housing
- P7 Housing for older people
- P8 Wheelchair accessible and adaptable housing
- P33 Business relocation
- P47 Community uses
- P65 Improving air quality

London Plan 2021 Policy

- GG1 Building strong and inclusive communities
- GG3 Creating a healthy city
- SD1 Opportunity areas
- SD10 Strategic and local regeneration
- T2 Healthy Streets

² Government Equalities Office/Home Office (2010): 'Equality Act 2010'. Available at: www.legislation.gov.uk

1.2.2 Health Impact Assessment

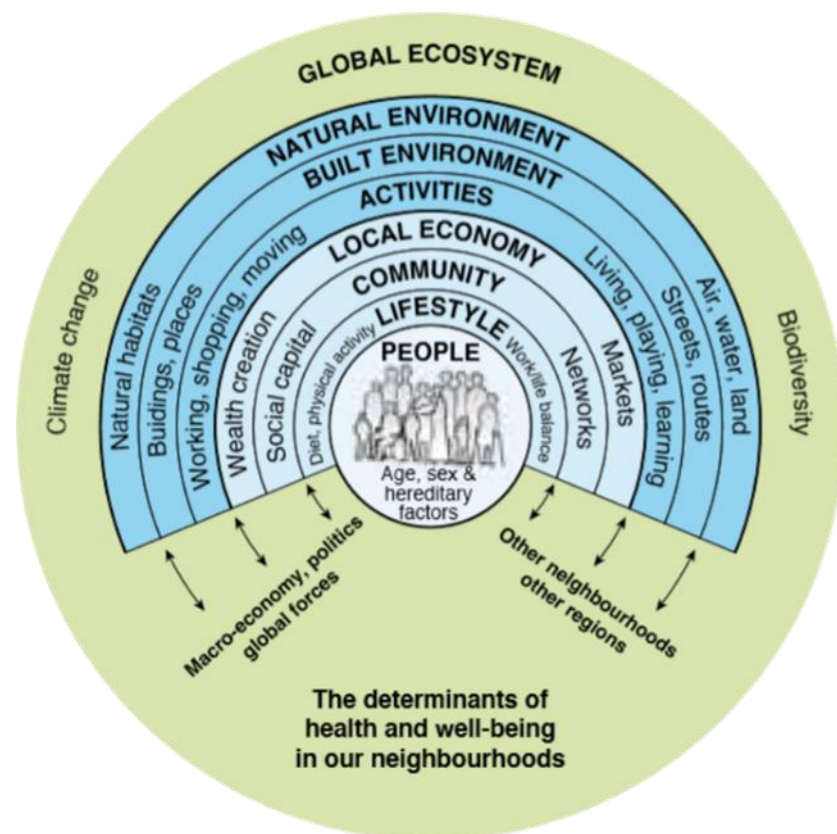
1.2.2.1 Assessing health impacts

Health as a component of the EHIA will focus on assessing whether certain sections of the population (based on the protected characteristic groups defined above) will experience health impacts disproportionately or differentially when compared to other sections of the population. The HIA component of this assessment identifies potential health risks and opportunities associated with the renewal option, focussing on key health aspects of the regeneration process (e.g. relocation, construction effects) and how this intersects with health inequalities. The mitigations Southwark has in place to prevent adverse effects on health for vulnerable sections of society are also outlined.

1.2.2.2 Determinants of health

The approach to the HIA aspect of this report uses the World Health Organization's (WHO) definition of health as a 'state of complete physical, mental and social well-being and not merely the absence of disease or infirmity'. Health inequity (avoidable differences in health) was considered, introducing a notion of fairness. The figure below highlights the determinants of health in a community context.

Figure 1.2: Determinants of Health



Source: Barton and Grant (2006) The health map, based on a public health concept by Whitehead and Dahlgren, The Lancet 1991. Department for Health (2010) Health impact assessment of government policy

1.3 Overall approach to the EHIA

The approach to EHIA employs the bespoke Mott MacDonald INCLUDE toolkit, which sets out the following steps:



1.4 Tasks Undertaken

The 'Hybrid' Planning Application EHIA is the third EHIA produced, aligned with the decision-making process on the Estate.

The Initial EHIA comprised a series of tasks undertaken to understand the equality and health effects of the original five scenarios put forward for the renewal of the estate. Once potential effects were identified, they were assessed against the renewal scenario. The initial EHIA was used to inform the residents ahead of the initial ballot in September 2020.

The Final Option EHIA was intended to provide further detail and analysis on the Final Option that was selected by residents and being taken forward by Southwark Council.

This 'Hybrid' Planning Application considers to the updates to provides updated detail and analysis of the final chosen masterplan for the renewal .

Within the steps above, the following tasks were undertaken to deliver the assessments:

1.4.1 Understanding the project

Discussion with Southwark Council: Initial discussions were undertaken with the Council to gain a better understanding of the Estate and the approach to the Programme. A further discussion was undertaken prior to beginning the EHIA of the 'Hybrid' Planning Application to receive an update on the Programme.

Estate walkover: A visit to the Estate was undertaken in December 2019. The visit included a viewing of the low-rise blocks on the Estate: Ullswater House, Hillbeck Close, Heversham House, Kentmere House, and Manor Grove; Pilgrims Way Primary School; and the Tustin Community Centre.

Review of renewal proposals: A review of documentation associated with the renewal, planned mitigation measures and impacts on residents was undertaken on an ongoing basis, as it was produced. This was repeated for the Final Option and 'Hybrid' Planning Application Option.

1.4.2 Evidence, distribution, and proportionality

Initial desk-based evidence and literature review: In order to better understand the potential risks and opportunities arising from the redevelopment, and to help to identify possible mitigation measures and opportunities associated with the programme, relevant published literature from governmental, academic, third sector and other sources were reviewed and updated throughout all EqlA stages. This allowed for the characterisation of potential risks and opportunities typically associated with estate regeneration and relocation, to understand whether they applied in this instance.

This process was repeated for the 'Hybrid' Planning Application EHIA, to update the literature and capture any potential new effects.

Demographic analysis of the Estate and surrounding area: A social and demographic profile of Tustin Estate was collated using publicly available data and compared to wider social and demographic data for Southwark, London and England. This work was undertaken in the baseline stage and updated in subsequent stages to reflect newly available data.

1.4.3 Engagement and analysis

Residents Project Group meetings: The EqlA team participated in three Residents Project Group (RPG) meetings between December 2019 and February 2020 to provide ongoing background, information and updates on the EHIA process and findings. Input to the EHIA from the RPG was provided through this process.

Drop-in events: Presented the EHIA process and findings at a design options drop-in event in February 2020 and a final options drop-in event in March 2020 to provide the wider Estate community with information about the EHIA, gather feedback on how they felt the proposals would affect them and help them understand the differences between the options from an equality and health perspective.

Youth session: Provided input to a youth session run by Common Grounds (the architects commissioned to design the options) and reviewed the engagement summary. It was important to engage youth in this process as, while typically affected by activities concerning regeneration and community planning, they are often under-engaged in mainstream consultation activities. This youth session forms part of a longer running youth engagement strategy which aims to set up a Young Persons Steering Group for the Estate with the potential for advising on future governance and engagement.

The session provided an overview of the current project and allowed young people to share local knowledge and insight. The intention of this was to understand shared experiences and think of possible design interventions to facilitate their vision for the local area they live in.

Analysis of Starting the Conversation Questionnaire: The autumn 2019 'Starting the Conversation' questionnaire conducted by Southwark Council aimed to understand the household needs of residents and picked up some common themes relating to particular equality groups around how the Estate could be improved. Feedback is incorporated in Chapter 3 Equality Risks and Opportunities. Analysis of demographic information with respect to who was engaged through the questionnaire is incorporated in the Appendix.

Final Option Engagement Session: An engagement session was held in November 2020 to take local residents through the final Final Option for the redevelopment, and present on the EHIA process. The session took attendees through the potential equality impacts of the development, as well as Southwark Councils plan to mitigate these. Feedback was also received on areas important to the attendees in making their decisions; and their thoughts on the future of the

estate. Co-design workshops were held with residents DDG sub-group which focused on design progress and invite discussion on key issues and potential resolution. The workshops were held monthly between 28th October and 25th November 2021, which looked to gain their views on the below themes:

- Community facilities and landscape 28th October
- Manor Grove design workshop. 13th November and 2nd December
- Sustainability, energy and transport. 25th November

1.4.4 Impact assessment

Assessment of potential impacts: Potential impacts were identified and assessed using the research undertaken in the stages above. Assessment of impacts was undertaken in light of the sensitivity of the affected parties to regeneration and relocation, and distribution of people with protected characteristics amongst residents of the Estate. Both adverse and beneficial impacts were identified in the context of the mitigation measure implemented by the Council.

Types of equality effects considered: Potential effects arising from the redevelopment will be assessed as either differential or disproportionate.

- **Differential effects:** Differential effects occur where people with protected characteristics are likely to be affected in a different way to other members of the general population. This may be because groups have specific needs or are more susceptible to the effect due to their protected characteristics. Differential effects are not dependent on the number of people affected.
- **Disproportionate effects:** Disproportionate effects occur where there is likely to be a comparatively greater effect on an equality group than on other sections of the general population. Disproportionate effects may occur if the affected community includes a higher than average proportion of people with a particular protected characteristic, or because people from a particular protected characteristic group are the primary users of an affected resource.

Action planning and making recommendations: An action plan has been developed which outlines the responsibilities to involved affected parties following submission of the 'Hybrid' Planning Application EHIA. A series of further recommendations have been developed to help manage the renewal process in a way that minimised the potential for adverse effects where appropriate.

1.5 Methodology for identifying and assessing equality and health effects

1.5.1 Assessing equality and health effects

The assessment of effects across the EHIA process is predominantly qualitative and outlines the nature of the impact on:

- residents living in low-rise and tower blocks on Tustin Estate;
- commercial properties on Tustin Estate, including employees and customer bases;
- community facilities on Tustin Estate and their service users;
- owners of residential and commercial property on Tustin Estate; and
- the local community.

The assessment considers:

- whether the proposed renewal option will have a positive or negative effect on the lives of those who live in the area;
- the relationship of the effect to the renewal option proposed within the Programme (e.g. direct relationship such as loss of property or indirect relationship such as loss of access to services);
- the severity of change; and
- the resilience of those who are affected.

2 Tustin Estate Improvement Programme

This chapter sets out the context of Tustin Estate and the renewal option proposed as part of the improvement programme. It provides background to the Estate including its history and current situation, before outlining the final renewal proposal.

2.1 Overview: Tustin Estate

Tustin Estate is a five-hectare brick-built housing estate located in the London Borough of Southwark, on the Southwark and Lewisham border. Constructed in the 1960s and 1970s, the Estate is made up of 526 properties spread over six low-rise blocks and three 20 storey towers; a one form entry Primary School, retail units, Tustin Community Centre, open space, resident parking and a district heating system. Many of the blocks are in need of significant reinvestment; and there is currently major renovation works underway on the three tower blocks as part of a separate improvement programme. Consequently, this assessment focuses on the low-rise blocks as they are the subject of focus for the proposed option for improvement.

The tenure mix of households eligible for rehousing per low rise block subject to demolition as of June 2021 is listed in Table 2.1 below. Previous versions of this EHIA included 47 temporary accommodation households in Ullswater House. These households were moved to alternative accommodation during the COVID-19 pandemic as the homes were not self-contained. As a result The Manor Grove homes have also not been included as these are not subject to demolition.

Table 2.1: Tenure mix per block

Block	Total no. of properties	Temporary Accommodation Tenants ³	Applicants on housing waiting list	Council Tenants	Leasehold	Freehold	Void
Bowness House	34	1	3	18	15	0	0
Heversham House	98	4	16	66	28	0	0
Hillbeck Close	32	3	0	20	5	0	4
Kentmere House	38	4	8	31	3	0	0
Total	202	12	27	135	51	0	4

Source: Southwark Council (correct as of February 2022. Housing waiting list correct as of June 2021)

³ subsequent to the effects of Covid 19 this block has been decanted to allow for social distancing practices to be adhered to.

Photo 2.1: Heversham House, Tustin Estate



Source: Southwark Council

Housing Need

The Housing Needs Assessment process was started in 2019 as part of the options development process. In advance of the ballot, before the pandemic, housing needs assessments for all residents were administered by Resident Services Officers making an appointment by phone to visit residents at home to complete the assessment. During the pandemic, the assessments were completed by phone. Where Resident Services Officers were not able to contact residents, the council asked the appointed independent tenant and homeowner adviser to visit and arrange for the assessment to be completed.

Following the ballot and cabinet approval of the re-housing strategy for Phase 1 (Hillbeck), in-depth housing needs assessments (attached) were undertaken with Hillbeck residents. At times when COVID-19 restrictions were not in place, the Resident Services Officer made an appointment with residents to visit and complete the assessment. During COVID-19 restrictions, assessments were completed over the phone. Assessments were completed with all residents and resident leaseholders. The Resident Services Officer has also supported the private tenants of non-resident leaseholders to provide housing advice. A similar approach will be taken for later phases.

The accessibility needs of residents were taken into consideration in completing the assessment – for example one resident who is hard of hearing preferred for the assessment and ongoing discussions to be done by text message.

In January 2022, a Housing Needs Assessment was carried out by Southwark Council in order to identify the sizes of homes required by the current residents of the Estate after renewal. A

summary of current need to be met by the new Estate, as broken down by current residence, is found in the table below.

Table 2.2: Housing Needs Assessment

Summary of Need	1 Bed	2 Bed	3 Bed	4 Bed	5 Bed	Total
Bowness House	0	0	25	3	0	28
Heversham House	15	20	41	7	1	84
Hillbeck Close	22	0	0	0	0	22
Kentmere House	27	0	0	0	0	27
Totals	64	20	66	10	1	161

Source: Southwark Council (correct as of February 2022)

2.2 Renewal of the Estate

History of Tustin Estate regeneration

Southwark Council is the biggest social landlord in London and has committed to delivering a target of 11,000 new council homes for social rent by 2043. Tustin Estate is also subject to the Southwark Planning policy framework, including the Old Kent Road Area Action Plan which establishes a minimum target of 20,000 new homes and 10,000 new jobs in the area.

It has launched a 'Great Estates' programme, with the aim of guaranteeing that every estate is clean, safe, and cared for, and to give residents the opportunity to improve their estate. Tustin Estate is intended to be a leading example of this programme.

In 2016 Tustin Estate residents were engaged in discussions about the future of the estate, and as a result of these discussions it was determined that Southwark would undertake a major refurbishment programme of the three high rise towers. No decision was made with regard to the low rise blocks and consequently no major investment has been made.

The council has since reengaged with residents through the Tustin Community Association (TCA) and has worked with local representatives and the community to develop detailed options for the future of the Estate that were taken to ballot in September 2020 and February 2021.

Renewal scenarios

Initial options

Options for the Programme were developed by Common Grounds, taking account of feedback from Tustin Estate residents, the Council and other consultants involved in the process to date.

Five scenarios were initially considered for the redevelopment of the Estate:

- Option 1 simply involved the maintenance of the Estate with no new builds
- Option 2 and 3 required part refurbishment/part demolition of the Estate and new builds
- Option 4 required the complete demolition and rebuild of the Estate
- Option 5 required almost complete demolition of the estate, with the exception of Manor Grove, which would be maintained and infilled with new homes.

Impact of COVID- 19

Due to the emergence of the COVID- 19 pandemic in March 2020, and subsequent national restrictions, Southwark Council temporarily postponed the consultation and engagement period designed to whittle down the five options. In July 2020, as some restrictions began to lift after the first lockdown, the consultation was re- started to refresh residents' memories on the options and continue conversations regarding the renewal options. Social distancing requirements meant that gatherings of groups was not permitted, and therefore additional efforts were made to ensure that residents continued to receive the information they required through online RPG meetings and public events, letter drops, telephone calls (including with those residents known to be vulnerable or requiring additional assistance in interpreting information), and socially distanced one to one meetings where required.

Residents Ballot

In September 2020, residents were asked to rank the options in order of preference in a ballot. Option 4, which would see the full redevelopment of the Estate, including Manor Grove, was the favoured option of all blocks on the Estate with the exception of Manor Grove residents. Manor Grove is where all freeholders on the Estate live.

Option 5 was the second most favoured option for Manor Grove residents, just following Option 1.

Announcement of Final Option

The decision on which option to take forward was based on the results of the options survey, its alignment with council policies and aims, and supporting information in the Cost Benefit Analysis and the EHIA. It was determined that the Final Option for the Estate was Option 5 - the complete demolition and re-provision of all blocks with the exception of Manor Grove. The Manor Grove homes would be retained and refurbished, with infill housing established. The decision to proceed with Option 5 was based on taking all of the above information into account, and because it allows for the benefits of both Option 4 and Option 5 to be realised.

The Final Option was taken to a ballot of residents in February 2021, with the option to vote Yes or No on the Final Option. The majority of residents (87% of a 64% turnout) voted Yes to take forward the Final Option and redevelop the Estate,

'Hybrid' Planning Application

After the Residents Ballot voted Yes to take forward the redevelopment of the Estate, Southwark's Cabinet approved the delivery plan including appointing a design team to develop a Masterplan for planning submission. Details of the Masterplan are presented in the following table.

Table 2.3: 'Hybrid' Planning Application breakdown

	Refurbishment	Decanting and demolition	New Homes	Retail offerings and community facilities	Public realm offerings
'Hybrid' Planning Application	<ul style="list-style-type: none"> ● Manor Grove refurbishment to the following standard: <ul style="list-style-type: none"> – Every home will have the option of being refurbished to meet Decent Homes Standard, Southwark Standard – New kitchens and bathrooms for council tenants when these are due for replacement. – Energy efficiency improvements. – Improvements to bin stores. – Improvements to communal entrances. ● Total number of 49 homes maintained 	<ul style="list-style-type: none"> ● Decanting, demolition and re-provision of all blocks with the exception of Manor Grove. 	<ul style="list-style-type: none"> ● Replacement of all existing homes subject to demolition including 200 Council homes and 49 leasehold ● Total of 689 new homes, of which 68% will be affordable ● Dedicated housing provision for key workers ● 60% of homes available for affordable rent, including some reserved for key workers ● All new homes will achieve zero net carbon ● Dedicated housing for the over 55's ● New family homes with gardens ● All new homes will meet the Wheelchair User Dwelling Standards, and 10% will meet the Adaptable Dwellings Standard. 	<ul style="list-style-type: none"> ● Reprovision of retail units, with an assumed number of 10 businesses of 100sqm. ● Additional commercial space of 142 sqm. ● 1,380 sqm of non-residential reprovision in total ● Relocation options on Tustin Estate on an interim or permanent basis. ● New school building at the heart of the estate, with space to accommodate future extension to a 2 form entry provision. ● EV charging points 	<ul style="list-style-type: none"> ● Enhanced and enlarged green space at the heart of the estate, with provision for landscaped play, social and visual amenity for residents. ● Priority for pedestrians through new estate, with new pedestrian routes and limited vehicle movements. ● Improvements to fencing. ● Improved lighting. ● Clearer and more secure routes for people passing through the estate. ● New 'Quiet Route' through estate to enable new walking and cycling routes. ● Majority of trees retained, and new trees planted for a net gain in trees. ● New play facilities.

3 Summary of evidence

This chapter sets out a summary of evidence. It includes existing evidence potential equality effects associated with the Tustin Estate Improvement Programme and associated protected characteristic groups who may be disproportionately affected, based on the initial desk-based review, as well as a summary of resident feedback.

3.1 Summary

The below table summarises the existing evidence of potential effects and associated protected characteristic groups who may be disproportionately affected. This includes reference to COVID-19 where relevant as well as a summary of key stakeholder feedback. Risks are defined as potential adverse effects resulting from the Programme, and opportunities are defined as potential benefits. Protected characteristic groups include those defined in Chapter 1. For the purposes of this EHIA, sub-groups have been identified within certain protected characteristic group categories based on the desk-based evidence review to improve the assessment.

- Within 'age', all age ranges are considered, but specific sub-groups include children (aged under 16), younger people (aged 16-24), and older people (aged over 65).
- Within 'race', all races and ethnicities are considered, but the sub-group of ethnic minority is identified to refer to non-White British communities.
- Within 'religion and belief', all religious and belief groups are considered, but the term 'Minority faith groups' refers to religious groups who are not Christian (Buddhist, Hindu, Jewish, Muslim, Sikh, and 'other').
- Within 'sexual orientation' and 'gender reassignment', all sexual orientations and gender statuses are considered, but the 'Lesbian, Gay, Bisexual, Transgender Plus' (LGBT+) community is considered together.
- Within 'sex', the sub-groups of men and women are used.
- Within 'pregnancy and maternity', pregnant women are reported as a sub-group where the effect only relates to pregnancy.

Table 3.1: Evidence summary

Effects on residents during the renewal process	Affected groups	Risk or opportunity	Key resident feedback
<p>Loss of social infrastructure and access to community resources:</p> <p>The renewal process can involve temporary or permanent resettlement of residents and demolition of housing and community resources. This can lead to the risk of loss of social infrastructure and access to these resources. In particular, it can increase residents' distances from facilities or places of social connection located on or in close proximity to their neighbourhood.</p> <p>The ongoing COVID-19 pandemic and regulations have had already had an impact on access to social infrastructure and resources, and as such any further impacts may have cumulative negative effects, especially on older people and disabled people.</p> <p>This can lead to increased stress and anxiety in children who may need to change school; and loneliness and isolation in older people which can turn to negative health outcomes such as poor mental health and obesity. Disabled people and pregnant women may also experience negative health impacts from this, including increased stress and anxiety.</p>	<ul style="list-style-type: none"> • Children • Older people • Disabled people • People from ethnic minority backgrounds • Minority faith groups • Pregnancy and maternity 	Risk	<p>A poll of residents in attendance at an online engagement event undertaken in November 2020, a majority of attendees selected social impact and community as one of the most important areas they would consider whilst making their decision about the future of the Estate.</p> <p>In an Estate walkaround in August 2021, residents fed back that they like the communal garden and terraces currently at Kentmere. Residents also fed back that they enjoyed the deck access to the properties as it provided space for social interaction. Residents highlighted that they liked the existing green space.</p>

Effects on residents during the renewal process

	Affected groups	Risk or opportunity	Key resident feedback
<p>Access to finance: Where renewal schemes require residents to resettle, it can lead to an increase in their financial outgoings due to costs associated with moving and obtaining new housing. Relocation costs could include removal services, the need to adapt a new home or buy new furniture. Access to the required finance to obtain new housing may be most limited for those at risk of financial exclusion, who experience difficulty accessing appropriate and mainstream financial services, such as bank accounts, loans and mortgages.</p>	<ul style="list-style-type: none"> • Young people • Older people • Disabled people • People from ethnic minority backgrounds • Women 	Risk	<p>At an online public event, residents raised concerns about the affordability of new homes, and the costs associated with moving.</p>
<p>Appropriate, accessible and affordable housing Where renewal schemes require the resettlement of many residents, issues can arise regarding sourcing suitable housing that meets the needs of families with children, people requiring adaptable and accessible housing, and people seeking affordable housing. A lack of suitable housing can lead to families living in overcrowded properties. Overcrowding can lead to negative impacts on children’s health, putting them at increased risk of developing respiratory conditions, infections, psychological problems, SIDS, and stress. Health effects caused by poor housing, such as respiratory disease, is more likely to impact upon older people.</p>	<ul style="list-style-type: none"> • Children • Disabled people • People from ethnic minority backgrounds 	Risk	<p>At a public event, residents wanted to hear about how the different options will address the current accessibility issues of the existing homes, as existing homes do not have appropriate space for those with mobility difficulties.</p> <p>A poll of residents in attendance at an online engagement event undertaken in November 2020, a majority of attendees noted that they felt the No vote option would not address the issue of overcrowding.</p> <p>In an Estate walkaround in August 2021, residents fed back that they liked the existing generous size of homes.</p>
<p>Health effects: Relocation can have a negative impact on an individual’s mental health and well-being. Relocation can create a great deal of stress and anxiety amongst children, young people and older people due to the need to adapt to new routines, facilities and surroundings. Health effects may also arise as a result of the environmental effects of demolition and construction processes. Health effects may also result from social isolation due to housing relocation, and impacts of the COVID-19 pandemic, such as poorer mental health, obesity, alcoholism, and a greater risk of hospitalisation. Older people and disabled people are also likely to be disproportionately affected by changes in air quality that may arise during any construction period as increased air pollution can impact upon underlying respiratory conditions. Air pollution can also contribute to health impacts in young children, including long term cognitive issues and neurodevelopment. Additionally, antenatal exposure to air pollution may alter the lung development of a baby whilst in the womb. If a baby is exposed to significant levels of air pollution, this can increase the risk of premature birth and low birth weight Noise pollution can also have adverse health impacts including sleep disturbance and stress.</p>	<ul style="list-style-type: none"> • Older people • Disabled people • Pregnant women • Children 	Risk	<p>Some residents fed back concerns with how the construction elements of the refurbishment and infill options would work, particularly questioning if residents would be expected to remain living in their homes during construction.</p> <p>A poll of residents in attendance at an online engagement event undertaken in November 2020, a majority of attendees identified health and wellbeing as one of the most important areas they would consider whilst making their decision about the future of the Estate.</p>
<p>Safety and security: In the lead up to the renewal process and during the decanting and demolition of properties in the area, properties will be vacated and can fall into disrepair. This can attract unwanted activity including anti-social behaviour and crime, which can affect those who are more likely to be a victim or witness of crime or those who are more fearful of crime. It has been suggested that fear of crime can contribute to social isolation, particularly for vulnerable groups such as women, older people, children and ethnic minority groups.</p>	<ul style="list-style-type: none"> • Young people • Disabled people • People from ethnic minority backgrounds • LGBT+ people • Men 	Risk	<p>Tustin Estate residents mentioned that the existing security, ASB issues on the Estate.</p> <p>A poll of residents in attendance at an online engagement event undertaken in November 2020, a majority of attendees identified safety as one of</p>

Effects on residents during the renewal process

	Affected groups	Risk or opportunity	Key resident feedback
	<ul style="list-style-type: none"> Older people Women Children 		the most important areas they would consider whilst making their decision about the future of the Estate.
<p>Accessibility and mobility in the area: Evidence has indicated that during construction the accessibility and mobility of the local area can be affected. In particular, construction can cause difficulties in relation to increased traffic in the local area, reducing parking (construction vehicles and subcontractors in parking), the construction activities blocking access to homes, shops, bus stops and pavements and safe routes, as well as effects on wayfinding.</p>	<ul style="list-style-type: none"> Older people Disabled people 	Risk	<p>Residents at a public event raised the importance of maintaining parking availability throughout construction.</p> <p>Residents at an Estate walkaround in August 2021 highlighted that motorbikes and scooters use existing pedestrian pathways to short cut through estate Residents also commented that the current private vehicle routes reduce safety and visibility around the greenspace in the estate.</p>
<p>Information and communication: The process of regeneration often requires two-way communication between residents and the council and or housing authorities in order for residents to understand the option available to them. The process of relocation itself also requires communication with a variety of organisations including the council, housing associations and removal companies. Such communication could be direct via the phone, face to face or over email, or could be indirect via websites, leaflets etc. Some groups of individuals may find communication more challenging than others and this is likely to depend upon the exact method and format of communication.</p>	<ul style="list-style-type: none"> Older people Disabled people People from ethnic minority backgrounds 	Risk	In a poll of residents in attendance at an online engagement event undertaken in November 2020, a majority of attendees agreed that the Cost Benefit Analysis and Initial Equality and Health Assessment were useful in helping them to make a decision about the future of the Estate.

Effects on businesses during the renewal process

<p>Potential redundancy of employees associated with business loss or relocation: The renewal process may result in the closure and relocation of businesses. These changes may result in business owners becoming unemployed, redundancies or in current staff being unable to access ongoing employment at a different location. Older people, disabled people and minority ethnic people may particularly be at risk if faced with redundancy and/or extended periods of unemployment due to typically facing additional barriers in securing interviews and offers of new employment. In addition, older people are more likely to be self-employed, meaning that they could face further barriers in finding new roles in the labour market. Closure or relocation may affect the customer base and net revenue of businesses, resulting in restructuring and redundancy of staff as a result.</p>	<ul style="list-style-type: none"> People from ethnic minority backgrounds Older people Disabled people Young people Women 	Risk	No feedback received on this topic. There will be further engagement with businesses as the detailed design moves forward.
<p>Potential loss of business: The renewal process may result in the closure and relocation of businesses. Research evidence shows that minority ethnic people are more likely to be self-employed and twice as likely to be in precarious work conditions than their White British counterparts in the UK. In addition, older people are also more likely to be self-employed, representing one in five self-employed population in the UK, placing them at potentially greater risk where businesses are affected.</p>	<ul style="list-style-type: none"> People from ethnic minority backgrounds Older people 	Risk	No feedback received on this topic. There will be further engagement with businesses as the detailed design moves forward.
<p>Impact of redundancy on health and well-being: Involuntary job loss due to redevelopment and renewal can have disproportionate health and well-being effects for certain groups. Older workers are at an increased risk of cardiovascular disease due to increased stress resulting from contributing factors such as a lower likelihood of re-employment, a substantial loss of income and the severance of work-based social interactions. Redundancy can create an increased risk of family tension and disruption, and that job loss for a parent can have detrimental effects on children including lowered self-esteem and socio-psychological well-being.</p>	<ul style="list-style-type: none"> Older people Children 	Risk	No feedback received on this topic. There will be further engagement with businesses as the detailed design moves forward.

