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Chippenham Road

Equality Impact Assessment

Iceni Projects Limited on behalf of
Havering and Wates Regeneration
LLP

April 2025

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ON BEHALF OF HAVERING
AND WATES
REGENERATION LLP

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Chippenham Road
EQUALITY IMPACT ASSESSMENT

CONTENTS

1. INTRODUCTION	4
2. ASSESSMENT METHDOLOGY	8
3. POLICY AND LEGISLATIVE CONTEXT	11
4. BASELINE CONDITIONS	14
5. IMPACT ASSESSMENT	18
6. SUMMARY AND CONCLUSIONS	30

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1. INTRODUCTION

1.1 This Equality Impact Assessment (EqIA) has been prepared by Iceni Projects Limited to accompany an application for full planning permission being submitted by the Applicant, Havering and Wates Regeneration LLP, for the Proposed Development at Chippenham Road in the London Borough of Havering (LBH).

1.2 The proposal involves the comprehensive redevelopment of the Site and demolition of the existing buildings to provide 138 affordable homes, alongside private residential amenity space, open space and play space.

1.3 The description of development is as follows:

“Redevelopment of the site and the erection of four residential blocks to provide affordable housing units, landscaping works, car parking, cycle parking, plant and associated works.”

1.4 **Section 149** of the **Equality Act 2010** places a statutory duty on public authorities in the exercise of their functions to have due regard to the need to eliminate discrimination and advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it. This EqIA has been prepared to assist the Council in their assessment of the proposal in line with their obligations, and outlines the potential risks and opportunities of the Proposed Development, with a particular focus on people with characteristics protected under the Equality Act.

Site Context

1.5 The Site falls within the administrative boundary of the London Borough of Havering (LBH).

1.6 The Site is formed of two parcels of land, separated by a central plot comprising three, two-storey buildings in use as a Vicarage, Funeral Services and Church Centre. Cumulatively, the Site area is 0.96 hectares. The site has a varied topography, sloping upwards from the north, Chippenham Road, to the south, Kings Lynn Drive.

1.7 The site currently accommodates approximately 32 residential units comprising 24 flats and 8 houses and a public house, The Alderman, to the west of the application site. The buildings are entirely vacant at this time.

1.8 The eastern part of the site comprises one detached three-storey building hosting 12 No. self-contained flats with frontage facing onto Kings Lynn Drive and eight two-storey dwellings with

frontage to Chippenham Road. The western part of the site comprises three detached buildings: a two-storey and detached office building with frontage to Chippenham Road; a three-storey detached building hosting self-contained flats with frontage to Kings Lynn Drive; and a two-storey detached building hosting a Public House with frontage to Dartfields.

- 1.9 The western part of the Site also comprises a surface level car park accessed via Kings Lynn Drive which has capacity for 40 cars.
- 1.10 The Site is located to the immediate south of Harold Hill District Centre and the surrounding area, whilst predominantly falling under residential uses, is mixed use and hosts a range of town centre uses include retail and leisure.
- 1.11 The Site does not contain any statutory or locally listed buildings and is not located within a conservation area. There are no conservation areas or designated heritage assets within the immediate area.
- 1.12 The site is adjacent to Farnham and Hildene estate to north for which there are separate emerging proposals for redevelopment. The scheme is currently going through pre-application discussions with LBH. For clarity, Chippenham Road is coming forward as a separate planning application to Farnham and Hildene.
- 1.13 The Site's location is shown in Figure 1.1 below.

Figure 1.1 Site Location



Source: Hawkins Brown (2025)

Proposed Development

1.14 The Proposed Development covered by the red line application area comprises of the following key components:

- Four residential blocks totalling 13,193.40 GIA (Ssqm)
- 138 residential units, ranging from 1 bed to 4 bed units (116 affordable and 22 intended for care leavers)
- 44 car parking spaces, alongside four cycle spaces
- 1166 sqm of external place space
- Open space (including courtyards, community garden and front garden areas)

Scope of the Assessment

- 1.15 This Equality Impact Assessment outlines the relevant policy and legislative framework relating to equalities.
- 1.16 The Assessment will then consider the likely effects of the Proposed Development on those with protected characteristics. The assessment would identify links between new development and equality using Havering's EqIA Template as a guide. The assessment also includes any mitigation and intervention measures to offset any identified negative impacts and enhance positive impacts.
- 1.17 Further detail on the methodology applied in this assessment is provided in **Section 2** of this report.

Report Structure

- 1.18 The assessment is structured as follows:
- **Section 2:** Assessment methodology;
 - **Section 3:** Policy context;
 - **Section 4:** Baseline context;
 - **Section 5:** Consideration of impact on protected characteristics; and
 - **Section 6:** Summary and conclusions.

2. ASSESSMENT METHDOLOGY

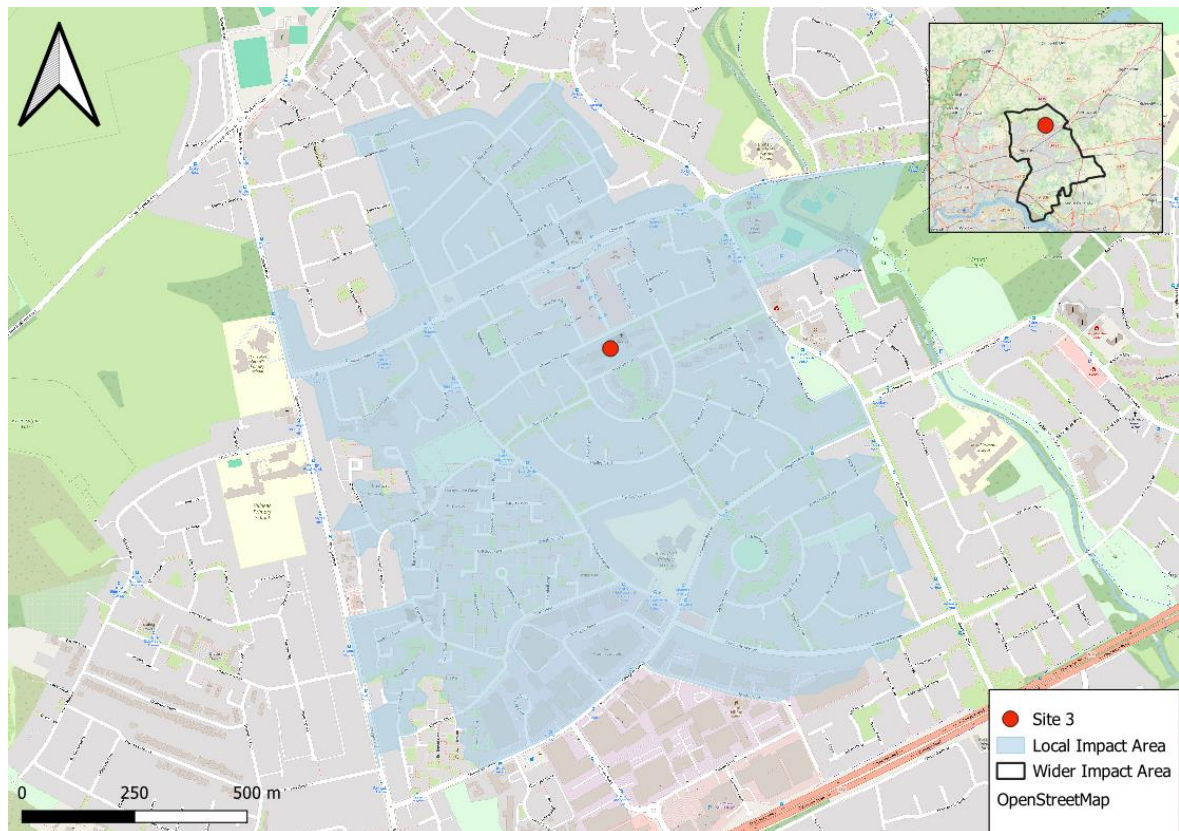
- 2.1 This Equality Impact Assessment has been prepared to consider the impacts of the Proposed Development with regards to discrimination and equality of opportunity, and to inform decision-making in the context of Section 149 of the Equality Act 2010.

