This photo report arises from a workshop held at the Winter Gardens, Weston-Super-Mare on Wednesday, 18 November 2009
This summary photo-report provides some of the key points and flavour of the workshop held on behalf of the South West Strategic Health Authority.

The project was undertaken by the WHO Collaborating Centre for Healthy Cities based at the University of the West of England, Bristol.

The workshop flipcharts and graphic plans serve as a record and aide memoire for those present. However they are inevitably quite cryptic in places.

It is strongly recommended that this photo report is not used as a means of communication with those not present at the meeting without providing proper interpretation.

Facilitation Team:

Marcus Grant  
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Senior Lecturer, WHO Collaborating Centre for Healthy Cities

Ben Cave  
Director, Ben Cave Associates

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email: marcus.grant@uwe.ac.uk
The session objectives were:

- To examine and spread good practice.

- To provide an understanding of the nature and role of a Health Impact Assessment in planning.

AGENDA

10:15 - Arrival
10:30 - Introductions + taking stock
11:30 - Health appraisal in the built environment
12:30 - Plenary - reflection
13:00 - Lunch
14:00 - The HIA Landscape
15:30 - Barriers + opportunities (top actions)
16:14 - Where next?
<table>
<thead>
<tr>
<th>Firstname</th>
<th>Surname</th>
<th>Post / Title</th>
<th>Organisation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Kirsty</td>
<td>Alexander</td>
<td>Consultant in Public Health</td>
<td>NHS Gloucestershire</td>
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<tr>
<td>Chris</td>
<td>Bartlett</td>
<td>Public Health Scientist</td>
<td>NHS Wiltshire</td>
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<tr>
<td>Denise</td>
<td>Burton</td>
<td>Assistant Director of Public Health - Obesity Lead</td>
<td>NHS BANES</td>
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<td>Sophia</td>
<td>Callaghan</td>
<td>Consultant in Public Health</td>
<td>NHS Bournemouth and Poole</td>
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<tr>
<td>Alan</td>
<td>Cheeseman</td>
<td>Professional Planner</td>
<td>Bournemouth Borough Council</td>
</tr>
<tr>
<td>Jacq</td>
<td>Clarkson</td>
<td>Head of Public Health Intelligence</td>
<td>NHS Somerset</td>
</tr>
<tr>
<td>Claire</td>
<td>Courtois</td>
<td>Principal Planning Policy Officer</td>
<td>North Somerset Council</td>
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<tr>
<td>Nicola</td>
<td>Cretney</td>
<td>Assistant Director (Public Health)</td>
<td>NHS Wiltshire</td>
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<tr>
<td>Fiona</td>
<td>Dickens</td>
<td>Public Health Programme Manager</td>
<td>NHS Swindon</td>
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<tr>
<td>Karin</td>
<td>Dixon</td>
<td>Health Improvement Specialist (Food and Health)</td>
<td>NHS North Somerset</td>
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<td>Liz</td>
<td>Elford</td>
<td>Planning Officer</td>
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<td>Helen</td>
<td>Erswell</td>
<td>Lifestyle Commissioning Manager</td>
<td>NHS BANES</td>
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<tr>
<td>Debbie</td>
<td>Fuller</td>
<td>Forward planning officer &amp; UWE PG student</td>
<td>Exeter City Council</td>
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<tr>
<td>Trudi</td>
<td>Grant</td>
<td>Consultant in Public Health - Obesity Lead</td>
<td>NHS Somerset</td>
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<td>Stephen</td>
<td>Hewitt</td>
<td>Specialist Professional Planner</td>
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<td>Sally</td>
<td>Hunter</td>
<td>Senior Researcher (Special Projects)</td>
<td>Wiltshire Council</td>
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<td>Sarah</td>
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<td>Cherry</td>
<td>Jones</td>
<td>Assistant Director of Public Health (Acting)</td>
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<tr>
<td>Jo</td>
<td>Lewitt</td>
<td>Commissioning Manager for Children and Families - Obesity Lead</td>
<td>NHS BANES</td>
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<tr>
<td>Andrew</td>
<td>Pratt</td>
<td>Health Impact Specialist Practitioner</td>
<td>NHS Plymouth</td>
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<td>Sarah</td>
<td>Prest</td>
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<td>NHS Dorset</td>
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<td>Christopher</td>
<td>Ricketts</td>
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<tr>
<td>Paul</td>
<td>Scott</td>
<td>NHS Bath and North East Somerset</td>
<td>BANES Council</td>
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<tr>
<td>Sue</td>
<td>Weaver</td>
<td></td>
<td>NHS Gloucestershire</td>
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<tr>
<td>Barry</td>
<td>Wyatt</td>
<td>Strategic Head (Development Services)</td>
<td>Stroud District Council</td>
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<tr>
<td>Peter</td>
<td>Ashcroft</td>
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<td>DH South West</td>
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<tr>
<td>Marcus</td>
<td>Grant</td>
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<td>WHO Healthy Cities</td>
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<tr>
<td>Ben</td>
<td>Cave</td>
<td></td>
<td>Ben Cave Associates</td>
</tr>
<tr>
<td>Paul</td>
<td>Pilkington</td>
<td></td>
<td>WHO Healthy Cities</td>
</tr>
</tbody>
</table>
Workshop Start-up