Effects on residents during the renewal process

	Affected groups	Risk or opportunity	Key resident feedback
<p>Access to commercial finance: For businesses, redevelopment and renewal may result in relocation or closure. This may result in a need to access finance to secure new premises, which can be more difficult for particular groups.</p>	<ul style="list-style-type: none"> • People from ethnic minority backgrounds 	Risk	No feedback received on this topic. There will be further engagement with businesses as the detailed design moves forward.
<p>Impact on customer base: Potential closure or relocation of businesses could reduce the availability of services in the local area. Research evidence suggests that certain groups, such as older people, disabled people and minority ethnic groups may be more reliant on existing networks and links to shops and commercial services. As a result, sudden changes in locations of businesses could reduce their access to services and lead to social isolation and negative mental health outcomes.</p>	<ul style="list-style-type: none"> • Older people • Disabled people • People from ethnic minority backgrounds 	Risk	No feedback received on this topic. There will be further engagement with businesses as the detailed design moves forward.

Effects on community following renewal process

<p>Tackling crime and disorder: Levels of crime have in part been attributed to the urban environment. It has been argued that the opportunity for some forms of crime can be reduced through thought-out approaches to planning and design of neighbourhoods and towns. Reducing potential for crime can affect those more likely to fear crime or be a victim or witness of crime.</p>	<ul style="list-style-type: none"> • Young people • Disabled people • People from ethnic minority backgrounds • LGBT people • Men • Older people • Women • Children 	Opportunity	<p>Tustin Estate residents mentioned the need to improve security, safety on the Estate and address ASB.</p> <p>In a residents feedback event held in December 2021, residents stressed the need for safety to be built into the design of the new estate, eg. with better lighting, overlooking of public space, and security.</p>
<p>Improved access, mobility and navigation: Renewal processes open up opportunities to create spaces and places that can be accessed and effectively used by all, regardless of age, size, ability or disability, using principles of inclusive design. There are a number of equality groups who can experience difficulties with access, mobility and navigation who could benefit from improvements in this area. Children who cannot move about safely and independently on foot and bicycle often become less physically active, reducing opportunities for children to develop certain cognitive, motor and physical skills – as well as contributing towards childhood obesity risks.</p>	<ul style="list-style-type: none"> • Children • Older people • Disabled people 	Opportunity	<p>Residents at a public event raised the importance of ensuring all parking would be replaced following redevelopment.</p> <p>In a residents feedback event held in December 2021, residents again stressed the need to continue to be able to park on the estate; and ensure that parking is available throughout construction.</p>
<p>Improved public realm and green space: Renewal offers an opportunity to improve the public realm. The ability to access and use the public realm is vitally important to ensuring people feel that they are active members of their society. This includes basic activities such as using local shops or meeting up with people in a shared space outside close to home. In addition, the opening up of green space has been shown to impact positively on both physical and mental health. Inner-city green space can promote social cohesion and instil a sense of community. Social contact is especially important for the health and wellbeing of older people. Green space can also have a positive role in a child's cognitive development, their wellbeing, and is linked to lower BMIs. Access to green space has also been shown to have positive health benefits for disabled people, and people with autism or learning difficulties in particular.</p>	<ul style="list-style-type: none"> • Older people • Children • People from ethnic minority backgrounds • Disabled people 	Opportunity	<p>A poll of residents in attendance at an online engagement event undertaken in November 2020, a majority of attendees identified green space provision as an important area they would consider whilst making their decision about the future of the Estate.</p> <p>In a residents feedback event held in December 2021, residents noted that the landscaping around Manor Grove should also be improved. Residents liked the plans for rain gardens, sensory gardens and outdoor seating in the green space. Residents also</p>

Effects on residents during the renewal process

	Affected groups	Risk or opportunity	Key resident feedback
<p>Provision of community resources and improved social cohesion: Community resources provide important places of social connection and promote wellbeing for many groups. For example, community hubs can provide an accessible centre point for local activities, services and facilities. They allow for a cross section of the community to be brought together in a safe place, allowing for better social cohesion and helping to address social isolation.</p> <p>An opportunity to socialise can have a positive effect on the loneliness of older people and disabled people, which may in turn provide positive health benefits. Social contact and out-of-classroom learning can also improve the wellbeing of children</p>	<ul style="list-style-type: none"> • Children • Older people • Disabled people • People from ethnic minority backgrounds • Pregnant women • LGBT people 	Opportunity	<p>liked that there would be different types of play spaces located around the estate.</p> <p>Tustin Estate residents noted they would like to see improved amenities for children and young people.</p>
<p>New employment opportunities: Renewal can act as a means of promoting economic growth and supporting job creation. For example, property development can contribute to urban economic regeneration by enabling local stores to grow and expand, and through attracting investment to the area and revitalising neighbourhoods. It can also facilitate improved connectivity between communities and places of employment and education. Improved opportunities to access employment and education can serve to help address issues of inequality and improve social mobility.</p>	<ul style="list-style-type: none"> • Older people • Disabled people • People from ethnic minority backgrounds • Women • Young people 	Opportunity	Residents at a public event asked about employment opportunities that would come from the redevelopment process.
<p>Improved housing provision: Renewal can lead to improvements in housing provision within the regeneration area therefore improving appropriateness, accessibility and affordability, as well as its quality and efficiency in energy consumption.</p> <p>Warm and insulated homes can help prevent against the health and wellbeing impacts of living in a cold home. Children living in cold homes are more than twice as likely to suffer from a variety of respiratory problems than children living in warm homes. Cold housing can negatively affect children's educational attainment, emotional wellbeing and resilience. Effects of cold housing are also evident among older people in terms of higher mortality risk, physical health and mental health.</p>	<ul style="list-style-type: none"> • Children • Older people • Disabled people • People from ethnic minority backgrounds 	Opportunity	<p>Tustin Estate residents felt that the rebuild option for the Estate was beneficial because they would provide larger homes with newer amenities</p> <p>Residents wanted to hear about how the different options will address the current accessibility issues of the existing homes, as existing homes do not have appropriate space for those with mobility difficulties.</p> <p>A poll of residents in attendance at an online engagement event undertaken in November 2020, some attendees identified that they believed the Yes option would lead to better living conditions on the Estate.</p> <p>In an Estate walkaround in August 2021, residents fed back that more storage provision in the new homes would be beneficial.</p> <p>In a residents feedback event held in December 2021, residents stressed the importance of providing enough daylight in the new homes, with windows on both sides. Residents wanted confirmation regarding the wheelchair accessibility of homes.</p>

4 Area profile and proportionality

This chapter is split into three sections: providing an overview of the socio-demographic profile of the Estate (the study area outlined in Chapter 2), and an overview of community resources businesses on the Estate.

2.2 Overview of the socio-demographic profile of the area

The area profile summary below provides a demographic characterisation of the area in which Tustin Estate falls. The baseline compares the socio-demographic profile of the Estate with the London Borough of Southwark, the Greater London region, and England. The summary includes analysis of protected characteristic groups under the Equality Act 2010 and the current socio-economic context of the area. In comparing these regions, where the Estate deviates by more than 3%, the difference is considered to be significant and is reported as such.

The data used in the baseline is the most current publicly available data from the Office of National Statistics. Where there are higher proportions of certain groups on the Estate, this is written in **bold text**.

A more detailed breakdown of the baseline can be found in Appendix A.

Table 4.1: Socio-demographic baseline

Protected Characteristic	Estate comparison with Southwark, Greater London and England ⁴
Age	<ul style="list-style-type: none"> Population of children (under 16) is consistent with other areas.⁵ Population of young people (16-24) is consistent with other areas. Population of working age people (16-64) living on the Estate (71%) is broadly in line with that of Southwark (73%) but higher than Greater London and England (67% and 62% respectively). Population of older people (65+) is consistent with other areas.
Disability⁶:	<ul style="list-style-type: none"> The population of disabled people living on the Estate is higher (16%) than Southwark or Greater London (14%), but in line with England (18%).
Gender reassignment	<ul style="list-style-type: none"> No information is publicly available for the Estate
Marriage and civil partnerships	<ul style="list-style-type: none"> Population of those who are married or in a civil partnership is lower than or consistent with other areas.
Pregnancy and maternity	<ul style="list-style-type: none"> The general fertility rate (live births per 1000 women aged 16-44) and total fertility rate (avg. number of children born per woman) is lower than other areas; number of live births as a proportion of the total population is consistent with other areas.
Race	<ul style="list-style-type: none"> 76% of people who live on the Estate are from an ethnic minority background. This is significantly higher than the proportion of people from an ethnic minority background who live in Southwark (60%), Greater London (55%) and England (20%). <ul style="list-style-type: none"> The largest ethnic minority group on the Estate are those from a Black African background (28%). This is significantly higher than the proportion in Southwark (16%), Greater London (7%), and England (2%). All other ethnic minority groups on the Estate are consistent with other areas There are lower proportions of White British people when compared to other areas.
Religion	<ul style="list-style-type: none"> 59% of people who live on the Estate identify as Christian. This is higher than the Christian population in Southwark (53%) and Greater London (59%). Populations of people from other religious and faith groups are consistent with other areas.
Sex	<ul style="list-style-type: none"> The population of men and women is consistent with other areas.
Sexual orientation	<ul style="list-style-type: none"> No information is publicly available for the Estate

Source: Office for National Statistics data

⁴ To determine the population within the Estate code point data was used. Code point data is a point representing a postcode area (there are multiple within the Estate boundary). Each code point is assigned with Lower Super Output Area (LSOA) data from the LSOA that the point falls in. An LSOA is the smallest geographical area (an average of 1,500 residents and 650 households) for which most population data is published (beyond Census data).

⁵ When comparing populations between areas, where the Estate differs by more than 3%, the difference is considered to be significant and is reported this way – e.g. <3% is consistent with other areas and >3% is higher or lower than other areas.

⁶ Defined here as 'People whose day to day activities are limited in any way as a result of being disabled or because of a long-term health condition'

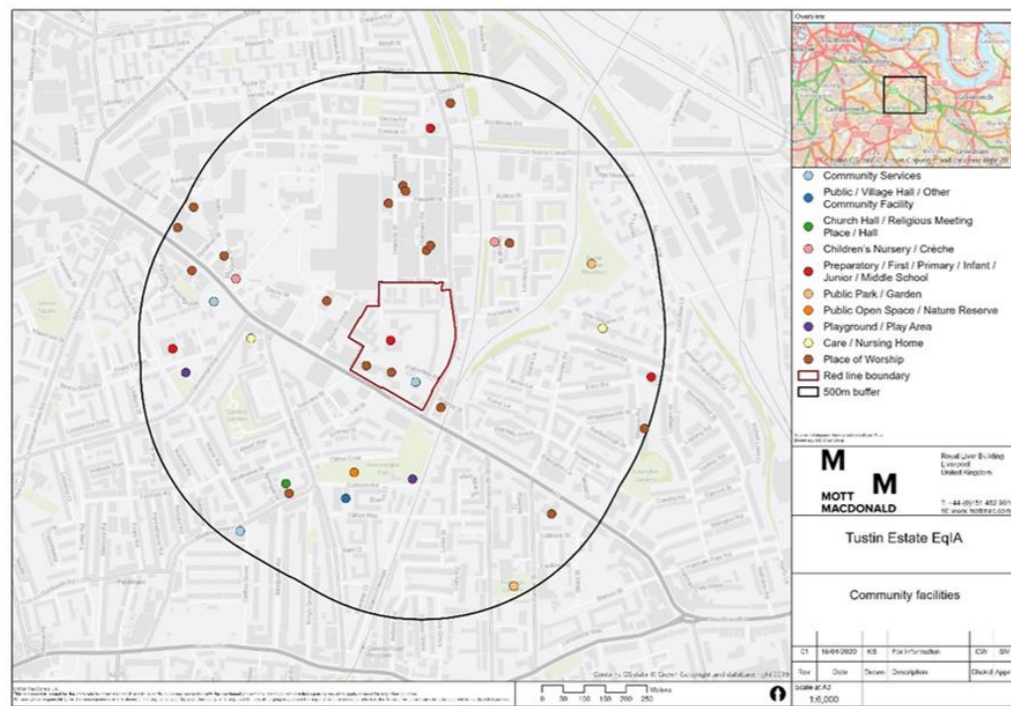
2.3 Overview of community resources within the Estate

There are a number of community facilities and resources located both within, and in close proximity to, Tustin Estate which are likely to be accessed by protected characteristic groups, or if they were to be lost, would potentially adversely affect protected characteristic groups. Within the Estate boundary, there are two Christian faith groups which are likely to be affected by the project. Children are likely to be impacted by relocation of the Pilgrims Way Primary School and day care / learning centre. There is also the Tustin Estate Community Centre, which is available for use by all residents of the current Estate. Table 4.2 below lists the community facilities located within the Estate boundary.

Table 4.2: List of community facilities within the Estate

Name	Category	Address
Day care / learning centre	Education	803 Old Kent Road
Pilgrims Way Primary School and Nursery	Infant School	Manor Grove
Tustin Community Centre	Community Services	Windermere Point
Divine Prophetic Interdenominational Ministries	Faith group	801 Old Kent Road
Redeemed Assemblies	Faith group	821 Old Kent Road

Map 4.1: Community facilities within and surrounding the Estate



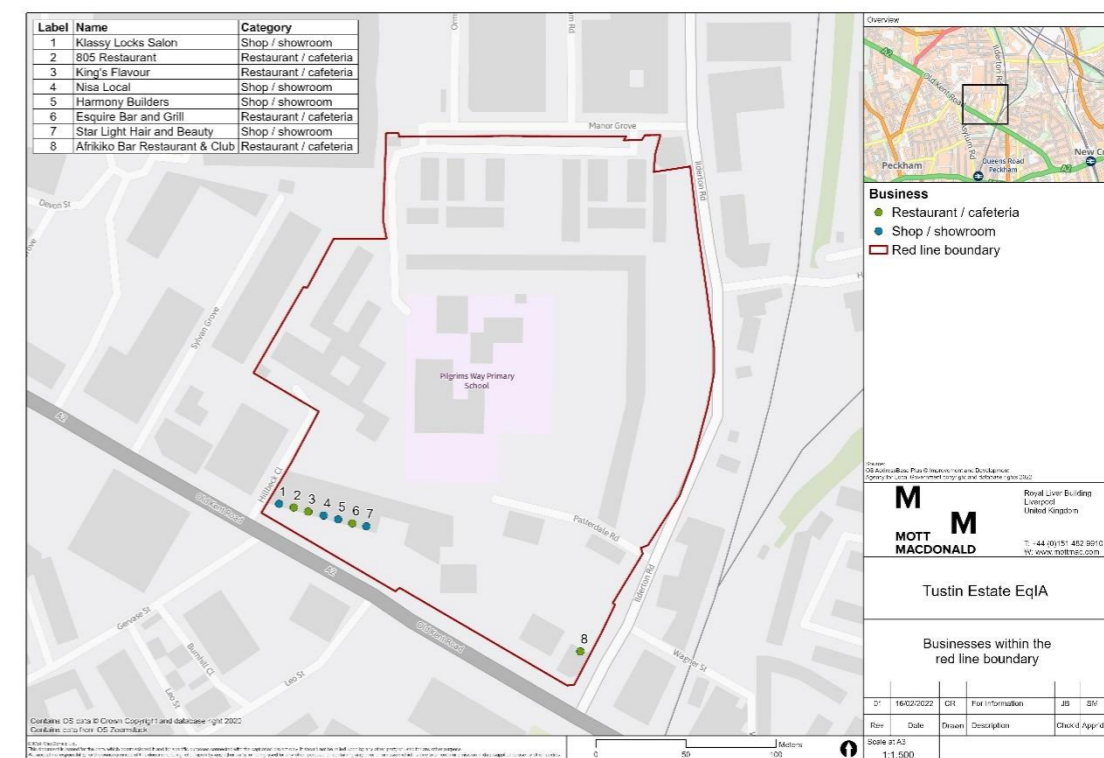
Source: OS AddressBase

2.4 Overview of businesses within the Estate

There are a number of commercial units located on the Estate facing Old Kent Road in Bowness House. The businesses include two restaurants, a takeaway, a convenience store, an accountancy and a hair and beauty salon. These may be affected by any demolition and rebuild option on the Estate, which could have equality impacts on owners and employees, and potentially local residents.

Map 4.2 maps and labels the businesses located within the Estate boundary.

Map 4.2: Businesses within the Estate



Source: OS AddressBase

5 Equality and health impacts

This chapter sets out the potential impacts of the renewal option on protected characteristic groups and outlines existing Southwark Council mitigation measures. The impacts split into three sections: Table 5.1 outlines the impact on residents and community resources during renewal, Table 5.2 outlines the impact on businesses during renewal, and Table 5.3 outlines the impact on communities after the renewal process is complete.

5.1 Impact on residents and community resources during renewal

The following table describes the potential impacts of the renewal option on protected characteristic groups, with a focus on impacts for residents and local community resources during the renewal process. These impacts have been identified through a review of published literature and through engagement with residents. Potential disproportionate effects on particular groups based on the demographic analysis of the Estate are also identified. Finally, existing measures Southwark Council has in place to mitigate or enhance impacts are set out.

Table 5.1: Impact on residents and community resources during renewal

Potential equality and health risks	Affected groups ⁷	Impact	Existing Southwark Council mitigations or enhancements
<p>Loss of social cohesion and access to community resources</p> <p>The renewal process can involve temporary or permanent resettlement of residents and demolition of housing and community resources. This could lead to the risk of loss of social infrastructure and temporary or permanent access to this amenity provision. In particular, it can increase residents' distances from facilities or places of social connection located on or in close proximity to their neighbourhood. For example, relocation accompanied by a school move has the potential to be particularly stressful and disruptive to children. In addition, older people can experience feelings of isolation from relocation if long-standing community links are broken and older people are already more likely to experience feelings of isolation compared to other groups within society.</p>	<ul style="list-style-type: none"> Children Older people Disabled people Pregnancy and maternity Ethnic minority groups Minority faith groups 	<p>Neutral</p> <ul style="list-style-type: none"> No change in social cohesion as residents able to remain on Estate during renewal <p>Risks</p> <ul style="list-style-type: none"> Temporary loss of play area. Reduced access to community facilities and social infrastructure during construction due to temporary loss of resources (e.g. churches). 	<ul style="list-style-type: none"> A community led gardening project was developed prior to the renewal process and will be continued throughout, promoting social cohesion and minimising social isolation, which has been exacerbated by COVID 19 restrictions. Where demolition is taking place, residents have the option to remain on the Estate during construction and continue to access their social networks and community resources, such as the TRA hall (subject to COVID-19 restrictions). There are a series of housing solutions to enable residents to remain on Estate if a temporary move is needed. Pilgrim's Way school will remain open during the renewal process, so there will be no requirement for pupils to change schools while the new school is being built. A phasing plan has been developed to limit the number of temporary moves to a maximum of two, with residents only making one move in most circumstances. Public realm works to be staggered to ensure there is always access to green and recreational space. Temporary amenity space will be provided throughout the redevelopment process. Dedicated resident support continues to be available online and in person where needed, and has also been available throughout the COVID-19 pandemic.
<p>Difficulty accessing finance (e.g. costs associated with moving home)</p> <p>Although the renewal process can often increase the value of properties it can also reduce the affordability of housing in the area and contribute to financial exclusion. This means that some groups of people within society are not able to purchase a renewed home as they are unable to get the required mortgage or loan. In addition, where renewal requires residents to relocate, it can lead to an increase in their financial outgoings due to costs associated with moving and securing new housing. Relocation costs could include removal services, the need to adapt a new home or buy new furniture.</p>	<ul style="list-style-type: none"> Young people Older people Disabled people Ethnic minority groups Women 	<p>Opportunity</p> <ul style="list-style-type: none"> Possible lower service charges for resident leaseholders after renewal Homes connected to the new district heating system and built to new building standards may have lower energy bills <p>Risks</p> <ul style="list-style-type: none"> Costs associated with resettlement such as securing new accommodation and moving home. Financial implications associated with new build option for freeholders. 	<ul style="list-style-type: none"> Homeowners will be offered the market value of their home. Should a residents home require demolition, a Home Loss Payment (sum in recognition of home loss) and a Disturbance Payment would be made to Council tenants and homeowners. The Home Loss Payment would be a one-time payment, whilst the Disturbance Payment may be made more than once where necessary to facilitate multiple moves. This includes reimbursement of funds for removals, disconnection and reconnection of cooker/washing machine, redirection of mail, BT Telephone Installation, cable TV/TV installation and reasonable adjustments to carpets and curtains. A number of options are available to leaseholders on the site, including shared ownership, an equity loan, and shared equity options. For leaseholders who cannot meet the equity requirements for these, council tenancies will be available, subject to financial appraisal. Leaseholders and freeholders will have access to an independent chartered surveyor to carry out a market evaluation of the properties and discuss this with the council surveyors.

⁷ Groups that have been highlighted in bold, blue text are also disproportionately represented in the study area.

- New build Council rents in line with new homes across Southwark.
- Council tax may increase for those in new homes.
- Service charges may increase for council tenants
- Southwark Council commitment to work with leaseholders and freeholders to ensure that no household is worse off as a result of renewal.
- Additional costs for freeholders resulting from the works to the wider estate as well as costs related to services and utilities will be set out in detail as the earliest opportunity.
- Council tenants will receive information regarding the indicative rent and council tax of each property size before the selection process.
- Resident leaseholders who wish to remain on the Estate will be able to choose their home once planning permission has been obtained, and will be provided with information on the cost and council tax band of the properties.
- Support will be provided to help residents deal with utility companies and any change in benefit claims

Appropriate, accessible and affordable housing

Where renewal schemes require the resettlement of many residents, issues can arise regarding sourcing suitable housing that meets the needs of families with children, people requiring adaptable and accessible housing, people seeking affordable housing and large intergenerational ethnic minority households.

- Children
- Older people
- **Disabled people**
- **Ethnic minority groups**

Risks

- Challenge finding appropriate temporary housing for those with specific housing needs (e.g. disabled people, families with children)

- Residents will be supported to access homes that meet their needs and preferences.
- All council residents whose homes will be demolished will be offered a like- for- like replacement home on the new Estate
- 10% of new build housing to be wheelchair accessible, in line with national government requirements.
- All tenanted homes will be adapted for residents' needs as required.
- Those with special housing needs to be prioritised through rehousing process.
- All new and refurbished social rented homes will be owned and managed by Southwark Council. They will all have Council rent levels.
- A mix of housing sizes and typologies will be available in the redevelopment, to provide for different housing needs.
- All new homes will have access to a balcony, patio, or roof terrace.
- A variety of tenures will be available to allow homeowners to stay on the estate including shared equity and rehousing as a Council tenant.
- Tenants who are overcrowded in the low rise blocks will be offered new accommodation to meet their housing needs.
- New housing block built specifically for older people who are not living with children.
- All new and refurbished social rented homes will be owned and managed by Southwark Council. They will all have Council rent levels.
- 13 new 'Hidden Homes' built within the high rise towers to accommodate low rise Tustin residents.

Health effects

Health effects may arise as a result of stress due to relocation, the environmental effects of demolition and construction processes and/or as a result from social isolation due to housing relocation.

- Children
- Older people
- **Disabled people**
- Pregnancy and maternity

Risks

- Noise exposure from demolition and construction.
- Poorer air quality from demolition and construction.
- Health effects associated with rehousing (stress, isolation).
- Impacts of noise and air pollution on school pupils and their learning during construction.

- Potential health impacts related to stress due to relocation would be mitigated through rehousing support outlined above. There will also be a dedicated team in place to help with questions or information throughout the process.
- Housing solutions to enable residents to remain on Estate if they need to move temporarily, where possible.
- Public realm works to be staggered to ensure there is always access to green and recreational space.
- Pilgrims Way Primary School will retain access to their play space until completion of the new school playground.
- Temporary amenity space will be provided throughout the redevelopment process.
- New communal outdoor space to mitigate health impacts of social isolation, which may have been exacerbated as a result of the COVID- 19 pandemic.
- Environmental effects to be mitigated through considerate construction practices and environmental management planning.

Safety and security

In the lead up to renewal, and during the decanting and demolition of properties in the area, properties will be vacated. If these are not maintained properly there is a risk that they could fall into disrepair. This could attract unwanted activity including anti-social behaviour and

- Children
- Young people
- Older people

Risks

- Potential for anti-social behaviour and vandalism during decanting and demolition period.

- Properties to be secured through appropriate measures, including phasing of redevelopment so the Estate is not left vacant.
- 'One move approach' to relocation of residents will ensure the Estate remains occupied during the construction period.

<p>crime, which can affect those who are more likely to be a victim or witness of crime or those who are more fearful of crime.</p>	<ul style="list-style-type: none"> • Disabled people • Ethnic minority groups • LGBT • Men • Women
<p>Accessibility and mobility in the surrounding area Evidence suggests that during construction the accessibility and mobility of the local area can be affected. In particular, construction can cause difficulties in relation to increased traffic on local roads, reducing parking (as construction vehicles may use existing parking facilities), the construction activities blocking access to homes, shops, bus stops and pavements and safe routes, as well as effects on wayfinding.</p>	<ul style="list-style-type: none"> • Older people Risks • Disabled people <ul style="list-style-type: none"> • The presence of tradesmen’s vehicles and construction vehicles during refurbishment may temporarily reduce access and parking. • The presence of more vehicles in the area may increase local traffic. • Potential for construction activities might block some access routes and could impact on wayfinding. <ul style="list-style-type: none"> • Resident car owners who currently have a parking permit will be re- provided with a parking permit for the redeveloped estate. Blue badge parking permits will also be re-provided. • The existing five disabled parking bays will be re-provided in the new Estate, with an additional provision of 16 (reflecting 3% of the total new homes on the Estate) • Accessibility of Estate to be considered through construction planning (e.g. ensuring hoarding does not sever the Estate).
<p>Information and communication Complex material and information on the regeneration may present a challenge to those who have different information and communication needs.</p>	<ul style="list-style-type: none"> • Older people Risks • Disabled people • Ethnic minority groups <ul style="list-style-type: none"> • Residents will need to spend time understanding the option available to them in order to make an informed decision. <ul style="list-style-type: none"> • Southwark Council will fund independent resident advice which will include training and support in design and construction stages to ensure that residents can meaningfully engage in decision making. • Series of face to face and online meetings held with residents to discuss issues and concerns of residents. • A dedicated Tustin team of housing officers will be established to liaise with residents throughout the development. • Information is published online as it is made available for all to access. • Language interpretation and face to face engagement available. • Additional support will be provided where required due to a language barrier or literacy needs. • Support will be provided to help residents deal with utility companies and any change in benefit claims.

5.2 Impact on businesses during renewal

The following table describes the potential impacts of the renewal option on protected characteristic groups, with a focus on the businesses on Tustin Estate during the renewal process. These impacts have been identified through a review of published literature and through engagement with residents. Potential disproportionate effects on particular groups based on the demographic analysis of the Estate are also identified. Finally, existing measures Southwark Council has in place to mitigate or enhance impacts are set out.