Approach

- 2.2 This assessment first establishes the policy and legislative framework for the Proposed Development.
- 2.3 It also reviews the demographics of those with protected characteristics to establish the baseline position. Demographic data is present for: Havering 004 MSOA, Havering; London; and England (depending on data availability). These geographic areas have been selected due to the availability of 2021 Census data and for comparative purposes¹. The assessment also considers the indices of multiple deprivation within the local area and the local health profile as socio-economic implications can have a strong influence on the built environment and community.

¹ Middle layer Super Output Areas (MSOAs) comprise between 2,000 and 6,000 households and have a usually resident population between 5,000 and 15,000 persons.

Figure 2.1 Impact Area



Source: Iceni Analysis (2025)

- 2.4 The assessment then examines the potential effect of the Proposed Development on equality outcomes for those with protected characteristics as defined in the Equality Act 2010. The protected characteristics from the Equality Act 2010 and their definitions are set out below. Additionally, Havering Council also considers socio-economic status as an additional characteristic.

Table 2.1 Protected Characteristics

Protected Characteristic	Definition from the Equality Act 2010
Age	An age group is a reference to a group of persons defined by reference to age, whether by reference to a particular age or to a range of ages.
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	A person who is proposing to undergo, is undergoing or has undergone a process (or part of a process) for the purpose of reassigning the person's sex by changing physiological or other attributes of sex.
Marriage and Civil Partnership	A person has the protected characteristic of marriage and civil partnership if the person is married or is a civil partner.

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. Chapter 2 of the Equality Act sets out pregnancy and maternity discrimination. In the non-work context, protection against maternity discrimination is for 26 weeks after giving birth, and this includes treating a person unfavourably because she is breastfeeding.
Race	Refers to the protected characteristic of race. It refers to a group of people defined by their race which includes colour, nationality and ethnic or national origins.
Religion and Belief	Religion means any religion and a reference to religion includes a reference to a lack of religion. Belief means any religious or philosophical belief and a reference to belief includes a reference to a lack of belief.
Sex	In relation to the protected characteristic of sex a reference to a person who has a particular protected characteristic is a reference to a man or to a woman. A reference to persons who share a protected characteristic is a reference to persons of the same sex.
Sexual Orientation	Whether a person's sexual attraction is towards the same sex, the opposite sex or either sex.

- 2.5 The assessment identifies links between the Proposed Development and equality, reflecting the style of Havering Council's EqIA template. It is presented within an assessment matrix which provides a qualitative consideration of potential impacts as either positive, negative or neutral. Where an impact is identified, actions and measures are recommended to mitigate an adverse impact or enhance or secure a positive impact.
- 2.6 This report draws on other technical documents submitted as part of the application; including the Design and Access Statement and the Engagement Summary.

3. POLICY AND LEGISLATIVE CONTEXT

- 3.1 This section provides a high-level overview of the policy, guidance and legislative context for the Proposed Development.

The Equality Act (2010)

- 3.2 The Equality Act 2010² ('the Act') sets the legal framework for equal rights legislation. It gives protection to those with 'protected characteristics', including:

- Age;
- Disability;
- Gender reassignment;
- Marriage and civil partnership;
- Pregnancy and maternity;
- Race;
- Religion or belief;
- Sex; and
- Sexual orientation.

- 3.3 The Public Sector Equality Duty requires public organisations and those delivering public functions to have due regard to the need to:

- Eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Act;
- Advance equality of opportunity between people who share a protected characteristic and those who do not; and
- Foster good relations between people who share a protected characteristic and those who do not.

Regional Planning Policy

The London Plan (2021)

- 3.4 The London Plan³ was published and formally adopted in March 2021 and sets out the new spatial development strategy and policy framework for development in London.

² Equality Act 2010 - <https://www.legislation.gov.uk/ukpga/2010/15/contents>

³ Mayor of London (2021) [The London Plan 2021](#)

-
- 3.5 The Plan includes various policies to promote inclusive design and equal opportunities for all. In particular, the first policy of the Plan **Policy GG1 build a strong and inclusive community**, seeks to build on the city's tradition of openness, diversity and equality, and help deliver strong and inclusive communities. **Policy SD 10: Strategic and Local Regeneration** highlights the need for collaborative working with local stakeholders to ensure that regeneration best meets the needs of local residents, alongside the need for regeneration opportunities to best address inequality and deprivation.

Equal Life Chances for All (2014)

- 3.6 The Equal Life Chances for All framework⁴ highlights the London Mayor's commitment to tackling inequality, improving life chances and removing barriers that prevent people from reaching their full potential. The framework looks to ensure that equality is mainstreamed into everything the Mayor of London oversees, including how goods and services are obtained.

Planning for Equality and Diversity in London Supplementary Planning Guide (2007)⁵

- 3.7 This supplementary planning guidance sets out some of the overarching principles that should guide planning for equality and explores how the key spatial planning issues can impact equality and diversity. It addresses the needs of London's different communities alongside addressing issues such as poverty and discrimination.

Inclusive London: The Mayor's Equality, Diversity and Inclusion Strategy (2018)⁶

- 3.8 The strategy sets out how the Mayor will create a fairer and more inclusive city where all people feel welcome and able to fulfil their potential. The strategy also outlines how the Mayor will help to address the inequalities, barriers and discrimination experienced by groups protected by the Act. It includes the Mayor's vision for the city which states that all residents should be able to share in its prosperity, culture and community life, regardless of their age, social class, disability, race, religion, gender, gender identity, sexual orientation, marital status or whether they are pregnant or on maternity leave.

Local Planning Policy

Havering Local Plan⁷

- 3.9 Havering Local Plan was adopted in November 2021, and outlines the Council's strategy for development for the period 2016-2031. This EqIA has been conducted in accordance with best

⁴ Mayor of London (2014) [Equal Life Chances For All](#)

⁵ Mayor of London (2007) [Planning for Equality and Diversity in London](#)

⁶ Mayor of London (2018) [The Mayor's Equality, Diversity and Inclusion Strategy](#)

⁷ Havering Local Plan (2016) [Havering Local Plan](#)

practice, though it is not a validation requirement. It is used to determine what effect, or likely effect, a proposed development will have on different groups in the community.