- Introductions to the agenda and each other
- What issues do you want covered?
- What HIA or HIA like activity is happening in the region?
Mapping where we have an impact on the health map

Table groups
(work of two groups shown)

Project Regional Health Impact Assessment Workshop Nov09

Subject Taking Stock
Getting to grips with HIA and HIA like activity in the region

Project: Regional Health Impact Assessment Workshop Nov09

Group: Plenary, but with each organisation contributing notes on activity in its area

Subject: Mapping HIA and HIA like activity
<table>
<thead>
<tr>
<th>Area / organisation</th>
<th>HIA / HIA related activity</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Bristol</strong></td>
<td>Planning and health policy paper/evidence base</td>
<td>Agenda setting</td>
</tr>
<tr>
<td></td>
<td>Health impact of development framework – Core Strategy and Site Allocation</td>
<td>HIA</td>
</tr>
<tr>
<td></td>
<td>Health appraisal of Knowle West regeneration framework</td>
<td>Informal</td>
</tr>
<tr>
<td></td>
<td>Look at relationship between EIA/SA/EqIA/HIA – separate or integrated?</td>
<td>Informal</td>
</tr>
<tr>
<td></td>
<td>Links between Planning, Transport and Health - PCT funded posts in Planning and Transport</td>
<td>Training and capacity building activity</td>
</tr>
<tr>
<td></td>
<td>Housing strategy</td>
<td>Rapid HIA participatory scoping - Spectrum</td>
</tr>
<tr>
<td><strong>Devon</strong></td>
<td>Growth plans and urban extensions</td>
<td>Desktop HIA</td>
</tr>
<tr>
<td></td>
<td>New Community - Sherford</td>
<td>Full HIA</td>
</tr>
<tr>
<td></td>
<td>New Communities - Cranbrook</td>
<td>Full HIA</td>
</tr>
<tr>
<td><strong>NHS Bournemouth and Poole</strong></td>
<td>Bournemouth: Early engagement with PCT to look at wider health issues eg greenspace network to promote walking and cycling – access to open space for families living in flats</td>
<td>Training and capacity building activity</td>
</tr>
<tr>
<td></td>
<td>Bournemouth: Health issues addressed in Sustainability Appraisal work</td>
<td>HIA -SA</td>
</tr>
<tr>
<td></td>
<td>HIA links with Local Authority to develop HIA work for Environmental planning</td>
<td>HIA</td>
</tr>
<tr>
<td></td>
<td>Opportunities schools programme</td>
<td>Informal contact and opportunities</td>
</tr>
<tr>
<td></td>
<td>Various aspects of health are considered as part formal and informal planning process</td>
<td></td>
</tr>
<tr>
<td></td>
<td>HIA associated with Poole's Core Strategy</td>
<td>HIA</td>
</tr>
<tr>
<td></td>
<td>NHS comments on Dorset’s Core Strategy</td>
<td>Informal contact and opportunities</td>
</tr>
<tr>
<td></td>
<td>Formal and informal level aspects of health are considered in the planning process</td>
<td>Informal contact and opportunities</td>
</tr>
<tr>
<td><strong>North Somerset Council</strong></td>
<td>Health policy in Core Strategy</td>
<td>Health policy</td>
</tr>
<tr>
<td><strong>NHS Somerset</strong></td>
<td>Input provided to LTP and Local Development Framework</td>
<td>Informal contact and opportunities</td>
</tr>
<tr>
<td></td>
<td>Good links to Moving Forward team on SCC</td>
<td>Informal contact and opportunities</td>
</tr>
<tr>
<td></td>
<td>HIAs mainly used on service redesign rather than infrastructure</td>
<td>Service delivery HIA</td>
</tr>
<tr>
<td><strong>NHS Swindon</strong></td>
<td>Health ‘influence’ on transport strategy therefore rewritten with a focus on walking/cycling</td>
<td>Informal contact and opportunities</td>
</tr>
<tr>
<td></td>
<td>Planners/transport on Active Swindon Partnership steering group, and involved in bringing new developments to group for discussion/consideration</td>
<td>Informal contact and opportunities</td>
</tr>
<tr>
<td></td>
<td>Destination Swindon – one planet living (across partnerships agenda)</td>
<td>Informal contact and opportunities</td>
</tr>
<tr>
<td></td>
<td>Considering HIA as part of Strategic Environment Assessment</td>
<td>Informal contact and opportunities</td>
</tr>
</tbody>
</table>