Table 5.2: Impact on businesses during renewal

Potential equality and health risks	Affected groups ⁸	Impact	Existing Southwark Council Mitigations or enhancements
<p>Potential redundancy of employees associated with business loss or relocation</p> <p>The renewal process may result in the closure and relocation of businesses. These changes may result in business owners becoming unemployed, redundancies or in current staff being unable to access ongoing employment at a different location. Older people, disabled people and minority ethnic people may particularly be at risk if faced with redundancy and/or extended periods of unemployment due to typically facing additional barriers in securing interviews and offers of new employment. In addition, older people are more likely to be self-employed, meaning that they could face further barriers in finding new roles in the labour market. Closure or relocation may affect the customer base and net revenue of businesses, resulting in restructuring and redundancy of staff as a result.</p>	<ul style="list-style-type: none"> Older people Disabled people Ethnic minority groups Young people Women 	<p>Risk</p> <ul style="list-style-type: none"> Relocation options for businesses on an interim or permanent basis may result in current staff not being able to access work. 	<ul style="list-style-type: none"> Relocation options to be discussed with businesses on a case by case basis. Options will include a permanent move to a property nearby, or a temporary relocation nearby with a permanent return to the Estate after Phase 4 in autumn 2029. Signposting to employment through Southwark Works. Dedicated business support available. Demolition of the commercial plots to take place in Phase 4 to maintain the commercial use by businesses for as long as possible.
<p>Potential loss of businesses</p> <p>The renewal process may result in the closure and relocation of businesses. Research evidence shows that minority ethnic people are more likely to be self-employed and twice as likely to be in precarious work conditions than their White British counterparts in the UK. In addition, older people are also more likely to be self-employed, representing one in five self-employed population in the UK, placing them at potentially greater risk where businesses are affected.</p>	<ul style="list-style-type: none"> Older people Ethnic minority groups 	<p>Risk</p> <ul style="list-style-type: none"> Renewal process may result in the permanent closure of businesses due to impacts to trading and customer base. 	<ul style="list-style-type: none"> Relocation options to be discussed with businesses on a case by case basis- options will include a permanent move to a property nearby, or a temporary relocation nearby with a permanent return to the Estate. Demolition of the commercial plots to take place in Phase 4 to maintain the commercial use by businesses for as long as possible. Dedicated business support available. Relocation fund to be made available where appropriate.
<p>Access to commercial finance</p> <p>For businesses, redevelopment and renewal may result in effects on trade, relocation or closure. This may result in a need to access finance, which can be more difficult for particular groups.</p>	<ul style="list-style-type: none"> Ethnic minority groups 	<p>Risk</p> <ul style="list-style-type: none"> Potential costs from disruption to business trading. Cost of relocation and securing new premises, either on a temporary or permanent basis. 	<ul style="list-style-type: none"> Relocation options to be discussed with businesses on a case-by-case basis. Options will include a permanent move to a property nearby, or a temporary relocation nearby with a permanent return to the Estate. Dedicated business support available. Relocation fund to be made available where appropriate. Signposting to employment through Southwark Works. Dedicated business support available.
<p>Impact of redundancy on health and well-being</p> <p>Involuntary job loss due to redevelopment and renewal can have disproportionate health and well-being effects for families with children and older people.</p>	<ul style="list-style-type: none"> Children Older people 	<p>Risk</p> <ul style="list-style-type: none"> Relocation may cause businesses to close and staff to be made redundant. 	<ul style="list-style-type: none"> Relocation options to be discussed with businesses on a case-by-case basis. Options will include a permanent move to a property nearby, or a temporary relocation nearby with a permanent return to the Estate. Demolition of the commercial plots to take place in Phase 4 to maintain the commercial use by businesses for as long as possible. Signposting to employment through Southwark Works. Dedicated business support available.
<p>Impacts on local customers</p> <p>Potential closure or relocation of businesses could reduce the availability of services in the local area. Research evidence suggests that certain groups, such as older people, disabled people and minority ethnic groups may be more reliant on existing networks and links to shops and commercial services. As a result, sudden changes in locations of businesses could reduce their access to services and lead to social isolation and negative mental health outcomes.</p>	<ul style="list-style-type: none"> Older people Disabled people Ethnic minority groups 	<p>Risk</p> <ul style="list-style-type: none"> Relocation or closure of businesses may impact upon local customers who are reliant on them for goods, services, or social interaction. 	<ul style="list-style-type: none"> Relocation options to be discussed with businesses on a case by case basis- options will include a permanent move to a property nearby, or a temporary relocation nearby with a permanent return to the Estate. Once businesses enter into these discussions, they will be able to proactively communicate the plan with their customer base. Demolition of the commercial plots to take place in Phase 4 to maintain the commercial use by businesses for as long as possible.

⁸ Estate demographic information does not apply to businesses therefore no Groups that have been highlighted in bold, blue text are also disproportionately represented in the study area

5.3 Impact on community following renewal process

The following table describes the potential impacts of the renewal option on protected characteristic groups, with a focus on the Estate and wider community following the renewal process. These impacts have been identified through a review of published literature and through engagement with residents. Potential disproportionate effects on particular groups based on the demographic analysis of the Estate are also identified. Finally, existing measures Southwark Council has in place to mitigate or enhance impacts are set out.

Table 5.3: Impact on community following renewal process

Potential equality and health opportunities	Affected groups ⁹	Impact of Redevelopment
<p>Tackling crime and disorder</p> <p>Levels of crime can be in part been attributed to the urban environment. It has been argued that the opportunity for some forms of crime can be reduced through well thought-out approaches to planning, and the design of neighbourhoods and towns. Reducing potential for crime can affect those more likely to fear crime or be a victim or witness of crime.</p>	<ul style="list-style-type: none"> ● Children ● Young people ● Older people ● Disabled people <ul style="list-style-type: none"> ● Ethnic minority groups ● LGBT ● Men ● Women 	<p>Opportunity</p> <ul style="list-style-type: none"> ● Better external lighting for safety and visibility. ● Clearer and more secure routes for people passing through the estate ● Estate to promote safety and security through new design. ● Paths and green spaces overlooked by houses to create feeling of safety. ● Designed to Secured by Design Standards.
<p>Improved access, mobility and navigation</p> <p>Renewal processes open up opportunities to create spaces and places that can be accessed and effectively used by all, regardless of age or disability, using principles of inclusive design. There are a number of equality groups who can experience difficulties with access, mobility and navigation who could benefit from improvements in this area.</p>	<ul style="list-style-type: none"> ● Children ● Older people ● Disabled people 	<p>Opportunity</p> <ul style="list-style-type: none"> ● Better external lighting for safety and visibility. ● Clearer and more secure routes for people passing through the estate. ● New estate priorities pedestrians, with clear separate pedestrian routes and new access to existing routes ● Improved signage for wayfinding ● Secure and controlled parking. ● New benches.
<p>Improved public realm and green space</p> <p>Renewal offers an opportunity to improve the public realm. The ability to access and use the public realm is vitally important to ensuring people feel that they are active members of their community. This includes basic activities such as using local shops or meeting up with people in a shared space outside close to home. In addition, the opening up of green space has been shown to impact positively on both physical and mental health.</p>	<ul style="list-style-type: none"> ● Children ● Older people ● Disabled people <ul style="list-style-type: none"> ● Ethnic minority groups 	<p>Opportunity</p> <ul style="list-style-type: none"> ● Enhanced and enlarged green space at heart of estate, promoting health and wellbeing for different equality groups. ● New network of green spaces across the development ● New active space within 'Tustin Common', with play areas and seating ● Enhanced bicycle storage provision to facilitate active travel, promoting healthier lifestyles. ● Electric charging points for vehicles. ● New communal outdoor space in blocks.

⁹ Groups that have been highlighted in bold, blue text are also disproportionately represented in the study area

Provision of community resources and improved social cohesion

Community resources provide important places of social connection and promote wellbeing for many groups. For example, community hubs can provide an accessible centre point for local activities, services and facilities. They allow for a cross section of the community to be brought together in a safe place, allowing for better social cohesion and helping to address social isolation.

- Children
- Older people
- **Disabled people**
 - **Ethnic minority groups**
- Pregnancy and maternity
- LGBT

Opportunity

- A mix of shared communal spaces in new blocks.
- Increased access to community resources such as the community garden.
- Possibility of tenants managing community spaces.
- New school building at the heart of the estate with space for outdoor learning to improve health and wellbeing
- New church premises on Estate.
- New outdoor communal space in blocks, and new park area, to improve social cohesion and reduce isolation after the COVID- 19 pandemic.
- Separate and dedicated amenity space for residents of the Over 55 homes.

Risk

- New community moving on to Estate and effects on social cohesion¹⁰

New employment opportunities

Renewal can act as a means of promoting economic growth and supporting job creation. For example, property development can contribute to urban economic regeneration by enabling local stores to grow and expand, and through attracting investment to the area and revitalising neighbourhoods. It can also facilitate improved connectivity between communities and places of employment and education. Improved opportunities to access employment and education can serve to help address issues of inequality and improve social mobility.

- Young people
- Older people
- **Disabled people**
 - **Ethnic minority groups**
- Women

Opportunity

- Improved commercial spaces for existing businesses.
- Construction employment onsite (varying by the amount of construction required for the job).
- Increased commercial space on site for new businesses

Improved housing provision

Renewal can lead to improvements in housing provision within the regeneration area, thereby improving suitability, accessibility and affordability, as well as its quality and efficiency in energy consumption.

- Children
- Older people
- **Disabled people**
 - **Ethnic minority groups**

Opportunity

- All new homes built to new building, space and accessibility standards.
- Potential health effects of overcrowding are addressed.
- Private external space for every home (garden, patio or balcony) to capture health benefits of access to outdoor space.
- New homes designed to maximise natural daylight and views
- Energy efficiency improvements to address potential health effects of cold housing.
- Mixture of shared and private external space in blocks .
- Housing to suit different needs, including family homes
- Large uplift in new homes.
- Dedicated housing for the over 55s with separate amenity space
- All new homes will meet the Wheelchair User Dwelling Standards, and 10% will meet the Adaptable Dwellings Standard.
- All tenanted homes will be adapted for residents needs as required.

Neutral

- Where relevant, new tenancy agreements will be drawn up.
- Where relevant, leaseholder deeds will change in line with changing ownership arrangements.
- No change to status of freeholders on estate.

¹⁰ Risk to be mitigated through phasing strategy and a dedicated support team to help integrate residents into new community.

6 Overall equality and health effects

This section identifies the potential impacts that could arise for people with protected characteristics, as a result of the redevelopment of the Estate. It shows the potential impact of risks and opportunities without mitigation, following mitigation and then highlights the likely overall equality effect if recommendations are adhered to.

6.1 Overview: assessing equality risks and opportunities

The scale below has been used to identify the extent of both risks and opportunities. Where there is more than one impact, the rating summarises the overall impact. Please note that the rating following mitigation captures where there may be possible further mitigation measures that could be put in place by the Council to further reduce the effect, or the impact has been reduced for identified protected characteristic groups to a level that is no worse than that experienced by the rest of the population.

Major risk	XXX
Moderate risk	XX
Minor risk	X
Neutral	0
Minor opportunity	✓
Moderate opportunity	✓✓
Major opportunity	✓✓✓

6.2 Risks and opportunities during renewal

Tables 6.1 and 6.2 identify the potential impacts on residents, community resources and businesses located within the low-rise blocks on the Estate during the renewal process, for the period between a successful ballot up to completed delivery. It shows the potential impact of risks and opportunities without mitigation, following mitigation measures that have been put in place by Southwark Council and then highlights the likely overall equality effect if Southwark Council adhere to the recommendations.

Table 6.1: Impact on residents and community resources during renewal (from the ballot up to delivery)

Potential impact	Without mitigation	With mitigation	Recommendations	Overall equality and health effect
<p>Loss of social cohesion and access to community resources</p> <p>The renewal process can involve temporary or permanent resettlement of residents and demolition of housing and community resources. This could lead to the risk of loss of social infrastructure and temporary or permanent access to this amenity provision.</p>	XXX	X	<ul style="list-style-type: none"> Work proactively and constructively through a range of channels, including face to face engagement where possible with residents, keeping up-to-date records of changing needs and circumstances, particularly if residents who will be most affected by refurbishment and/or redevelopment in order to remediate feelings of social isolation. Maintain continuity in access to community resources (e.g. churches and play areas) where possible. If this is not possible, consider pop-up spaces for these uses. 	<p>There are likely to be no adverse effects on equality groups due to a loss of social cohesion.</p> <p>There may be limited effects on equality groups due to temporarily reduced access to some community resources during the renewal period under the Final Option.</p> <p>Overall, this risk is considered to be managed through a range of proportionate measures.</p>
<p>Difficulty accessing finance (e.g. costs associated with moving home)</p> <p>Although the renewal process can often increase the value of properties it can also reduce the affordability of housing in the area and contribute to financial exclusion.</p>	XX	X	<ul style="list-style-type: none"> Work proactively and constructively through a range of channels, including face to face engagement where possible, keeping up-to-date records of changing needs and circumstances— particularly those who are most affected by financial exclusion. Ensure that residents are signposted to the reallocation process (including financial advice) available online or via telephone, if necessary, to comply with COVID- 19 social distancing and self-isolation recommendations. Early estimates of changes to rent and service charges as a result of the vote should be communicated to residents as soon as possible. 	<p>There should be no significant adverse effects on the ability of equality groups to access finance, although there may be some effects linked to increases in rent, council tax, and service charges after renewal.</p> <p>Overall, this risk is considered to be managed through a range of proportionate measures.</p>
<p>Appropriate, accessible and affordable housing</p> <p>Where renewal schemes require the resettlement of many residents, issues can arise regarding sourcing suitable housing that meets the needs of families with children, people requiring adaptable and accessible housing, people seeking affordable housing and large intergenerational Ethnic Minority Background households.</p>	XXX	O	<ul style="list-style-type: none"> Work proactively and constructively through a range of channels, including face to face engagement where possible, keeping up-to date records of changing needs and circumstances – particularly those who are most affected by a change to affordable and appropriate housing. Ensure that residents are signposted to the reallocation process (including financial advice) available online or via telephone, if necessary, to comply with COVID- 19 social distancing and self-isolation recommendations. 	<p>There is likely to be no adverse effect on equality groups with relation to access to appropriate, accessible, and affordable housing during the renewal period.</p> <p>Overall, this risk is considered to be managed through a range of proportionate measures.</p>

Potential impact	Without mitigation	With mitigation	Recommendations	Overall equality and health effect
<p>Health effects</p> <p>Health effects may arise as a result of stress due to relocation, the environmental effects of demolition and construction processes, including on school pupils, and/or as a result from social isolation due to housing relocation.</p>	XX	X	<ul style="list-style-type: none"> Demolition works should be monitored closely and disruption should be minimised through the creation of a Construction Environmental Management Plan (CEMP), which would be implemented by the contractor carrying out the works, in order to address health impacts related to noise and air quality. Throughout the improvement works, identify and work with vulnerable people whose protected characteristics may make them more vulnerable to adverse health impacts. Access to communal outdoor space should be maintained during the construction period to limit impacts on health caused by social isolation. 	<p>There may be minor adverse impacts on equality groups during the renewal period due to the noise and air quality impacts of construction during the renewal period; and the potential stress associated with moving home.</p> <p>Overall, this risk is considered to be managed through a range of proportionate measures.</p>
<p>Safety and security</p> <p>In the lead up to renewal, and during the decanting and demolition of properties in the area, properties will be vacated. This could attract unwanted activity including anti-social behaviour and crime, which can affect those who are more likely to be a victim or witness of crime or those who are more fearful of crime.</p>	X	O	<ul style="list-style-type: none"> Ensure best practices for enhancing safety and preventing crime are considered throughout the planning and construction process. Ensure a process is in place for reporting and addressing incidents of Anti-Social Behaviour (ASB) within the Estate. Monitor the security of the Estate and consider additional security where concerns are flagged. However, any enhanced security measures should only be implemented as a last resort, if deemed necessary, and in conjunction with residents, as it risks adding to a sense of vulnerability, isolation, and loss of sense of community for residents. 	<p>The impact of safety and security is likely to cause no adverse impacts on equality groups on the estate due to the mitigations and recommendations.</p> <p>Overall, this risk is considered to be managed through a range of proportionate measures.</p>
<p>Accessibility and mobility in the surrounding area</p> <p>Evidence suggests that during construction the accessibility and mobility of the local area can be affected. In particular, construction can cause difficulties in relation to increased traffic on local roads, reducing parking (as construction vehicles may use existing parking facilities), the construction activities blocking access to homes, shops, bus stops and pavements and safe routes, as well as effects on wayfinding</p>	XXX	X	<ul style="list-style-type: none"> As with health impacts, good access and mobility would be maintained through the creation of a CEMP, which would set out arrangements for any necessary diversions, which should provide well-signed routes that limit extra travelling distances. The CEMP should also ensure that access is maintained through measures such as such as limiting pavement obstructions and maintaining disabled parking. The CEMP should specifically consider the needs of protected characteristic groups who may have limited mobility. 	<p>There are potential minor impacts on accessibility and mobility which may affect equality groups during the renewal period.</p> <p>Overall, this risk is considered to be managed through a range of proportionate measures.</p>

Potential impact	Without mitigation	With mitigation	Recommendations	Overall equality and health effect
<p>Information and communication</p> <p>Complex material and information on the regeneration may present a challenge to those who have different information and communication needs.</p>	X	O	<ul style="list-style-type: none"> • Accessible format consultation materials, including but not limited to, easy read, different community languages, audio, and braille, should be available if requested. • Access to information and communication should be available in a number of formats, including online, telephone and one to one meetings, to ensure that all residents have safe access to information and support services as COVID- 19 restrictions continue. • Information should be provided in a clear and easy to understand way and communicated in a timely manner. This includes keeping website information up to date. • Up-to-date information about the renewal, including what is going on before, during and after all stages of the renewal process should be shared with residents, businesses and community resources. This provides them with the means to understand the options available to them in order to make an informed decision on what they need to do and when. 	<p>There are likely to be no adverse impacts on equality groups due to information and communication during the renewal period.</p> <p>Overall, this risk is considered to be managed through a range of proportionate measures.</p>

Table 6.2: Impact on businesses during renewal (from the ballot up to delivery)

Potential impact	Without mitigation	With Mitigation	Recommendations	Overall Equality and health effect
<p>Barriers to reemployment</p> <p>The renewal process may result in the closure and relocation of businesses. These changes may result in business owners becoming unemployed, redundancies or in current staff being unable to access ongoing employment at a different location.</p>	XX	X	<ul style="list-style-type: none"> • Offer business development support to existing businesses to ensure they are equipped to maximise the opportunity that the refurbishment and/or redevelopment may bring, such as information on how they might diversify their business. 	<p>There may be some minor adverse effects on equality groups due to barriers to reemployment during renewal.</p> <p>Overall, this risk is considered to be largely managed through a range of proportionate measures, however consideration should be given to adding the detail provided in the recommendations to the existing proposed measures.</p>

Potential impact	Without mitigation	With Mitigation	Recommendations	Overall Equality and health effect
<p>Potential loss of businesses</p> <p>The renewal process may result in the closure and relocation of businesses. Research evidence shows that minority ethnic people are more likely to be self-employed and twice as likely to be in precarious work conditions than their White British counterparts in the UK. In addition, older people are also more likely to be self-employed, representing one in five self-employed population in the UK, placing them at potentially greater risk where businesses are affected.</p>	XX	X	<ul style="list-style-type: none"> Work proactively and constructively through a range of channels, including face to face engagement where possible with vulnerable business owners and employees. Offer business development support to existing businesses to ensure they are equipped to maximise the opportunity that the refurbishment and/or redevelopment may bring. This should include engagement with each of the businesses to understand each business model, trading history, relocation requirements and identification of areas for support and diversification. Ensure that a business relocation and support approach is implemented to assist businesses in the relocation process and ensure minimum business disruption and to prevent the loss of business, if the business chooses to relocate permanently. Businesses should qualify for disturbance payments in reflection of the potential impact of the redevelopment on their business. 	<p>There may be some minor adverse effects on equality groups due to potential loss of business.</p> <p>Overall, this risk is considered to be largely managed through a range of proportionate measures, however consideration should be given to adding the detail provided in the recommendations to the existing proposed measures.</p>
<p>Access to commercial finance</p> <p>For businesses, redevelopment and renewal may result in effects on trade, relocation or closure. This may result in a need to access finance, which can be more difficult for particular groups.</p>	XX	X	<ul style="list-style-type: none"> Ensure businesses are fully informed of the timescales that would affect them as soon as possible, including when they if and would need to vacate the premises and the period of time they would be inactive for before being able to reopen on the refurbished or redeveloped Estate. Businesses should qualify for disturbance payments in reflection of the potential impact of the redevelopment on their business. 	<p>There may be some minor adverse effects on equality groups due to difficulty accessing commercial finance during renewal.</p> <p>Overall, this risk is considered to be largely managed through a range of proportionate measures, however consideration should be given to adding the detail provided in the recommendations to the existing proposed measures.</p>
<p>Impact of redundancy on health and well-being</p> <p>Involuntary job loss due to redevelopment and renewal can have disproportionate health and well-being effects for families with children and older people.</p>	XX	X	<ul style="list-style-type: none"> Work proactively and constructively through a range of channels, including face to face engagement where possible with vulnerable business owners and employees. 	<p>There may be some minor adverse effects on equality groups due to the impact of redundancy on health and wellbeing.</p> <p>Overall, this risk is considered to be largely managed through a range of proportionate measures, however consideration should be given to adding the detail provided in the recommendations to the existing proposed measures.</p>
<p>Impacts on local customers</p> <p>Potential closure or relocation of businesses could reduce the availability of services in the local area.</p>	XX	X	<ul style="list-style-type: none"> Work proactively and constructively through a range of channels, including face to face engagement where possible with business owners and employees. 	<p>There may be some minor adverse effects on equality groups due to impacts on local customers.</p>

Potential impact	Without mitigation	With Mitigation	Recommendations	Overall Equality and health effect
				Overall, this risk is considered to be largely managed through a range of proportionate measures, however consideration should be given to adding the detail provided in the recommendations to the existing proposed measures.

6.3 Risks and opportunities following renewal

Table 6.3 below identifies the potential impacts on the future Tustin Estate community (residents, community resources and businesses) following the renewal process, following completed delivery. It shows the potential impact of risks and opportunities without mitigation, following mitigation measures that have been put in place by Southwark Council and then highlights the likely overall equality effect if Southwark Council adhere to the recommendations.

Table 6.3: Impact on the Tustin Estate community following the renewal process

Potential impact	Without mitigation	With Mitigation	Recommendations	Overall Equality and health effect
<p>Tackling crime and disorder</p> <p>Levels of crime can be in part been attributed to the urban environment. It has been argued that the opportunity for some forms of crime can be reduced through well thought-out approaches to planning, and the design of neighbourhoods and towns. Reducing potential for crime can affect those more likely to fear crime or be a victim or witness of crime.</p>	✓✓✓	✓✓✓	<ul style="list-style-type: none"> Follow Crime Prevention Through Environmental Design (CPTED) and Secure by Design principles in designing the built environment and public realm.¹¹ 	<p>There is likely to be a major positive impact on equality groups due to the impact on tackling crime and disorder after delivery of the redevelopment programme.</p> <p>Overall, this risk is considered to be managed through a range of proportionate measures.</p>
<p>Improved access, mobility and navigation</p> <p>Renewal processes open up opportunities to create spaces and places that can be accessed and effectively used by all, regardless of age or disability, using principles of inclusive design. There are a number of equality groups who can experience difficulties with access, mobility and</p>	✓✓✓	✓✓✓	<ul style="list-style-type: none"> Ensure the design of movement networks and public spaces specifically addresses the mobility needs of vulnerable groups. This can be achieved by applying principles of inclusive design.¹² 	<p>There is likely to be a major positive impact on equality groups due to improved access, mobility, and navigation after delivery of the redevelopment programme.</p> <p>Overall, this risk is considered to be managed through a range of proportionate measures.</p>

¹¹ Jeffery (1971) 'Crime Prevention Through Environmental Design'. Sage publications

Secured by Design (2014) 'Secured by Design: Reducing crime by good design'. Available at: <https://mbp.co.uk/wp-content/uploads/2017/06/Secured-by-Design-Reducing-Crime-by-Good-Design-reduced.pdf>

¹² Design Council (2006) 'The Principles of Inclusive Design'. Available at: <https://www.designcouncil.org.uk/sites/default/files/asset/document/the-principles-of-inclusive-design.pdf>

Department for Transport (2005) 'Inclusive mobility' Available at: <https://www.gov.uk/government/publications/inclusive-mobility>

Department for Transport (2007) 'Manual for Streets'. Available at: <https://www.gov.uk/government/publications/manual-for-streets>

Potential impact	Without mitigation	With Mitigation	Recommendations	Overall Equality and health effect
navigation who could benefit from improvements in this area.				
<p>Improved public realm and green space</p> <p>Renewal offers an opportunity to improve the public realm. The ability to access and use the public realm is vitally important to ensuring people feel that they are active members of their community. This includes basic activities such as using local shops or meeting up with people in a shared space outside close to home. In addition, the opening up of green space has been shown to impact positively on both physical and mental health.</p>	✓✓✓	✓✓✓	<ul style="list-style-type: none"> Involve the local community in planning and designing improvements to the public realm and green spaces, specifically targeting protected characteristic groups that are likely to benefit from improvements e.g. children, older people and disabled people. Ensure the design of movement networks and public spaces specifically addresses the mobility needs of vulnerable groups. This can be achieved by applying principles of inclusive design. 	<p>There is likely to be a major positive impact on equality groups due to improved public realm and green space after delivery of the redevelopment programme.</p> <p>Overall, this risk is considered to be managed through a range of proportionate measures.</p>
<p>Provision of community resources and improved social cohesion</p> <p>Community resources provide important places of social connection and promote better health and wellbeing for many groups. For example, community hubs can provide an accessible centre point for local activities, services and facilities. They allow for a cross section of the community to be brought together in a safe place, allowing for better social cohesion and helping to address social isolation.</p>	✓✓✓	✓✓✓	<ul style="list-style-type: none"> Continue to involve the local community in decisions about which resources should be incorporated into the area, specifically targeting protected characteristic groups that are likely to benefit from improvements. Ensure analysis is undertaken to understand on any potential pressure on public services that could result from redevelopment (eg. extra pressure on schools and health care services). 	<p>There is likely to be a major positive impact on equality groups due to the provision of community resources and improved social cohesion after delivery of the redevelopment programme</p> <p>Overall, this risk is considered to be managed through a range of proportionate measures.</p>
<p>New employment opportunities</p> <p>Renewal can act as a means of promoting economic growth and supporting job creation. For example, property development can contribute to urban economic regeneration by enabling local stores to grow and expand, and through attracting investment to the area and revitalising neighbourhoods. It can also facilitate improved connectivity between communities and places of employment and education. Improved opportunities</p>	✓✓✓	✓✓✓	<ul style="list-style-type: none"> Work with owners of new businesses in the renewal area to employ local people, focussing on groups that are vulnerable to unemployment e.g. ethnic minority groups, disabled people, young people. 	<p>There is likely to be a major positive impact on equality groups due to new employment opportunities after delivery of the redevelopment programme</p> <p>Overall, this risk is considered to be managed through a range of proportionate measures.</p>

Potential impact	Without mitigation	With Mitigation	Recommendations	Overall Equality and health effect
to access employment and education can serve to help address issues of inequality and improve social mobility.				
<p>Improved housing provision</p> <p>Renewal can lead to improvements in housing provision within the regeneration area, thereby improving suitability, accessibility and affordability, as well as its quality and efficiency in energy consumption, addressing potential effects of cold housing.</p>	✓✓✓	✓✓✓	<ul style="list-style-type: none"> • Ensure housing meets the needs of current and future residents. 	<p>There is likely to be a major positive impact on equality groups due to improved housing provision after delivery of the redevelopment programme</p> <p>Overall, this risk is considered to be managed through a range of proportionate measures.</p>

7 Conclusion and action plan

7.1 Conclusion

The EqIA has identified a number of risks, opportunities and potential impacts that could arise for those with protected characteristics, as a result of the redevelopment of the Estate. The details of these impacts are set out in detail in Chapter 5 Impact Assessment.

The assessment found that the regenerated Estate has the potential to provide improved living conditions, housing quality, accessibility, public realm and community facilities. This, coupled with the majority vote in the February 2021 ballot for the redevelopment to go ahead means there is a compelling case in the public interest for the redevelopment. This must be weighed against the acknowledged potential risks set out above. In this case, the Council has sought to mitigate these through a range of reasonable and proportionate measures focused on engagement, rehousing assistance and compensation options in order to improve the outcomes of the redevelopment for the current and future Estate community.

7.2 Action plan

The following action plan seeks to establish activities and responsibilities following the planning application to continue to identify and address equality issues where they arise. It is the responsibility of Southwark Council to implement any recommendations and mitigations identified.

