

Health Impact Assessment in Planning Toolkit



(Reference 1)

March 2024

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1 Introduction

Many aspects of planning can have a significant impact on health. In particular: good quality housing; a well-designed public realm, sustainable transport; employment and training opportunities; and access to leisure, cultural activities and green space. These factors are known as the “wider determinants of health” (**reference 2**).

Yet, when it comes to the design of an urban plan, policy or action, health is not always given particular recognition. Significantly, health experts are rarely involved in the development of urban plans and policies, and rather are generally engaged with patients, hospitals and the health system. Therefore, our health systems tend to be more reactive than proactive.

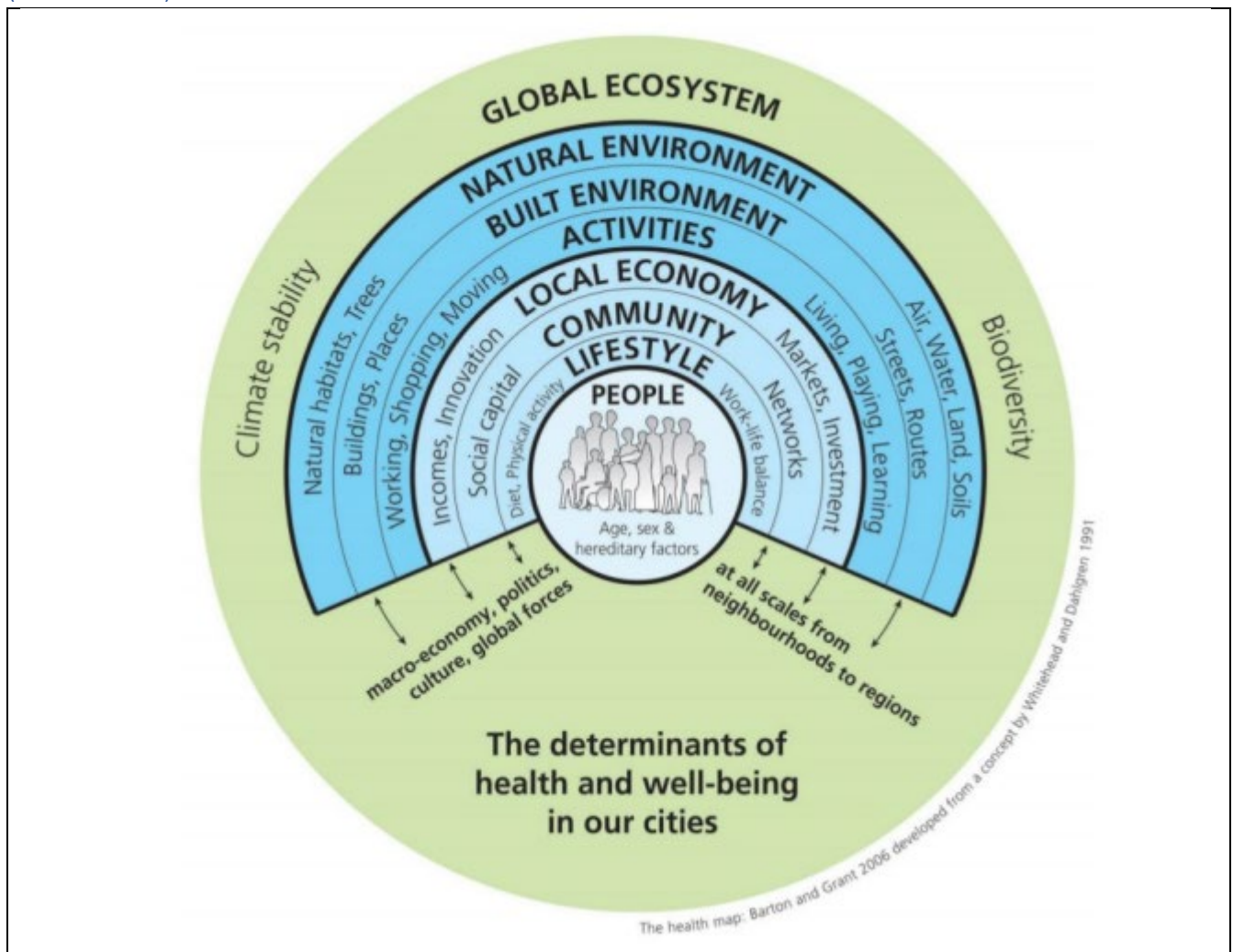
The World Health Organisation defines health as including *good physical, mental and social wellbeing*. Good health is not just about the absence of illness, and it is this definition of health that is used in Health Impact Assessments (HIA) (**reference 4**).

Therefore, to take a proactive and systematic approach to health, city planners and policy makers should use Health Impact Assessments (HIAs) to better understand the impact of various urban factors on the social, physiological and physical health of communities. HIAs are designed to consider whether a development proposal might reinforce health inequalities and inadvertently damage people's health, or have positive health outcomes for the local community.

HIAs aim to produce a set of evidence-based recommendations which maximise positive and minimise negative health impacts and, are used to inform decision-makers and the public when policies or plans with significant potential to impact health are being considered (**reference 2**).

Figure 1 demonstrates the multifaceted nature of what is considered ‘health’ determinants.

Figure 1: The Barton and Grant model of the determinants of health and wellbeing in our cities (reference 3)



1.1 Purpose of this guidance

This guidance aims to inform developers and guide local authority officers and public health professionals on assessing HIAs submitted with planning applications.

Beginning with the national and local health policy context, local Checklists are then set out in this Toolkit which supports the HIA process (see Appendix 1 and 2). This guidance also outlines the different types of HIAs and the various stages of the HIA within the planning process. **(reference 3)**

The aims and objectives of this guidance note therefore are:

Aims

- That the HIA process is better understood
- That this Toolkit may set out the relevant process guidance
- That this Toolkit may set out purposeful planning application advice at pre-application and consultation stages.

Objectives

- To support the implementation of the Waltham Forest Local Plan
- To support the implementation of Waltham Forest Health Policy and Strategy including the Joint Strategic Needs Assessment (JSNA)
- To support the implementation of national HIA recommendations and best practice.

2 Policy Context

2.1 The National Planning Policy Framework

The National Planning Policy Framework (NPPF) sets out the purpose of the planning system as being "to contribute to the achievement of sustainable development." Ensuring a strong, healthy and just society is recognized by the NPPF and Securing the Future (UK Sustainable Development Strategy) as one of the guiding principles of sustainable development (**reference 5**).