- 3.10 **Policy 4 – Affordable Housing:** highlights that developments should provide the maximum amount of affordable housing, considering the borough-wide affordable housing target of 35% and the need to provide an appropriate mix of tenures to meet local housing needs, reflecting a borough-wide target of 70% social rent and Affordable Rent, and 30% intermediate housing.
- 3.11 **Policy 6 – Specialist accommodation:** outlines that appropriate housing to meet the specialist needs of local people will be supported where it can be robustly demonstrated that it has access to essential services and shops by walking, is well served by public transport and contributes to a mixed, balanced and inclusive community.
- 3.12 **Policy 7 – Residential design and amenity:** ensures development should be of a high design quality that is inclusive and provides an attractive, safe and accessible living environment for new residents whilst ensuring that the amenity and quality of life of existing and future residents is not adversely impacted. In any development affordable and market housing will be expected to have the same external appearance and equivalent amenity in relation to views, daylight, noise and proximity to open space.
- 3.13 **Policy 12 – Healthy Communities:** encourages development that provides opportunities for healthy lifestyles, contribute to the creation of healthier communities and helps reduce health inequalities. All major development proposals must be supported by a Health Impact Assessment (HIA) to demonstrate that full consideration has been given to health and wellbeing and the principles of active design. They are also required to consider wider local/regional primary care and other health strategies, as appropriate, to take into account how any developments can contribute to the aims and objectives of those strategies
- 3.14 **Policy 18 – Open space, sports and recreation:** ensures that all residents of Havering have access to high quality open space, sports and recreation facilities. The policy sets out how they will achieve this.

4. BASELINE CONDITIONS

- 4.1 This section provides a high-level overview of the demographic profile of the population, the socio-economic environment and health profile.

Demographic Profile

- 4.2 According to the ONS Census 2021, the Havering resident population was 262,052. The number of residents in Havering has increased over the last decade from 237,232 in 2011 to 262,052 in 2021. This indicates a 10.4% increase.
- 4.3 According to the GLA Local Authority population projections, Havering's population is expected to increase to 288,489 residents by 2036.
- 4.4 Where data is available, the table below summarises the demographic profiles of Havering 004 MSOA, Havering, London and England in terms of protected characteristics.

Table 4.1 Summary of Protected Characteristics

Protected Characteristic	Commentary
Age	Children and young people: The proportion of children (under 16 years) in Havering 004 is 26.9%, which is higher than Havering (19.9%), London (19.2%), and England (18.5%). Working age: There is a slightly higher proportion of working-age people (16-64 years) in Havering 004 MSOA (63.3%), than Havering (62.4%) and London (62.5%) but slightly lower than England (64%). Between the two censuses, the median age in Havering decreased by one year, from 40 to 39 years. Older people: The proportion of older adults (aged 65 and above) in Havering 004 MSOA is 9.8%, which is significantly lower than in Havering (17.7%) and England (18.3%), but in line with London (11.9%).
Disability	The proportion of residents who are disabled under the Equality Act in Havering 004 MSOA is 18.1%, which is higher than in Havering (14.7%) and London (13.2%), but in line with England (17.3%).
Gender Reassignment	92.6% of people in Havering 004 MSOA have a gender identity which is the same as sex registered at birth. This is similar to Havering (93.7%) and London (91.2%) and slightly lower than England (94%). The proportion of people in Havering who did not answer is 5.8%, compared to 7.9% in London and 6% in England.

Protected Characteristic	Commentary
Marriage and civil partnership	Havering 004 MSOA has a far lower proportion of residents that are married or in a civil partnership (34.7%) than Havering (47.0%) and London (40%). The proportion of residents who are divorced or civil partnership dissolved is 10.3% in Havering 004 MSOA, compared to 7.8% in Havering and 7.3% in London.
Pregnancy and Maternity	The general fertility rate (live births per 1000 women aged 15-44 years over the period 2016-2020) is higher in Havering (65.4) than England (59.2).
Race	The majority of Havering 004 MSOA residents identify as White (69.6%), which is slightly lower than Havering (75.3%), but significantly higher than London (53.8%). The largest non-White group in Havering 004 MSOA is Black, Black British, Black Welsh, Caribbean or African, who represent 16.4.% of the population. The most spoken language in Havering is English (90%) followed by other European languages (4%). The most spoken non-European language is Punjabi (0.6%).
Religion	Christianity is the largest religion in Havering 004 MSOA, with 48.0% of residents identifying as Christian. This is lower than 52.2% in Havering, but higher than 40.7% in London and 46.3% in England. Islam is the religion of 6.5% of residents in Havering 004 MSOA, compared to 6.2% in Havering, 15% in London and 6.7% in England. The proportion of residents with no religion in Havering 004 MSOA is 37.7% compared to Havering (30.6%), England (36.7%) and London (27.1%).
Sex	The population in Havering 004 MSOA consists of 52.1% female and 47.9% male. This compares to the Havering population (51.8% female and 48.5% male) and London (51.5% female and 48.5% male).
Sexual Orientation	90.1% of people in Havering 004 MSOA identified as straight or heterosexual, slightly lower than Havering (91.1%) but higher than England (89.4%) and London (86.2%). 1.2% of people in Havering 004 MSOA identified as gay or lesbian, and 0.9% as bisexual, in line with Havering but slightly lower than London. The proportion of people in Havering who did not answer is 7.5%, compared to 7.5% in England and 9.5% in London.

Source: Office for National Statistics, OHID Fingertips and Census 2021 data

Socio- economic deprivation

- 4.5 Although not a protected characteristic, social economic status is considered by Havering Council as an additional characteristic.

- 4.6 The English Indices of Multiple Deprivation (IMD) provides a ranking of neighbourhoods (Lower Layer Super Output Areas - LSOAs) to compare levels of deprivation across the country.⁸ The IMD measures relative deprivation using a series of data to rank every neighbourhood (LSOA). The IMD combines information from seven domains – income, employment, education, health, crime, barriers to housing and living environment– to produce an overall relative measure of deprivation.
- 4.7 In terms of overall deprivation, Havering is ranked 179th out of 317 local authorities where 1 is the most deprived. The Site is located within the Havering 004B LSOA boundary, which is ranked within the 2nd decile of deprivation (where 1 is within the 10% of most deprived LSOAs). This indicates that the Site is in an area of high deprivation.
- 4.8 Out of the below indicators of deprivation, the area is most deprived in terms of Income, Education, Skills and Training and Crime (within 10% of most deprived neighbourhoods).
- 4.9 **Table 4.1** provides a breakdown of each domain of deprivation score.