Table 7.1: Tustin Estate recommended action plan

Recommendation	Potential impact addressed	Timeframe	Responsibility
Work proactively and constructively through a range of channels, including face to face engagement where possible with residents, keeping up-to-date records of changing needs and circumstances, particularly if residents who will be most affected by refurbishment and/or redevelopment in order to remediate feelings of social isolation.	Loss of social cohesion and access to community resources Difficulty accessing finance Appropriate, accessible and affordable housing Impact of redundancy on health and well-being Loss of business	Ongoing during renewal period until completion of renewal (2028)	Southwark Council, especially the council's engagement team Independent resident advisor
Maintain continuity in access to community resources (e.g. churches and play areas) where possible. If this is not possible, consider pop-up spaces for these uses.	Loss of social cohesion and access to community resources	Ongoing during renewal period until completion of renewal (2028)	Southwark Council
Ensure that residents are signposted to the reallocation process (including financial advice) available online or via telephone, if necessary, to comply with COVID- 19 social distancing and self-isolation recommendations.	Difficulty accessing finance Appropriate, accessible and affordable housing	Ongoing, with priority during the Preparation period (Spring 2021- Summer 2022)	Southwark Council, especially the council's engagement team Independent resident advisor
Demolition works should be monitored closely and disruption should be minimised through the creation of a Construction Environmental Management Plan (CEMP), which would be implemented by the contractor carrying out the works, in order to address health impacts related to noise and air quality.	Health effects	Ongoing- periods of demolition from Autumn 2022- Autumn 2028	Southwark Council, contractor (TBC)
Throughout the improvement works, identify and work with vulnerable people whose protected characteristics may make them more vulnerable to adverse health impacts.	Health effects	Ongoing during renewal period until completion of renewal (2028)	Southwark Council, especially the council's engagement team
Access to communal outdoor space should be maintained during the construction period to limit impacts on health caused by social isolation.	Health effects	Ongoing during renewal period until completion of renewal (2028)	Southwark Council, contractor (TBC)

Recommendation	Potential impact addressed	Timeframe	Responsibility
Ensure best practices for enhancing safety and preventing crime are considered throughout the planning and construction process.	Safety and security	Ongoing during renewal period until completion of renewal (2028)	Southwark Council, contractor (TBC)
Ensure a process is in place for reporting and addressing incidents of Anti-Social Behaviour (ASB) within the Estate.	Safety and security	Ongoing	Southwark Council, especially the council's engagement team
Monitor the security of the Estate and consider additional security where concerns are flagged. However, any enhanced security measures should only be implemented as a last resort, if deemed necessary, and in conjunction with residents, as it risks adding to a sense of vulnerability, isolation, and loss of sense of community for residents.	Safety and security	Ongoing	Southwark Council
Offer business development support to existing businesses to ensure they are equipped to maximise the opportunity that the refurbishment and/or redevelopment may bring, such as information on how they might diversify their business.	Barriers to reemployment	Ongoing until new business space opens in Winter 2026	Southwark Council
Accessible format consultation materials, including but not limited to, easy read, different community languages, audio, and braille, should be available on request.	Information and communication	Ongoing during renewal period until completion of renewal (2028)	Southwark Council
Access to information and communication should be available in a number of formats, including online and in one to one meetings, to ensure that all residents have safe access to information and support services as COVID- 19 restrictions continue.	Information and communication	Ongoing during renewal period until completion of renewal (2028)	Southwark Council
Ensure businesses are fully informed of the timescales that would affect them as soon as possible, including when they if and would need to vacate the premises and the period of time they would be inactive for before being able to reopen on the refurbished or redeveloped Estate.	Difficulty accessing commercial finance	Ongoing during Preparation period (Spring 2021- Summer 2022) up until businesses move in Phase 2 (Summer 2024)	Southwark Council
Follow Crime Prevention Through Environmental Design (CPTED) and Secure by Design principles in designing the built environment and public realm.	Tackling crime and disorder	Ongoing during renewal period until completion of renewal (2028)	Southwark Council, Common Grounds
Ensure the design of movement networks and public spaces specifically addresses the mobility needs of vulnerable groups. This can be achieved by applying principles of inclusive design.	Improved access, mobility and navigation Improved public realm and green space	Ongoing until completion of public space.	Southwark Council, Common Grounds
Involve the local community in planning and designing improvements to the public realm and green spaces, specifically targeting protected characteristic groups that are likely to benefit from improvements e.g. children, older people and disabled people.	Improved access, mobility and navigation	Ongoing until completion of public space.	Southwark Council, Common Grounds
Continue to involve the local community in decisions about which resources should be incorporated into the area, specifically targeting protected characteristic groups that are likely to benefit from improvements.	Provision of community resources and improved social cohesion	Ongoing	Southwark Council
Ensure analysis is undertaken to understand on any potential pressure on public services that could result from redevelopment (eg. extra pressure on schools and health care services).	Provision of community resources and improved social cohesion	Ongoing during Preparation period, and updated subsequently if relevant.	Southwark Council
Work with owners of new businesses in the renewal area to employ local people, focussing on groups that are vulnerable to unemployment e.g. ethnic minority groups, disabled people, young people.	New employment opportunities	Ongoing	Southwark Council
Ensure housing meets the needs of current and future residents.	Improved housing provision	Ongoing	Southwark Council

Recommendation	Potential impact addressed	Timeframe	Responsibility
Up-to-date information about the renewal, including what is going on before, during and after all stages of the renewal process should be shared with residents, businesses and community resources. This provides them with the means to understand the options available to them in order to make an informed decision on what they need to do and when.	Information and communication	Ongoing	Southwark Council, especially the council's engagement team
Businesses should qualify for disturbance payments in reflection of the potential impact of the redevelopment on their business	Potential loss of businesses	Ongoing	Southwark Council
Offer business development support to existing businesses to ensure they are equipped to maximise the opportunity that the refurbishment and/or redevelopment may bring. This should include engagement with each of the businesses to understand each business model, trading history, relocation requirements and identification of areas for support and diversification.	Potential loss of businesses	Ongoing	Southwark Council
Ensure that a business relocation and support approach is implemented to assist businesses in the relocation process and ensure minimum business disruption and to prevent the loss of business, if the business chooses to relocate permanently.	Potential loss of businesses	Ongoing	Southwark Council

Appendices

A. Analysis of existing evidence

This chapter sets out the finding of the desk-based review process, providing a literature review of the potential effects of the renewal on people with protected characteristics. All potential risks and opportunities of a typical housing renewal project have been considered.

Section A.1 discusses the potential effects on residents and community resources associated with rehousing. Section A.2 provides an overview of the potential effects of renewal on businesses and section A.3 sets out the community effects of estate renewal. All are segmented into key thematic areas and summarised in the impact assessment in Chapter 5.

A.1 Impact on resident and community resources during renewal

A1.1 Loss of social cohesion and access to community resources

The renewal process can involve temporary or permanent resettlement of residents and demolition of housing and community resources. This could lead to the risk of loss of social infrastructure and temporary or permanent access to this amenity provision. In particular, it can increase residents' distances from facilities or places of social connection located on or in close proximity to their neighbourhood. This can impact on all parts of the community, but can have a disproportionately negative effect on children, older people, disabled people, people who are pregnant, people from ethnic minority backgrounds and people from minority faith groups.

Children

The instability caused by involuntary relocation has the potential to be particularly disruptive to children. Such disruption can be attributed to stress and anxiety relating to changing schools and the need to adapt to new routines, staff, facilities and peers. It is generally accepted that children develop better in stable environments with a degree of routine; sudden and dramatic disruptions can be both stressful and affect feelings of security.¹³

Evidence outlined by the Centre for Social Justice has indicated that where residential moves are accompanied by school moves for older children, the impact can be severe. It suggests that school moves can disrupt learning and are associated with a weaker educational performance within secondary school, particularly for children from disadvantaged backgrounds.¹⁴ Only 27 per cent of students who move secondary schools three times or more achieve five A* to C grade GCSEs, compared to the national average of 60 per cent.¹⁵ Research from the Centre for Social Justice also found that two or more school moves before the age of twelve can lead to behavioural problems later in childhood.¹⁶

¹³ Sandstrom, H and Huerta, S (2013) 'The Negative Effects of Instability on Child Development' Available at: <https://www.urban.org/sites/default/files/publication/32706/412899-The-Negative-Effects-of-Instability-on-Child-Development-A-Research-Synthesis.PDF>

¹⁴ The Centre for Social Justice (2016) 'Home Improvements, a social justice approach to housing policy'. Available at: <https://www.centreforsocialjustice.org.uk/core/wp-content/uploads/2016/08/Home-Improvements-full-report.pdf>

¹⁵ The Centre for Social Justice (2016) 'Home Improvements, a social justice approach to housing policy'.

¹⁶ The Centre for Social Justice (2016) 'Home Improvements, a social justice approach to housing policy'. Available at: <https://www.centreforsocialjustice.org.uk/core/wp-content/uploads/2016/08/Home-Improvements-full-report.pdf>

¹⁷ University of Manchester (undated) 'The impact of primary-secondary school transition for children with autism spectrum conditions: a longitudinal, mixed-methods study'. Available at: <http://documents.manchester.ac.uk/display.aspx?DocID=20008%20>

¹⁸ Yeung, J., Wearing, S., & Hills, A. P. (2008). *Child transport practices and perceived barriers in active commuting to school. Transportation Research Part A: Policy and Practice*, 42(6), 895-900.

¹⁹ Joseph Rowntree Foundation (2016) 'Falling short: the experience of families living below the minimum income standard'. Available at: <https://www.jrf.org.uk/report/falling-short-experiences-families-below-minimum-income-standard>

Children with autism spectrum conditions may also find new routines, expectations, and social relationships of a new school environment to be especially challenging, which can have further negative effects on educational attainment and wellbeing.¹⁷

Relocation can often mean a longer journey travelling to school, which can result in negative effects on health and well-being due to increased time spent inactive. Research has found that the travel distance to school influences the transportation mode choice of children, and longer distances can result in a change from active transportation such as cycling or walking, to sedentary transportation, such as vehicular transport.¹⁸

Children from low-income families may be particularly impacted by relocation due to loss of local informal child care support. A study from the Joseph Rowntree Foundation showed that informal childcare support from grandparents was one important factor in enabling parents to work, generating income and preventing families from going without daily necessities.¹⁹

Relocation can also have negative mental health effects on children and adolescents for a number of reasons, including: weakened social ties, disturbed social networks, household disruption, social isolation and a reduction in parent-child interactions.²⁰

Loss of relationships with peers and adults can cause anxiety and hinder both social development and educational attainment.²¹ Children at key stage two experience an average of a twelve per cent drop in Maths and English attainment within a year of a changing schools.²²

The loss of facilities where children can socialise, and play could be particularly detrimental to children living in the local area. Demolition and resource relocation could adversely affect access to child social networks. Evidence suggests that early years provision plays an important role in a child's development and that free play in early childhood is a vital experience through which child learn social, conceptual and creative skills, as well as increasing their knowledge and understanding of the world.²³

Older people

The loss of long-standing community links risks creating feelings of isolation, particularly amongst older people. Age UK research indicates that physical isolation, a lack of social resources and a removal of familiarity can all contribute to feelings of isolation and loneliness amongst older people.²⁴ Age UK research indicates that physical isolation, a lack of social resources and a removal of familiarity can all contribute to feelings of isolation and loneliness amongst older people.²⁵ This in turn can lead to negative health outcomes such as poorer mental health, a higher likelihood of developing certain health conditions (e.g. obesity and alcoholism) and a greater risk of hospitalisation.²⁶ Loneliness increases the likelihood of mortality by 26 per cent

²⁰ Morris, T, Manley D, Northstone, K, Sabel, C, (2017): 'How do moving and other major life events impact mental health? A longitudinal analysis of UK children'

²¹ Adam, Emma K., and P. Lindsay Chase-Lansdale. (2002): 'Home Sweet Home(s): Parental Separations, Residential Moves, and Adjustment in Low-Income Adolescent Girls.' *Developmental Psychology* 8(1) :792-80

²² RSA. (2013): 'Falling between the cracks; Exploring in-year admissions in schools in England'

²³ Nation Children's Bureau (2007): 'Free Play in Early Childhood'

²⁴ Age UK (2015) 'Evidence Review: Loneliness in Later Life'. Available at: https://www.ageuk.org.uk/globalassets/age-scotland/documents/reports-and-publications/reports-and-briefings/health-wellbeing/rb_june15_loneliness_in_later_life_evidence_review.pdf

²⁵ Age UK (2015) 'Evidence Review: Loneliness in Later Life'. Available at: https://www.ageuk.org.uk/globalassets/age-scotland/documents/reports-and-publications/reports-and-briefings/health-wellbeing/rb_june15_loneliness_in_later_life_evidence_review.pdf

²⁶ IoTUK (2017): 'Social Isolation and Loneliness in the UK' Available at: <https://iotuk.org.uk/social-isolation-and-loneliness-report/>

among those over the age of 65 and raises the risk of developing conditions, such as high blood pressure, heart disease and stroke.²⁷ The link between older people and the likelihood of experiencing feelings of isolation and loneliness indicates that this group may be disproportionately negatively impacted by relocation. This can equally be the case for older people remaining in or very close to an area being redeveloped.²⁸

As demolition proceeds, local amenities and services (such as shops, community centres and health facilities) may decide to close. Some community resources may be included in the demolition process. The loss of these resources can have a disproportionately negative effect on older people remaining in the neighbouring areas, who may find it more challenging to travel to new services outside of their neighbourhood.²⁹ Furthermore, for local businesses, the loss of their traditional customer base following the relocation of residents can force closures, further reducing the choice of services available to people in the community, with older people among the most likely to be affected. Research from Age UK found that reduced access to community facilities can, have serious negative effects on mental health and wellbeing, and increase rates of cardiovascular disease in older people.³⁰

The impact of the COVID- 19 pandemic has already had an impact on feelings of social isolation amongst older people. In the UK, from March 2020, almost nine million people over the age of 70 were advised by the Government to 'strictly adhere' to social distancing rules, only leaving their home for essential purposes. Restrictions have increased social isolation and feelings of loneliness for older people.³¹

Disabled people

Relocation has the potential to cause stress, anxiety and uncertainty for disabled people. Changes, both minor and major, to some disabled people's routines and surroundings may adversely affect feelings of security and comfort. For example, research shows that people on the autism spectrum, tend to prefer set routines (such as traveling via the same routes) and rigid structures (such as preferences to room layouts or objects) as they can help to bring order to their daily life so that they know what is going to happen and when.³² Similarly, for those suffering from dementia or Alzheimer's learning about and interpreting new environments can be difficult, and relocation can create feelings of dissonance, confusion and discomfort.³³

The loss of community links may also have a disproportionate impact on disabled people. Findings from the Jo Cox Commission on loneliness found that over half of disabled people say they are lonely, with around one in four feeling lonely every day.³⁴ The report also states that forming and maintaining social connections can be a

challenge for people with a range of disabilities, including those with sensory impairments, learning disabilities, autism, physical and mobility impairments, mental health conditions, dementia, head and brain injury, neurological conditions, cancer and HIV. As disabled people can experience more barriers to forming social connections the loss of existing local social connections through residential displacement or loss of social resources could lead to disabled people experiencing further loneliness and isolation.

Relocation can also create stress, anxiety and uncertainty for people with disabilities regarding the accessibility of their new home. A report published by the EHRC identifies that across all housing tenures, there is a severe shortage of accessible housing. For example, one in three disabled people living in private rented properties live in unsuitable accommodation. This figure is one in five for disabled people living in social housing, and one in seven for disabled people who own their own home. Overall, in England, only 7% of homes offer the basic four accessibility features to make a home fully accessible (level access to the entrance, a flush threshold, sufficiently wide doorways and circulation space, and a toilet at entrance level).³⁵ This suggests that disabled people are more likely to be concerned about the accessibility of their new home compared to other residents. Additionally, a report by Leonard Cheshire Disability highlights that only 4% of those with mobility impairments who have looked for accessible homes said they were easy to find. In addition, they also found that some disabled people have also experienced difficulties in terms of local authorities being reluctant to fund adaptations that would allow them to live independently.³⁶

The disruption of social networks caused by relocation may also cause negative health outcomes for people with mental health problems and autism, many of whom depend on social networks to maintain their standard of living³⁷. People with mental health problems may be disproportionately impacted by stress and anxiety, especially if relocation is unexpected or accompanied by financial stress³⁸. Research from Wilding (2017) found that increased rates of mental ill health are associated with involuntary residential relocation.³⁹

The impact of the COVID- 19 pandemic and restrictions throughout 2020 have also had a negative impact on feelings of social isolation amongst disabled people. In May 2020 the Office for National Statistics found that nearly two thirds of disabled people said that COVID-19 concerns were affecting their wellbeing, compared with half of non-disabled people. One of the main reasons cited was feelings of loneliness or isolation.⁴⁰

Ethnic minority and/or minority faith groups

Ethnic minority and minority faith communities are also likely to experience adverse effects as a result of relocation. It has been identified that these groups may be more reliant on social networks, faith and cultural facilities. They are likely to have concerns over loss of social

²⁷ Age UK (2015): 'Campaign to end loneliness: threat to health'.

²⁸ Age UK (2015): 'Loneliness and Isolation evidence review'

²⁹ A. Power (2008) 'Does demolition or refurbishment of old and inefficient homes help to increase our environmental, social and economic viability'. Available at: <https://www.sciencedirect.com/science/article/pii/S0301421508004709>

³⁰ Age UK (2015): 'Campaign to end loneliness): 'Threat to health'

³¹ Wu, Bei (2020): 'Social isolation and loneliness among older adults in the context of COVID-19: a global challenge'. Available at: <https://ghrp.biomedcentral.com/articles/10.1186/s41256-020-00154-3>

³² National Autistic Society (2016) 'Obsessions, repetitive behaviour and routines'. Factsheet. Available at: <https://www.autism.org.uk/about/behaviour/obsessions-repetitive-routines.aspx>

³³ Son, G. R., Therrien, B., & Whall, A. (2002). 'Implicit memory and familiarity among elders with dementia'. *Journal of Nursing Scholarship*, 34(3), 263-267. Available at: <https://lemosandcrane.co.uk/resources/Journal%20of%20Nursing%20Scholarship%20-%20Implicit%20Memory%20and%20Familiarity%20Among%20Elders%20with%20Dementia.pdf>

³⁴ Sense for the Jo Cox Commission on Loneliness (2017) 'Someone cares if I'm not there'. Available at: <https://www.sense.org.uk/support-us/campaign/loneliness/>

³⁵ DCLG (2015). 'English Housing Survey: Adaptations and Accessibility Report' Available at: https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/539541/Adaptations_and_Accessibility_Report.pdf

³⁶ Leonard Cheshire Disability (2014): 'The hidden housing crisis' Available at: <https://www.leonardcheshire.org/sites/default/files/Hidden%20Housing%20Crisis%20July%202014.pdf>

³⁷ National Autistic Society. (2017): 'Moving house' URL: <https://www.autism.org.uk/movinghouse> 56

³⁸ Wilding et al., (2018): 'Place and preference effects on the association between mental health and internal migration within Great Britain' *Health and Place*. 52(1), pp 180-187

³⁹ Wilding et al., (2018): 'Place and preference effects on the association between mental health and internal migration within Great Britain' *Health and Place*. 52(1), pp 180-187

⁴⁰ ONS (2020): 'Coronavirus and the social impacts on disabled people in Great Britain: May 2020'. Available at: <https://www.ons.gov.uk/peoplepopulationandcommunity/healthandsocialcare/disability/articles/coronavirusandthesocialimpactsdisabledpeopleingreatbritain/may2020>

networks and facilities, as well as fears of isolation, harassment or language barriers in new locations.⁴¹ ethnic minority communities also tend to experience greater difficulty in accessing health care when compared to other sections of the population, and rehousing may exacerbate the issue.⁴²

Pregnancy and maternity

Evidence has suggested that women who move home while pregnant tend to experience an increase in stress and depression levels above and beyond that of women who move home when not pregnant.⁴³ Evidence also suggests that the stress and physical exercise involved with relocation can slightly increase the risk of miscarriage, preterm delivery, small for gestational age new-borns, low birthweight, preeclampsia / gestational hypertension and can exacerbate deep vein thrombosis which pregnant women are more at risk of.⁴⁴

Relocation can result in adverse health effects on those who are pregnant.. A 2015 survey carried out by the Care Quality Commission assessed the impact that having the same midwife had on pregnant women. The results showed that women who had the same midwife throughout pregnancy had more positive midwifery experiences than those who did not. The most negative experiences occurred with those who wanted to see the same midwife but were unable to.⁴⁵ Should relocation result in the need to make changes to preestablished antenatal services and relationships, this could negatively impact pregnant individuals.

A.1.2 Difficulty accessing finance (e.g. costs associated with moving home)

The need for residents to resettle can lead to an increase in their financial outgoings due to costs associated with moving and obtaining new housing. Rehousing costs could include removal services, the need to adapt a new home or buy new furniture. Access to the required finance to obtain new housing may be most limited for those at risk of financial exclusion, who experience difficulty trying to access appropriate and mainstream financial services, such as bank accounts, loans and mortgages.

Financial exclusion arises when an individual faces difficulty when trying to access appropriate and mainstream financial services. In the UK, certain groups are particularly vulnerable to financial exclusion. These include, **young people** not in employment, **lone parents**, **ethnic minority** groups and **older people**.⁴⁶ For example, young people may be unable to purchase a property due to cutbacks in social housing and increased house pricing.⁴⁷ For older people, research suggests that they (particularly those who have paid off a previous mortgage or those with no recent experience of moving home) are more reluctant to move.⁴⁸ Older people often lack the same financial means and income flexibility that afford people from younger age groups and those in full time employment the widest range of home ownership options. Relocation may

also require older people who have savings and investments to use them in order to secure a new home, affecting their financial independence and stability.

Further, according to evidence presented to the House of Commons Communities and Local Government Committee, low income ethnic minority households often have limited experience of institutional loan finance.⁴⁹ They may also be less able to access commercial loans due to poor credit-ratings or their location in 'high risk' postcodes.

Those people from an ethnic minority background are more likely to live in low income households compared to those who are White British or from Other White Ethnic groups.⁵⁰

Financial exclusion is also geographically focussed. It is often the case that large numbers of financially excluded individuals live in areas where there are high levels of **deprivation**. Research suggests that approximately 35% of people living in deprived do not have a bank account, and that 68% of financially disengaged people living in the top 10% most financially exclude postcodes.⁵¹

According to evidence presented to the House of Commons Communities and Local Government Committee, relocation may also impact people who have savings and investments to use them in order to secure a new home, affecting their financial independence and stability.⁵²

A.1.3 Issues accessing appropriate, accessible and affordable housing

As renewal processes often involve the rehousing of many residents, issues may arise regarding sourcing suitable housing that meets the needs of the following groups:

Children

Families with children may also find it difficult to find housing that can accommodate their needs. A 2016 report highlighted that 3.6 million children in England are thought to be affected by poor housing, and a higher proportion of children live in overcrowded conditions than any other age group.⁵³ Children who live in overcrowded accommodation have an increased risk of developing respiratory conditions, infections and psychological problems.⁵⁴ It can also increase their risk of injury, for example, bed sharing, which is more likely to occur in overcrowded houses, has been identified as a factor contributing to Sudden Infant Death Syndrome (SIDS). Sleep disturbance is also more common amongst children in overcrowded households. Overall, overcrowded conditions present a potential source of stress and can negatively impact a child's emotional and physical health in the long term.⁵⁵

⁴¹ Joseph Rowntree Foundation (2007) 'Demolition, Relocation and affordable rehousing: Lessons from the housing market renewal pathfinders'. Available at: <https://www.jrf.org.uk/report/addressing-housing-affordability-clearance-and-relocation-issues-housing-market-renewal>

⁴² BME Health Forum (2010) 'Good Access in Practice: Promoting community development in the delivery of healthcare'. Available at: http://bmehf.org.uk/files/9013/6536/5135/Good_Access_in_Practice_final.pdf

⁴³ Tunstall, H., Pickett, K. and Johnsen, S. (2010): 'Residential mobility in the UK during pregnancy and infancy: Are pregnant women, new mothers and infants 'unhealthy migrants'?'

⁴⁴ NHS (2016): 'Deep vein thrombosis'; Royal College of Physicians and Faculty of Occupational Medicine (date unknown): 'Advising women with a healthy, uncomplicated, singleton pregnancy on: heavy lifting and the risk of miscarriage, preterm delivery and small for gestational age'

⁴⁵ Care Quality Commission (2015): '2015 survey of women's experiences of maternity care'. Available at: https://www.cqc.org.uk/sites/default/files/20151215b_mat15_statistical_release.pdf

⁴⁶ Joseph Rowntree Foundation (2008): 'Financial inclusion in the UK: Review of policy and practice'. Available at: <https://www.jrf.org.uk/sites/default/files/jrf/migrated/files/2234.pdf>

⁴⁷ Financial Conduct Authority (2016) 'Access to Financial Services in the UK' Available here: <https://www.fca.org.uk/publication/occasional-papers/occasional-paper-17.pdf>

⁴⁸ Joseph Rowntree Foundation (2007) 'Demolition, Relocation and affordable rehousing: Lessons from the housing market renewal pathfinders'. Available at: <https://www.jrf.org.uk/report/addressing-housing-affordability-clearance-and-relocation-issues-housing-market-renewal>

⁴⁹ House of Commons Communities and Local Government Committee (2011) 'Regeneration Sixth Report of Session 2010-12'. Available at: <https://publications.parliament.uk/pa/cm201012/cmselect/cmcomloc/1014/1014.pdf>

⁵⁰ Department for Work and Pensions (2015) 'Low income'

⁵¹ Resolution Foundation (2007): 'In brief: Financial exclusion'.

⁵² House of Commons Communities and Local Government Committee (2011) 'Regeneration Sixth Report of Session 2010-12'. Available at: <https://publications.parliament.uk/pa/cm201012/cmselect/cmcomloc/1014/1014.pdf>

⁵³ National Children's Bureau (2016): 'Housing and the health of young children: Policy and evidence briefing for the VCSE sector'. Available at: <https://www.ncb.org.uk/sites/default/files/field/attachment/Housing%20and%20the%20Health%20of%20Young%20Children.pdf>

⁵⁴ House of Commons Communities and Local Government Committee (2011) 'Regeneration Sixth Report of Session 2010-12'. Available at: <https://publications.parliament.uk/pa/cm201012/cmselect/cmcomloc/1014/1014.pdf>

⁵⁵ National Children's Bureau (2016): 'Housing and the health of young children: Policy and evidence briefing for the VCSE sector'. Available at: <https://www.ncb.org.uk/sites/default/files/field/attachment/Housing%20and%20the%20Health%20of%20Young%20Children.pdf>

Disabled people

Disabled people (particularly those with mobility impairments) often experience difficulties trying to find a suitable, accessible home. A report by Leonard Cheshire Disability highlights that only 4% of those with mobility impairments who have looked for accessible homes said they were easy to find. In addition, they also found that some disabled people have also experienced difficulties in terms of local authorities being reluctant to fund adaptations that would allow them to live independently.⁵⁶

A report published by the Equality and Human Rights Commission has further highlighted some of the existing issues in terms of housing for disabled people. The report states that across all housing tenures, there is a severe shortage of accessible housing. For example, one in three disabled people living in private rented properties live in unsuitable accommodation. This figure is one in five for disabled people living in social housing, and one in seven for disabled people who own their own home. Overall, in England, only 7% of homes offer the basic four accessibility features to make a home fully accessible (level access to the entrance, a flush threshold, sufficiently wide doorways and circulation space, and a toilet at entrance level).⁵⁷ One conclusion of the report was that there are too many gaps in data held by local authorities. For example, 65% of local authorities do not know whether its social or affordable rented housing stock is accessible.⁵⁸

People with a disability who live in social housing could experience particularly acute effects. The introduction of the 'removal of the spare room subsidy' or 'bedroom tax' in 2013 has had a disproportionate impact on disabled people in social housing; two thirds of those affected have a disability. Research shows that disabled people have found it difficult to take up proposed mitigation measures, such as taking up work, working longer hours or downsizing, and thus have had their income reduced by £12 to £22 per week, depending on the number of spare bedrooms. These changes have resulted in increased poverty and adverse effects on health, well-being and social relationships of disabled residents in social housing.⁵⁹

Ethnic minority

Research by the Runnymede Trust highlighted that people from all ethnic minority groups are more likely to live in overcrowded housing when compared to the White British population. For example, around 40% of Black African and 36% of Bangladeshi people in the UK live in overcrowded housing.⁶⁰

Ethnic minority households may also be impacted by the availability of affordable housing when relocating to new areas. It was reported in 2017 that rents are less affordable for most ethnic

minority groups when compared to White British households.⁶¹ Two-fifths of people from an ethnic minority background live in low-income households.⁶² Additionally, evidence from the Runnymede Trust suggests that ethnic minority communities are more likely to experience homelessness than their white counterparts.⁶³ Therefore, it is possible that ethnic minority households could experience difficulties in finding suitable housing that accommodates their needs.

Older people

When relocating, a lack of affordable and/or quality housing is more likely to adversely affect older people (and particularly pensioners) who have lower average incomes than working-age people and are therefore less likely to be able to secure additional sources of income to buy a new property.⁶⁴ Research by the Joseph Rowntree Foundation found that older people often lack the same financial means and income flexibility compared to other age groups, especially younger people and those in employment.⁶⁵ A lack of financial means can limit the range of ownership options available to older people and relocation may cause older people to use savings and investments in order to secure a new home. This can potentially affect their long-term financial independence and stability.⁶⁶ Research from the Council of Mortgage Lending shows that older people only account for one per cent of all mortgage lending, which further indicates that they may experience difficulties in accessing finance to facilitate relocation.⁶⁷

Older people are also more likely to need specialist housing which meets their needs. Evidence estimates that the potential national demand for specialist retirement housing, which cannot be met from existing stock.⁶⁸ As such, it is likely to be more difficult for older people to relocate to appropriate housing. Health effects, such as increases in respiratory disease, have been associated with poor housing and could arise as a consequence of the need to relocate to a less well-suited property. Older people have a higher rate of health conditions such as respiratory disease, compared to the general population. This makes such effects more likely to arise amongst this group.⁶⁹

A.1.4 Health effects

Relocation can have a negative impact on an individual's mental health and well-being, as measured by the SF-12 Mental Health Composite Score⁷⁰ and Warwick-Edinburgh Mental Wellbeing Scale test.⁷¹ These tests have shown that relocation can create increased levels of depression and anxiety.⁷² The associated impacts have been found to be more severe when there is a lack or perceived lack of control over the decision.⁷³ This stress has been attributed to

⁵⁶ Leonard Cheshire Disability (2014): 'The hidden housing crisis' Available at:

<https://www.leonardcheshire.org/sites/default/files/Hidden%20Housing%20Crisis%20July%202014.pdf>

⁵⁷ DCLG (2015). 'English Housing Survey: Adaptations and Accessibility Report' Available at:

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/539541/Adaptations_and_Accessibility_Report.pdf

⁵⁸ Equality and Human Rights Commission (2018): 'Housing and disabled people: Britain's hidden crisis'. Available at:

<https://www.equalityhumanrights.com/sites/default/files/housing-and-disabled-people-britains-hidden-crisis-main-report.pdf>

⁵⁹ Moffatt, S., Lawson, S., Patterson, R., Holding, E., Dennison, A., Sowden, S., & Brown, J. (2015). A qualitative study of the impact of the UK 'bedroom tax'. *Journal of Public Health*, 38(2), 197-205.