Paragraph 8b: **a social objective** - supports strong, vibrant and healthy communities, by ensuring that a sufficient number and range of homes can be provided to meet the needs of present and future generations; and by fostering well-designed, beautiful and safe places, with accessible services and open spaces that reflect current and future needs and support communities' health, social and cultural well-being.

Links to health can be found throughout the framework, with key sections including policies on delivering homes (section 5), transport (section 9), design (section 12), climate change (section 14), and the natural environment (section 15).

Chapter 8. Promoting healthy and safe communities

Paragraph 92 requires planning policies and decisions to aim to achieve healthy, inclusive and safe places which promote social interaction, that are safe and accessible, and enable and support healthy lifestyles, especially where this would address identified local health and well-being needs.

Paragraph 98 recognises the importance of access to quality open space and opportunities for sport and physical activity for health and well-being.

Chapter 11. Making effective use of land

Paragraph 119 requires planning policies and decisions to promote an effective use of land in meeting the need for homes and other uses, while safeguarding and improving the environment and ensuring safe and healthy living conditions.

National Planning Practice Guidance

National Planning Practice Guidance provides further detailed advice on how planning policies and decisions can help to deliver healthier communities. It explains that a healthy community "is a good place to grow up and grow old in. It is one that supports healthy behaviors and supports reductions in health inequalities. It should enhance the physical and mental health of the community..."

It also describes a healthy place as one which:

- Provides opportunities for the community to improve their physical and mental health
- Supports community engagement and well-being
- Meets the needs of children and young people
- It is adaptable to the needs of an increasingly elderly population and those with dementia and other sensory or mobility impairments

The NPPG regards Health Impact Assessment as a useful tool to use where there are expected to be significant impacts of development on Health and Wellbeing. (**reference 6**).

2.2 London Plan

The London Plan 2021 Chapter 1 Good Growth GG3 Creating healthy city states:

To improve Londoners' health and reduce health inequalities, those involved in planning and development must:

c) use the Healthy Streets Approach to prioritise health in all planning decisions

d) assess the potential impacts of development proposals and development Plans on the mental and physical health and wellbeing of communities, in order to mitigate any potential negative impacts, maximise potential positive impacts, and help reduce health inequalities, for example through the use of Health Impact Assessments.

The London Plan 2021 Chapter 6 Economy paragraph 6.9.5 states that the proliferation and concentration of Hot food takeaways should be carefully managed through Development Plans and planning decisions, particularly in town centres that are within Strategic Areas for Regeneration, which tend to have higher numbers of these premises. Boroughs may require Health Impact Assessments for particular uses.

The London Plan 2021 provides further clarity on HIA:

Health Impact Assessment (HIA) is used as a systematic framework to identify the potential impacts of a development proposal, policy or plan on the health and wellbeing of the population and highlight any health inequalities that may arise. HIA should be undertaken as early as possible in the plan making or design process to identify opportunities for maximising potential health gains, minimizing harm, and addressing health inequalities.

Furthermore, it is important that development proposals reduce the negative impact of development on the transport network and reduce potentially harmful public health impacts (10.4.3 of the London Plan).

(reference 7).

2.3 Local Planning Policy

Local Plan Part-1

The new Local Plan (LP1) 2020-2035 was formally adopted on 29th February 2024, replacing the Development Management Policies 2013. The new Local Plan carries forward the Health and Well-Being policy from the Development Management Policies adopted in 2013, embedding health as a cross-cutting theme throughout. **Chapter 13, "Promoting Health and Well-being,"** outlines the goal to enhance the health and well-being of all residents and workers in the borough, it includes a range of policies designed to support healthy communities in Waltham Forest.

The following policies in the plan address the issue in more detail:

Policy 48 - Promoting Healthy Communities: Proposals will be supported where they promote the creation of healthy and sustainable places and communities by: Encouraging the use of Health Impact Assessments (see Policy 49 Health Impact Assessments).

Policy 49 - Health Impact Assessment: that Health Impact Assessments (HIA) are one of the tools that can be used to not only assess the health and well-being impacts of development but embed health and well-being into new developments.

Policy 78 - Parks Open Spaces and Recreation: To promote healthy communities, open space provision must be high quality and usable in order to provide space for leisure and relaxation. Access to high quality sports facilities, both outdoor playing fields and pitches, and indoor sports halls and swimming pools are important in developing and maintaining healthy communities **(reference 8).**

Environmental Impact Assessment

Policy 49 also requires HIA for development that requires an Environmental Impact Assessment (EIA).

Some types of development automatically require EIA, including those set out in Schedule 1 of the EIA Regulations. This includes, for example, certain types of waste disposal installations, waste-water treatment plants and certain types of industrial plants. The requirement for EIA is determined through the screening process undertaken in accordance with EIA Regulations thus Developments that automatically require EIA are therefore required to carry out an HIA (**reference 3**).

Note: This Toolkit will be updated should the Policy Context change.

2.4 National and Local Strategies

This Toolkit/guidance will be updated when further information is available regarding the Health and Wellbeing Strategy and Joint Strategic Needs Assessment (JSNA).

“**Fair Society, Healthy Lives**”, (the Marmot Review (**reference 9**)) found that individual health is influenced by wider determinants such as income, education, local environmental quality and employment; the ‘social determinants of health’. The review set out six policy objectives for reducing health inequalities including ‘to create and develop healthy and sustainable places and communities’.

“**Healthy Lives, Healthy People: our strategy for public health in England**” (**reference 10**) (the White

Paper) sets out the Government’s long-term vision for the future of public health in England. It adopts the Marmot Review’s framework for tackling the social determinants of health, and aims to support healthy communities including by:

- Creating healthy places to grow up and grow old in (para 3.4)
- Supporting active travel (walking and cycling) and for physical activity to become the norm in communities (para 3.32)
- Creating an environment that supports people in making healthy choices, and that makes these choices easier (para 3.62)

The Department of Health and Social Care’s “**Prevention is Better than Cure**” (**reference 11**) publication seeks to improve healthy life expectancy and reduce health inequalities, recognizing that various factors influence health including housing, neighbourhoods, education, safety, transport, food, leisure, greenspace and employment.

Waltham Forest’s **Health and Wellbeing Strategy (reference 12)** aims to improve health and reduce inequalities within Waltham Forest. To do this, the strategy focuses on: Best start in life by developing, thriving and achieving. Living healthy, longer, happy lives by being prosperous, active and sustainable.