As documented at the event.

**Group**  Plenary, but with each organisation contributing notes on activity in its area

**Project**  Regional Health Impact Assessment Workshop Nov09

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**Subject**  Mapping HIA and HIA like activity
<table>
<thead>
<tr>
<th>Area / organisation</th>
<th>HIA / HIA related activity</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gloucestershire</td>
<td>Wingmoor waste treatment and landfill sites (includes strategic hazardous waste site)</td>
<td>HIA</td>
</tr>
<tr>
<td></td>
<td>Wingmoor potential hazardous waste landfill site – planning application for 20-year extension</td>
<td>Anticipated</td>
</tr>
<tr>
<td></td>
<td>Gloucestershire CC – Core waste strategy – site selections and choice of treatment methodologies</td>
<td>Anticipated</td>
</tr>
<tr>
<td></td>
<td>Various housing/planning areas – NW extension to Cheltenham 5000 prospectus</td>
<td>Anticipated</td>
</tr>
<tr>
<td></td>
<td>Various health impact assessments being discussed for other potential housing development proposals</td>
<td>Anticipated</td>
</tr>
<tr>
<td>NHS Wiltshire</td>
<td>Impact of Lafarge Cement works on the health of local people</td>
<td>HIA</td>
</tr>
<tr>
<td></td>
<td>Opportunity to ‘influence’ LDF process and ensure it contained health statements</td>
<td>Informal contact and opportunities</td>
</tr>
<tr>
<td></td>
<td>No specific HIAs under way currently – Director of PH holds joint post with Wiltshire Council and public health – advice is given on specific projects</td>
<td>Informal contact and opportunities</td>
</tr>
<tr>
<td>Plymouth</td>
<td>Social housing redevelopments</td>
<td>Full HIAs</td>
</tr>
<tr>
<td></td>
<td>Airport</td>
<td>Desktop HIA by private sector</td>
</tr>
<tr>
<td></td>
<td>Transport changes following growth point and urban extension proposals</td>
<td>Full HIA</td>
</tr>
<tr>
<td></td>
<td>Planning/health group</td>
<td>upstream HIA advice’ - desktop</td>
</tr>
<tr>
<td>Private sector Cornwall</td>
<td>Unified authority</td>
<td>Full HIAs by private sector</td>
</tr>
<tr>
<td></td>
<td>Incinerator</td>
<td>Full HIAs by private sector</td>
</tr>
<tr>
<td>North Dorset Planning policy</td>
<td>Core Strategy – Health Policy with link through all policies such as green infrastructure</td>
<td>Health policy work</td>
</tr>
<tr>
<td>B&amp;NES PCT</td>
<td>Working with planners at B&amp;NES to agree Supplementary Planning Document for health care infrastructure contributions</td>
<td>Liaison</td>
</tr>
<tr>
<td></td>
<td>Two capability building workshops on ‘Planning Healthy Neighbourhoods’ for LSP, council and health staff in B&amp;nes</td>
<td>Training and capacity building activity</td>
</tr>
<tr>
<td>B&amp;NES Council</td>
<td>Core Strategy Options</td>
<td>HIA</td>
</tr>
<tr>
<td></td>
<td>Sustainable Community Strategy</td>
<td>HIA</td>
</tr>
<tr>
<td></td>
<td>Officer training from WHO/UWE + Stakeholders’ workshops</td>
<td>Training and capacity</td>
</tr>
<tr>
<td>Exeter City Council</td>
<td>Masterplans (i.e. South West extensions: Monkerton Strategic Broad Allocations)</td>
<td>Rapid HIA</td>
</tr>
<tr>
<td>GOSW Regional Planning Team</td>
<td>Comment: “Health and Sustainability is the same thing; useful to have the Health arguments – give us the evidence”</td>
<td>Informal contact and opportunities</td>
</tr>
</tbody>
</table>