⁶⁰ Runnymede Trust (2016) 'Ethnic Inequalities in London: Capital For All'. Available at:

<https://www.runnymedetrust.org/uploads/images/London%20Inequality%20report%20v3.pdf>

⁶¹ Shelter (2017) 'BAME homelessness matters and is disproportionately rising – time for the government to act'. Available at:

<http://blog.shelter.org.uk/2017/10/bame-homelessness-matters-and-is-disproportionately-rising-time-for-the-government-to-act/>

⁶² The Poverty Site (2017). See: <http://www.poverty.org.uk/06/index.html>

⁶³ Runnymede Trust (2014) 'Black and Asian Britons more likely to be homeless or live in overcrowded houses'.

<https://www.runnymedetrust.org/news/558/272/Black-and-Asian-Britons-more-likely-to-be-homeless-or-live-in-overcrowded-homes.html>

⁶⁴ Council of Mortgage Lending. (2015): 'Pension tension: the challenges for older borrowers'

⁶⁵ Joseph Rowntree Foundation. (2007): 'Demolition, Relocation and affordable rehousing: Lessons from the housing market renewal pathfinders.'

⁶⁶ Joseph Rowntree Foundation. (2007): 'Demolition, Relocation and affordable rehousing: Lessons from the housing market renewal pathfinders'

⁶⁷ Council of Mortgage Lending. (2015): 'Pension tension: the challenges for older borrowers'

⁶⁸ Housing Age UK (2014): 'Housing in later life'

⁶⁹ Housing Age UK (2014): 'Housing in later life'

⁷⁰ The SF-12 is a multipurpose short form survey with 12 questions, all selected from the SF-36 Health Survey (Ware, Kosinski, and Keller, 1996). The questions are combined, scored, and weighted to create two scales that provide glimpses into mental and physical functioning and overall health-related-quality of life.

⁷¹ The Warwick-Edinburgh Mental Well-being scale was developed to enable the monitoring of mental wellbeing in the general population and the evaluation of projects, programmes and policies which aim to improve mental wellbeing. WEMWBS is a 14 item scale with 5 response categories, summed to provide a single score ranging from 14-70. The items are all worded positively and cover both feeling and functioning aspects of mental wellbeing.

⁷² Cleland, C., Kearns, A., Tannahill, C. and Ellaway, A. (2016). The impact of life events on adult physical and mental health and well-being: longitudinal analysis using the GoWell health and well-being survey. Available at: <https://bmresnotes.biomedcentral.com/articles/10.1186/s13104-016-2278-x>

⁷³ Thomson H, Petticrew M, Douglas M. (2003): 'Health impact assessment of housing improvements: Incorporating research evidence'. Available at: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC1732281/pdf/v057p00011.pdf>

the anticipation of disruption, extra costs for residents and undermining of community stability and support networks.

Children, young people, older people and disabled people

Relocation can create a great deal of stress and anxiety amongst **children** and **young people** due to the need to adapt to new routines, facilities and surroundings.⁷⁴

There is also evidence that involuntary relocation can have a significant impact on **older people**. For example, it has been shown that mortality rates for those moved involuntarily due to urban renewal (either temporarily or permanently) can be higher than non-movers and those who move voluntarily.⁷⁵

As noted above, for older people and disabled people, the loss of community connections due to relocation may lead to feelings of isolation and loneliness, which are in turn linked to negative health outcomes such as poorer mental health, a higher likelihood of developing certain health conditions (e.g. obesity and alcoholism) and a greater risk of hospitalisation.⁷⁶

Older people and disabled people are also likely to be disproportionately affected by changes in air quality that may occur throughout the demolition and construction stages of a scheme. Older people with respiratory conditions such as asthma are likely to be more susceptible to the effects of air pollution when compared to other groups. This is particularly the case if they have underlying COPD (Chronic Obstructive Pulmonary Disease).⁷⁷ Disabled people with heart or lung conditions are also at an increased risk of becoming ill and needing treatment as a result of air pollution.⁷⁸

Noise pollution may arise as a result of demolition and construction. Research has linked noise pollution to several adverse outcomes for older people, including cardiovascular diseases, sleep disturbance, tinnitus, and stress.⁷⁹

Expectant mothers and children

There are associated health effects related to the demolition of housing and the displacement from housing. For example, it has been found that the birth weight of babies can be affected by demolition and displacement. This is due to the potential for expectant mothers to experience an increase in stress and loss of social support when displacement occurs.⁸⁰ As the redevelopment involves both demolition and relocation, it is possible that this adverse impact may arise.

Children are likely to be disproportionately affected by changes in noise pollution and air quality that may occur throughout the demolition and construction stages of a scheme. Noise

associated with demolition and construction can also impact the health of vulnerable people remaining in the nearby community. Research shows that noise can negatively affect children's cognitive learning and memory.⁸¹

Exposure to air pollution during infancy can result in neurodevelopment and long-term cognitive health problems.⁸² In addition, research from Asthma UK highlights that air pollution is more detrimental to children when compared to other age groups with the condition. This is due to children have faster breathing rates and lungs that are still developing.⁸³

Lastly, antenatal exposure to air pollution may alter the lung development of a baby whilst in the womb. If a baby is exposed to significant levels of air pollution, this can increase the risk of premature birth and low birth weight.⁸⁴

A.1.5 Safety and security

In the lead up to the renewal process and during the decanting and demolition of properties in the area, properties will be vacated and can fall into disrepair. This can attract unwanted activity including anti-social behaviour and crime such as increased vandalism, arson, break-ins and other damage to neighboring homes.⁸⁵

Children, young people, older people, disabled people, ethnic minority groups, LGBT people, men and women

This potential increase in crime can impact a number of vulnerable groups remaining in the community during demolition who are more likely to be a victim or witness of crime. An Ipsos MORI survey on public views of policing in England and Wales in 2016 determined that groups who were more likely to have had contact with their local police as a victim or witness include: young people aged 16-34, disabled people, those from ethnic minority backgrounds, and lesbian, gay, bisexual and transgender (LGBT) people.⁸⁶

The Crime Survey for England and Wales (CSEW), has also identified that a number of protected characteristic groups are more likely to be victims to crime:

- Men are more likely to be victims of violent crime than women.⁸⁷
- Mixed and Asian ethnic groups are more likely to have said they were victim of crime compared to white people.⁸⁸
- Younger people aged 16 to 24 are more likely to be victims of violence than those in older age groups.⁸⁹

⁷⁴ Sandstrom, H and Huerta, S (2013): 'The Negative Effects of Instability on Child Development'. Available at: <https://www.urban.org/sites/default/files/publication/32706/412899-The-Negative-Effects-of-Instability-on-Child-Development-A-Research-Synthesis.PDF>

⁷⁵ Danermark BD, Ekstrom ME and Bodin LL (1996): 'Effects of residential relocation on mortality and morbidity among elderly people'. Available at: https://www.academia.edu/19474641/Effects_of_residential_relocation_on_mortality_and_morbidity_among_elderly_people

⁷⁶ IoTUK (2017) 'Social Isolation and Loneliness in the UK'. Available at: <https://iotuk.org.uk/social-isolation-and-loneliness-report/>

⁷⁷ Asthma UK (2017): 'Pollution'. Available at <https://www.asthma.org.uk/advice/triggers/pollution/>

⁷⁸ Department for Environmental Food and Rural Affairs (2013): 'Guide to UK Air Pollution Information Resources'. Available at:

⁷⁹ World Health Organisation (2011): 'Burden of disease from environmental noise Quantification of healthy life years lost in Europe'. Available at: http://www.who.int/quantifying_ehimpacts/publications/e94888.pdf?ua=1

⁸⁰ Kramer, M., et al. (2012): 'Housing Transitions and Low Birth Weight Among Low-Income Women: Longitudinal Study of the Perinatal Consequences of Changing Public Housing Policy'. Available at: <https://www.ncbi.nlm.nih.gov/pubmed/23078464>

⁸¹ Gupta, A. et al (2018): 'Noise Pollution and Impact on Children Health'. Available at: <https://link.springer.com/article/10.1007/s12098-017-2579-7>

⁸² Royal College of Physicians (2016) 'Every breath we take: the lifelong impact of air pollution'. Available at: <https://www.rcplondon.ac.uk/projects/outputs/every-breath-we-take-lifelong-impact-air-pollution>

⁸³ Asthma UK (2017): 'Pollution'. Available at <https://www.asthma.org.uk/advice/triggers/pollution/>

⁸⁴ British Lung Foundation (2016): 'How air pollution affects your children's lungs'. Available at: <https://www.blf.org.uk/support-for-you/signs-of-breathing-problems-in-children/air-pollution>

⁸⁵ Power, A. (2010): 'Housing and sustainability: demolition or refurbishment?'. Available at https://uk-air.defra.gov.uk/assets/documents/reports/cat14/1406191156_060618_Guide_to_UK_Air_Pollution_Information_Resources-issue_2-FINAL.pdf <https://www.icevirtuallibrary.com/doi/abs/10.1680/udap.2010.163.4.205>

⁸⁶ Ipsos MORI (2016): 'Public views of policing in England and Wales'. Available at: <https://www.ipsos.com/sites/default/files/migrations/en-uk/files/Assets/Docs/Publications/sri-public-views-of-policing-in-england-and-wales.pdf>

⁸⁷ Office for National Statistics (2018) 'The nature of violent crime in England and Wales: year ending March 2018' Available at: <https://www.ons.gov.uk/peoplepopulationandcommunity/crimeandjustice/articles/thenatureofviolentcrimeinenglandandwales/yearendingmarch2018>

⁸⁸ Gov.uk (2019) 'Victims of crime'. Available at: <https://www.ethnicity-facts-figures.service.gov.uk/crime-justice-and-the-law/crime-and-reoffending/victims-of-crime/latest>

⁸⁹ Gov.uk (2019) 'Victims of crime'. Available at: <https://www.ethnicity-facts-figures.service.gov.uk/crime-justice-and-the-law/crime-and-reoffending/victims-of-crime/latest>

In addition, the fear of crime is also more prevalent amongst the following groups, and consequently this can have an effect on individual mental health and wellbeing.⁹⁰

- Evidence from Age UK suggests that although older people are generally at a lower risk of crime compared to other ages, they are often more fearful of crime.⁹¹
- Fear of crime can be an issue for women when they are travelling. Data from the ONS Crime Survey for England and Wales suggests that women fear more for their safety than men when walking alone at night – two fifths of women reported feeling 'somewhat unsafe' and one in eight reported feeling 'very unsafe'.⁹²
- A study by Transport for London highlights that ethnic minority individuals are more likely to express concerns over safety and security when travelling (particularly after dark) than white people and are more likely to say that their frequency of travel is affected 'a lot' or 'a little' due to these concerns.⁹³
- Research from Stonewall demonstrates that LGBT people often fear for their safety and well-being in public spaces and on pedestrian journeys.⁹⁴

It has been suggested that fear of crime can contribute to social isolation, particularly for vulnerable groups such as children, older people, ethnic minority groups and women.⁹⁵

A.1.6 Accessibility and mobility in the surrounding area

Evidence suggests that during construction the accessibility and mobility of the local area can be affected. In particular, construction can cause difficulties in relation to increased traffic in the local area, reducing parking (construction vehicles and subcontractors in parking), the construction activities blocking access to homes, shops, bus stops and pavements and safe routes, as well as effects on wayfinding.

Children

Changes in road traffic levels may reduce children's access to community and recreational facilities due to road severance and traffic delays.⁹⁶ Increased traffic in proximity to schools, or community facilities that are frequently used by children can also impact their concentration and long-term cognitive development.⁹⁷

Disabled people

Research shows that the presence of vehicular traffic can present a barrier for disabled people accessing community resources. National Travel Survey data shows disabled people are generally more likely to experience travel difficulties in the daily trips that they make.⁹⁸ Disabled people who travel by car are more likely to report difficulties due to congestion and roadworks, especially where the severity of the disability increases.⁹⁹ Short-term change to

transport networks and road alignment can act as a barrier for disabled people wanting to access community facilities, exacerbating issues such as loneliness and social isolation.¹⁰⁰

Older people

Changes to surface transport resulting from renewal of a housing estate may affect how older people interact with community facilities.¹⁰¹ Older people may find it difficult to access public spaces further away from their home or integrate into new social networks, due to severance caused by increases in road traffic.¹⁰²

A.1.7 Information and communication

Complex material and information on the regeneration may present a challenge to those who have different information and communication needs, this includes but is not limited to people with learning disabilities, people with low literacy levels, older people, people with visual or hearing impairments and people who use English as a second language.

Best practice guidance¹⁰³ and evidence suggests that the following processes can ensure that information documents are fully accessible to everyone and reduce concerns regarding access to information:

- information should be in short, concise sentences without jargon;
- pictures should be included where possible to support the text;
- the format, layout and length of document should be carefully considered;
- easy read, braille, audio and large print should be provided upon request; and
- information should be translated into people's first language upon request.

A.2 Impacts on businesses during renewal

A.2.1 Barriers to reemployment

The renewal programme may result in the closure and relocation of businesses. These changes may create redundancies or result in current staff being unable to access future employment at a different location. The following protected characteristic groups face barriers to employment and are therefore more likely to be affected by loss of existing employment due to business closure or relocation.

Older people

Research suggests that those who are older when they are made redundant experience additional barriers to returning to employment, one of these is the potential challenge of

⁹⁰ Stafford, M et al. (2006) 'Association between fear of crime and mental health and physical functioning'. Available at: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2040373/>

⁹¹ Age UK (2006) 'Crime and fear of crime: help the aged policy statement 2006'. Available at: https://www.ageuk.org.uk/documents/en-gb/for-professionals/communities-and-inclusion/crime_and_fear_of_crime_2006_pro.pdf?dtrk=true

⁹² ONS (2015) Crime Survey for England and Wales. Available at: <https://www.ons.gov.uk/peoplepopulationandcommunity/crimeandjustice/bulletins/crimeinenglandandwales/2015-07-16>

⁹³ Transport for London (2013) 'Attitudes to Safety and Security – Annual Report'. Available at: <https://tfl.gov.uk/corporate/publications-and-reports/safety-and-security>

⁹⁴ Stonewall (2017) LGBT in Britain: Hate Crime. Available at: <https://www.stonewall.org.uk/comeoutforLGBT/qbt-in-britain/hate-crime>

⁹⁵ Lorenc, T et al (2013) 'Fear of crime and the environment: systematic review of UK qualitative evidence'. Available at: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3666893/>

⁹⁶ Hiscock, R. and Mitchell, R (2011) 'What is needed to deliver places that provide good health to children?' Available at: http://www.edphis.org.uk/Report_on_Place_and_Children.pdf

⁹⁷ Institute of Education (2001): 'The effect of travel modes on children's mental health, cognitive and social development: a systematic review'

⁹⁸ Department for Transport (2019): 'National Travel Survey: 2018'

⁹⁹ Department for Transport (2017) 'Disabled people's travel behaviour and attitudes to travel' Available at: https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/647703/disabled-peoples-travel-behaviour-and-attitudes-to-travel.pdf

¹⁰⁰ Equality and Human Rights Commission (2017): 'Being disabled in Britain: a journey less equal'

¹⁰¹ DfT (2017): Health impact analysis for the draft Airports National Policy Statement'

¹⁰² NatCen (2019): 'Transport, health and wellbeing: an evidence review for the Department for Transport'

¹⁰³ Change (2015): 'how to make information accessible: a guide to producing easy read documents' Available at: [How-to-make-info-accessible-guide-2016-Final \(changepeople.org\)](https://www.changepeople.org/accessible-guide-2016-final) Department for Health and Social Care (2010): 'Making written information easier to understand for people with learning disabilities' Available at: [Making written information easier to understand for people with learning disabilities - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/131141/making-written-information-easier-to-understand-for-people-with-learning-disabilities-GOV-UK-2010.pdf) MENCAP (date unknown): 'Making myself clear' Available at: [Making-Myself-Clear.pdf \(accessibleinfo.co.uk\)](https://www.mencap.org.uk/accessibleinfo)

securing interviews for new positions.¹⁰⁴ According to research by Age UK, once unemployed, only 23% of people aged 50 years or above secure a new job within three months (compared to 35% of 35-49-year olds).¹⁰⁵ Research by Anglia Ruskin University found that older white British men were 22% less likely to be invited for interview when compared to their 28-year-old counterparts, and that that ageism increases for older male ethnic minority applicants and female applicants.¹⁰⁶ These groups may therefore experience disproportionate negative effects as a result of the loss of existing businesses and associated employment.

As **older people** may be more likely to own their own business, they may find relocation much more difficult than other groups. According to ONS data there were 4.6 million self-employed people in the UK at the end of 2015, which was an increase from 3.8 million in 2008; 43% of those were over 50.¹⁰⁷ After the 2008 recession, many older people were made redundant and there was a widely-reported lack of jobs suitable for people over the age of 50,¹⁰⁸ with many finding it difficult to find a new employer. Many took this as an opportunity to start their own businesses. Therefore, older business owners may be more likely to be disproportionately affected by relocation, particularly due to the time it takes to establish and build a customer base in a new location.

Older people, and people from ethnic minority backgrounds may be disproportionately impacted by the potential closure of small businesses, where self-employment is common. Research shows that part-time self-employment is highest among those over the age of 55, and that older people are the fastest growing age group of self-employed people, with those aged over 70 showing the greatest increase of those becoming self-employed out of the total UK workforce between 2001 and 2015.¹⁰⁹

Disabled people

According to research from the Equality and Human Rights Commission, disabled people are more likely to experience barriers to employment than non-disabled people. More than a third of disabled people in employment (36 per cent) say that they are limited in the amount or type of work that they do compared with less than a fifth (19 per cent) of non-disabled people. This increases to (66 per cent) for unemployed disabled people who say they are limited in the amount or type of work they could do, compared to 31 per cent of unemployed non-disabled people.¹¹⁰ This means that disabled people could be disproportionately impacted by loss of employment, particularly if their current working conditions would be difficult to find or replicate elsewhere, or if they have to travel further to work.

Ethnic minority groups

People from an ethnic minority background may be disproportionately impacted by loss of employment, as they are more likely to experience unemployment and face barriers to employment and social mobility. Research has shown that while educational attainment among people of minority ethnic backgrounds has improved, this has not been reflected in social mobility and job opportunities.¹¹¹ People from an ethnic minority background are also more likely to be unemployed. In 2017, just under 4% of White people were unemployed, compared with 8% from all non-White ethnic groups combined. Pakistani and Bangladeshi ethnic groups had the highest rate of unemployment, at 10%.¹¹²

A.1.1 Potential redundancy of employees associated with business loss or relocation

The redevelopment programme may lead to the closure or relocation of some businesses. These changes may create direct redundancies or indirect redundancies as a result in staff being unable to access employment once it has relocated to a new location. Such changes are likely to particularly impact some protected characteristic groups including older people, disabled people and minority ethnic groups.

Research suggests that **older people** who are made redundant face additional barriers to finding new employment compared to the other age groups, especially when attempting to secure interviews for potential new positions.¹¹³ Once unemployed, only 23% of those over the age of 50 gain employment within three months, compared to 35% of 35-49 year olds. Research by Anglia Ruskin University found that older white British men were also 22% less likely to be invited for interview when compared to their 28-year-old counterparts.¹¹⁴ This suggests that older people who lose their job as a result of the redevelopment may be significantly adversely impacted compared to the general population.

The proportion of **minority ethnic** workforce in the UK is expected to rise to almost 21% by 2051 and this is currently not reflected in the majority of workplaces, with many ethnic minorities concentrated in lower paying jobs.¹¹⁵ According to the Chartered Institute of Personnel and Development (CIPD) research, people from minority ethnic communities are significantly more likely to say that people's identity or background can have an effect on the opportunities they are given than white British employees.¹¹⁶ Minority ethnic people are also more likely to say that experiencing discrimination is a problem in their workplace.¹¹⁷ Research by the Centre of Social Investigation (CSI) also highlights that British employers are more likely to discriminate against job applicants with an ethnic minority background when making hiring decisions.¹¹⁸ The same CSI study also shows that Black Africans and applicants from the Middle East and North Africa (MENA) countries are more likely to be disproportionately discriminated against, when compared to the applicants of other minority ethnic groups.

¹⁰⁴ Leeds University Business School (2004): 'The Economic and Social Impact of Redundancies from Corus and Allied Steel and Wire in Wales'

¹⁰⁵ Age UK (2013): 'Older Workers at High Redundancy Risk' available at: <https://www.ageuk.org.uk/latest-press/archive/older-workers-at-high-redundancy-risk/>

¹⁰⁶ The Prince's Responsible Business Network (2017). 'Factsheet: Why employers need to tackle ageism in redundancy and recruitment processes.' Available at: https://age.bitc.org.uk/sites/default/files/business_in_the_community_factsheet_-_tackling_age_bias_in_processes.pdf

¹⁰⁷ Chartered Institute of Personnel and Development (2018): Megatrends

¹⁰⁸ Chartered Institute of Personnel and Development (2018): Megatrends

¹⁰⁹ Institute of Directors (2017) 'The Age of the Older Entrepreneur'. Available at:

<https://www.iod.com/Portals/0/PDFs/Campaigns%20and%20Reports/Start%20ups/Older-Entrepreneur-Report-loD.pdf>

¹¹⁰ Equality and Human Rights Commission (2013). *Barriers to unemployment and unfair treatment at work: a quantitative analysis of disabled people's experiences*. Available at: <https://www.equalityhumanrights.com/sites/default/files/research-report-88-barriers-to-employment-and-unfair-treatment-at-work-disabled-peoples-experiences.pdf>

¹¹¹ Brown, L., Heath, A., Li, Y., & Nazroo, J. (2013). *Addressing ethnic inequalities in social mobility: research findings from the CoDE and Cumberland Lodge policy workshop*. Available at: <http://hummedia.manchester.ac.uk/institutes/code/briefings/policy/code-social-mobility-briefing-Jun2014.pdf>

¹¹² Annual population survey (2018). 'Ethnicity facts and figures: Unemployment'

¹¹³ Centre for Aging Better (2020): 'Supporting Over 50s back to work' Available at: supporting-over-50s-back-to-work.pdf (ageing-better.org.uk)

¹¹⁴ Age UK (2013): 'Older Workers at High Redundancy Risk'

¹¹⁵ The McGregor-Smith Review (2017): 'Race in the workplace' Available at: [Race in the workplace: The McGregor-Smith review \(publishing.service.gov.uk\)](https://www.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/644447/race-in-the-workplace-the-mcgregor-smith-review.pdf)

¹¹⁶ CIPD (2017): 'Addressing the barriers to BAME employee career progression to the top' Available at: [*addressing-the-barriers-to-BAME-employee-career-progression-to-the-top_tcm18-33336.pdf \(cipd.co.uk\)](https://www.cipd.co.uk/media/11833336/addressing-the-barriers-to-bame-employee-career-progression-to-the-top_tcm18-33336.pdf)

¹¹⁷ CIPD (2017): 'Addressing the barriers to BAME employee career progression to the top' Available at: [*addressing-the-barriers-to-BAME-employee-career-progression-to-the-top_tcm18-33336.pdf \(cipd.co.uk\)](https://www.cipd.co.uk/media/11833336/addressing-the-barriers-to-bame-employee-career-progression-to-the-top_tcm18-33336.pdf)

¹¹⁸ CSI (2019): 'Are employers in Britain discriminating against ethnic minorities?' Available at: [Are employers in Britain discriminating against ethnic minorities? final.pdf \(ox.ac.uk\)](https://www.ox.ac.uk/files/11833336/are-employers-in-britain-discriminating-against-ethnic-minorities_final.pdf)

A.2.2 Impact of redundancy on health and well-being

Older people

Involuntary job loss due to redevelopment may have disproportionate health effects for older workers. Older workers are at an increased risk of cardiovascular disease due to increased stress resulting from contributing factors such as a lower likelihood of re-employment, a substantial loss of income and the severance of work-based social interactions.¹¹⁹

Children

Involuntary redundancy may also disproportionately impact the wellbeing of children. Research has shown that redundancy can create an increased risk of family tension and disruption, and that job loss can have detrimental effects on children including lowered self-esteem and socio-psychological well-being.¹²⁰ This is, in turn, is connected to effects on children's education attainment. Studies have shown that effects of parental redundancy on children including higher likelihood of grade repetition, dropout, suspension or expulsion from school, lower educational attainment and lower income of children in adulthood.¹²¹

A.2.3 Access to commercial finance

Renewal may result in effects on trade, relocation or closure. This may result in a need to access finance, which can be more difficult for particular groups

For businesses, redevelopment and renewal may result in relocation or closure. This may result in a need to access finance to secure new premises.

Ethnic minority groups

Research indicates that businesses owned by members of some ethnic groups are more likely to be denied a loan outright in comparison to White-owned businesses. Black African owned businesses are four times more likely to be denied a loan outright, Black Caribbean-owned businesses are three and a half times more likely, Bangladeshi-owned businesses are two and a half times more likely, and Pakistani-owned businesses are one and a half times more likely. This suggests that ethnic minority-owned businesses tend to experience greater difficulties in securing financial support, which could be detrimental where redevelopment results in a reduction in affordable commercial premises.¹²²

A.2.4 Impacts on customer base

With the announcement of demolition, local businesses and community facilities may relocate. Such relocation may impact the customer base that businesses have accumulated from the local area should the new business premises be further afield from existing customers.

Research suggests that **older people** may find it harder to access services and amenities that are located further away. For **disabled people**, especially those who have mobility impairments, the relocation or closure of businesses can reduce accessibility to services and amenities which they rely on, potentially increasing social isolation and the likelihood of negative mental health outcomes. People belonging to **minority ethnic groups** may also be more reliant on existing networks and links with local infrastructure when compared to other ethnic groups.

A.3 Impact on community following renewal process

A.3.1 Tackling crime and disorder

Levels of crime have in part be attributed to the urban environment. Using theoretical approaches such as Rational Choice Theory¹²³ and Broken Windows Theory,¹²⁴ a strong argument has developed which links the design of neighbourhoods and towns to levels of crime and disorder.¹²⁵ It has been argued that the opportunity for some forms of crime can be reduced through better thought-out approaches to planning and design of neighbourhoods and towns. For example, concepts such as Crime Prevention Through Environmental Design (CPTED)¹²⁶ are more frequently used today to ensure buildings and public spaces are designed in a way that aims to reduce the occurrence of crime and alter the environmental factors that might encourage criminal behaviour. Indeed, evidence suggests that homes built to 'Secured by Design' principles can reduce burglary and crime rates by up to 75%.¹²⁷

Children, young people, older people, disabled people, ethnic minority groups, men, women and LGBT people

Changes to the urban environment that affect crime and disorder can impact on those who are more likely to be a victim or witness of crime, including young people, disabled people, people from ethnic minority backgrounds, men and LGBT people. Changes may also affect those who are likely to be adversely impacted by fear of crime, including children, older people, ethnic minority groups, women and LGBT people.