Waltham Forest’s **Joint Strategic Needs Assessment (JSNA)** provides local evidence on the health needs of the Borough and is used in formulating local policy.

Public Health England has published HIA guidance in 2020 for local authority public health and planning teams, which supports the use of Health Impact Assessment in the spatial planning process. This toolkit is informed by Public Health England guidance (**reference 2**).

3 Local requirement for HIA

Intention of the HIA Toolkit

The justification for HIA is seen in the importance of assessing Plans and Planning Applications for all matters of sustainability i.e. economic, social and environmental. Waltham Forest seeks to ensure a joined-up approach to its planning instruments for health mitigation.

Health and healthy lifestyles can determine outcomes for those of all ages, namely children, young people, families, adults and the elderly. Waltham Forest Local Plan projects housing growth of circa 27,000 homes in the Plan period until 2040.

In planning for the health needs of a growing population, JSNAs were introduced by the Department of Health in April 2008 to strengthen joint working between the NHS (National Health Service) and local authorities.

The Health and Social Care Act 2012 (**reference 13**) awarded the responsibility for the JSNA and developing a Joint Health and Wellbeing Strategy to Health and Wellbeing Boards, with the purpose of reducing inequalities and improving the health and wellbeing of the whole community.

Public Health England's annual Health Profile for England identifies the following wider determinants of health, also reflected in the Waltham Forest Mental Wellbeing Strategy and Healthy Weight Strategy (**reference 14 and 15**):

Figure 2: Wider Determinants of Health

- The built and natural environment, including:
 - Air quality
 - Quality of and access to green space
 - Housing quality including homelessness
- Education
- Employment
- Income
- Communities and social capital

These determinants are to be reflected in Waltham Forest's next JSNA when published.

These determinants are assessed using the 'HIA Assessment Criteria' set out in Figure 6, also contained within the Rapid and Detailed Checklists (see Appendix 1 and 2). This ensures process clarity for the developments in Waltham Forest, and it enables applications to be tested for health across the full spectrum of health needs in our Borough.

Following the release of both the NPPF and the Health & Social Care Act in 2012, HIA has been increasingly gaining awareness among local authority public health and planning teams, and frequently and routinely applied in both, plan making and development projects. This is often happening next to, or integrated with other impact assessment tools, including Integrated Impact Assessment (IIA), Strategic Environmental Assessment/Sustainability Appraisal (SEA/SA), EIA, Equality Impact Assessment (EqIA) and others during the planning applications process for development projects. Yet, despite its widespread use, understanding of how frequently it is used and how it should be applied remains poor (**reference 13**).

The Health and Social Care Act (2012) gave local authorities new duties and responsibilities for health improvement and health protection. The Act requires every local authority to use all the levers at its disposal to improve health and wellbeing. The promotion and protection of health and wellbeing is being embedded throughout all directorates and functions of the Council, including spatial planning and development management (**reference 16**).

Thus, the Waltham Forest HIA Toolkit has been purposely devised to address the best-practice recommendations as follows;

- I. Embed the use of HIAs earlier in the planning process.
- II. Provide greater clarity on consideration of health issues.
- III. Develop consistency in Waltham Forest's approach to HIA and HUDU (**reference 16**).
- IV. Implement the recommendations set out in Public Health England HIA guidance (**reference 2**) on health outcomes, which addresses the 'Health Determinants' stated in **Figure 2**.

Reasoned Justification for HIA in Waltham Forest

- The Toolkit sets out HIA Process requirements in order to provide clarity.
- As the NPPG guidance advises, Public Health should be consulted on any planning applications (including at the pre-application stage) that are likely to have a significant impact on the health and wellbeing of the local population or particular groups within it. This would allow them to work together on any necessary mitigation measures. A health impact assessment is a useful tool to use where there are expected to be significant impacts.
- Having considered local need, applications under the uses set out in Local Plan Policy 51 will be screened as eligible to submit a rapid HIA (see figure 2).
- The NPPF stipulates that 'Plans should set out the contributions expected from development. This should include setting out the levels and types of health infrastructure' (**reference 5**).
- Thus, this guidance enshrines the connected approach between 'health' and 'health mitigation'.
- We have chosen these application types as per Public Health England guidance, where the impact on population groups is based on the health needs and priorities and population characteristics of the borough, which is set out in the Joint Strategic Needs Assessment, the Health and Wellbeing Strategy and the Waltham Forest Infrastructure Delivery Plan. Needs and priorities are also informed by the Waltham Forest Healthy Weight Strategy and Mental Wellbeing Strategy.
- As per Public Health England guidance, prevention and/or mitigation measures may be required depending on the 'severity' and 'likelihood' of impact. (**reference 2**)
- Applicants will be guided by both the Waltham Forest HIA Toolkit and consultation with Waltham Forest Public Health on what is deemed 'severity' and 'likelihood' of impact. Doing so reflects best practice in impact assessment.
- This Toolkit confirms that Applications should only be subject to HUDU calculations where they have also been subject to an HIA.
- In Waltham Forest we take seriously the need to develop in a sustainable, viable manner (Achieving Sustainable Development) (**reference 5**). We believe we have done so by abiding by policy and strategy guidance. Thus the applicants that submit an EIA will be expected to demonstrate HIA within their EIA, not duplicate the process by submitting separate documents.

4 What is a Health Impact Assessment?

The purpose of an HIA is to assess the health impacts of a policy, programme or project and supports decision makers who can use this information to maximise the positive and minimise the negative health impacts of a proposal or policy option. HIA aims to influence decision making to ensure that policies, projects, and programs lead to improved population health, or at the least do no damage (**reference 4 and 18**).

A HIA will give information about potential effects on a community's health and offers information about a proposal's effects on the distribution of health in the population, providing an opportunity to reduce inequality in health between groups.

It is also a way of making public views and perceptions known to decision-makers, by being inclusive to local stakeholders who will be affected by the proposals, or who have knowledge of the local area.

It is responsive, providing the opportunity to amend the design of a proposed development to protect and improve health. And finally, it offers guidance on how to manage potential health impacts and can strengthen local partnerships within local government, other organisations and the community.

4.1 Aims

An HIA should:

- Predict and identify the potential positive and negative health and well-being impacts of the proposal on planned new communities and neighbouring existing communities in the vicinity.
- Consider which groups of the existing population would be affected by the proposal, as most proposals will not affect all individuals or groups across a community in the same way. By understanding the composition of a local population, the assessor will be able to identify groups most vulnerable to impacts resulting from a proposed development.
- Make recommendations to mitigate against any potential negative health impacts and maximise potential positive health impacts, highlighting where possible the most affected vulnerable groups (**reference 2 and 3**).