As documented at the event. 

**Project** Regional Health Impact Assessment Workshop Nov09 

**Group** Plenary, but with each organisation contributing notes on activity in its area 

**Subject** Mapping HIA and HIA like activity
Plymouth PCT HIA activities 2001-09  (selected)

Published HIA reports etc
- HIA of the Morice Town ‘home zone’ proposals
- HIA of the ‘Gardens for People’ project
- HIA of the PCT Strategic Services Development Plan
- HIA of the East End Community Village regeneration plans
- (participation in) HIA of the Sherford (planned new urban extension/community) commissioned by Devon County Council
- HIA of the Millbay Area Action Plan
- HIA of the redevelopment of social housing in Devonport
- HIA of the Eastern Corridor transport proposals
- A pilot HIA toolkit for commissioning: an HIA of stroke services in Plymouth

HIA capacity building
- Publication of guidance for undertaking HIAs of Home Zone projects
- Production of the “Plymouth HIA framework”
- Regular ‘Introduction to HIA approaches’ learning events/master-classes for various audiences
- Introduction to HIA approaches for students at the University of Plymouth, and to ‘post-16’ students of Health and Social Care at local ‘6th forms’
- ‘HIA, SEA and the LDF planning system’ learning event 2006
- Presentation of the HIA framework to the Local Authority’s Health Oversight and Scrutiny Committee
- Establishing and managing a ‘Plymouth impact assessment group’
- Contributions to the Plymouth Joint Strategic Needs Assessment
- ‘HIA and world class commissioning’ learning event
- Presentations of Plymouth HIA work at various international HIA Conferences and other events
- Caretaking a role as a SW contact for the DH national HIA network

HIA engagement with the LDF process
- Influencing the Sustainability Appraisal and SEA ‘frameworks’
- Desktop HIA analysis of selected LDF Area Action Plans, and routine ‘health impact’ scrutiny of LDF documents
- HIA ‘contributions’ to LDF documents such as the Waste Strategy
- Establishing a ‘Planning and Health’ group within the LSP structure to build relationships between planning and the health sector

Current HIA work
- HIA of the Plymouth ‘Stepping Stones to Nature’ project
- HIA of the regeneration of the North Prospect neighbourhood

Submitted following the event

<table>
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<th>Regional Health Impact Assessment Workshop Nov09</th>
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<tbody>
<tr>
<td>Subject</td>
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</tbody>
</table>

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<tr>
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</tr>
</thead>
</table>

Group Participants were asked for feedback and updates on the list generated at the event
How can we sort and label all this different HIA activity?