Table 4.2 Index of Multiple Deprivation for LSOA Havering 004B

Domain of Deprivation	Havering 004B
Income	1
Employment	2
Education, Skills and Training	1
Health	5
Crime	1
Barriers to Housing and Services	4
Living Environment	7
Overall IMD	2

Source: Ministry of Housing, Communities and Local Government, 2019

- 4.10 Unemployment levels are lower in Havering (3.9%) than in London (5.1%), but slightly higher than England (3.7%).⁹
- 4.11 In 2024, the median average weekly workplace-based earnings for full-time employees in Havering was £802.10 per week¹⁰. This is lower than the average weekly wage for London (£905.50). The median average weekly resident-based earnings for full-time employees in Havering was £822.50¹¹,

⁸ Lower layer Super Output Areas (LSOAs) comprise between 400 and 1,200 households and have a usually resident population between 1,000 and 3,000 persons.

⁹ ONS Annual Population Survey - [Employment and unemployment \(Jul 2023-Jun 2024\)](#)

¹⁰ ONS Annual Survey of Hours and Earnings - Workplace Analysis (2024)

¹¹ ONS Annual Survey of Hours and Earnings - Resident Analysis (2024)

again lower than London (£853.40). Havering has a lower proportion of residents (49.4%) employed in managerial and professional occupations compared to London (63.1%).

Health Profile

Joint Strategic Needs Assessment (JSNA)

4.12 The Havering Joint Strategic Needs Assessment (JSNA)¹² is a process that identifies the current and future health and wellbeing and social care needs of the Havering population. The latest JSNA identified the following priorities for the Borough:

- The most recent data available at Borough level, aggregated for the period 2018-2020, shows that life expectancy in Havering reduced for both men (by 0.4yrs to 79.7yrs) and women (by 0.6yrs to 83.5yrs)
- Havering has a rate of 45 children in care per 10,000. This is better than both London (52 per 10,000) and England (70 per 10,000)
- An estimated 83.% of Havering residents had 'good' or 'very good' health, which is higher than London (81.9%) and England (81.7%).
- Just under half of all Havering's households have three bedrooms (46.9% of the 101,277 households). This is the highest percentage across all of the London boroughs and is higher than London (29.5%) and England (40%).
- According to Census 2021, about 12.7% (12,838) of the population aged 66 years and above are living in one-person households. This is the second highest proportion after Bexley in London.
- Havering has a higher rate of under 18 conceptions than both London and England
- 22% of children in Reception were overweight or obese, rising to 39% in Year 6
- The rate of hospital admissions amongst 15-24 year olds due to substance misuse in Havering is significantly worse (117.4 per 100,000) than both London (56.5 per 100,000) and England (81.2 per 100,000). Havering had the highest (worst) rate out of all the London boroughs

¹² Havering Council [Joint Strategic Needs Assessment \(2024\)](#)

5. IMPACT ASSESSMENT

- 5.1 This section considers the potential impacts (both positive and negative) on groups with protected characteristics, the equality information on which this analysis is based and any mitigating actions to be taken, including improvement actions to promote equality and tackle inequalities. This is based on Havering Council's EqIA template.

Age		
<i>Please tick the relevant box</i>		Overall impact: During construction, the Proposed Development may have some differential negative impacts on children and older people. Once constructed, it will likely have a differential positive impact on children and young people, working age people and older people.
Positive	✓ (during occupation phase)	
Neutral		
Negative	✓ (during construction phase)	
Evidence & sources used: Impacts during construction: Children and older people can be disproportionately affected by any changes in air quality that may arise during the construction period. Research by Urban Health suggests that older people are more vulnerable to air pollution (for example arising from construction dust) as they can experience a number of long-term conditions, such as high blood pressure, diabetes and heart disease, ¹³ while children are also more vulnerable due to the developmental stage of their organs. ¹⁴ A Construction Environmental Management Plan will be put in place outlining mitigation measures to reduce the impact of construction activities (eg dust and emission control measures).		

¹³ Urban Health (undated) Air pollution and older people <https://urbanhealth.org.uk/insights/reports/air-pollution-and-older-people>

¹⁴ Urban Health (undated) Air pollution and children <https://urbanhealth.org.uk/insights/reports/air-pollution-and-children>

Impact of the loss of the Alderman pub: The Alderman pub is currently subject to a planning application for demolition. Research indicates that pubs act as sites for social interaction.¹⁵ Older people are especially vulnerable to loneliness and social isolation.¹⁶ Stakeholder engagement indicated that a small number of people consider the pub to be a community asset, with usage concentrated in the daytime and afternoons. There are a number of other community facilities locally, for example Harold Hill Library, alongside commercial enterprises (such as cafes and restaurants) which could be used for socialising. In addition, the Applicant is committed to looking for a potential user space in the local area for the pub's relocation.

Impact of new housing: According to Census 2021 data, 7.9% of Havering's households are in accommodation which is overcrowded. Overcrowding is more common amongst certain demographic groups, including households with dependent children. Evidence from the National Housing Federation indicates that overcrowding can have a detrimental effect on children's physical and mental health, as well as their wellbeing, educational attainment and relationships with others.¹⁷

Young people leaving care face many challenges in accessing stable housing, and one third of care leavers become homeless in the first two years after they leave care.¹⁸ Young people who were in care often have additional vulnerabilities, particularly if they went into care at an older age. Further challenges in accessing suitable housing include limited support networks, low benefits, wages and lack of available social housing stock.

The Proposed Development will provide 138 homes including a mix of 1,2,3 and 4 bedroom homes. 22 of these units will be exclusively for care leavers. This could alleviate some of the current issues of overcrowding in the Borough, ensuring that children and care leavers are not forced to sofa surf, share beds with other family members or sleep in rooms other than bedrooms (such as living rooms).

Impact of open space: The Proposed Development will provide a range of open space, including residential courtyards, a community garden and front gardens. Given that children living in

¹⁵ IPPR (2012) Pubs and Places – the social value of community pubs

https://www.london.gov.uk/sites/default/files/pubs_and_places_-_the_social_value_of_community_pubs_.pdf

¹⁶ NHS (undated) Loneliness in older people <https://www.nhs.uk/mental-health/feelings-symptoms-behaviours/feelings-and-symptoms/loneliness-in-older-people/>

¹⁷ NHF (2023) Overcrowding in England [National Housing Federation - Overcrowding in England](#)

¹⁸ Children's Rights Alliance for England

[https://crae.org.uk/sites/default/files/uploads/J4KL_Hitting%20brick%20walls_Final%20\(1\)%20\(2\).pdf](https://crae.org.uk/sites/default/files/uploads/J4KL_Hitting%20brick%20walls_Final%20(1)%20(2).pdf)

deprived local authorities in England are nine times less likely to be able to access green space than their counterparts in less deprived areas, this increase in open space will have a disproportionately beneficial impact on children. The community garden is envisaged as a multifunctional space that accommodates various activities and caters to residents of all ages, and will include a dedicated space for care-leaver residents. Young people leaving care are four times more likely to experience mental health difficulties compared to their peers. This can be caused due to an absence of support networks, past trauma or experiences within the care system, and can exacerbate issues such as anxiety, depression, and loneliness.¹⁹ Therefore, a space which is designed for social interactions and relaxation would be particularly beneficial for care leavers. In addition, measures will also be put in place to promote active travel (eg the provision of long stay cycle parking spaces for residential units), further increasing opportunities for children and young people to be active.