Where pre-app engagement takes place, HIAs should be submitted at the pre- application stage, as this enables the findings to be incorporated into changes to the proposed development where necessary (**reference 2 and 3**).

5 Types of Health Impact Assessment

In accordance with Local Plan policy 49, all development meeting the threshold set out below will be expected to submit a Health Impact Assessment:

Figure 3: Development Types Screened to Submit an HIA in Waltham Forest

- | |
|--|
| <p>A. Major development within air quality management area.</p> <p>B. Developments which contain any of the following uses:</p> <ul style="list-style-type: none">• Hot-food-takeaways• Betting Shops• Casinos and amusement arcades (sui generis)• Pay-day loan shops (sui generis) <p>C. Developments of a scale referable to the Greater London Authority (as set out in legislation).</p> |
|--|

There are generally two types of HIA: Rapid and Comprehensive HIA, and the approach taken will be determined by the nature and scale of the proposal and the timescales involved. All the developments meeting the thresholds set out in Policy 49 'Health Impact Assessments' will first require a rapid HIA. However, following consideration of a Rapid HIA, the Council may require additional information from the applicant or request the submission of a comprehensive HIA where adverse outcomes could be expected regarding the significance or likelihood of the impact occurring.

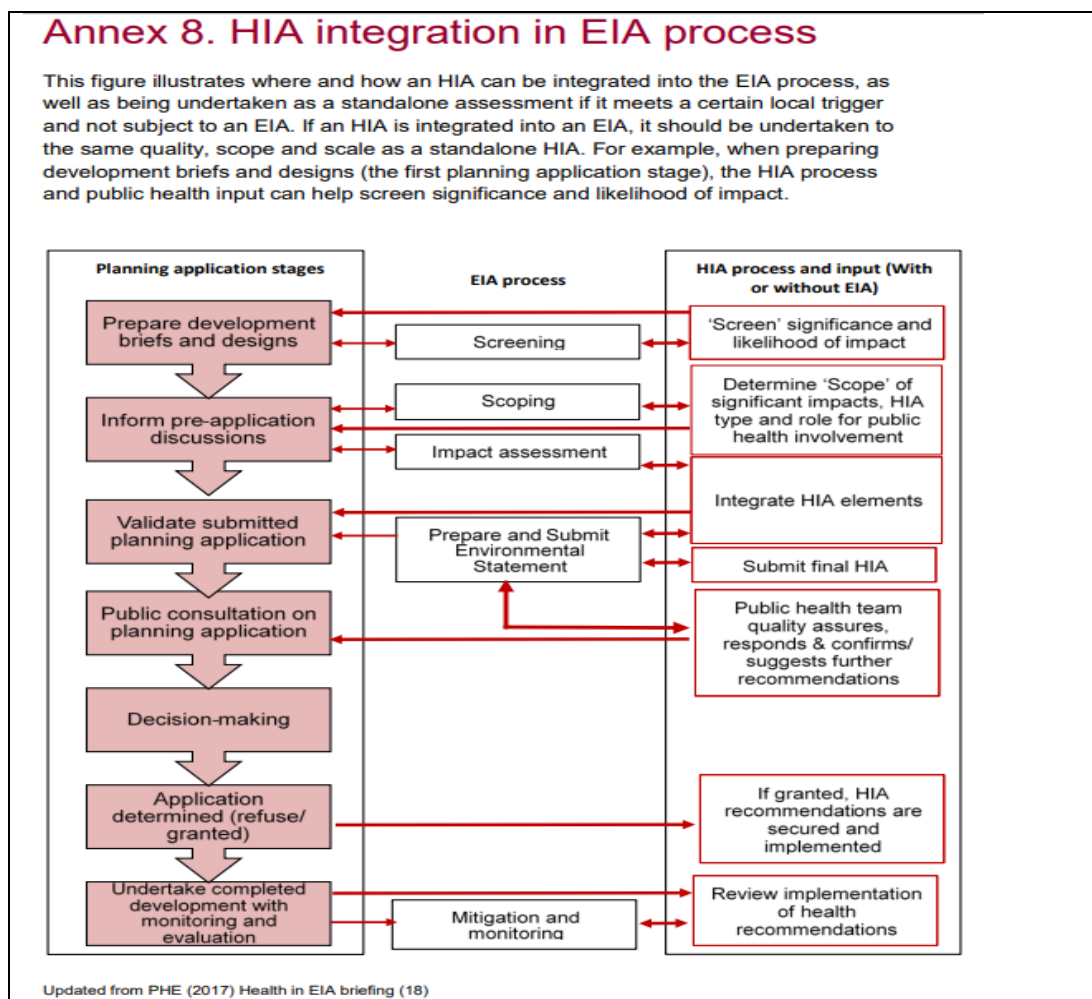
Developments of a scale referable to the Greater London Authority (as set out in legislation) will be required to complete and submit a comprehensive HIA. Therefore, the most appropriate type of HIA should be discussed with the Public Health team.

Rapid HIAs –This typically involves a brief investigation of health impacts, including a short literature review of quantitative and qualitative evidence and the gathering of knowledge and further evidence from a number of local stakeholders. **(Reference 3 and 19)**

Comprehensive HIAs – in-depth analysis, with extensive literature searches and collection of primary data. This will include the comprehensive involvement of stakeholders such as focus groups, panels/public consultations, and interviews. **(Reference 3 and 19)**

HIA as part of the EIA Process- where an application is liable to submit an EIA, they should incorporate HIA into that, as per PHE Guidance, a copy of which is illustrated below.

Figure 4: Extract of EIA and HIA integration, as per PHE Guidance (Reference 2)



6 Stages of HIA

HIAs have seven main stages: Screening, Scoping, Assessment, Recommendations, Implementation, Monitoring and Review. Waltham Forest Public Health work in partnership with Planning to determine what is to be included in each stage.

Stage 1: Screening

Waltham Forest has screened applications by use of the Local Plan policy on Health (Policy 51 as per Figure 2)
The screening stage of the HIA is therefore to decide whether or not an HIA needs to be undertaken.

Stage 2: Scoping

Waltham Forest Public Health will determine this as per Local Plan policy 49.