A.3.2 Improved access, mobility and navigation

Aging and being disabled can lead to a decline in physical or cognitive functions, resulting in decreased social activity and narrowing of social networks.¹²⁸ Leisure activities are considered to be effective mediators between social relationships and wellbeing of **older people** and **disabled people**. This is because leisure is scientifically proven to help people overcome their stress resulting from a chronic condition or negative life event. Leisure activities provide disabled and old people with social support, and further mediate their stress-health relationship. Availability of leisure services and facilities could therefore benefit older and disabled people, who are in a greater need for social interaction than the general population.¹²⁹

¹¹⁹ Gallo, W. T., Bradley, E. H., Falba, T. A., Dubin, J. A., Cramer, L. D., Bogardus Jr, S. T., & Kasl, S. V. (2004). 'Involuntary job loss as a risk factor for subsequent myocardial infarction and stroke: findings from the Health and Retirement Survey'. American journal of industrial medicine, 45(5), 408-416. Available at: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC1351254/pdf/nihms-6175.pdf>

¹²⁰ Brand, J. E. (2015). 'The far-reaching impact of job loss and unemployment'. Annual review of sociology, 41, 359-375. Available at: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4553243/>

¹²¹ Brand, J. E. (2015). 'The far-reaching impact of job loss and unemployment'. Annual review of sociology, 41, 359-375. Available at: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4553243/>

¹²² Enterprise Research Centre (2013): 'Diversity and SMEs'. Available at: <https://www.enterpriseresearch.ac.uk/wp-content/uploads/2013/12/ERC-White-Paper-No-3-Diversity-final.pdf>

¹²³ Felson and Clarke (1998) 'Opportunity Makes the Thief, Practical Theory of Crime Prevention'. Available at: <https://pdfs.semanticscholar.org/09db/dbce90b22357d58671c41a50c8c2f5dc1cf0.pdf>

¹²⁴ Wilson and Kelling (1982) 'Broken Windows: The police and neighbourhood safety'. Available at: <https://www.theatlantic.com/magazine/archive/1982/03/broken-windows/304465/>

¹²⁵ See for example, Monahan and Gemmell (2015) 'Reducing Crime Hotspots in City Centres'. Available at: <http://www.bre.co.uk/filelibrary/Briefing%20papers/102417-Crime-Hotspots-Briefing-Paper-v4.pdf>

¹²⁶ Jeffery (1971) 'Crime Prevention Through Environmental Design'. Sage publications

¹²⁷ Secured by Design (2014) 'Secured by Design: Reducing crime by good design'. Available at: <https://mbp.co.uk/wp-content/uploads/2017/06/Secured-by-Design-Reducing-Crime-by-Good-Design-reduced.pdf>

¹²⁸ Wray et al. (2014): 'Social relationships, leisure activity and health in older adults' Available at: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4467537/>

¹²⁹ Liu et al. (2018): 'Social interaction patterns of the disabled people in asymmetric social dilemmas' Available at: <https://www.frontiersin.org/articles/10.3389/fpsyg.2018.01683/full>

A.3.3 Improve public realm and green space

The ability to access and use the public realm is vitally important to ensuring people feel that they are active members of their society. This includes basic activities such as using local shops or meeting up with people in a shared space outside close to home.¹³⁰

However, it has been acknowledged that **disabled people** and **ethnic minority** communities are less likely to take part in public life than other sections of the population.¹³¹ For disabled people, public spaces can often be inaccessible. The presence of vehicular traffic and lack of accessible design (such as the use of appropriate paving and lighting) can present a barrier to using outdoor, shared public spaces.¹³² And, evidence suggests that in areas where over 40% of residents are ethnic minority, there is 11 times less green space when compared to areas where residents are largely White.¹³³

The inclusion of community gardens and other public green spaces through redevelopment can also benefit **older people, children, and disabled people**. Research reports that interaction with nature or gardening can improve attentional functioning for children who have Attention Deficit Hyperactivity Disorder (ADD) and can also reduce stress levels and improve self-esteem for children. Such inclusion can also improve self-identity and a sense of purpose for those with dementia, and can generally improve social interaction, social mixing, and community building.¹³⁴

Better access to, and management of, the public realm is also important to the provision of play space for children. When children are able to play in an outdoor environment, they tend to be more active which supports positive mental health and wellbeing.

Disabled people

Research into the health benefits of urban green space has found that it can positively impact both physical and mental health. With physical health, a UK study found that those who live within 500 meters of accessible green space are 24% more likely to take part in 30 minutes of physical activity daily. In terms of mental health, green space can provide areas that encourage social interaction and integration and can indirectly benefit the wellbeing of users.¹³⁵

Ethnic minority

Research has found that in urban areas ethnic minority groups tend to have less access to local green space, and the space they can access is often of poor quality. For example, in the UK, wards that have an ethnic minority population of less than 2% have six times as much green space as wards where the ethnic minority population is over 40%.¹³⁶ The provision of green space is therefore likely to benefit this group.

Children

Children are likely to benefit from urban green space. Research carried out by UCL highlighted that urban green space can have a positive role in a child's cognitive functioning. The study

found that children who lived in areas with more green space outperformed those from areas with less green space.¹³⁷ Exposure to green space is also important for a child's wellbeing and healthy development. However, children living in London can experience barriers in access to green space compared to the rest of the UK. This is due to the high population densities, deficiencies in green space and poor access to private gardens that are characteristic of London.¹³⁸

The presence of urban green space also presents an opportunity to incorporate play space into regeneration schemes. Research by Play England has highlighted the benefits of play to children, and how play is central to a child's physical, psychological and social wellbeing. Play space can enable children to form friendships, interact with others and feel part of a group, something that is important to levels of self-esteem. Play space can also encourage children to have familiarity with an area and identify as part of a community. Lastly, ensuring that outdoor play space is fun and enjoyable for children is a key motivator for physical activity and exercise.¹³⁹

Older people

Urban green space may also benefit older people. Evidence suggests that inner-city green space can promote social cohesion and instil a sense of community. Social contact is especially important for the health and wellbeing of older people as social isolation has been linked to poor health and increased mortality rates.¹⁴⁰

However, in order to ensure the best outcomes, the design and maintenance of green space is important. Well designed and maintained spaces that have attractive green areas and planted vegetation are perceived as safer and more 'walkable'. If green space is not maintained and becomes littered and derelict, the appeal of the green space decreases and anti-social behaviour can occur.¹⁴¹ Evidence shows that safety of urban green space is particularly important to women and ethnic minority individuals. These groups may perceive themselves as vulnerable when visiting urban green spaces due to previous experiences of victimisation or harassment. Such experiences can result in these groups feeling fearful of urban green space.¹⁴²

Overall, the provision and maintenance of green spaces in urban areas can make an important contribution to the health and wellbeing of several groups, specifically ethnic minority, children and older people. However, such space must be appropriately managed and maintained to ensure positive outcomes, and so that users (particularly women and ethnic minority individuals) feel safe.

A.3.4 Provision of community resource and improved social cohesion

community resources provide important places of social connection and promote wellbeing for **children, older people, disabled people, people from an ethnic minority background and pregnant women**. Regeneration of areas can include both continued access to and the creation

¹³⁰ House of Commons Women and Equalities Committee (2017): 'Building for Equality: Disability and the Built Environment'.

¹³¹ Greater London Authority (2017): 'The Mayor's vision for a diverse and inclusive city: Draft for consultation'.

¹³² House of Commons Women and Equalities Committee (2017): 'Building for Equality: Disability and the Built Environment'.

¹³³ CABE (2016): 'Community green: using local spaces to tackle inequality and improve health'.

¹³⁴ Maheshwari, S. (2017). 'Food in the City: Review of Psychological Impact of Growing Food in Urban Spaces'. *Journal of Innovation for Inclusive Development*, 2(1), 36-43.

¹³⁵ Houses of Parliament, Parliamentary Office of Science & Technology (2016): 'Green Space and Health'. Available at:

<https://www.ethnicity-facts-figures.service.gov.uk/housing/housing-conditions/fuel-poverty/latest>

<http://researchbriefings.files.parliament.uk/documents/POST-PN-0538/POST-PN-0538.pdf>

¹³⁶ Commission for Architecture and the Built Environment (2010): 'Community green: Using local spaces to tackle inequality and improve health'. Available at: <https://www.designcouncil.org.uk/sites/default/files/asset/document/community-green-full-report.pdf>

¹³⁷ UCL (2018): 'Greener neighbourhoods may be good for children's brains'. Available at:

<https://www.ucl.ac.uk/oe/news/2018/sep/greener-neighbourhoods-may-be-good-childrens-brains>

¹³⁸ London Sustainable Development Commission (2011): 'Sowing the seeds: Reconnecting London's children with nature'. Available at:

https://www.london.gov.uk/sites/default/files/lscdc_-_sowing_the_seeds_-_full_report_2011.pdf

¹³⁹ Play England (2012): 'A literature review on the effects of a lack of play on children's lives'. Available at:

<http://www.playengland.net/wp-content/uploads/2015/09/a-world-without-play-literature-review-2012.pdf>

¹⁴⁰ World Health Organisation (2016): 'Urban green spaces and health, a review of evidence'. Available at:

http://www.euro.who.int/_data/assets/pdf_file/0005/321971/Urban-green-spaces-and-health-review-evidence.pdf?ua=1

¹⁴¹ Houses of Parliament, Parliamentary Office of Science & Technology (2016): 'Green Space and Health'. Available at:

<http://researchbriefings.files.parliament.uk/documents/POST-PN-0538/POST-PN-0538.pdf>

¹⁴² World Health Organisation (2016): 'Urban green spaces and health, a review of evidence'. Available at:

http://www.euro.who.int/_data/assets/pdf_file/0005/321971/Urban-green-spaces-and-health-review-evidence.pdf?ua=1

of community resources, improving social cohesion and community relations. This can impact on all parts of the community, but can have a disproportionate effect on the above groups

Improved provision of affordable and accessible facilities for sports and physical activity would positively impact groups that often face barriers to participation, including older people, disabled people, ethnic minority communities, and those who identify as LGBT.¹⁴³

A.3.5 New employment opportunities

Renewal and regeneration where done effectively can act as a means of promoting economic growth and supporting job creation.¹⁴⁴ For example, property development can contribute to urban economic regeneration through the enabling of local stores to grow and expand, and through attracting investment to the area and revitalising neighbourhoods. It can also facilitate improved connectivity between communities and places of employment and education. Improved opportunities to access employment and education can serve to help address issues of inequality and improve social mobility, this may particularly benefit the protected characteristic groups who are more likely to face barriers to employment. These groups include older people, disabled people, and those from an ethnic minority background.

New opportunities may also positively affect other protected characteristics groups who are more likely to face unemployment, including young people and women. Statistics released in 2018 have shown that for the first time since the 1980s, British women are more likely to be unemployed than men. For young people, amongst those aged 16-24, 11.2% are Not in Education, Employment or Training (NEET). Recent unemployment statistics for the UK show that young people are around four times more likely to be unemployed than their adult counterparts aged 25-64.¹⁴⁵

A.3.6 Improved housing provision

Regeneration can lead to the relocation of residents. Whilst negative effects can arise as a result of relocation, positive effects may also arise. This is particularly likely to be the case should residents move to an area with more green space, and better air quality. Groups that are susceptible to air pollution (see section A.1.4), and may therefore benefit from relocation, include children, older people, disabled people and those who are pregnant.

Section 3.3.3 outlines the importance of appropriate, accessible and affordable housing for particular protected characteristic groups, including children, disabled people, and people from an ethnic minority background. The regeneration of the area will improve the housing provision in the local areas increasing capacity and quality. This can affect all parts of the community but can have a disproportionate effect on the above groups.

Children and older people

Through redevelopment, homes can be re-provided to a high standard, including better sound proofing and lower energy costs and consumption levels.¹⁴⁶ With regard to noise, reduced levels due to redevelopment can disproportionately impact children and older people.

With regard to insulation, the Decent Homes Standard (DHS) requires local authorities to make sure all social housing provides a reasonable degree of thermal comfort to its residents. This includes ensuring efficient heating is provided with use of minimum insulation levels. However, the DHS does not require local authorities to ensure all social housing is heated affordably, and therefore does not always automatically serve to address issues such as fuel poverty.¹⁴⁷

Fuel poverty and cold housing can have several detrimental effects on individual's physical and mental health. Children living in cold homes are more than twice as likely to suffer from a variety of respiratory problems than children living in warm homes. Cold housing can negatively impact children's educational attainment, emotional wellbeing and resilience.¹⁴⁸

Effects of cold housing are also evident among older people in terms of higher mortality risk, physical health and mental health. Older people spend on average 80% of their time at home, making them more susceptible to cold or damp related health problems. Cold temperatures can increase the levels of minor illnesses such as colds and flu, contribute towards excess winter deaths, negatively affect mental health, and exacerbate existing conditions such as arthritis and rheumatism.¹⁴⁹

Disabled people

Research from disability charity Scope evidences that long term impairments or conditions have a significant impact on energy costs, with many disabled people consuming more energy because of their impairment or condition. In particular those with limited mobility report having to use more heating to stay warm.¹⁵⁰

People from an ethnic minority background

In England, fuel poverty is more common with ethnic minority households when compared to White households.¹⁵¹ Data shows that in 2015, 16% of ethnic minority households were living in fuel poverty compared to 10% of White households.¹⁵²

¹⁴³ Assembly, N. I. (2010). 'Barriers to Sports and Physical Activity Participation'.

¹⁴⁴ Communities and Local Government (2012) 'Regeneration to enable growth: A toolkit supporting community-led regeneration'. Available at: https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/5983/2064899.pdf

¹⁴⁵ UK Government (2018) 'Unemployment'. Available at: <https://www.ethnicity-facts-figures.service.gov.uk/work-pay-and-benefits/unemployment-and-economic-inactivity/unemployment/latest>

¹⁴⁶ City of Westminster Council (2018): 'My Ebury: Shaping the preferred scenario'.

¹⁴⁷ Centre for Sustainable Energy (2006): 'Tackling fuel poverty at local and regional level: opportunities to deliver action and policies to stimulate success'. Available at: https://www.cse.org.uk/downloads/reports-and-publications/fuel-poverty/tackling_fuel_poverty_at_local_and_regional_level.pdf

¹⁴⁸ Marmot Review Team (2011) 'The Health Impacts of Cold Homes and Fuel Poverty'. London: Department of Epidemiology and Public Health, University College London.

¹⁴⁹ The Housing and Ageing Alliance (2013) 'Policy Paper: Health, Housing and Ageing', Available at www.housingalliance.org/HAA/

¹⁵⁰ Scope (2018) 'Out in the Cold', Available at <https://www.scope.org.uk/Scope/media/images/Out-in-the-cold.pdf>

¹⁵¹ This does not include White ethnic minority households.

¹⁵² Department for Business, Energy and Industrial Strategy (2017): 'Ethnicity facts and figures: Fuel poverty'. Available at: <https://www.ethnicity-facts-figures.service.gov.uk/housing/housing-conditions/fuel-poverty/latest>

B. Area profile and proportionality

This appendix is split into three sections. Section A.1 provides an overview of the socio-demographic profile of the Estate (the study area outlined in Chapter 2). An overview of community resources is provided in Section A.2. Section A.3 provides the results of socio-demographic monitoring for the area which has been collated through a review of the Starting the Conversation questionnaire administered by Southwark Council.

B.1 Socio-demographic profile of the area

The area profile below provides a wider contextual demographic characterisation of the area in which the Estate falls. The data includes the current social and economic context of the area and relevant comparators, namely the London Borough of Southwark, the Greater London region, and England. In comparing these regions, where the Estate deviates by more than 3%, the difference is considered to be significant and is reported as such.

The demographic data¹⁵³ has been sourced from publicly available data and only applies to the resident population.

Age

The tables and figures below show the population for key age groups within the Estate and the above comparator areas. The figures show both the proportion and density of each age group within the different areas.

Children (under 16 years)

The table below indicates that the proportion of people under the age of 16 on the Estate is broadly in line with Southwark, Greater London, and England (18% compared with 19%, 21% and 19% respectively).

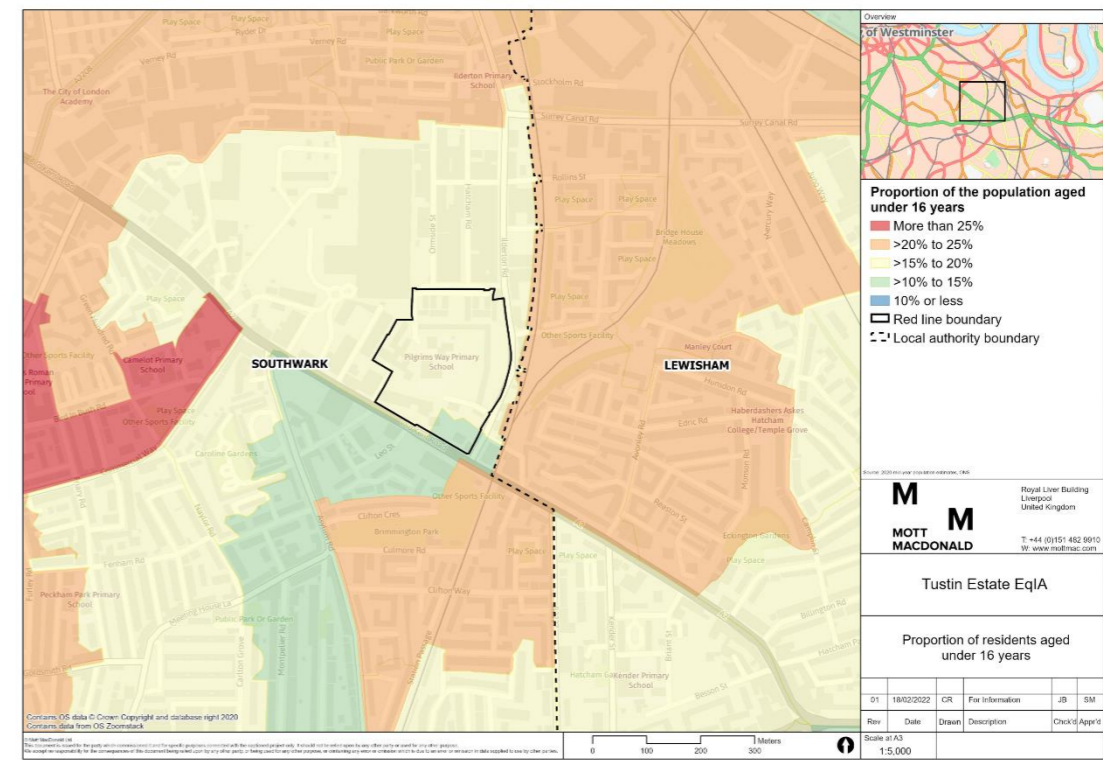
Table B.1: Children (under 16 years)

Location	Total population, 2020	Children (under 16 years)	%
Estate	1,190	211	18%
Southwark	320,017	60,065	19%
Greater London	9,002,488	1,853,207	21%
England	56,550,138	10,852,240	19%

Source: ONS 2020 mid-year population estimates

The following figure, Map A.1, illustrates that the proportion of children within the Estate ranges between 11% to 20% of the population; lower than most surrounding areas but higher than the area south of the Estate

Map B.1: Proportion of children under 16 within the Estate

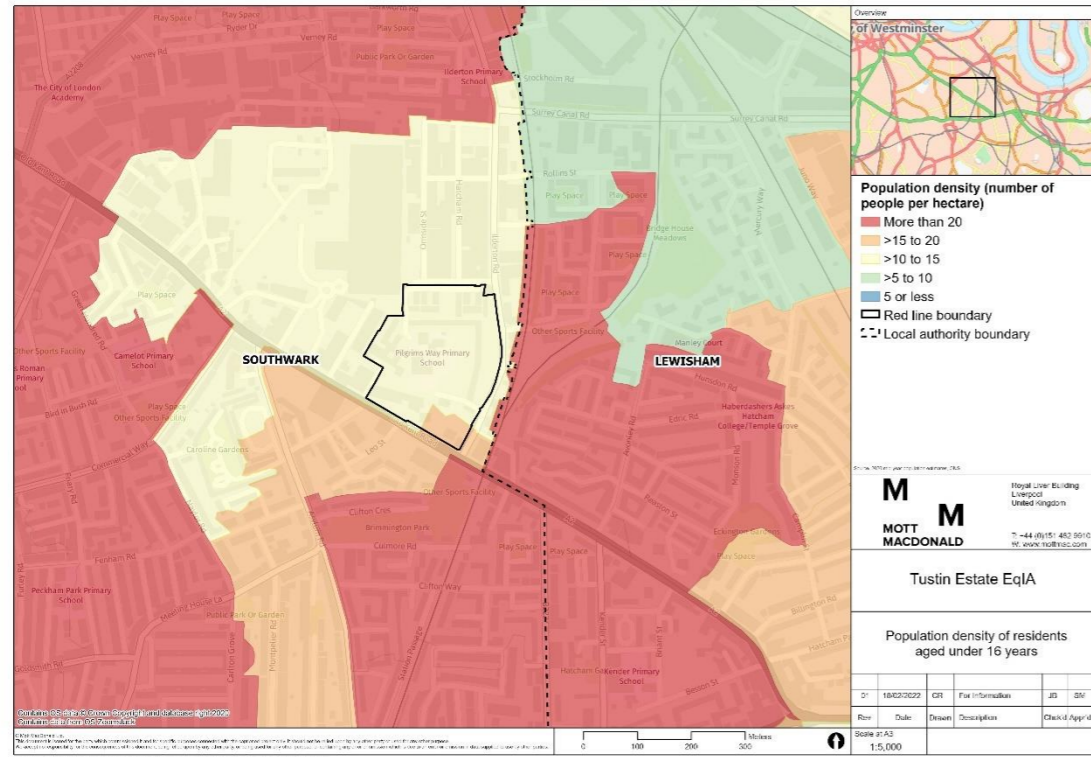


Source: Mott MacDonald

¹⁵³ In order to calculate statistics for the Estate, codepoint data was used, which includes a point representing each postcode area. Lower Super Output (LSOA) data is shared between the codepoints that fall within each LSOA, and is summed up for where the codepoints fall within the Estate.

Map A.2, below, illustrates that the density of children within the Estate is lower than most of the surrounding areas, with a density of 11 to 15 children per hectare through most of the Estate.

Map B.2: Population density of children under 16 within the Estate



Source: Mott MacDonald

Young people (16-24 years)

Table A.2 shows that the proportion of young people aged 16-24 within the Estate (10%) is broadly in line with Southwark, Greater London and England (11%, 10% and 11% respectively).

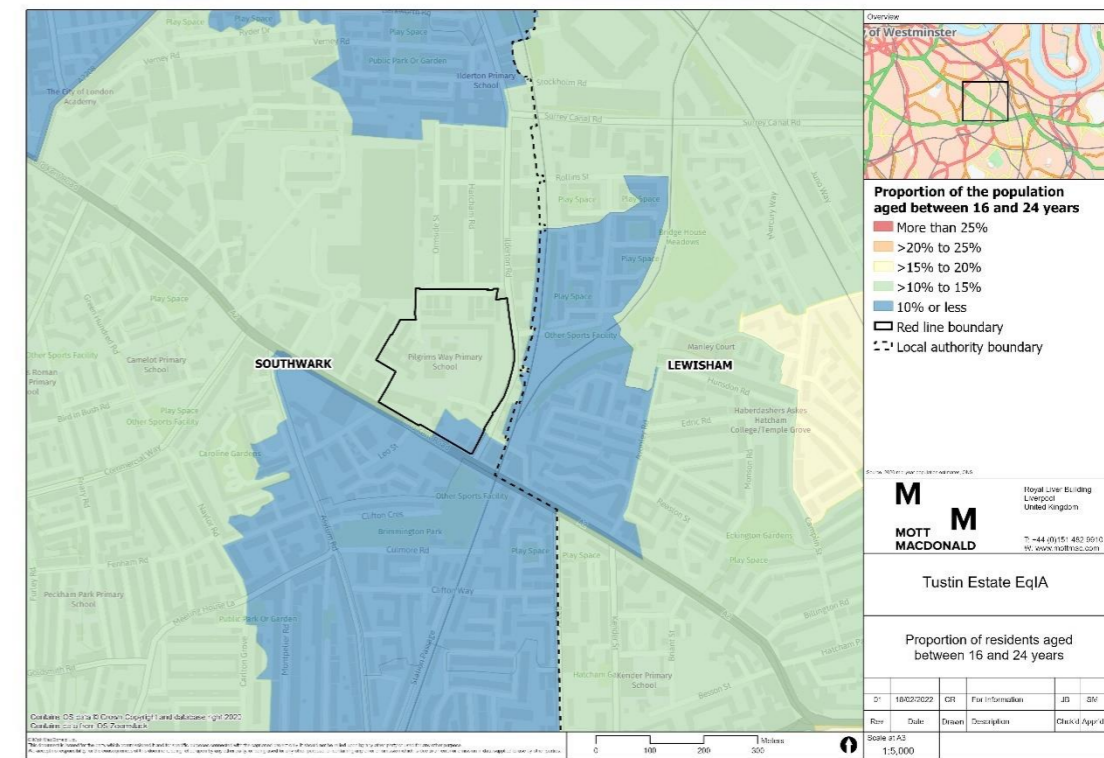
Table B.2: Young people (16-24 years)

Location	Total population, 2020	Young people (16-24 years)	%
Estate	1,190	118	10%
Southwark	320,017	33,947	11%
Greater London	9,002,488	930,728	10%
England	56,550,138	5,950,637	11%

Source: Office of National Statistics (2020) Mid- year population estimates

Map A.3, below, demonstrates that proportions of young people aged 16-24 within the Estate are less than 15% across the Estate. This is broadly in line with most of the surrounding areas, with slightly lower proportions to the north and south.

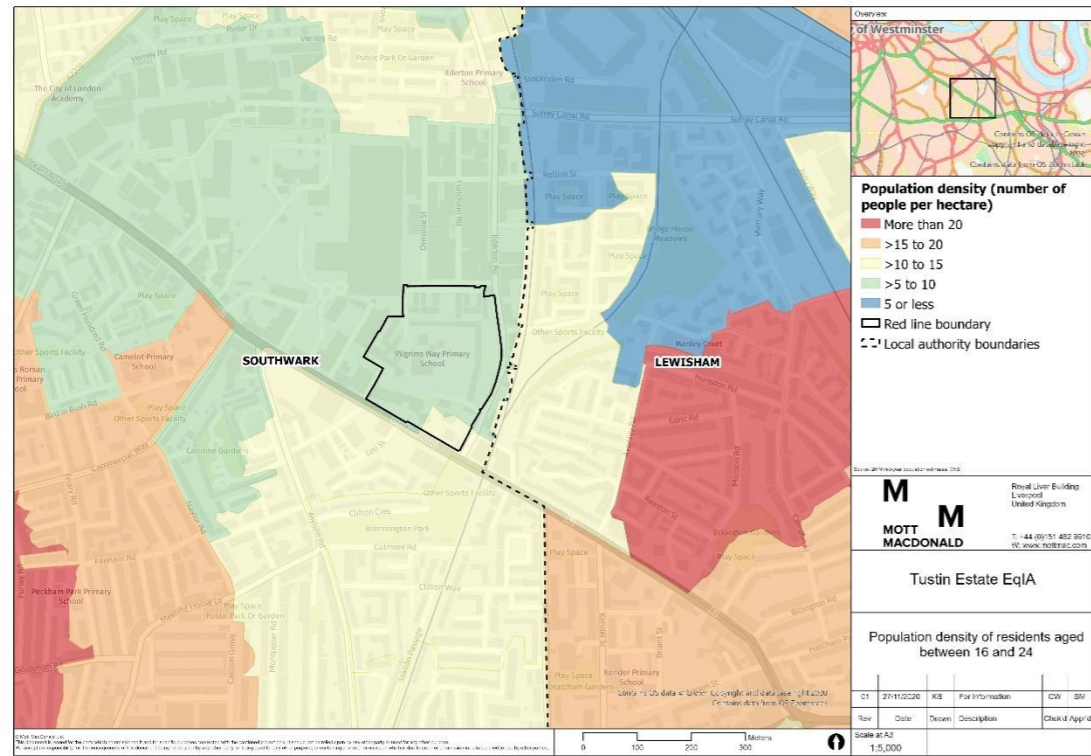
Map B.3: Proportion of young people aged 16-24 within the Estate



Source: Mott MacDonald

Map A.4 illustrates that there are lower population densities of young people aged 16-24 across the Estate when compared to surrounding areas, with approximately 6 to 10 young people per hectare across the estate.

Map B.4: Population density of young people aged 16-24 within the Estate



Source: Mott MacDonald

Working aged people (16- 64)

The percentage of working age people (aged between 16 and 64) on the Estate (71%) is broadly in line with that of Southwark (73%) but higher than Greater London and England (67% and 62% respectively).

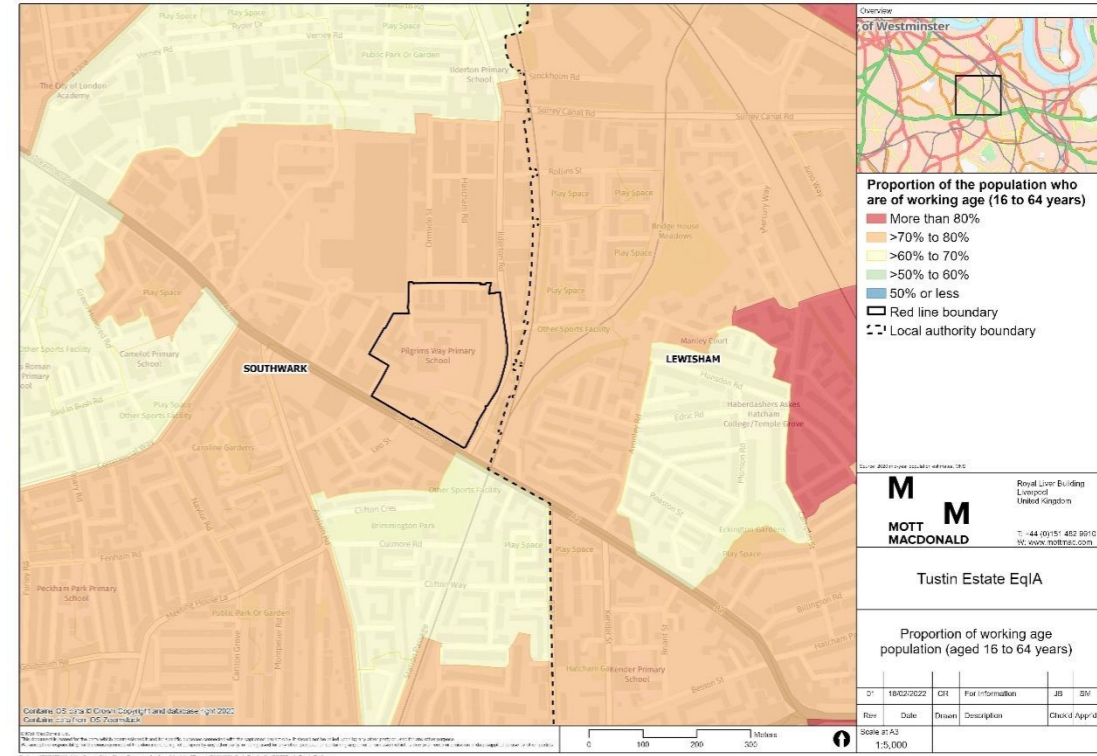
Table B.3: Working age population

Location	Total population, 2019	Working age population	%
Estate	1,190	844	71%
Southwark	320,017	232,014	73%
Greater London	9,002,488	6,050,828	67%
England	56,550,138	35,233,879	62%

Source: ONS 2020 mid-year population estimates and 2011 Census

Map B.5, below, demonstrates that the proportion of working age residents on the Estate is between 71% and 80%, in line with most surrounding areas.