**Project**  
Regional Health Impact Assessment Workshop Nov09

**Group**  
Plenary

**Subject**  
Mapping HIA and HIA like activity
Participants were given a map indicating two contrasting local areas and encouraged to take a 40 minute walks and score the physical form to pick up the degree that if helps support of frustrates healthy lifestyles.

**Spectrum Appraisal for Health**

**Grading the scheme against the local criteria**

- **EXCELLENT**: The local delivery criterion is fully satisfied
- **GOOD**: The criterion is generally satisfied
- **NEGOTIABLE**: Success depends on further work and negotiation
- **PROBLEMTICAL**: Not likely to be satisfactorily fulfilled without major reassessment
- **UNACCEPTABLE**: The criterion can not be satisfied
Observations of the walkabout with the Spectrum tool

1. Prior data eg. JSNA would help inform the observations

2. Need to take into account the wider contact of the areas, there may accessible ‘facilities’ not in the area but certainly nearby

3. How do we capture a potential for change?

4. How are cross-cutting issues dealt with in the Spectrum system?

5. The ‘time’ component needs to be acknowledged; a site visit is only a snapshot.
Learning aims

- What kinds of HIA are there?
- Where do they all fit in the planning process?
- How does HIA fit with other assessment tools eg SA, SEA, EIA?

We will
- examine recent developments in HIA;
- consider resources in HIA (eg the HIA gateway website; Barton’s health map of the human habitat);
- consider some examples at strategic and at (maybe at) operational level.

Health impact assessment ...

... is a combination of procedures, methods and tools that systematically judges the potential, and sometimes unintended, effects of a policy, programme or project ... on both the health of a population and the distribution of those effects within the population ... HIA identifies appropriate actions to manage those effects.

International Association for Impact Assessment, 2007

Quality ...

- Commissioners (developers, planning authorities, PCTs) need to know the HIA report is up to scratch ...
- Based on review packages for environmental assessment available at www.bcuhealth.co.uk

Health and planning ...

Three perspectives

- Health services ⇒ For a tool to calculate developer contributions for health services see www.healthyurbandevelopment.nhs.uk
- Health protection ⇒ Close, and existing, links with Environmental Protection services
- Health improvement ⇒ Many overlaps and parallels with the social determinants of health approach


Stages of (H)IA

- Screening
- Scoping
- Assessment
- Reporting/Feedback
- Monitoring/Management

Establish relevance to health
Identify key issues*
Identify potential effects*
Present results
Ongoing action

*opportunities for wider involvement

Further information ...

- www.hiagateway.org.uk
- www.publichealth.ie
- www.whiasu.wales.nhs.uk
- www.euro.who.int/healthimpact
- www.who.int/hia/en
- www.liaa.org
- www.healthimpactassessment.info
- www.healthimpactassessment.blogspot.com
**Policy, plan, programme, project ... UK context**

- **Business, Enterprise and Regulatory Reform**
  Any proposal that imposes or reduces costs on businesses, third sector or public sector requires an Impact Assessment.

- **Strategic Environmental Assessment**
  Derived from Directive 2001/42/EC
  - Requires consideration of effects on "human health".

- **Sustainability Appraisal**
  Planning & Compulsory Purchase Act 2004

- **Environmental Impact Assessment**
  Derived from Directive 85/337/EEC
  - Requires consideration of effects on "population".