The Scoping Stage of an HIA is about planning how the HIA will be undertaken and deciding which type of HIA is the most appropriate. This will depend upon the type and size of the project as is explained in the section above on 'Types and stages Health Impact Assessment'.

Stage 3: Assessment

The assessment process has two main stages; the development of the local profile and the appraisal of the proposal.

I. Local Profile

A health profile of the local population should be produced as a baseline for assessing the health impacts of the development. The health profile should contain data on:

- The demographic make-up of the local population, paying particular attention to any vulnerable sub-population groups identified at scoping stage
- The health status of the local population, including that of vulnerable sub-population groups
- An assessment of the local area, such as amenities, facilities and environmental challenges

As the HIA will need to consider the impacts on both the existing local population and any future population, the profile should also consider any changes to population that would arise from the development, e.g. an increase in any particular type of group or significant change in demographics.

If pre-application advice is sought, the Council can provide links to sources of local demographic and health data that can be used in preparation of the local profile.

II. Appraisal

- The purpose of the appraisal is to identify all the potential health impacts and will involve assessing the proposal and considering how it relates to the range of wider determinants of health of the local population.

- The appraisal stage should include consideration of the potential positive and negative impacts of the proposal on the local population, including sub-population groups. If the application is submitting their HIA as part of an EIA, then other EIA topic areas such as noise will be reviewed in order to obtain robust quantitative information.
- If a Comprehensive HIA has been recommended the appraisal stage should also include engagement with the local stakeholders, for example consultation for their views on health impact through questionnaire, focus groups and workshops, depending on the scale of development. On a case by case basis, determined by Waltham Forest Public Health, a Rapid Assessment may also be required to demonstrate this engagement with local stakeholders.

III. Impacts

- Impacts can affect different groups in different ways, can be direct or indirect, and could arise through unforeseen consequences. Impacts can also vary and occur at different stages of a proposed development and this should be considered and documented.
- The HIA should make it clear which impacts will affect which groups of people and be scored according to significance and likelihood as per Figure 2 and 3. For example, where adverse impacts affect many people, where they are irreversible, or where they affect people who already suffer from poor- health; or where positive impacts have significant potential for health improvements.
- The assessment should be systematic and transparent about how impacts were identified.
- The applicant will need to demonstrate how they have engaged with local stakeholders and incorporated their views into their plans.

Stage 4: Reporting Recommendations on an HIA

Following the appraisal, recommendations should be developed by those undertaking the HIA to remove or mitigate adverse health impacts and to enhance the positive effects of proposals.

1. Recommendations should be practicable, achievable and have an evidence base for effectiveness, such as:
 - an alteration to the design of the proposal;
 - an alteration to activities in, or strategies governing, the construction and operation phases of a project;
 - proposed mitigation steps to be secured by a legal agreement.
 - mitigation of health need as per Infrastructure Delivery Plan with the inclusion of a financial health contribution.
2. Recommendations can be graded according to perceived priority (likelihood and significance) of impacts.
3. The report's aim is to document the judgements made on health, with reference to the evidence that informed those judgements. Reporting should be precise and concise.
4. Reporting should be underpinned by HIA principles (see Appendix 1 and 2), including a comprehensive approach to health, equity and ethical use of evidence. A proportionate description of methods, data, any quantitative algorithms used and other evidence should be included where this has informed the judgement.
5. The report will usually set out the residual health effects – these are the effects that are expected to occur after the measures for mitigation and enhancement have been

implemented. When the conclusion in the assessment relies upon measures for mitigation and enhancement, the report should also set out how these measures are secured and, if necessary, how they will be monitored.

6. The scope of the HIA is based upon the description of the proposal known at that point in time and this is likely to include measures for mitigation and enhancement. Both the scoping report and the final report should set out the measures that were relied upon to develop the scope of the HIA.

Detailed HIA Reporting:

Detailed HIAs may consider and report on outcomes that are below the threshold for significance. For example, there is value in reporting community views even though they may not relate to issues that are significant in the terms of the assessment.

Stage 5: Implementation

Follow through with the recommendations and/or the measures when implementing the proposal.

Stage 6: Monitoring

Monitoring involves data collection and analysis after the assessment report has been issued. The assessment identifies potential effects. Monitoring will track the actual effects and can be conducted during different phases of the legislation, the policy, plan or programme. At project level, monitoring will be conducted on the construction and operation phases. It may also be required during decommissioning. It can also be used to follow up on significant issues that were identified during the health assessment, but for which levels of certainty were low.

- The Council may seek to collect or examine further data/indicators and if appropriate take further action.
- If the Council has additional monitoring requirements, it will be confirmed in writing.

Stage 7: Review

Review can be of process, impact or outcome. Each is looked at briefly in turn.

Process: Examine how the HIA process was undertaken, who was involved and how useful the process was. This can help determine whether the HIA added value to the process.

Impact: Examine whether recommendations from the HIA were accepted as measures by the decision-makers and if not, why not.

Outcome: Examine the health outcomes of a proposal after a HIA has been conducted. For example, whether the anticipated positive effects on health, wellbeing and equity were realised and whether negative ones were avoided. The Review Stage of HIA process consists of assessment of the robustness and effectiveness of the assessment and its outcomes so as to achieve 'Improved practice'. There may be circumstances where the Review requires additional information. If that is the case, the Council will confirm in writing. **(Informed by reference 3 and 19)**

7 Contents of the HIA report

The HIA report may be a standalone document or may form part of an Environmental Statement. In each case it should include sufficient information for it to be appraised by others and to justify the recommendations made.

