## Closure of Brunstane Road Integrated Impact Assessment

Each of the numbered sections below must be completed

| Interim report | Final report | J | (Tick as appropriate) |
|----------------|--------------|---|-----------------------|
|----------------|--------------|---|-----------------------|

#### 1. Title of plan, policy or strategy being assessed

Closure of Brunstane Road and associated measures.

#### 2. What will change as a result of this proposal?

Brunstane Road will be closed to through vehicular traffic and associated traffic management measures will be introduced within the Coillesdene area to discourage through traffic.

#### 3. Briefly describe public involvement in this proposal to date and planned

Prior to implementation of the ETRO, public consultation was undertaken in November to December 2020 where the public was asked to comment on the proposal to close Brunstane Road to through traffic.

ETRO/21/13 was then publicly advertised in October 2021 for members of the public to object formally or to comment.

Further public consultation was undertaken to seek feedback from the public on the trial ETRO measures in the Brunstane Road and Coillesdene area in September to October 2022.

Having considered public feedback and the monitoring that was undertaken throughout, it was clear that residents in the Coillesdene area felt that further measures were needed to discourage displaced traffic using the surrounding Coillesdene area as a short-cut after the closure of Brunstane Road. Sinusoidal speed humps will be installed if the proposed TRO is approved. This will further help to discourage short-cutting traffic and maintain low traffic speeds. The changes proposed in the RSO will also help encourage drivers to obey the restrictions.

TRO/23/14 and RSO/23/15 have been subject to a statutory period of public advertisement providing members of the public an opportunity to object formally or to comment in August to September 2023.

#### 4. Is the proposal considered strategic under the Fairer Scotland Duty?

No

#### 5. Date of IIA

1 March 2024

## 6. Who was present at the IIA? Identify facilitator, lead officer, report writer and any employee representative present and main stakeholder (e.g. Council, NHS)

| Name  | Job Title          | Date of IIA training |
|---|--------------------|----------------------|
| David Wilson (CEC) (Lead Officer & Report Writer) | Operations Manager | 10 June 2015         |
|   |                    |                      |
| Tony Booth (CEC)                                  | Principal Engineer |                      |
| Karyn Teather (CEC)                               | Project Manager    | 6 September 2023     |

#### 7. Evidence available at the time of the IIA

| Evidence  | Available – detail source   | Comments: what does the evidence tell you with regard to different groups who may be affected and to the   |
|---|---|--|
| Data on populations in need                         | Census 2011  Scottish Index of Multiple Deprivation (SIMD)  Joint Strategic Needs | environmental impacts of your proposal City of Edinburgh has one of the fastest growing populations of any city in the UK.  Although the city has a lower share of its population over 65 years of age (12%), the wider city region has a significantly higher share (22%) than Edinburgh and Scotland (19%).                      |
|   | Assessment (CEC, 2015)  | Based on 2011 Census Data the wards with the highest number of health conditions (including Deafness, Blindness, Physical, mental health, learning disabilities etc.) are Portobello/Craigmillar and Liberton/Gilmerton. Both had 31% of their total reporting health conditions. The City Centre had the lowest proportion (22%). |
| Data on service uptake/access                       | Census 2011   | Car use in Edinburgh is the joint lowest of all Scottish cities.  In 2010 of the 191,000 people living and working in Edinburgh, 63,500 commuted to work by car and a further 63,300 commuted by car from other local authority areas.   |
| Data on socio-<br>economic<br>disadvantage e.g. low | Scottish Index of Multiple  | Transport accessibility is lowest around the periphery areas of Edinburgh, for example Niddrie, Baberton, Clermiston and   |

| Evidence  | Available –<br>detail source                              | Comments: what does the evidence tell you with regard to different groups who may be affected and to the environmental impacts of your proposal  |
|---|---|--|
| income, low wealth,<br>material deprivation,<br>area deprivation. | Deprivation<br>(SIMD)                                     | Granton. Many of these are areas of high deprivation as ranked by the SIMD.  |
| Data on equality outcomes   | ATAP, Bike Life 2015/17/19                                | Women, BME communities and various other groups with protected characteristics remain less likely to cycle than white males. In a 2017 survey, 24.5% of school pupils, stated they normally travelled to school using only private motorised mode of travel compared with 48.8% who normally use active modes. 2017 data from Transport Scotland indicates that women were more likely than men to walk or catch the bus to work and men were more likely to cycle to work or travel by rail. In Scotland twice as many men as women cycle once or twice a week for transport. In addition, people in lower income households were more likely to walk or take the bus whereas people in higher income households were more likely to drive. 7.5% of commuters living in Edinburgh cycle to work with over 15.3 million trips made by bike in 2017.  In the city black and minority ethnic (BAME) communities, women and over 65s are underrepresented when it comes to cycling. • Female – 37% • Over 65 – 6% • BAME – 3% (8% of City population) |
| Research/literature evidence                                      | Edinburgh Street Design Guidance Local Transport Strategy | The Council has approved policies, strategies and guidance which support the protection and enhancement of the public realm.   |
|   | Local<br>Development<br>Plan                              | The proposal is in-line with current place-<br>making and street design initiatives and<br>supports Low Traffic Neighbourhood<br>principles.   |
|   | Edinburgh Bike<br>Life 2017/19 The<br>Pedestrian Pound    | Cycling averts 106 serious long term health conditions annually, saving NHS in Edinburgh £731,000pa.   |