Replaces Regulatory Impact Assessment
All costs/benefits to be taken into account
... soc/env/econ ... incl health

DH issued draft guidance – update - soon
400 SEAs a year in England alone - minimal health input (how many since 2004?)
When Kiev Protocol is ratified Health Authorities will be statutory consultees

Wider remit than SEA ... very good case for health input (England & Wales)
SEA/SA conducted together

Many of the Regional Spatial Strategies in England have a policy for HIA – these will often be carried out at same time as EIA

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**Key elements of the English planning system**


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**HIA** - a critical tool for health improvement

**Project** Regional Health Impact Assessment Workshop Nov09

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**Group** Plenary Presentation - Ben Cave

**Subject** The health impact assessment landscape
Top actions

Selecting the themes of action to work on.

Five themes were selected in plenary and then worked up using forcefield analysis in sub-groups.

Group 1: Relationships between Public Health and Planning

Group 2: Public Health Priorities:

Group 3: Roles and Responsibilities

Group 4: Strategic Environmental Assessments

Group 5: GOSW: support coordination and messages
<table>
<thead>
<tr>
<th>Helping factors</th>
<th>Hindering factors</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Initial events → start to build links</td>
<td>• Planners have multiple considerations → not enough time for Health focus</td>
</tr>
<tr>
<td>• Support from Regional DPH</td>
<td>• Planners driven by legal requirements to relate to certain groups</td>
</tr>
<tr>
<td>• Increasing profile of successful HIAs → which result in demonstrable health outcomes</td>
<td>• Lack of capacity</td>
</tr>
<tr>
<td>• Networks</td>
<td>• Relating to many LAs (eg 7 in Dorset)</td>
</tr>
</tbody>
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**Forces**

**maximising help**

• Specific new posts (to cross the divide), link between PCTs and planning?

• Move this from a position where this is a ‘good thing to do’ towards making it a critical requirement

**Forces**

**minimising hindrance**

• Priorities in legislation to make health considerations a statutory requirement

• Money to increase capacity to network and undertake HIAs

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**Sub-group communication: Chris Ricketts**
Helping factors

- Shared priority – ‘sustainability’ (also affordable housing) in sustainable communities strategy
- Public health staff within planning, chief executives, same directorate

Hindering factors

- NHS policy and practice! – no joint appointment DPH
- Events invitations went to DPH and not to Director of Planning

Public Health Priorities:
- inequalities, mental health, physical activity, climate change/sustainability, injuries

Forces

maximising help

- JSNA – just data – ‘intelligence report’
- Influence councillors (media) – broaden scope
- Regional leadership needed
- Public education re PH priorities and planning system

minimising hindrance

- Joined-up approach
- GOSW planning functions + Regional DPH need to be better joined up on promoting this agenda

Sub-group communication: Andy Platt and Debbie Fuller
Helping factors

- Exchange information – names/contact, structures
- Public health and planning forum
- Joint training – lunchtime seminars, breakfast briefings
- Education for key stakeholders of the value of HIA
- Agreement between LA and PCT on joint working, approach to HIA

Hindering factors

- Time
- Money
- Scepticism
- Lack of experience/confidence in doing HIA
- Other priorities
- Targets

Roles and Responsibilities

Forces maximising help

- Senior management support for public health + planning forum
- Do HIA at strategic level → core strategy, community strategy
- Councillor support
- Recognition of links between planning and public health

Forces minimising help

- Senior management
- Support/direction
- Build activities into mainstream rather than add-ons

Sub-group communication: Stephen Hewitt
### Helping factors

- Get on Regional DsPH meeting agenda
- Need for training on SEAs

### Hindering factors

- Other priorities
- Our knowledge/capacity

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**SEAs:** of RSS, Core Strategy and other documents; LTP3, waste/minerals, airport, major developments, coastal management plans

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**Forces:**

**Maximising help**

- Gabriel Scally (South West RDPH) behind it will ensure DPHs on board
- Legislation will make PCTs (DPHs) statutory consultees
- Capacity building – how do we approach SEA?
- Share SEA experiences, good/bad

**Forces:**

**minimising hindrance**

- Acknowledgement of workload implications by SHA/GOSW
- Resources!