The HIA **must** include:

- An Executive Summary- It is good practice to produce a short version for those who may not want to read the technical report.
- Information relevant to each of the Stages 1 to 7 set out above in **section 6**.
- Full consideration of the required Checklist (Rapid or Detailed)

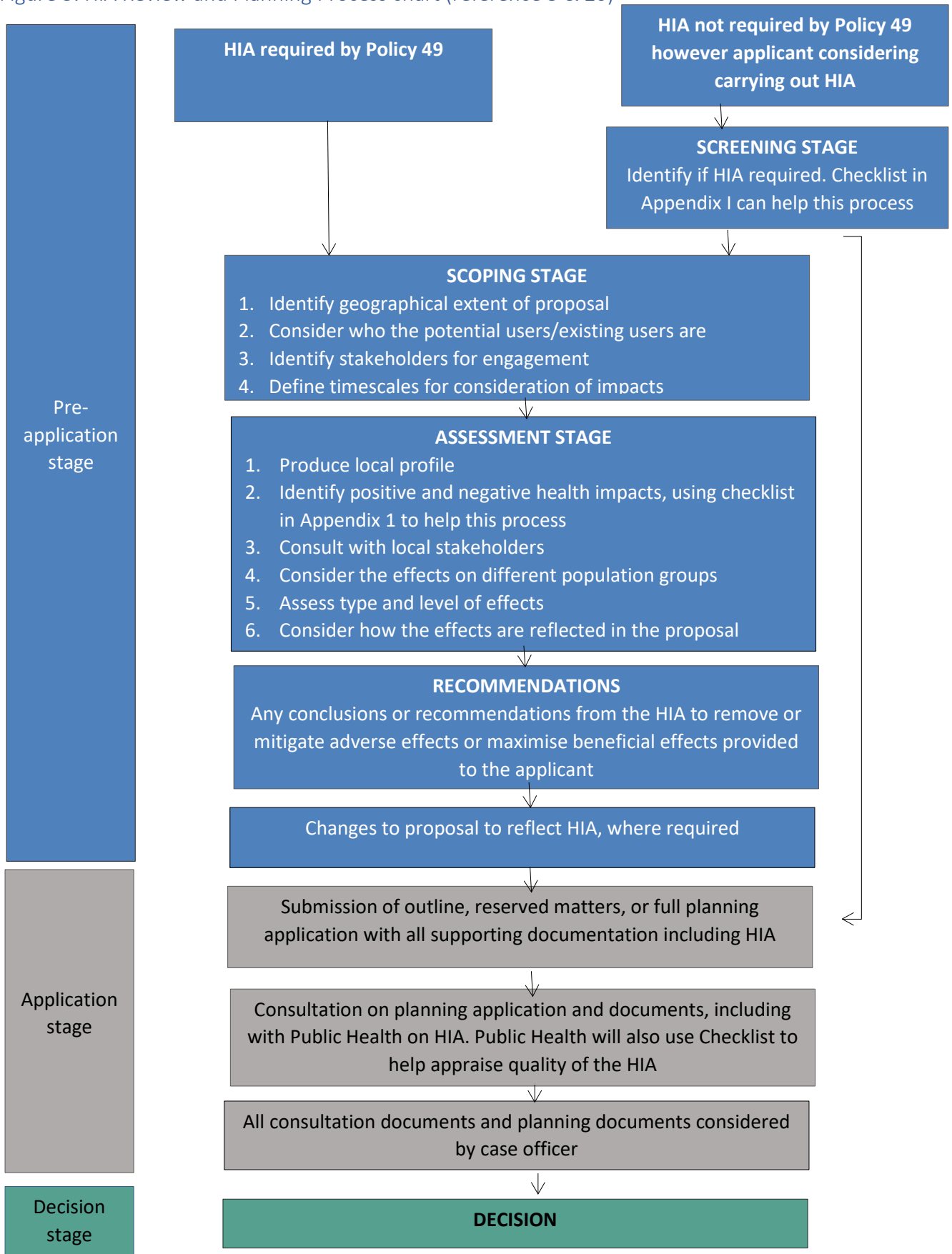
As well as a full consideration of the required Checklist (Rapid or Detailed), exemplar HIA reports will demonstrate the following;

- I. A Description of the development proposal
- II. Scope (geographical and population) and methodology
- III. Options examined, where relevant
- IV. Policy context
- V. Limits of the HIA
- VI. Local evidence, where relevant
- VII. Local Profile including any groups given special consideration
- VIII. Stakeholder involvement
- IX. Appraisal/Assessment
- X. Summary of impacts
- XI. Implications for equality
- XII. Recommendations
- XIII. Resources/references used (**reference 3**)

Within the proposed recommendations, there should be a plan for monitoring and evaluating/review as this is an important part of the HIA.

This includes evaluating whether the HIA has influenced the decision-making process and subsequent proposal, as well as monitoring the implementation of the proposal. This is critical to ensure any recommendations that decision-makers agreed to do occur. Longer-term monitoring of the health of populations is sometimes a component of larger proposals and can be used to see if the predictions made during the appraisal were accurate, and to see if the health, or health-promoting behaviours, of the community, have improved.

Figure 5. HIA Review and Planning Process chart (reference 3 & 20)



Following Decision, the stages of **Implementation, Monitoring** and **Review** will occur.

8 Health Outcomes Considered within an Assessment

The council will evaluate the combined effects of proposed development on health, taking into account how different factors collectively impact the community's wellbeing. The Council's Local Plan, Infrastructure Delivery Plan and Supplementary Planning Document on Developer Contributions will each inform any necessary mitigation contributions (**reference 23 and 24**).

The range of outcomes in an HIA assessment will reflect primary national guidance (Office for Health Improvement and Disparities (DHSC), and NHS as well as planning policy (NPPF, London Plan and Local Plan).

Annex 2 within the PHE guidance (reference 2) categories outcomes as per Figure 6 below, with their impact determined by degree of '**significance**' (Figure 7) and '**likelihood**' (Figure 8). In weighing up the likelihood and severity, the Council will consider the 'local health needs and priorities' as well as the 'characteristics of the population' in our borough. WF does this through the following channels:

- local health strategic documents, such as the Health and Wellbeing Strategy, Healthy Weight Strategy and Mental Wellbeing Strategy
- the local Joint and Strategic Needs Assessment (JSNA) which informs the Health and Wellbeing Strategy and is approved by the Health and Wellbeing Board
- local data sets and intelligence sources, including indicators published in the PHOF (Public Health Outcomes Framework) and local health profiles
- engagement with wider health and social care partners including: primary care, CCGs, STPs/ICSs and NHS trusts (**reference 2**).

'Likelihood' and 'Significance' of Health Impact

The phrase 'likely and significant' comes from environmental assessment. As an approach, all HIAs should have a focus on those health effects that are identified by the Council as 'likely' and 'significant'. Clearly it is crucial to consider not just site-specific impact but also cumulative impact on Health with any project.

Figure 6: HIA Assessment Criteria (reference 2)

- I. Reduces Health Inequalities
- II. Improve mental health and wellbeing
- III. Improve diet and weight
- IV. Improve musculoskeletal health
- V. Improve respiratory health
- VI. Improve cardiovascular health
- VII. Protect environmental health
- VIII. Provide access to health and care infrastructure and services.