Impact of crime prevention: Research by the Youth Endowment Fund suggests that young people are particularly worried about becoming victims of crime, and that this can influence their daily decisions, such as avoiding certain areas, social networking outside of the home or altering their travel routes. Vulnerable children and young people are particularly at risk of crime.²⁰ In addition, Havering has the highest proportion of violence & exploitation offences involving under 25s in London, with weapon possession a key concern.²¹ Stakeholder engagement indicates concerns in the area around antisocial behaviour. Measures will be put in place such as lighting to streets and in shared residential amenity areas to ensure visibility at night, 1.8m tall metal fencing to resident amenity, secure lobbies with security rated doors and entrance points designed with two separate doors to mitigate tailgating. Refuse and cycle stores to have access control and management strategy to ensure they are not used for anti-social behaviour.

¹⁹ National youth advocacy service (2024) Challenges facing care leavers [https://www.nyas.net/about-us/news/challenges-facing-care-](https://www.nyas.net/about-us/news/challenges-facing-care-leavers/#:-:text=The%20absence%20of%20a%20support,anxiety%2C%20depression%2C%20and%20loneliness.)

[leavers/#:-:text=The%20absence%20of%20a%20support,anxiety%2C%20depression%2C%20and%20loneliness.](https://www.nyas.net/about-us/news/challenges-facing-care-leavers/#:-:text=The%20absence%20of%20a%20support,anxiety%2C%20depression%2C%20and%20loneliness.)

²⁰ Youth Endowment Fund (2024) Who is affected by violence? <https://youthendowmentfund.org.uk/reports/children-violence-and-vulnerability-2024/who-is-affected/>

²¹ Havering Council (2024) Serious Violence Duty Strategy <https://www.havering.gov.uk/downloads/file/6494/serious-violence-strategy-2024>

Recommendations:

- Ensure that a CEMP is in place to mitigate the impacts of construction disruption, noise and dust
- Consider going into local schools and youth groups to highlight the dangers of entering construction areas
- Consider sharing information (eg on noticeboards around the site or on a website) outlining where other community facilities can be found locally

Disability

Please tick the relevant box

Positive ☒ (during occupation phase)

Neutral ☐

Negative ☒ (during construction phase)

Overall impact: During construction, the Proposed Development may have some differential negative impacts on disabled people. Once constructed, it will likely have a differential positive impact.

Evidence & sources used:

Impacts during construction: Construction works can affect the accessibility and mobility of the local area, including and disrupting pedestrian movements and wayfinding.²² Disabled residents with sensory impairments may be particularly affected by a change in the environment. However, it is unlikely that pedestrian routes will be diverted during construction.

Impacts of new housing: Disabled people can encounter challenges in obtaining accessible housing, due in part to the age of England's housing stock.²³ As a result, disabled people can be forced to live in unsuitable accommodation for long periods of time, with negative implications for their health, wellbeing and dignity. A lack of affordable housing can disproportionately affect

²² Okeenea (undated) How to Maintain Pedestrian Accessibility When Carrying out Street Works? <https://www.inclusivecitymaker.com/pedestrian-accessibility-street-works/>

²³ DLUHC (2024) [Disabled people in the housing sector - Levelling Up, Housing and Communities Committee \(parliament.uk\)](#)

disabled people - ONS data shows that that 53% of disabled Londoners (compared to 44% of non-disabled Londoners) find it difficult to afford their housing costs, and often have to cut back on activities or utilities as a result.²⁴

The Proposed Development will deliver a total of 14 (10%) wheelchair homes as M4(3)(2)(a) 'wheelchair adaptable'. Accessible homes will be located with entrances on Chippenham Road for better access to Farnham and Hildene town centre. This will provide further opportunities to Havering residents with a disability who have been unable to live independently before due to a lack of suitable accommodation.

Impact of crime prevention: Research by the Equality and Human Rights Commission suggests that disabled people are more likely than non-disabled people to worry about being the victim of crime, and particularly people with a learning disability or mental health condition.²⁵ Stakeholder engagement indicates concerns in the area around antisocial behaviour, and in particular concerns about anti-social behaviour and loitering in open spaces. The Proposed Development will contribute towards creating a safe neighbourhood, as features such as well-placed windows, clear sightlines and adequate lighting will provide passive surveillance. As outlined above, the Proposed Development also features a number of safety measures to reduce the potential for crimes on the site.

Recommendations:

- Ensure that the engagement process is as continuous and inclusive as possible

Sex/gender		
Please tick the relevant box		Overall impact: The improved safety measures could have a disproportionately positive impact on women, who are more likely to be concerned with safety in public spaces.
Positive	✓	

²⁴ Inclusive London (2025) Barriers at Home <https://www.inclusionlondon.org.uk/wp-content/uploads/2025/02/Barriers-at-Home-report.pdf>

²⁵ Equality and Human Rights Commission (2013) Crime and disabled people Baseline statistical analysis of measures from the formal legal inquiry into disability-related harassment <https://www.equalityhumanrights.com/sites/default/files/research-report-90-crime-and-disabled-people.pdf>

Neutral		
Negative		
Evidence & sources used: Impact of security measures: Research with 8,000 Londoners indicates that women are more likely to be concerned with safety in public spaces than males, particularly at certain times of the day and night. ²⁶ Poor lighting, neglected/isolated spaces and limited natural surveillance can exacerbate crime, as well as fear of crime. Where the local pedestrian environment is intimidating, people are less likely to go out, reducing social interaction and increasing the potential for crime. Feedback from stakeholder engagement activities with residents as part of this Application process raised concerns about security and anti-social behaviour in the area, particularly with concerns of crime and drug use. Crime statistics suggest that there were 27 reported crimes in the vicinity in February 2025. The Proposed Development incorporates elements to help design out crime in open spaces, including 1.8m high fences across community open spaces and defensible planting at private homes with street access. This will ensure that open space is safe, accessible and inclusive to all residents. Furthermore, development in a currently vacant space will bring vitality to the area, and prevent the current site from being used for anti-social purposes. Recommendations: • Ensure that the engagement process is as continuous and inclusive as possible		

Ethnicity/race	
Please tick the relevant box	Overall impact: The provision of new housing will have a positive impact on ethnic minority households, who are more likely to

²⁶ Mayor of London (2022) Women Girls and Gender Diverse Peoples Safety in Public Spaces

[https://www.london.gov.uk/sites/default/files/2022-](https://www.london.gov.uk/sites/default/files/2022-11/Women%20girls%20and%20gender%20diverse%20peoples%20safety%20in%20public%20space.pdf)

[11/Women%20girls%20and%20gender%20diverse%20peoples%20safety%20in%20public%20space.pdf](https://www.london.gov.uk/sites/default/files/2022-11/Women%20girls%20and%20gender%20diverse%20peoples%20safety%20in%20public%20space.pdf)