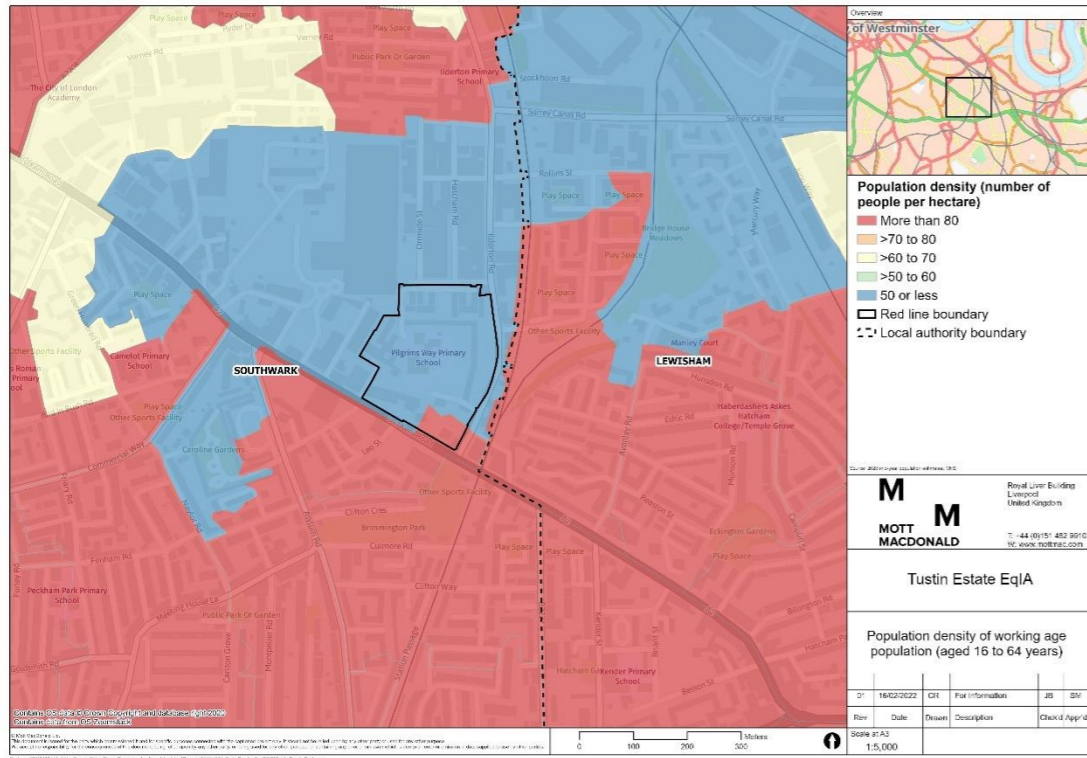
Map B.5: Proportion of residents aged between 16 and 64.



Source: Mott MacDonald

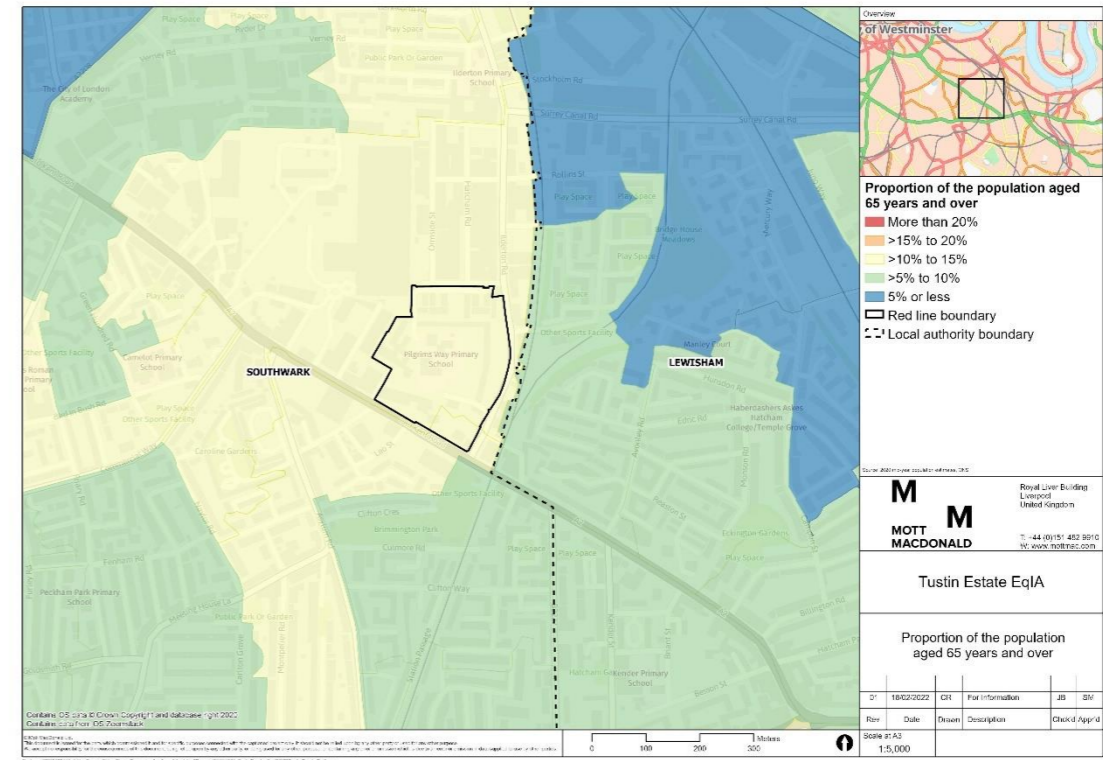
Map A.6, demonstrates that there is a lower density of working age people on the Estate when compared to surrounding areas. Most of the Estate has a density of less than 50 working age people per hectare. However, in a small area in the south east this density rises to more than 80 working age people per hectare.

Map B.6: Population density of working age people



Source: Mott MacDonald

Map B.7: Proportion of residents aged 65 and over



Source: Mott MacDonald

Older people (over 65 years)

The percentage of older people over 65 years within the Estate (11%) is broadly in line with Southwark and Greater London (9% and 12% respectively), but significantly lower than England as a whole (18%).

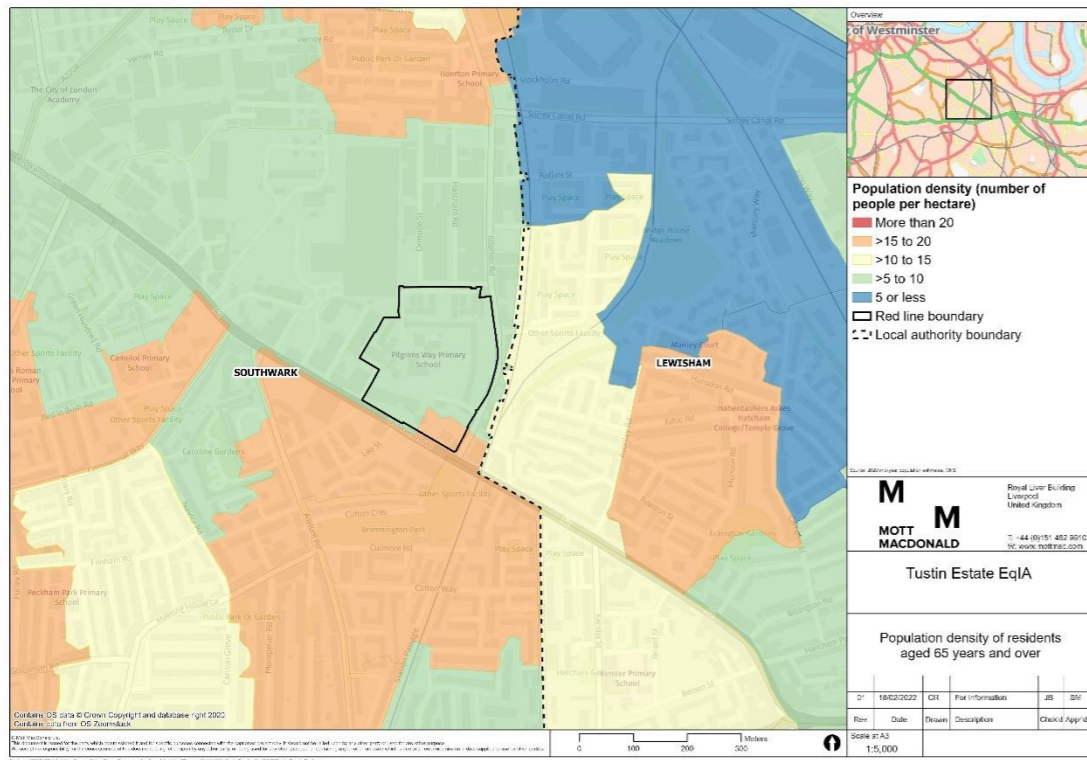
Table B.4: Older people (65+ years)

Location	Total population, 2020	Older people (65+ years)	%
Estate	1,190	135	11%
Southwark	320,017	27,938	9%
Greater London	9,002,488	1,098,453	12%
England	56,550,138	10,464,019	18%

Source: Office for National Statistics (2020) Mid- year population estimate

Map A.7, below, demonstrates that that proportions of older people over 65 years within the Estate, ranging between 11% and 15%, is in line with the proportion of older people living in the areas immediately surrounding the Estate.

Map B.8: Population density of people aged over 65 years



Source: Mott MacDonald

Disabled people

The table below shows the proportion of disabled people living in the Estate, Southwark, Greater London, and England.

There are higher proportions of disabled people (those whose day-to-day activities are limited a little or a lot) within the Estate (17%) when compared with Southwark and Greater London (both 14%), however this figure is in line with the proportion of disabled people in England (17%). People in existing poor health with long-term conditions that limit their day-to-day activities may be more sensitive to changes such as increased air pollutants from construction.

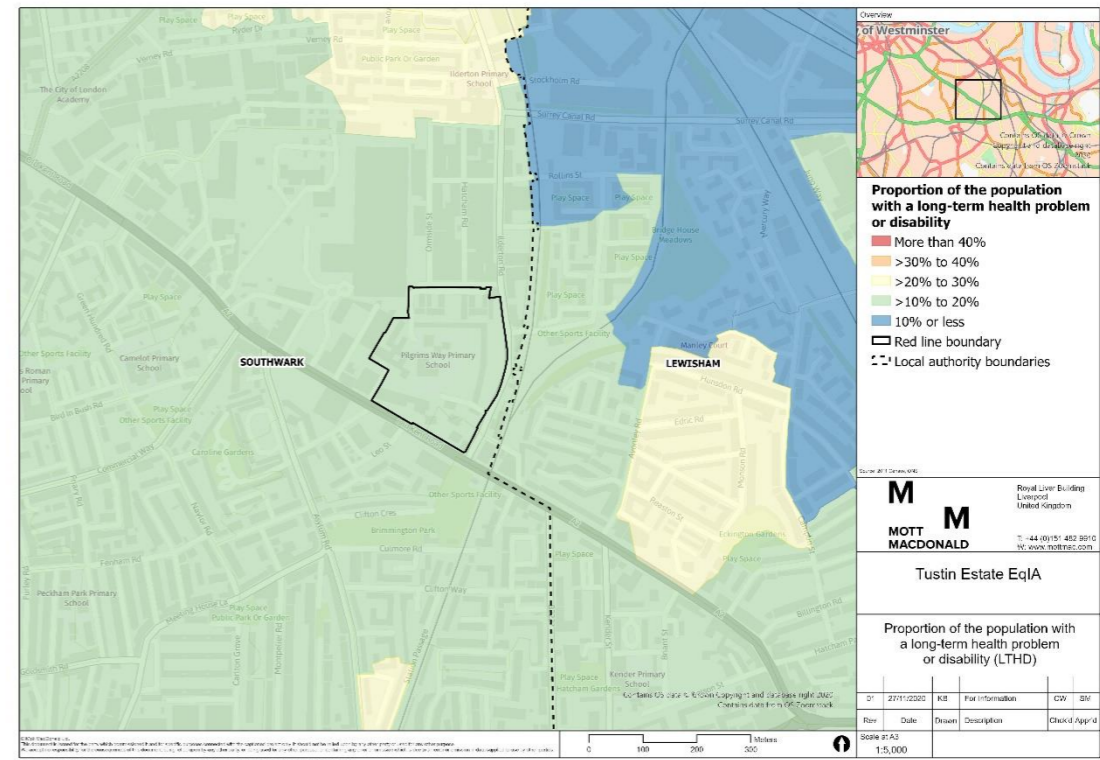
Table B.5: Population with a long-term health problem or disability limiting day-to-day activities

Disability	Estate	Southwark	Greater London	England
Limited a lot	8%	7%	7%	8%
Limited a little	9%	7%	7%	9%
Not limited	84%	86%	86%	82%

Source: Office of National Statistics (2011) Census data

Map A.9, below, shows that the proportion of people in the Estate living with a long-term health condition or disability ranges from 11% to 20%, broadly in line with most surrounding areas.

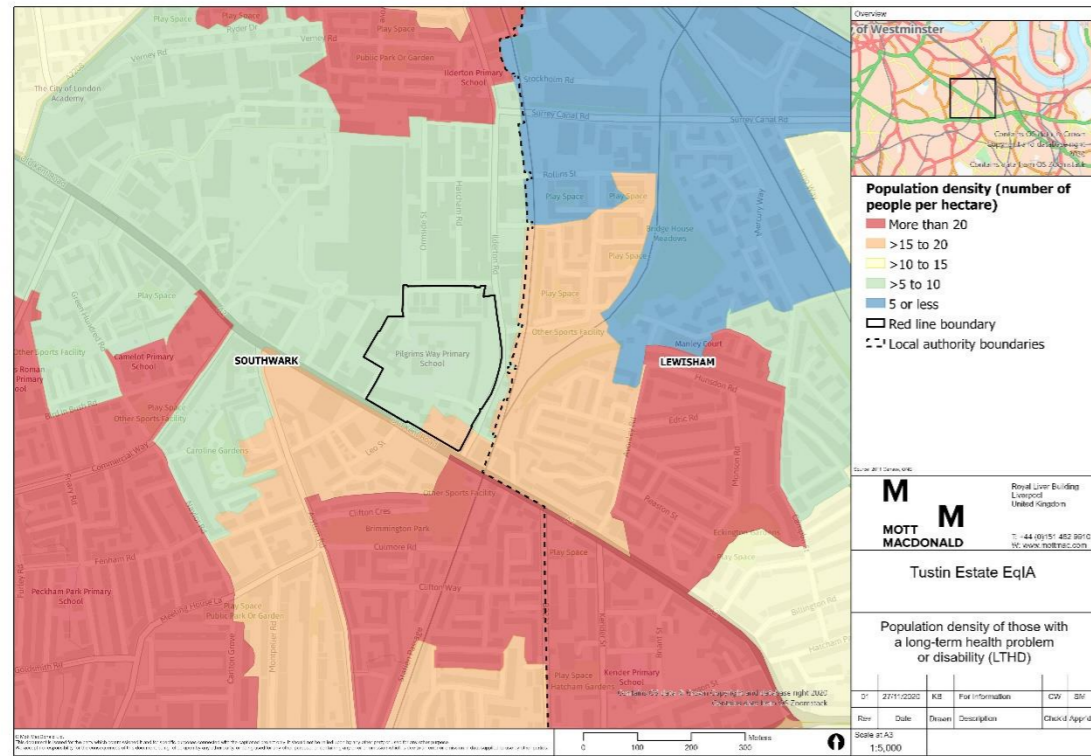
Map B.9: Proportion of residents with a long-term health condition or disability



Source: Mott MacDonald

Map A.11, below, illustrates that across the majority of the Estate, the density of people with a long-term health problem or disability is between 6 and 10 people per hectare. This is lower than most areas surrounding the Estate.

Map B.10: Population density of people within the Estate with a long-term health problem or disability



Source: Mott MacDonald

Gender reassignment

There are no Census or other data for the number of gender variant people with the Estate, Southwark, Greater London, or England. Data on gender identity is currently limited as there are still a number of methodological challenges obtaining this data such as privacy and acceptability; complexity; accuracy; terminology; small sample universe, and the scope of information required.¹⁵⁴ The ONS, though, has estimated that the size of the Trans community in the UK could range from 65,000 to 300,000.¹⁵⁵

Marriage and civil partnership

The total proportion of those who are married or in a civil partnership that live within the Estate (30%) is lower than Southwark, Greater London, and England (29%, 40%, and 47% respectively).

The table below shows that there is a lower percentage of married people within the Estate (25%), compared to Southwark (29%). However, both the Estate and Southwark's percentage of married people are considerably lower than both Greater London, and England (40% and 47% respectively). The proportion of people in a civil partnership in the Estate (0.5%) is broadly in line with that in Southwark, Greater London and England (0.9%, 0.4% and 0.2% respectively). The proportion of people on the Estate who are separated, but still legally married, (6%) is broadly in line with figures in Southwark, Greater London and England (4%, 3% and 3% respectively).

Table B.6: Population married or in a civil partnership

Location	All usual residents aged 16+, 2011	Married	%	In a civil partnership	%	Separated (still legally married or in a civil partnership)	%
Estate	870	270	31%	4	0.5%	54	6%
Southwark	234,901	66,997	29%	2,159	0.9%	10,080	4%
Greater London	6,549,173	2,608,345	40%	27,425	0.4%	211,500	3%
England	42,989,620	20,029,369	47%	100,288	0.2%	1,141,196	3%

Source: Office for National Statistics 2011 Census

¹⁵⁴ Office for National Statistics (date unknown): 'Gender identity update'

¹⁵⁵ Office for National Statistics (2009): 'Trans Data Position Paper'.

Pregnancy and maternity

Table A.7, below, shows that live births in Southwark, as a proportion of the total population (1.3%), are broadly in line with Greater London and England figures (1.3% and 1.1% respectively). Estate level data is not available for pregnancy and maternity.

Table B.7: Live births by mothers' usual area of residence

Births	Southwark	Greater London	England
Female population aged between 16 and 44	80,405	1,978,845	10,581,832
Total population	320,017	9,002,488	56,550,138
Live births by mothers' usual area of residence	3,557	111,688	585,195
Live births by mothers' usual area of residence (%)	1.3%	1.3%	1.1%

Source: Office of National Statistics 2020 mid-year population estimates.

Table A.8 below shows that the General Fertility Rate (all live births per 1000 women aged 16 to 44) in Southwark (44.2) is lower than that of the general fertility rate in Greater London (56.4) and England (55.3). The Total Fertility Rate in Southwark (1.18) is lower than the total fertility rate in Greater London (1.54) and England (1.59).

Table B.8: General and total fertility rates

Fertility Rate	Southwark	Greater London	England
General fertility rate (all live births per 1000 women aged 16 to 44)	44.2	56.4	55.3
Total fertility rate (average number of children born per woman)	1.18	1.54	1.59

Source: ONS 2020 mid-year population estimates and Live births in England and Wales : birth rates down to local authority areas 2018

Race and ethnicity

The table below provides a breakdown of the race and ethnicities of residents on the Estate compared with Southwark, Greater London, and England. The proportion of those from an Ethnic Minority background (76%) is considerably higher than Southwark (60%), Greater London (55%) and England (20%). The largest ethnic minority group on the Estate are those from a Black African background (28%). This is higher than the proportion in Southwark (16%), Greater London (7%), and England (2%).

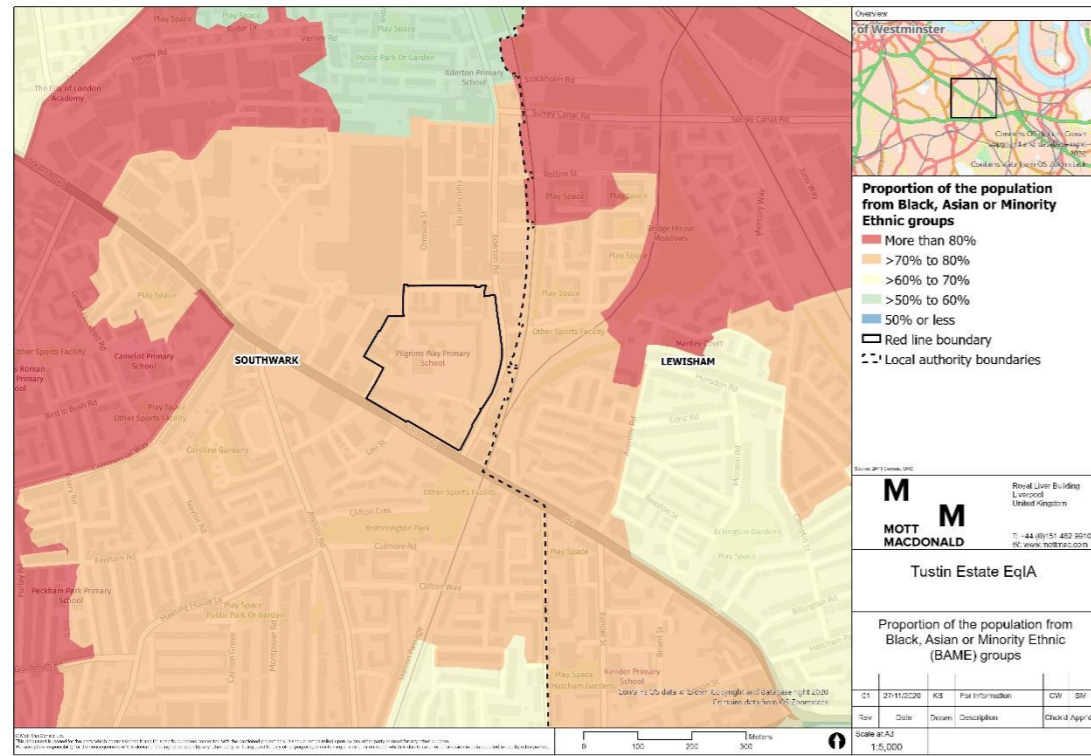
Table B.9: Population by race and ethnicity

Race and ethnicity	Estate	Southwark	Greater London	England
White British	24%	40%	45%	80%
Ethnic minority	76%	60%	55%	20%
Irish	2%	2%	2%	1%
Gypsy or Irish Traveller	0.1%	0.1%	0.1%	0.1%
Other White	12%	12%	13%	5%
White and Black Caribbean	3%	2%	1%	0.8%
White and Black African	2%	1%	0.8%	0.3%
White and Asian	0.5%	1%	1%	0.6%
Other mixed	2%	2%	1%	0.5%
Indian	1%	2%	7%	3%
Pakistani	0.3%	0.6%	3%	2%
Bangladeshi	0.6%	1%	3%	0.8%
Chinese	2%	3%	2%	0.7%
Other Asian	3%	3%	5%	2%
Black African	28%	16%	7%	2%
Black Caribbean	8%	6%	4%	1%
Other Black	6%	4%	2%	0.5%
Arab	1%	0.8%	1%	0.4%
Any other ethnic group	4.5%	2%	2%	0.6%

Source: Office for National Statistics 2011 Census

Map A.11 below illustrates that people from an ethnic minority background represent three quarters of the population within the Estate and in surrounding areas. There are similar proportions of people from an ethnic minority background within the Estate compared to surrounding area, with nearly all areas containing proportions between 71% and 80%.

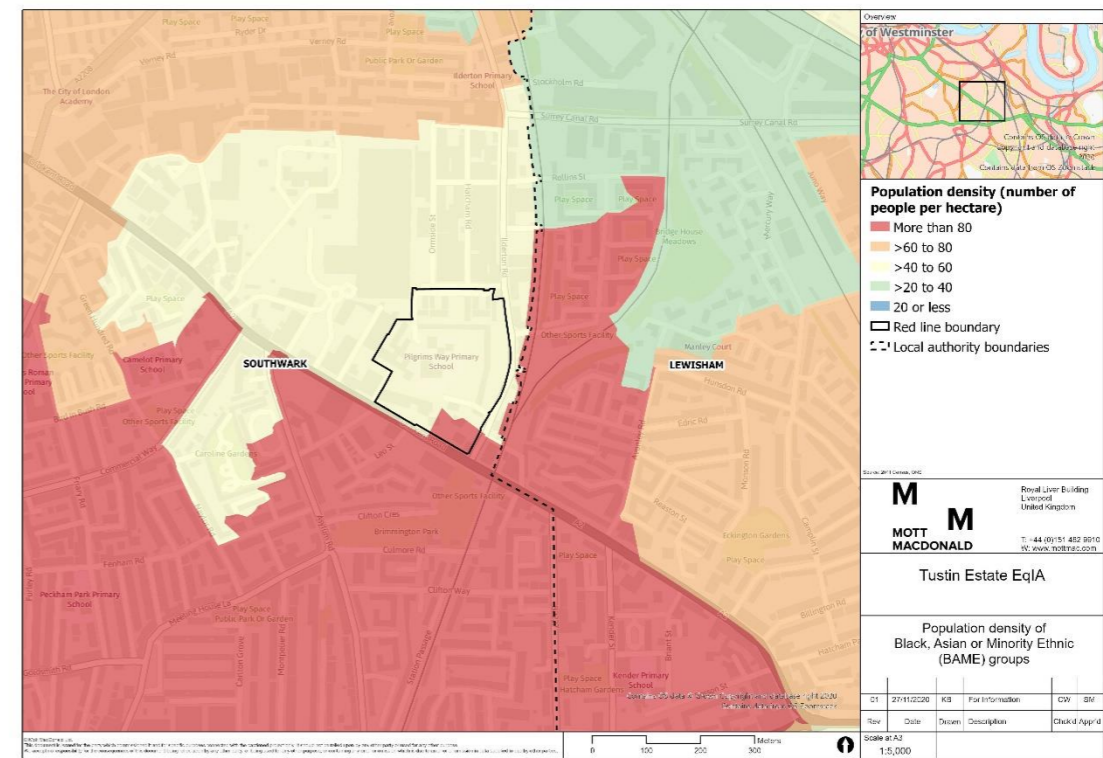
Map B.11: Proportion of people from an Ethnic Minority background within the Estate



Source: Mott MacDonald

Map A.12, below, indicates that there is a lower density of people from an ethnic minority background within the Estate when compared to surrounding areas. Most of the Estate has a density of between 41 to 60 people from an ethnic minority background per hectare. A small area of the Estate in the south has a higher density of people per hectare (80 people per hectare).

Map B.12: Population density of people from an ethnic minority background within the Estate



Source: Mott MacDonald

Religion and belief

The table below provides a religious profile of the Estate, compared with Southwark, Greater London, and England. The Estate has a higher Christian population (59%) compared to Southwark (53%) and Greater London (48%) but is in line with that of England (59%). Proportions of people from minority faith groups are broadly in line with those for Southwark, Greater London and England.

Table B.10: Population by religion or belief

Religion and belief	Estate	Southwark	Greater London	England
Christian	59%	53%	48%	59%
Minority Faith*				
Buddhist	1%	1%	1%	0.5%
Hindu	0.4%	1%	5%	2%
Jewish	0.1%	0.3%	2%	0.5%
Muslim	11%	9%	12%	5%
Sikh	0.4%	0.2%	2%	0.8%
Other Religion	0.7%	0.5%	0.6%	0.4%
No Religion	17%	27%	21%	25%
Religion Not Stated	9%	9%	8%	7%

Source: Office of National Statistics 2011 Census

Sex

The following table shows the proportion of the population who are male and female on the Estate, compared to Southwark, Greater London and England. Proportions of males (52%) and females (48%) that live within the Estate are broadly in line with other areas.

Table B.11: Population by Sex

Sex	Estate	Southwark	Greater London	England
Male	53%	50%	50%	49%
Female	47%	50%	50%	51%

Source: ONS 2020 mid-year population estimates

Sexual orientation

There is no data available on this protected characteristic for the study area. However, emerging experimental statistics relating to sexual identity are available nationally and at a regional level.