| Evidence  | Available –<br>detail source  | Comments: what does the evidence tell you with regard to different groups who may be affected and to the environmental impacts of your proposal                                       |
|---|---|---|
|   | UK and International Evidence showing beneficial economic impacts to businesses where space for walking | It is important that towns and cities adapt to the challenges associated with the climate emergency and the need to decarbonise transport and the ways people move around urban areas |
| Public/patient/client experience information  | Local Resident<br>Feedback  | Regular feedback received from local residents on traffic problems, anti-social behaviour from drivers and damage to parked and passing vehicles.                                     |
| Evidence of inclusive engagement of people who use the service and involvement findings | N/A   |   |
| Evidence of unmet need  | N/A   |   |
| Good practice guidelines  | Edinburgh Street Design Guidance Cycling by Design  | The proposals align with many of the principles endorsed by the the Council's Edinburgh Street Design Guidance policy document and national guidance on active travel.                |
|   | Standards for<br>Community<br>Engagement  | The National Standards for Community Engagement are good-practice principles designed to support and inform the process of community engagement.                                      |
| Carbon emissions generated/reduced data   | City Mobility Plan  | In 2017 one-third of Edinburgh's carbon emissions came from road transport. Traffic congestion costs the city £225m per annum.  |
| Environmental data  | Air Quality Action Plan   | There are no existing air quality issues in the area.   |
| Risk from cumulative impacts  | N/A   |   |
| Other (please specify)  | Public<br>Consultation<br>Exercise  | Local residents were generally supportive of the proposals whilst those who used Brunstane Road as a through route were less supportive.  |
| Additional evidence required  | N/A   |   |

#### 8. In summary, what impacts were identified and which groups will they affect?

#### **Equality, Health and Wellbeing and Human Rights**

#### Positive

# Life: The removal of through traffic from Brunstane Road will significantly enhance conditions for local residents. Health: The proposal will improve conditions for pedestrians and cyclists. Improving conditions for walking and cycling increases opportunities for people to attain an increased standard of physical and mental health. Standard of living: Investment in improving conditions for walking and cycling improves access to public and green spaces.

Individual, family and social life: Investment in improving conditions for walking and cycling will encourage families to walk or cycle.

Disability: The removal of through traffic in this area will improve conditions for wheelchairs and mobility scooters. It will also benefit disabled groups by the reduction of unnecessary through traffic from residential streets. Age: The improvements delivered through this project will make it safer for young and old alike by the removal of unnecessary through traffic.

#### **Negative**

None

#### Affected populations

All groups.

### **Environment and Sustainability including climate change emissions and impacts**

#### **Positive**

The proposal will remove traffic from residential streets and enhance conditions for local residents. This will result in reduced vehicle emissions in the area with attendant environmental benefits. In addition, the reduction in vehicular traffic will create a safer environment encouraging sustainable transport modes like cycling and walking.

#### **Negative**

Whilst the proposals will not generate traffic, it is recognised that existing traffic will be displaced as a

#### Affected populations

All groups.

result. However, this displaced traffic will be transferred to more appropriate primary and secondary distributors rather than residential streets. Residential streets that are affected by any dispersed traffic will have mitigation measures installed to discourage any shortcutting traffic.

| Economic including socio-economic disadvantage   | Affected populations |
|--|----------------------|
| Positive   | All groups.          |
| The proposal will remove through traffic from part of Brunstane Road where parked and passing vehicles experience minor collision damage on a regular basis and thus should reduce costs to residents and drivers alike. |                      |
| Negative   |                      |
| None   |                      |

9. Is any part of this policy/ service to be carried out wholly or partly by contractors and how will equality, human rights including children's rights, environmental and sustainability issues be addressed?

N/A

10. Consider how you will communicate information about this policy/ service change to children and young people and those affected by sensory impairment, speech impairment, low level literacy or numeracy, learning difficulties or English as a second language? Please provide a summary of the communications plan.

N/A

11. Is the plan, programme, strategy or policy likely to result in significant environmental effects, either positive or negative? If yes, it is likely that a <a href="Strategic Environmental Assessment">Strategic Environmental Assessment</a> (SEA) will be required and the impacts identified in the IIA should be included in this. See section 2.10 in the Guidance for further information.

No – the proposal does not generate any additional traffic.

12. Additional Information and Evidence Required

If further evidence is required, please note how it will be gathered. If appropriate, mark this report as interim and submit updated final report once further evidence has been gathered.

N/A

# 13. Specific to this IIA only, what recommended actions have been, or will be, undertaken and by when? (these should be drawn from 7 – 11 above) Please complete:

| Specific actions (as a result of the IIA which may include financial implications, mitigating actions and risks of cumulative impacts) | Who will take<br>them forward<br>(name and job<br>title | Deadline for progressing  | Review<br>date |
|--|---|---|----------------|
| Construction of infrastructure in FY 24/25   | Karyn Teather<br>Senior Project<br>Manager              | N/A Temporary infrastructure can remain in place while a Contractor is appointed for the works. | N/A            |

14. Are there any negative impacts in section 8 for which there are no identified mitigating actions?

No

15. How will you monitor how this proposal affects different groups, including people with protected characteristics?

No negative impact on any group is expected as a result of this proposal.

16. Sign off by Project Lead

Name David Wilson

**Date:** 5/3/2024

#### 17. Publication

Completed and signed IIAs should be sent to:

<u>integratedimpactassessments@edinburgh.gov.uk</u> to be published on the Council website www.edinburgh.gov.uk/impactassessments

Edinburgh Integration Joint Board/Health and Social Care <a href="mailto:sarah.bryson@edinburgh.gov.uk">sarah.bryson@edinburgh.gov.uk</a> to be published at <a href="mailto:www.edinburghhsc.scot/the-ijb/integrated-impact-assessments/">www.edinburghhsc.scot/the-ijb/integrated-impact-assessments/</a>