Positive	✓	experience challenges with overcrowding and poor housing conditions
Neutral		
Negative		

Evidence & sources used:

Impact of new housing: The largest non-White group in the local area is Black, Black British, Black Welsh, Caribbean or African, who represent 16.4.% of the population. Overcrowding is three times more common in minority ethnic groups than in White British households.²⁷ This can be due to a number of factors, including a higher prevalence of multigenerational households, a connection to a particular area and/or limited available of sufficiently suitable and affordable housing.²⁸ According to the 2021 Census, 16.3% of Black African households, 22.5% of Bangladeshi households and 12.4% of Mixed ethnicity households experienced overcrowding, compared to 1.7% of White British households.²⁹ As outlined above, overcrowding can impact on households' physical and mental health, alongside increased rate of accidents, strained personal relationships and increased housing deterioration (including condensation and mould).³⁰ Given that people from certain ethnic minority groups are more likely than White British people to report having a long-term condition and/or poor health, overcrowded and poor quality housing provision can have a disproportionately negative health impact.³¹

In addition, 44% of Black households, 34% of Bangladeshi and 13% of Pakistani households live in social housing, compared to 16% of White British households.

The Proposed Development will deliver 138 new homes, of which 2 units are 4 bedroom, and 20 are 3 bedroom. All units will be affordable housing. Encouraging more housing delivery is of benefit to groups that are more likely to live in sub-standard or overcrowded housing. The provision of a

²⁷NHF (2023) Overcrowding in England [National Housing Federation - Overcrowding in England](#)

²⁸ DLUHC (2022) Overcrowding in South Asian households: a qualitative report [Overcrowding in South Asian households: a qualitative report - GOV.UK \(www.gov.uk\)](#)

²⁹ House of Commons Library (2023) Overcrowded housing (England) <https://researchbriefings.files.parliament.uk/documents/SN01013/SN01013.pdf>

³⁰ Ibid

³¹ Kings Fund (2023) The health of people from ethnic minority groups in England <https://www.kingsfund.org.uk/insight-and-analysis/long-reads/health-people-ethnic-minority-groups-england>

mix of dwellings also creates mixed and socially inclusive communities which enables a sense of belonging and neighbourliness.

Those from minority ethnic groups are also more likely to live in non-decent homes (eg those with poor heating or insulation, or not in a reasonable state of repair), with Black Caribbean households being disproportionately impacted.³² This can cause new health issues (such as pneumonia) and exacerbate existing health conditions, such as asthma. Stakeholder engagement raised a number of concerns about current heat and noise insulation.

The homes are designed to provide high levels of daylight, sunlight, and natural ventilation, along with energy efficiency, which should all make homes cheaper to run and heat.

Impact of new open space: Currently, residents have expressed concerns that the area can attract unwanted anti-social activity. People from minority ethnic groups can be more likely to be a victim or witness of crime, which can lead to impacts such as loss of confidence, fear of going out, difficulty sleeping and anxiety.³³ New development on a vacant site will improve passive surveillance, and the Proposed Development will include elements to help design out crime in open spaces, which will both likely have a positive impact.

Recommendations:

- Ensure that the engagement process is as continuous and inclusive as possible

Religion/faith:		
Please tick the relevant box		Overall impact: There are no impacts anticipated during the construction or occupation phase.
Positive		
Neutral	✓	
Negative		

³² IRR (2024) [BME statistics on poverty and deprivation](https://irr.org.uk/bme-statistics-on-poverty-and-deprivation) - Institute of Race Relations (irr.org.uk)

³³ Home Office (2023) Anti-social behaviour: impacts on individuals and local communities <https://www.gov.uk/government/publications/impacts-of-anti-social-behaviour-on-individuals-and-communities/anti-social-behaviour-impacts-on-individuals-and-local-communities>

Evidence & sources used: Impacts during construction: There will be no impact on access to Saint George's Parish Church and Centre Harold Hill during construction, ensuring that the congregation can continue to worship.
Recommendations: Continue to engage with local faith community groups before and during the construction phase to discuss access requirements

Sexual orientation:		
<i>Please tick the relevant box</i>	N/A	Overall impact: No differential impact anticipated.
Positive		
Neutral		
Negative		
Evidence & sources used: N/A		
Recommendations: N/A		

Gender reassignment:		
<i>Please tick the relevant box</i>	N/A	Overall impact: No differential impact anticipated.
Positive		

Neutral		
Negative		
Evidence & sources used: N/A		

Marriage/civil partnership:		
<i>Please tick the relevant box</i>		Overall impact: No differential impact anticipated.
Positive		
Neutral		
Negative		
Evidence & sources used: N/A		
Recommendations: N/A		

Pregnancy, maternity and paternity:		
<i>Please tick the relevant box</i>		Overall impact: There may be differential negative impacts on pregnant mothers during the construction phase, however the provision of new housing will have a positive impact as it will increase the housing offer in the local area.
Positive (During occupation phase)	✓	
Neutral		
Negative (During construction phase)	✓	

Evidence & sources used: Impacts during construction: Antenatal exposure to air pollution arising from construction activities may lead to adverse pregnancy outcomes, including increased risks of preterm births, smaller birth weights and altered lung development.³⁴ There are no plans to alter access to St George's Church, which hosts a pre-school for children aged 1 year 6 months to 5 years. Impact of new housing: Research indicates that the stress associated with poor housing or overcrowding can have a disproportionate impact on pregnant women, with the potential for adverse pregnancy outcomes.³⁵ The provision of 138 high-quality homes will increase the number of family-friendly homes locally, and will alleviate current issues with overcrowding and housing availability within Havering.
Recommendations: • Ensure that the engagement process is as continuous and inclusive as possible

Socio-economic status:		
Please tick the relevant box		Overall impact: The construction of the Proposed Development will have a positive impact on people who are socio-economically disadvantaged due to the provision of affordable housing.
Positive (During the occupation phase)	✓	
Neutral		
Negative		
Evidence & sources used:		

³⁴ RCOG (2021) RCOG position statement Outdoor air pollution and pregnancy in the UK <https://www.rcog.org.uk/media/euxn0kya/outdoor-air-pollution-and-pregnancy-rcog-position-statement.pdf>

³⁵ Nelson J. No room at the inn: pregnancy and overcrowding. J Fam Health Care. 2010;20(4):112-4. PMID: 21053657. [No room at the inn: pregnancy and overcrowding - PubMed \(nih.gov\)](#)

Currently, the local area experiences socio-economic challenges, and is within the 10% most deprived neighbourhoods in the country in terms of Income, Education, Skills and Training and Crime.

Impacts during construction: There are no plans to alter access to Saint George's Parish Church and Centre Harold Hill, which hosts a weekly job club and a foodbank. Therefore users of these services which operate from the Site will be unaffected. The Alderman pub is currently subject of a planning application for demolition. The pub currently employs a number of staff, and the current manager resides on the Site. Job losses can disproportionately impact individuals from lower socio-economic backgrounds, creating barriers to upward mobility and wider impacts on local communities. Current employees will receive redundancy money, and the manager will be supported by the Applicant to find suitable accommodation.