In 2017, estimates from the Annual Population Survey (APS)¹⁵⁶ showed that 93% of the UK population identified as heterosexual or straight and 2% of the population identified themselves as lesbian, gay or bisexual (LGB). This comprised of:

- 1.3% identifying as gay or lesbian
- 0.7% identifying as bisexual
- A further 0.6% of the population identified themselves as “other”, which means that they did not consider themselves to fit into the heterosexual or straight, bisexual, gay or lesbian categories.
- A further 4.1% refused or did not know how to identify themselves.

¹⁵⁶ Source: Office for National Statistics (2017): See: <https://www.ons.gov.uk/peoplepopulationandcommunity/culturalidentity/sexuality/bulletins/sexualidentityuk/2016>

B.2 Community resources

There are a number of community facilities and resources located both within, and in close proximity to, Tustin Estate. Within the estate, these include a primary school, two faith groups, a daycare/learning centre, and a community centre. Table A.13 lists the community facilities located within the Estate boundary.

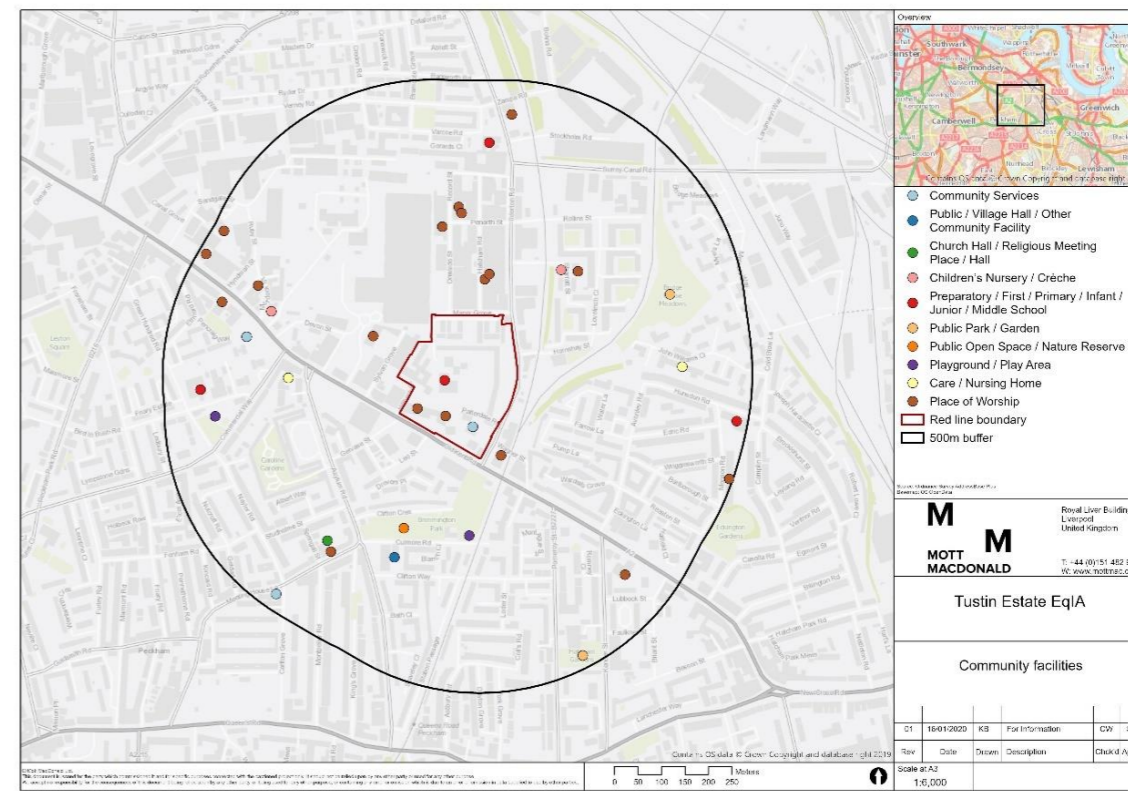
Table B.12: : List of community facilities within the Estate

Name	Category	Address
Day care / learning centre	Education	803 Old Kent Road
Pilgrims Way Primary School	Infant School	Manor Grove
Divine Prophetic Interdenominational Ministries	Church	
Redeemed Assemblies	Church	
Tustin Community Centre	Community Services	Windermere Point

Source: AddressBase

Map A.14 below maps the location of community resources and facilities within and surrounding the estate, which are likely to be accessed by protected characteristic groups, or if they were to be lost, would potentially adversely affect protected characteristic groups. Within the Estate boundary, there are two Christian churches which will predominately be used by members of that faith. Children are likely to be impacted by the relocation of the Pilgrims Way Primary School and the day care/learning centre. There is also the Tustin Estate Community Centre, which is available for use by all residents of the current estate.

Map B.13: Community resources within and around the Estate

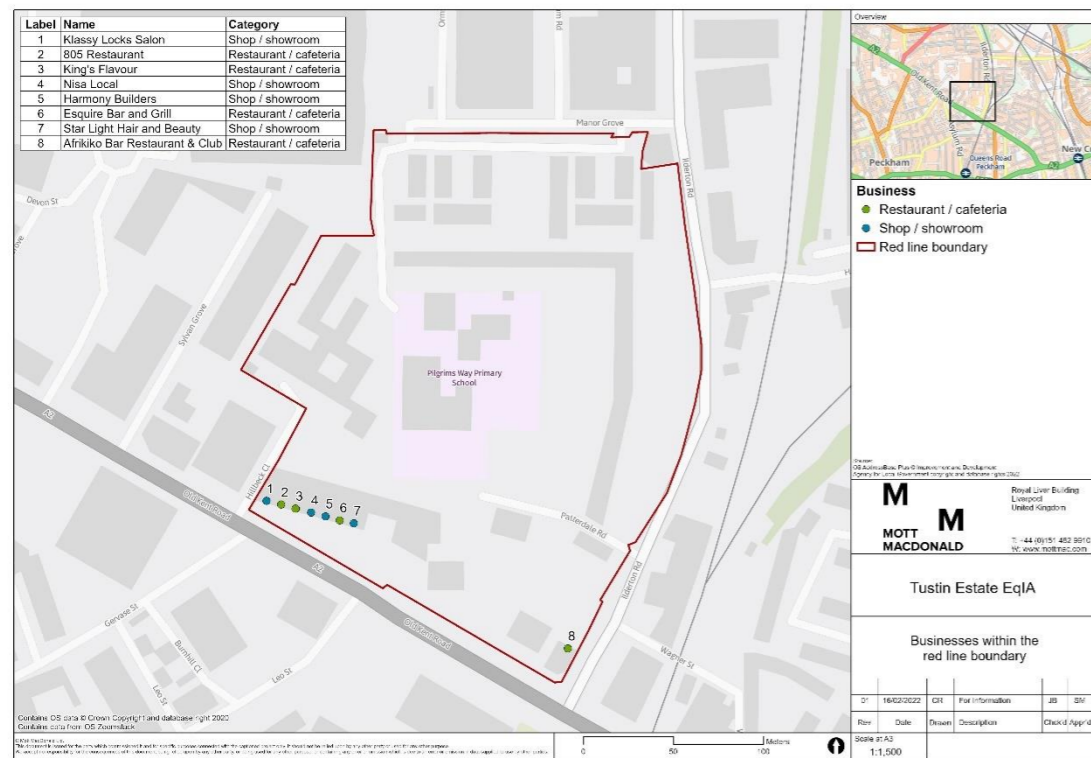


Source: AddressBase

B.3 Businesses

There are a number of commercial units located on the Estate facing Old Kent Road in Bowness House. The businesses occupying these units are mapped and labelled in Map A.15 below. The businesses include two restaurants, a convenience store, one hair and beauty salon, one take away and an accountancy. These may be affected by any demolition and rebuild option on the Estate, which could have equality impacts on owners and employees, and potentially local residents.

Map B.14: Businesses within the Estate



Source: Southwark Council business information

B.4 Health profile

The following presents a human health overview for the Estate. Where Estate-level information is not available, data is shown for the wider Borough.

Local economy

Good quality employment and local economic conditions are important determinants of health. The following table highlights employment, unemployment and proportion of those claiming Jobseeker's Allowance (JSA) and those claiming Universal Credit (UC). The claimant count combines all those claiming benefit principally for the reason of being unemployed.

Table A.24: Employment and unemployment

Location	Claimants as a % of working age population	Unemployment rate (%)	Employment rate (%)
Southwark	4%	5%	78%
Greater London	3%	5%	74%
England	2%	4%	75%

Source: Nomis Labour Market Profile (2018-2020) *data for the Estate is not available.

Unemployment in the local area is in line with Greater London and England, as is the proportion of people claiming Job Seekers Allowance (JSA) or Universal Credit. The employment rate in Southwark (78%) is higher than England (75%).

Table A.35: Median annual pay

Location	Full-time workers (£)	Part-time workers (£)
Southwark	39,183	10,585
Greater London	36,797	10,699
England	30,661	10,521

Source: Nomis Labour Market Profile (2019) *data for the Estate is not available.

Median income for full-time workers in Southwark is higher than both London and England, at £39,183 per annum, compared to £36,797 and £30,661, respectively. For part-time workers, income is broadly in line with that of London and England, at £10,585 per annum, compared to £10,699 in London and £10,521 in England.

Deprivation

The index of Multiple Deprivation (IMD) brings together data covering seven different aspects or 'domains' of deprivation into a weighted overall index for each Lower-layer Super Output Area (LSOA) in England.^{157,158} The scores are then used to rank the LSOAs nationally and to calculate an IMD score for each local authority area. These are then divided into deciles or

¹⁵⁷ The domains used in calculating the index are: Income; Employment; Education, Skills and Training; Health Deprivation and Disability; Crime; Barriers to Housing and Services; and Living Environment.

¹⁵⁸ LSOAs are a geographical unit which has an average of 1,500 residents and 650 households. They were developed following the 2001 census, through the aggregation of smaller census output areas, to create areas with a reasonably compact shape and which were socially similar (assessed through housing type). (<https://data.gov.uk/dataset/c481f2d3-91fc-4767-ae10-2efdf6d58996/lower-layer-super-output-areas-lsoas>)

quintiles, with 1 being the most deprived 20% of LSOAs, and 5 the least deprived 20% of LSOAs (in the case of quintiles).

The following table shows the proportion of the population of the Site who live in each deprivation quintile. The Site falls within an area of higher deprivation, where the entire population lives within the most or second most deprived quintile. The Site has a higher proportion of those living in the most deprived quintile (25%), compared with Southwark, Greater London, and England (21%, 16%, and 20% respectively). A considerably higher number of people (75%) live in the second most deprived quintile, compared with Southwark (47%), Greater London (32%) and England (21%).

There is evidence to suggest that people living in the most deprived areas in England spend more time in ill health compared the rest of the population.

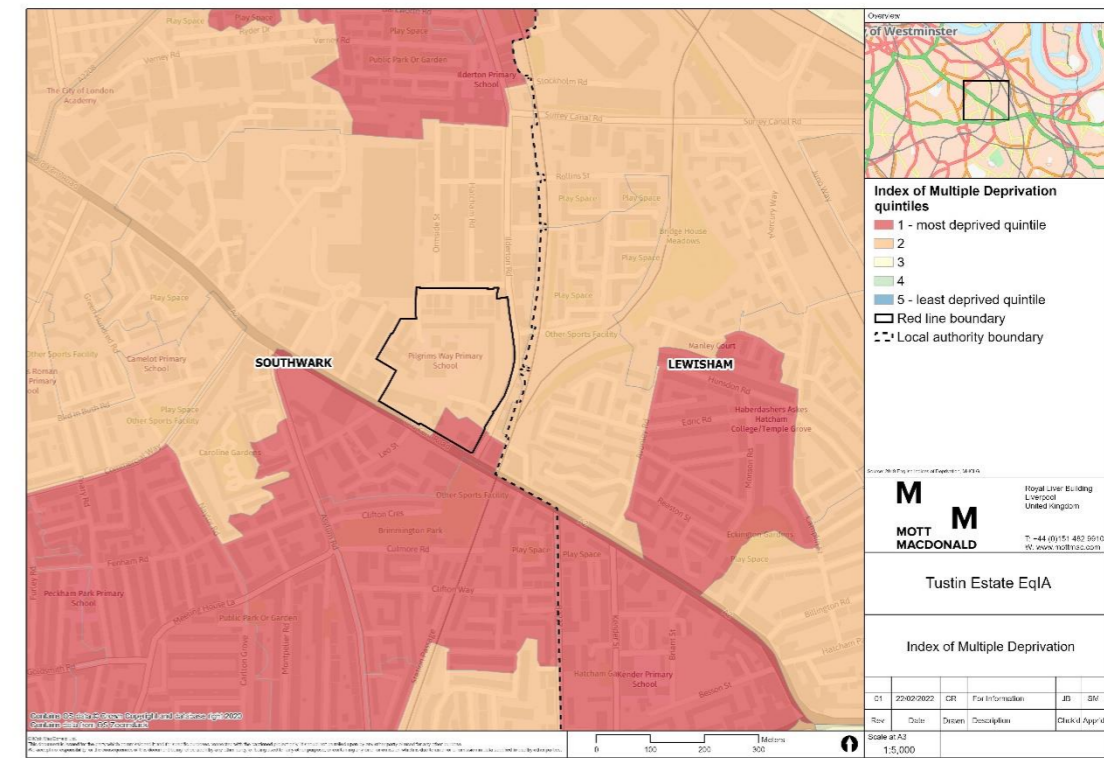
Table B.15: Population by deprivation

Location	Most deprived quintile (%)	Second most deprived quintile (%)	Third most deprived quintile (%)	Fourth most deprived quintile (%)	Least deprived quintile (%)
Site	25%	75%	0%	0%	0%
Southwark	21%	47%	21%	8%	3%
Greater London	16%	32%	23%	17%	12%
England	20%	21%	20%	20%	19%

Source: ONS 2020 mid-year population estimates and 2019 Indices of Multiple Deprivation

Map A.16, below, shows that most of the Site is in the second most deprived quintile.

Map B.15: Index of Multiple Deprivation



Source: Mott MacDonald

Human health

The table below provides an overview of the health of the population in Southwark. Figures for the Estate are unavailable. Consideration has been given to conditions and impairments that may be exacerbated by the improvement programme construction and design, including potential impacts such as relocation and associated social cohesion impacts, an increase in air pollution or noise, or loss/gain of public open space and recreation facilities.

Table B.16: Human health indicators

Category	Indicator	Southwark	Southwark %	England	England %
Physical activity	Percentage of physically active adults (PHE 2019 estimates)	-	72%	-	66%
	Obese children (Year 6) (PHE 2019)	-	27%	-	22%
Cardiovascular and respiratory health	Emergency hospital admissions for Chronic Obstructive Pulmonary Disease	613	-	415	-

Category	Indicator	Southwar k	Southwark %	England	England %
	(COPD) per 100,000				
	Under 75 mortality rates from cardiovascular diseases (PHE 2019) per 100,000	88	-	72	-
	Under 75 mortality rates from all respiratory diseases (PHE 2019) per 100,000	31	-	29	-
	Mortality rate for deaths involving COVID-19 (2020) per 100,000	177.3		140.1	
Mental health	Social isolation: % of adult social care users who have as much social contact as they would like (18+ years) (PHE 2019/20)	-	34%	-	46%
	% reporting depression or anxiety (PHE 2020)	-	14%	-	14%
Life expectancy	Male life expectancy at birth	79	-	79	-
	Female life expectancy at birth	83	-	83	-

Source: Public Health England (2017-2019)

Southwark has better rates of healthy behaviours in terms of levels of physical activity with a larger proportion of physically active adults (72%) compared to England (66%). However, Southwark has poorer rates of health behaviour in terms of childhood obesity, with high child obesity (27%) compared to the figure for England (22%).

There is likely a higher prevalence of those with respiratory and cardiovascular conditions in Southwark when compared to England, as mortality and hospital admissions from these diseases are higher. Mortality due to COVID-19 in 2020 was also higher in Southwark than in England.

Adults who are social care users in Southwark reportedly feel lonelier than those elsewhere in London – Southwark reports higher loneliness amongst adult social care users than any other borough. When compared to England, only 34% of respondents reported having as much social contact as they would like compared to 46%. However, those reporting depression or anxiety in Southwark is in line with England.

Male healthy life expectancy is broadly in line with the national average. Female healthy life expectancy is (number of years a person can expect to live in good health) higher than the national average. Healthy life expectancy at birth is an overall measure of how social, economic and environmental conditions in an area are affecting a population.

Socio-demographic monitoring

Equality Survey

In Autumn 2019, Southwark Council arranged to visit each of the 289 occupied low-rise homes on Tustin Estate to administer the ‘Starting the Conversation’ paper questionnaire. The intention of this survey was to attain an understanding of household needs across the Estate.

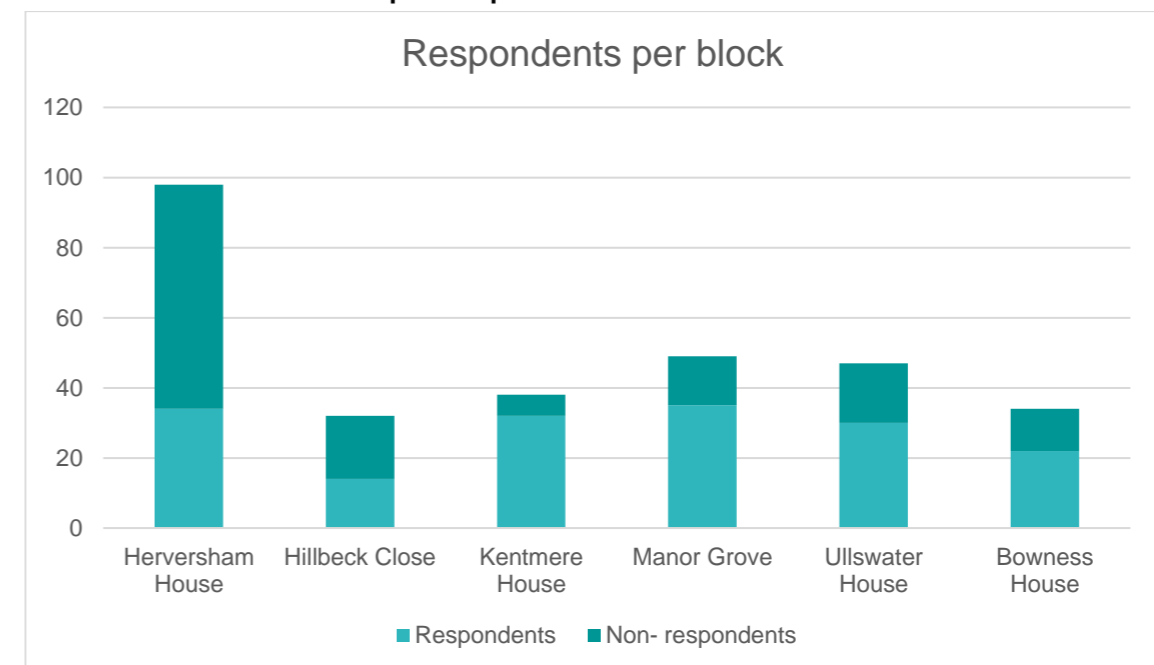
The visits were made on an appointment basis and lasted around 60 minutes each. In instances where it was difficult to make contact with the resident, homes were visited at least three times to arrange an appointment.

202 of the 289 homes were visited (70%), including 166 of the 219 tenanted homes (76%). 10 households refused to take part in the survey.

The survey only asked about the characteristics of the person responding to the survey, and to report on household needs with respect to those living in the household.

Analysis

Chart B.1: Residents and responses per block



Source: Southwark

Those who completed the equality survey were asked to outline their demographic details. The results have been outlined below.

Age

Residents that live in the properties that took part in the survey are from a range of ages. The majority of residents who took part in the survey were aged between 35-44 (39 residents) followed by those aged 45- 54 (35 residents) and those aged between 55-64 (31 residents).

Most of the blocks had a similar age trend, with a range of ages with the majority of respondents of working age. Of the older people who completed the survey (31 respondents in total), the majority live in either Manor Grove (12 respondents) or Kentmere House (11 respondents). 34% of the respondents in both Manor Grove and Kentmere House were older people.

Children and young people were also identified through the survey. One respondent identified themselves as being under 16 and four identified themselves as being 16-24, three of whom live in Ullswater house.

Disability

Of the residents who participated in the survey, just under a quarter of people (39 respondents) reported that their day to day activities were limited to some extent because of a health problem or disability. Nearly half of these respondents (18) reported that this limited their day to day activity 'a lot'.

Of the respondents who described the nature of their disability (40), the majority (30 respondents) reported that this was or included a physical or mobility impairment. 10 respondents reported either a hearing or vision impairment, or long-term mental illness, eight reported having memory problems and four reported having learning difficulties.

Of the respondents who described the nature of their disability (40), nearly half (19) were older people.

Gender reassignment

Of the residents who took part in the survey, nobody identified themselves as being transgender. Three chose not to answer the question.

Marriage and Civil Partnerships

The survey did not ask respondents about their marital status.

Pregnancy and Maternity

The survey did not ask respondents if where they were pregnant or had been pregnant in that last year.

Race and ethnicity

Of Tustin Estate residents who took part in the survey, two-thirds identified as being from an ethnic minority background. Half (83) of the residents who took part in the survey identified as black. Of those who identified as black, 48 identify as being from a black British or Nigerian background.

One third of residents who took part in the survey (59) identify themselves as white, and just under one tenth (15) identify themselves as being from an Asian background.

Of the residents who took part in the survey, the distribution of race and ethnicity reported across different blocks is mostly even.

Religion and belief

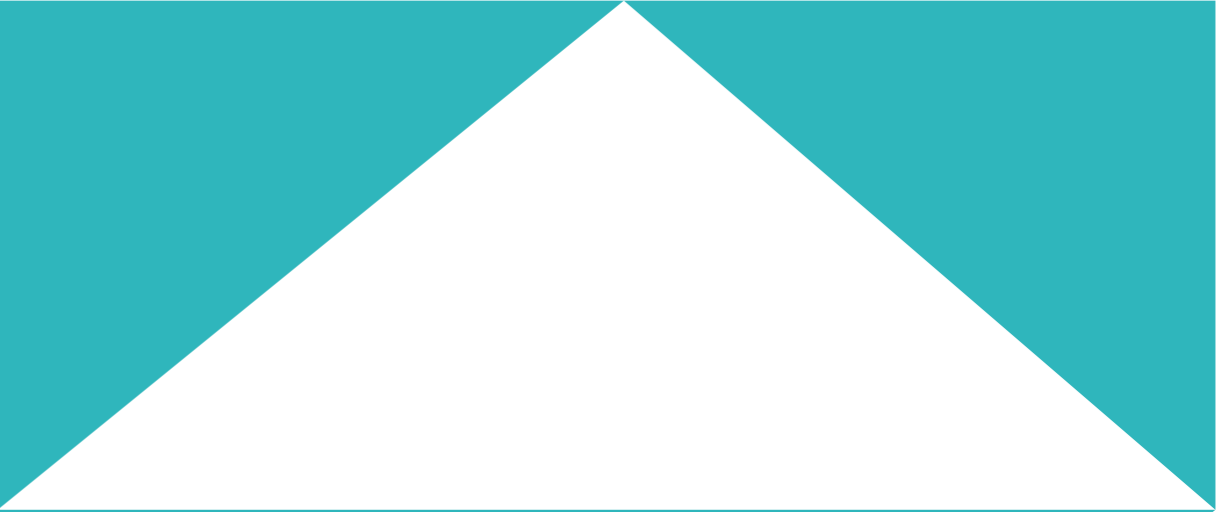
Of the residents who took part in the survey, over half (96 respondents) identify as being Christian, followed by those with no religion (34) and those who identify as Muslim (30) . Residents of a minority faith were also identified through the survey – two respondents reported that they are Buddhist, one reported they are Jewish, one reported they are a Jehovah's Witness, and one identified as Orthodox.

Sex

The majority of residents who responded to the survey were female (109). 59 respondents were male and two residents chose not to answer the question. Of those who responded, the majority of women (25) live in Heversham House, and the majority of men (14) live in Kentmere House.

Sexual Orientation

Of the residents who took part in the survey, nearly all (162) reported as identifying as heterosexual or straight. One resident identified themselves as being gay, one resident identified themselves as being bisexual, and nine residents chose not to answer the question.



Tustin Estate

Final tenure mix as approved by Planning July 2022

Tenure mix by phase

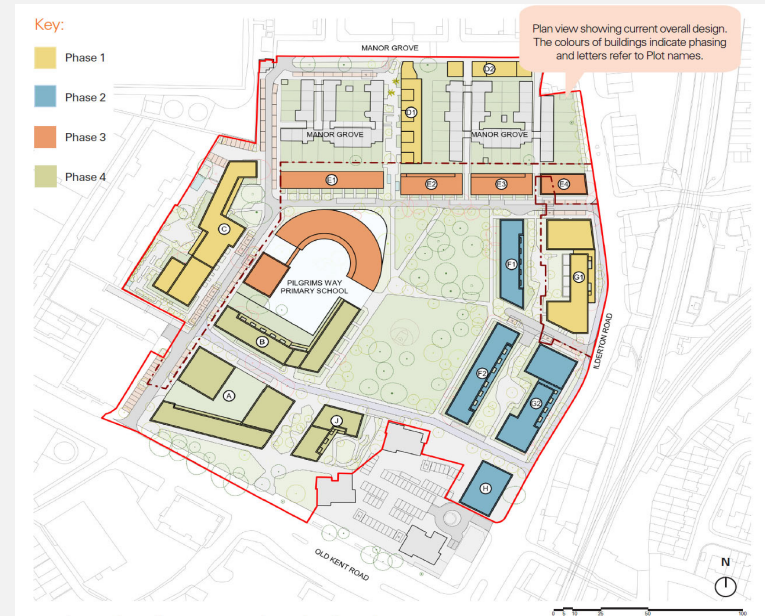
Phase	Council rent	Keyworker	Shared equity	Private sale	Total
Phase 1	157	0	10	0	167
Phase 2	59	51	10	126	246
Phase 3	51	0	0	0	51
Phase 4	78	47	7	94	226
Total	345	98	27	220	690

Tenure mix by plot

Phase	Plot	Council rent	Keyworker	Shared equity	Private sale	Total
Phase 1	C	68	0	5	0	73
	D1	9	0	0	0	9
	D2	5	0	0	0	5
	G1	75	0	5	0	80
Phase 2	F1	29	0	5	0	34
	F2	30	0	5	0	35
	G2	0	51	0	50	101
Phase 3	H	0	0	0	76	76
	E1	10	0	0	0	10
	E2	15	0	0	0	15
	E3	10	0	0	0	10
Phase 4	E4	16	0	0	0	16
	A	0	47	0	94	141
	B	50	0	7	0	57
Total	J	28	0	0	0	28
	Total	345	98	27	220	690

Unit mix by tenure

Tenure	1-bed	2-bed	3-bed	4-bed	5-bed	Total homes	Hab rooms
Council rent	143	82	87	30	3	345	1313
Keyworker	37	38	23	0	0	98	378
Shared equity	3	3	21	0	0	27	120
Market sale	88	121	11	0	0	220	804
Total	271	244	142	30	3	690	2615



Affordable unit mix tenure breakdown

Building	Phase	1B				2B				3B				4B				5B				Total
		Total	CR	SE	KW	Total	CR	SE	KW	Total	CR	SE	KW	Total	CR	SE	KW	Total	CR	SE	KW	
A	4	18			18	18			18	11			11	0			0	0			0	47
B	4	22	22			22	22			13	6	7	11	0			0	0			0	57
C	1	56	53	3		7	6	1		10	9	1		0			0	0			0	73
D	1	0				0				6	6			7	7		1	1			0	14
E1	3	0				0				0				10	10		0	0			0	10
E2	3	5	5			0				5	5			5	5		0	0			0	15
E3	3	0				0				5	5			5	5		0	0			0	10
E4	3	10	10			0				6	6			0			0	0			0	16
F1	2	13	13			13	13			7	2	5		0			1	1			0	34
F2	2	14	14			13	13			7	2	5		0			1	1			0	35
G1	1	12	12			16	14	2		49	46	3		3	3		0	0			0	80
G2	2	19			19	20			20	12			12	0			0	0			0	51
H	2	0				0				0				0			0	0			0	0
J	4	14	14			14	14			0				0			0	0			0	28
Total units		183				123				131				30			3				3	470
Total by tenure			143	3	37		82	3	38		87	21	23		30	0	0		3	0	0	

Summary

Tenure	Studio	1-bed	2-bed	3-bed	4-bed	5-bed	Total homes	Hab rooms
Existing social rent	60	30	25	87	0	0	202	543
Proposed social rent	0	143	82	87	30	3	345	1313
Proposed key worker		37	38	23	0	0	98	378
Shared equity		3	3	21	0	0	27	120
Market sale	0	88	121	11	0	0	220	804
Total	0	271	244	142	30	3	690	2,615
Percentage	0%	39.28%	35.36%	20.58%	4.35%	0.43%	100%	

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