Figure 7. Significance of Impact-PHE Guidance (Reference 2)

Major adverse	Major benefit	Significant based on: high exposure or scale; long-term duration; continuous frequency; severity predominantly related to mortality; majority of population affected; permanent change; and substantial service quality implications. Prevention measures will be required.
Moderate adverse	Moderate benefit	Potentially significant based on: low exposure or medium scale; medium-term duration; frequent events; severity predominantly related to moderate changes in morbidity; large minority of population affected; gradual reversal; and small service quality implications. Prevention or mitigation measures will be required.
Slight adverse	Slight benefit	Not significant based on: very low exposure or small scale; short-term duration; occasional events; severity predominantly related to minor change in morbidity; small minority of population affected; rapid reversal; and slight service quality implications. Mitigation measures will be required.
Neutral		Not significant based on: negligible exposure or scale; very short-term duration; one-off frequency; severity predominantly relates to a minor change in quality-of-life; very few people affected; immediate reversal once activity complete; and no service quality implication.

Figure 8. Likelihood of Impact-PHE Guidance (Reference 2)

Definite	Strong direct evidence (for example from a range of qualitative and quantitative sources) or direct evidence from official statistics.
Probable	Good direct evidence (for example from a range of qualitative and quantitative sources) to support the impact.
Possible	Direct evidence to support the impact but drawn from limited source(s) (for example grey literature, news articles, blogs or commentaries).
Unlikely	No direct evidence but issue highlighted as a potential impact.

Appendix 1 Checklist of HIA Rapid Assessment

Name of Assessing Officer/Organisation						
Name of Proposal						
Planning Reference (if applicable)						
Location of Project						
Date of Assessment						
Population Groups						
Each HIA must demonstrate 'How it fully considers the population groups most vulnerable to the health impact of the proposal'.						
See Appendix 4 for guidance on this.						
Assessment Criteria	Relevance of Issue to Assessment	Significance Select that which applies	Likelihood Select that which applies	Evidence/Details	Rationale/Summary of Impact	Mitigation Recommended
Reduces Health Inequalities	Tick or X (Symbols here)	<ul style="list-style-type: none"> • Major Adverse • Major Benefit • Moderate Adverse • Moderate Benefit • Slight Adverse • Slight Benefit • Neutral 	<ul style="list-style-type: none"> • Definite • Probable • Possible • Unlikely 			
Improve mental health and wellbeing	Tick or X (Symbols here)	<ul style="list-style-type: none"> • Major Adverse • Major Benefit • Moderate Adverse • Moderate Benefit • Slight Adverse • Slight Benefit • Neutral 	<ul style="list-style-type: none"> • Definite • Probable • Possible • Unlikely 			

Improve diet and weight	Tick or X (Symbols here)	<ul style="list-style-type: none"> • Major Adverse • Major Benefit • Moderate Adverse • Moderate Benefit • Slight Adverse • Slight Benefit • Neutral 	<ul style="list-style-type: none"> • Definite • Probable • Possible • Unlikely 			
Improve musculoskeletal health	Tick or X (Symbols here)	<ul style="list-style-type: none"> • Major Adverse • Major Benefit • Moderate Adverse • Moderate Benefit • Slight Adverse • Slight Benefit • Neutral 	<ul style="list-style-type: none"> • Definite • Probable • Possible • Unlikely 			
Improve respiratory health	Tick or X (Symbols here)	<ul style="list-style-type: none"> • Major Adverse • Major Benefit • Moderate Adverse • Moderate Benefit • Slight Adverse • Slight Benefit • Neutral 	<ul style="list-style-type: none"> • Definite • Probable • Possible • Unlikely 			
Improve cardiovascular health	Tick or X (Symbols here)	<ul style="list-style-type: none"> • Major Adverse • Major Benefit • Moderate Adverse • Moderate Benefit • Slight Adverse 	<ul style="list-style-type: none"> • Definite • Probable • Possible • Unlikely 			

		<ul style="list-style-type: none"> • Slight Benefit • Neutral 				
Protect environmental health	Tick or X (Symbols here)	<ul style="list-style-type: none"> • Major Adverse • Major Benefit • Moderate Adverse • Moderate Benefit • Slight Adverse • Slight Benefit • Neutral 	<ul style="list-style-type: none"> • Definite • Probable • Possible • Unlikely 			
Provide access to health and care infrastructure and services.	Tick or X (Symbols here)	<ul style="list-style-type: none"> • Major Adverse • Major Benefit • Moderate Adverse • Moderate Benefit • Slight Adverse • Slight Benefit • Neutral 	<ul style="list-style-type: none"> • Definite • Probable • Possible • Unlikely 			

(reference 2, 3 and 20 and 23)

Appendix 2 Checklist of Detailed HIA Assessment

Name of Assessing Officer/Organisation _____						
Name of Proposal _____						
Planning Reference (if applicable) _____						
Location of Project _____						
Date of Assessment _____						
Population Groups Each HIA must demonstrate 'How it fully considers the population groups most vulnerable to the health impact of the proposal'. See Appendix 4 for guidance on this.						
Assessment Criteria	Relevance of Issue to Assessment	Significance Select that which applies	Likelihood Select that which applies	Evidence/ Details	Rationale/ Summary of Impact	Mitigation Recommended
Reduces Health Inequalities	-	-	-	-	-	-
Housing design and affordability Access to health and social care services and other social infrastructure Access to open space and nature Air quality, noise and neighbourhood amenity Accessibility and active travel Crime reduction and community safety	Tick or X (Symbols here)	<ul style="list-style-type: none"> • Major Adverse • Major Benefit • Moderate Adverse • Moderate Benefit • Slight Adverse • Slight Benefit • Neutral 	<ul style="list-style-type: none"> • Definite • Probable • Possible • Unlikely 			

<p>Access to healthy food</p> <p>Access to education, work and training (including consideration of literacy and early years accessibility and attainment)</p> <p>Social cohesion and inclusive design (including community provision through community spaces accessible to all ages and health needs such as the disabled and elderly)</p> <p>Climate change Health inequalities between population age groups</p> <p>Health inequalities between geographic areas</p> <p>Financial Stability/Work Environment (including wages, employment opportunities, risk of debt, cost of living).</p>						
<p>Improve mental health and wellbeing</p>	<p>Tick or X (Symbols here)</p>	<p>-</p>	<p>-</p>	<p>-</p>	<p>-</p>	<p>-</p>