Impact of new housing: A lack of suitable, affordable housing can exacerbate socio-economic inequalities, pushing households into poverty, impairing labour mobility and leading to overcrowding. Research by Shelter shows that households often cut back on basic necessities such as food or heating to meet housing costs.³⁶

The Proposed Development will deliver 100% affordable housing, significantly increasing the availability of affordable housing within Havering. This increase in affordable housing would help reduce homelessness in the local authority (including reducing the number of people in temporary accommodation and homelessness assistance), provide stability to help people get into work and improve health and wellbeing.³⁷ It is also anticipated that new homes will be more energy efficient, meaning that residents will experience reduced heating bills.

Recommendations:

- Produce an Employment and Skills Plan, which outlines plans to support local employees during the construction phase
- Consider providing current pub employees with information about Havering careers services to support with their search for new job opportunities

³⁶ Shelter (2010) The Human Cost: How the lack of affordable housing impacts on all aspects of life https://assets.ctfassets.net/6sxvmndn0s/3jHJGmHTaPoxQF3GhCsJAY/1d80f4ff3a63016e026e2d5debdad25c/The_Human_Cost.pdf

³⁷ House of Lords Library Supply of affordable housing <https://lordslibrary.parliament.uk/supply-of-affordable-housing/#fn-11>

6. SUMMARY AND CONCLUSIONS

6.1 This Equality Impact Assessment has been prepared to identify, assess and present any potential impacts and their significance on groups with protected characteristics, as defined in the Equality Act 2010, arising from the Proposed Development at Chippenham Road. It also seeks to identify any mitigation measures which may be required to optimise the impacts of the Proposed Development. It is intended to assist LB Havering in fulfilling its obligations under the Act, which introduces a Public Sector Equality Duty requiring all public bodies to play their part in making society fairer by having due regard to the need to:

- Eliminate unlawful discrimination;
- Advance equality of opportunity; and
- Foster good relations between people who share a protected characteristic and people who do not share it.

6.2 The assessment shows that the Proposed Development has the potential to improve the quantity, quality and accessibility of housing for Havering residents (and particularly for young care leavers). Whilst there are potential negative impacts (particularly during the construction phase), the Applicant has sought to mitigate these through a range of reasonable and proportionate measures, such as ongoing resident engagement and a CEMP.

Baseline Analysis

6.3 The baseline analysis provides an overview of the demographic and social indicators, predominantly drawing on ONS Census 2021 data. Compared to London, the analysis shows that the local areas has:

- Significantly more children and young people;
- Higher levels of deprivation;
- A higher proportion of disabled residents;
- Significantly more residents from a White background; and
- More Christians and fewer residents with no religion.

6.4 A review of the surrounding area's Index of Multiple Deprivation rankings indicated that the area has a high level of deprivation, ranking amongst the 10-20% most deprived neighbourhoods in England.

Impact Assessment

6.5 Overall it has been assessed that the Proposed Development would not have any undue negative impacts on protected groups or characteristics during the occupation phase, but instead will have a positive impact on children, older people, people with disabilities, pregnancy/maternity, people from

minority ethnic groups, females and people who are socio-economically disadvantaged. During construction the proposal has been planned and designed to provide an inclusive environment and minimise disruptions.

6.6 The following mitigation measures should be considered to ensure that negative equalities outcomes are not experienced:

- Demolition, Construction, Environmental Management Plan to be prepared and secured via pre-commencement planning condition;
- Ensure that all open space is designed to prevent crime and/or fear of crime and that Secured by Design principles are adhered to
- Ensure that the Lifetime Homes Standards are followed to ensure that homes are more easily adaptable for lifetime use at minimal costs
- Ensure open communication with local community facilities (such as the Alderman Pub and Saint George's Parish Church)
- Explore local labour initiatives to prioritise construction jobs for Havering residents
- Consider implementing a Local Letting Plan to prioritise new affordable homes for local people
- Ensure the feedback from consultation exercises are implemented where possible, and that the local community is updated on construction progress.
- Ensure that open space follows inclusive design standards, and a landscape maintenance strategy is implemented to maintain open spaces to a high standard

Conclusions

6.7 Through effective design measures and mitigation, the Proposed Development is anticipated to deliver an inclusive scheme that does not result in discriminatory negative impacts on any protected group. The relevant planning policies and equality objectives are therefore considered to have been met.

6.8 Given that the Proposed Development would comply with all regulatory thresholds protective of the environment and health (including the most vulnerable members of society), due regard has been applied and the Public Sector and Equality Duty and Equality Act are met.

A1. LOCAL HEALTH PROFILE

Indicator	Period	004 Harold Hill East					England		Best/ Highest
		Count	Value	Value	Value	Worst/ Lowest	Range		
Behavioural risk factors									
Smoking prevalence at age 15. Regular smokers (modelled estimates)	2014	3	2.1%*	3.5%*	5.4%*	17.9%		0.0%	
Smoking prevalence at age 15. Regular or occasional smokers (modelled estimates)	2014	6	4.2%*	5.8%*	8.2%*	19.3%		0.0%	
Reception prevalence of obesity (including severe obesity), 3 years data combined	2021/22 - 23/24	-	10.4%	9.9%	9.6%	20.9%		2.2%	
Reception prevalence of overweight (including obesity), 3 years data combined	2021/22 - 23/24	-	24.5%	21.8%	21.9%	37.9%		6.9%	
Year 6 prevalence of obesity (including severe obesity), 3 years data combined	2021/22 - 23/24	-	28.6%	24.8%	22.7%	42.0%		3.8%	
Year 6 prevalence of overweight (including obesity), 3 years data combined	2021/22 - 23/24	-	45.4%	39.2%	36.7%	55.1%		10.3%	
Child and Maternal Health									
Deliveries (births) to teenage mothers, 5 year pooled data	2016/17 - 20/21	10	1.5%	0.5%	0.7%	-	Insufficient number of values for a spine chart	-	
General fertility rate, live births per 1,000 women aged 15 to 44 years. Five year pooled	2016 - 20	894	69.1	65.4	59.2	2.1		147.8	
Children and Young people: Health care use									
Emergency hospital admissions in under 5 years old, crude rate	2016/17 - 20/21	195	67.3	71.2	140.7	352.2		24.8	
Emergency hospital admissions for injuries in under 5 years old, crude rate	2016/17 - 20/21	40	80.6	81.2	119.3	363.7		0.0	
Emergency hospital admissions for injuries in under 15 years old, crude rate	2016/17 - 20/21	90	62.9	60.1	92.0	251.2		18.7	
Emergency hospital admissions for injuries in 15 to 24 years old, crude rate	2016/17 - 20/21	60	82.6	76.2	127.9	733.3		14.4	