Housing design and affordability Access to open space and nature Air quality, noise and neighbourhood amenity Crime reduction and community safety Social cohesion and inclusive design	Tick or X (Symbols here)	<ul style="list-style-type: none"> • Major Adverse • Major Benefit • Moderate Adverse • Moderate Benefit • Slight Adverse • Slight Benefit • Neutral 	<ul style="list-style-type: none"> • Definite • Probable • Possible • Unlikely 			
Improve diet and weight	Tick or X (Symbols here)	-	-	-	-	-
Housing design and affordability Access to health and social care services and other social infrastructure Access to open space and nature Accessibility and active travel Access to healthy food/Nutrition Access to work and training	Tick or X (Symbols here)	<ul style="list-style-type: none"> • Major Adverse • Major Benefit • Moderate Adverse • Moderate Benefit • Slight Adverse • Slight Benefit • Neutral 	<ul style="list-style-type: none"> • Definite • Probable • Possible • Unlikely 			
Improve musculoskeletal health	Tick or X (Symbols here)	-	-	-	-	-
Housing design and affordability	Tick or X (Symbols here)	<ul style="list-style-type: none"> • Major Adverse • Major Benefit 	<ul style="list-style-type: none"> • Definite • Probable • Possible 			

<p>Access to health and social care services and other social infrastructure</p> <p>Access to open space and nature</p> <p>Accessibility and active travel</p> <p>Social cohesion and inclusive design</p>		<ul style="list-style-type: none"> • Moderate Adverse • Moderate Benefit • Slight Adverse • Slight Benefit • Neutral 	<ul style="list-style-type: none"> • Unlikely 			
Improve respiratory health	Tick or X (Symbols here)	-	-	-	-	-
<p>Housing design and affordability</p> <p>Access to health and social care services and other social infrastructure</p> <p>Access to open space and nature</p> <p>Air quality, noise and neighbourhood amenity</p> <p>Accessibility and active travel</p>	Tick or X (Symbols here)	<ul style="list-style-type: none"> • Major Adverse • Major Benefit • Moderate Adverse • Moderate Benefit • Slight Adverse • Slight Benefit • Neutral 	<ul style="list-style-type: none"> • Definite • Probable • Possible • Unlikely 			
Improve cardiovascular health	Tick or X (Symbols here)	-	-	-	-	-
<p>Access to health and social care services and other social infrastructure</p> <p>Access to open space and nature</p>	Tick or X (Symbols here)	<ul style="list-style-type: none"> • Major Adverse • Major Benefit • Moderate Adverse • Moderate Benefit 	<ul style="list-style-type: none"> • Definite • Probable • Possible • Unlikely 			

Air quality, noise and neighbourhood amenity Accessibility and active travel		<ul style="list-style-type: none"> • Slight Adverse • Slight Benefit • Neutral 				
Protect environmental health	Tick or X (Symbols here)	-	-	-	-	-
Housing design and affordability Air quality, noise and neighbourhood amenity Water and Soil quality Crime reduction and community safety Minimising the use of resources Climate change Housing, buildings and connecting routes (safety and cohesion between the same) Poverty and social Exclusion Fit for purpose design of community space	Tick or X (Symbols here)	<ul style="list-style-type: none"> • Major Adverse • Major Benefit • Moderate Adverse • Moderate Benefit • Slight Adverse • Slight Benefit • Neutral 	<ul style="list-style-type: none"> • Definite • Probable • Possible • Unlikely 			
Provide access to health and care infrastructure and services.	Tick or X (Symbols here)	-	-	-	-	-

Access to health and social care services and other social infrastructure	Tick or X (Symbols here)	<ul style="list-style-type: none"> • Major Adverse • Major Benefit • Moderate Adverse • Moderate Benefit • Slight Adverse • Slight Benefit • Neutral 	<ul style="list-style-type: none"> • Definite • Probable • Possible • Unlikely 			
Accessibility and active travel						
Access to work and training						
Occupational safety and health						

(reference 2, 3 and 19 and 22)

Appendix 3 - List of local Development Plan policies with links to health

Policies may be listed more than once as relevant to the different topics of Decent Homes for Everyone, Promoting Health and Well-being, Sustainable Transport and Infrastructure, Creating High Quality Places and Protecting and Enhancing the Environment.

Decent Homes for Everyone

Local Plan Part 1
Policy 15 Housing Size and Mix
Policy 16 Accessible and Adaptable Housing

Promoting Health and Well-being

Policy 48 Promoting healthy communities
Policy 49 High quality environment
Policy 51 Hot Food Takeaways
Policy 52 Betting Shops and Payday Loan Shops

Sustainable transport and Infrastructure

Policy 60 Promoting Sustainable Transport
Policy 61 Active Travel
Policy 63 Development and Transport Impacts

Creating High Quality Places

Policy 53 Delivering High Quality Design
Policy 56 Residential Space Standards
Policy 57 Amenity

Protecting and Enhancing the Environment

Policy 77 Green Infrastructure and the Natural Environment
Policy 78 Open Spaces Sport and Recreation
Policy 81 Epping Forest and the Epping Forest Special Area of Conservation
Policy 82 The Lee Valley Regional Park
Policy 84 Food Growing and Allotments
Policy 88 Air Pollution
Policy 89 Water Quality and Water Resources
Policy 90 Contaminated Land

Appendix 4: Population Groups Checklist

By population groups we are asking;

How does the HIA fully consider the population groups most vulnerable to the health impact of development?

Each HIA should therefore demonstrate how it has addressed population vulnerability within its HIA.

Population and associated characteristics of population	
<i>Sex/Gender related groups</i>	<i>Health status groups</i>
Female	People with existing poor physical or mental health (including relating to disabilities)
Male	
Transgender	
Age related groups	Carers of people with existing poor physical or mental health
Children and young people	People with physical, sensory or learning disabilities/difficulties
Early years (including pregnancy and first year of life)	
General adult population	<i>Income related groups</i>
Older people	Economically inactive
<i>Groups at higher risk of discrimination or other social disadvantage</i>	People of low income
	People who are unable to work due to ill health
Black and minority ethnic groups	Unemployed/workless
Ex-offenders	<i>Geographical groups and/or settings</i>
Gypsies and travellers	People in key settings: workplaces/schools/hospitals/care homes/prisons
Homeless	
Lesbian, gay and bisexual people	People living in areas which exhibit poor economic and or health indicators
Looked after children	
People seeking asylum	People living in rural, isolated or over-populated areas
Refugee groups	People unable to access services and facilities
Religious groups	
Veterans	

(reference 19 and 21)

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