Indicator	Period	004 Harold Hill East					England		
		Count	Value	Value	Value	Worst/ Lowest	Range	Best/ Highest	
Population									
Percentage of the total resident population who are 0 to 4 years of age (0-4 yrs)	2020	942	8.2%	6.6%	5.7%	0.7%		13.5%	
Percentage of the total resident population who are 0 to 15 years of age	2020	3,141	27.2%	20.4%	19.2%	1.5%		39.3%	
Percentage of the total resident population who are 5 to 15 years of age (5-15 yrs)	2020	2,199	19.1%	13.8%	13.5%	0.5%		27.7%	
Percentage of the total resident population who are 16 to 24 years of age	2020	1,285	11.1%	9.6%	10.5%	4.0%		80.3%	
Percentage of the total resident population who are 25 to 64 years of age	2020	5,934	51.4%	52.1%	51.8%	14.4%		74.3%	
Percentage of the total resident population who are 50 to 64 years of age (50-64 yrs)	2020	1,796	15.6%	18.5%	19.2%	1.4%		29.5%	
Percentage of the total resident population who are 65 and over	2020	1,177	10.2%	17.8%	18.5%	0.4%		53.7%	
Percentage of the total resident population aged 85 and over	2020	154	1.3%	2.9%	2.5%	0.1%		12.1%	
Population density, people per square kilometre	2020	11,537	8,491	2,320	434	6		29,453	
Ethnicity and Language									
Percentage of population whose ethnic group is not 'white'	2011	1,642	17.0%	12.3%	14.6%	0.4%		94.4%	
Percentage of population whose ethnicity is not 'White UK'	2011	2,125	22.0%	16.7%	20.2%	1.1%		96.6%	
The percentage of people that cannot speak English well or at all, 2011	2011	86	0.9%	0.7%	1.7%	0.0%		22.5%	
Deprivation, Housing, and living environment									
Index of Multiple Deprivation (IMD) Score	2019	-	39.5	16.8	21.7	2.2		86.9	
Income deprivation, English Indices of Deprivation	2019	2,805	26.9%	10.8%	12.9%	48.8%		0.9%	
Child Poverty, Income deprivation affecting children index (IDACI)	2019	951	35.2%	16.0%	17.1%	64.7%		0.9%	
Older people in poverty, income deprivation affecting older people Index (IDAOPI)	2019	463	30.4%	11.7%	14.2%	76.0%		2.0%	
Modelled estimates of the proportion of households in fuel poverty (%)	2020	728	16.4%	10.3%	13.2%	54.1%		2.5%	
Households with overcrowding based on overall room occupancy levels	2011	630	15.4%	7.4%	8.7%	60.9%		0.6%	
Older people living alone, Percentage of people aged 65 and over who are living alone	2011	546	47.6%	31.9%	31.5%	87.2%		14.4%	
Percentage of households in Poverty	2013/14	-	28.8%	-	21.1%	63.7%		6.7%	
Employment									
Unemployment (Percentage of the working age population claiming out of work benefit)	2021/22	654	9.1%*	5.0%*	5.0%*	20.8%		0.7%	
Long-Term Unemployment. Rate per 1,000 working age population	2021/22	31	4.3*	1.8*	1.9*	15.1		0.0	

Indicator	Period	004 Harold Hill HaveringEngland East					England	
		Count	Value	Value	Value	Worst	Range	Best
Emergency Hospital Admissions: Adults								
Emergency hospital admissions for all causes, all ages, standardised admission ratio	2016/17 - 20/21	-	114.1	87.7	100.0	215.6		31.5
Emergency hospital admissions for coronary heart disease, standardised admission ratio	2016/17 - 20/21	-	110.0	84.1	100.0	396.1		23.0
Emergency hospital admissions for stroke, standardised admission ratio	2016/17 - 20/21	-	109.3	90.2	100.0	260.9		28.4
Emergency hospital admissions for myocardial infarction (heart attack), standardised admission ratio	2016/17 - 20/21	-	117.5	76.3	100.0	318.7		21.4
Emergency hospital admissions for chronic obstructive pulmonary disease (COPD), standardised admission ratio	2016/17 - 20/21	-	252.7	99.0	100.0	554.5		9.3
Hospital admissions, harm and injury and Long Term Conditions								
Emergency hospital admissions for intentional self harm, standardised admission ratio	2016/17 - 20/21	-	65.7	41.9	100.0	541.4		10.2
Emergency hospital admissions for hip fracture in persons 65 years and over, standardised admission ratio	2016/17 - 20/21	-	124.6	101.0	100.0	527.4		29.3
Hospital admissions for alcohol attributable conditions, broad definition	2016/17 - 20/21	817	123.0	84.1	100.0	391.1		35.9
Hospital admissions for alcohol attributable conditions, narrow definition	2016/17 - 20/21	199	91.9	66.0	100.0	471.9		22.6
Percentage of people who reported having a limiting long term illness or disability	2011	1,999	20.7%	17.3%	17.6%	38.9%		3.6%

Indicator	Period	004 Harold Hill HaveringEngland East				England		
		Count	Value	Value	Value	Worst	Range	Best
Life Expectancy								
Life expectancy at birth, upper age band 90 and over (Male)	2016 - 20	-	75.8	79.5	79.5	66.6		94.1
Life expectancy at birth, upper age band 90 and over (Female)	2016 - 20	-	81.9	83.7	83.2	72.0		97.5
Mortality								
Deaths from all causes, all ages, standardised mortality ratio	2016 - 20	370	115.7	99.3	100.0	251.0		36.0
Deaths from all causes, under 75 years, standardised mortality ratio	2016 - 20	186	154.9	97.0	100.0	309.2		26.1
Deaths from all cancer, all ages, standardised mortality ratio	2016 - 20	115	136.7	103.4	100.0	200.8		32.2
Deaths from all cancer, under 75 years, standardised mortality ratio	2016 - 20	70	159.2	104.3	100.0	231.0		29.2
Deaths from circulatory disease, all ages, standardised mortality ratio	2016 - 20	92	122.2	92.0	100.0	244.7		32.1
Deaths from circulatory disease, under 75 years, standardised mortality ratio	2016 - 20	39	159.2	96.7	100.0	374.4		12.6
Deaths from coronary heart disease, all ages, standardised mortality ratio	2016 - 20	42	131.4	89.0	100.0	307.5		16.6
Deaths from stroke, all ages, standardised mortality ratio	2016 - 20	13	74.6	85.6	100.0	415.7		0.0
Deaths from respiratory diseases, all ages, standardised mortality ratio	2016 - 20	54	135.7	104.6	100.0	335.4		21.8
Deaths from causes considered preventable, under 75 years, standardised mortality ratio	2016 - 20	80	148.6	96.0	100.0	378.4		17.3
Emergency hospital admissions for intentional self harm, standardised admission ratio	2016/17 - 20/21	-	65.7	41.9	100.0	541.4		10.2
Emergency hospital admissions for hip fracture in persons 65 years and over, standardised admission ratio	2016/17 - 20/21	-	124.6	101.0	100.0	527.4		29.3