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*Group communication: Peter Ashcroft*
Helping factors
- Evidence
- Technical guidance
- Early relationships
- Regional influence with planners
- Money
- Must-do guidance
- Follow-up at regional level
- Measure progress

Hindering factors
- Top down
- Repetition
- Lack of communication
- Inconsistency
- Silo work
- Politics

GOSW: support; we need co-ordination, clear and messages

Forces maximising help
- Government guidance from GOSW for us to deliver HIA
- Co-ordinated range of evidence and technical guidance for local delivery
- Fund capacity building and training
- Spread good practice

Forces minimising hindrance
- Set up e-group, steering group, central system to access
- Examples of good practice
- Consistent advice re. planning policy
- Integrate SEA/HIA into work roles
- Longer-term plans to embed, so not affected so much by political change

Sub-group communication: Sophia Callaghan
Key Messages that I will take away

Impact assessments
HIA tools available, link with planners is key, patchy delivery and prioritisation within PCTs. SEA is vital.
How I can link Equalities Assessment and HIA and its relationship with SEA/SA
SEA – PCTs will become statutory consultees
Look in to GOW SEA is being used in my area
Find out about SEAs

Public Health linking with planners / Health Impact Assessment and planning
HIA can help planners to improve health. But they are not the only way
Do we have shared beliefs and motives regarding change and how to achieve this?
HIAs are relevant, indeed important, at multiple levels of planning
HIA will add to planning process: Links with Planners locally.
Public health and planners at an operational level need to talk to each other
Importance of integration between PCT/planning policy
Make links with planners. Find out about SEAs and Core Strategies
Need to meet more with our planners (informally) and need to prepare for SEAs
Need to develop close working relationships with local planners to ensure they are involved at beginning of sessions
Need to build relationships between public health and planners to make health protection and improvement a higher priority
Follow upon core strategies status
  * Need to understand and get to know planning & placements
  * For SEAs there will be a requirement for PCTs to be consulted

Health Impact Assessment reflections
It is an evolving field. We don’t have the answers yet.
HIA is a useful tool to influence PH priorities in the longer term. To clarify where this sits in priorities of the planning directorate
Importance of HIA: Scope and importance of HIA:
That HIAs exist and can be a useful tool in improving health outcomes

Planners reflecting on the Health Impact Assessment
Important to understand health structure – who’s who etc.
Closer working with PCT: Health being involved in planning departments
An activity, action or change I could make in my practice

**Collaborative action in local areas**
Try to make informal links/networks with planners. Find out what our consultant has already been doing and how I fit in. Collect evidence on obesity and health and planning.
Better communication with contracts in planning
Reminder to refresh relation with planners and identify/map key decision times for planning
To seek to bring a greater health input to local planning processes.
Identify planners
To communicate with planning and PH in my area to see if we can develop this agenda and how my research team could help
Make links with planners
Continue to forge relationships with the planning and transport team within local authority
Begin to look outside the public health arena to be able to improve public health eg. Influence the environment in which we live
Send draft density strategy to local planning
More engagement with planners early on
Contact planners and discuss areas of work

**HIA and planning competences**
Refresh HIA tools in my mind. Network with colleagues changes update on context.
Engage with PCT to promoted HIA
   - Talk to regional group re: S106 agreement
   - Help my own public health department understand issues better
Aim to find out more about HIA and the agenda in my area
Positive examples of HIA
Find out about SEAs and core strategies
Talk to county council about JSNA data – how it can help Annual Monitoring for Plans (LDF)
Read up more around SEAs and how to contribute to one
I only started my job this week so it is a bit difficult to know at this stage
Learn more about this. Understand local planning system

**HIA action in local areas**
Influence content of planning and health policy paper.
Reread HIA of Core Strategy
Start HIA for core strategy
Talk to person who wrote health core policy
As PH consultant for Stroud locality I can work on distinct level relationship. The need to start PCT level working group (meeting of all locally focussed Public Health team chaired by Consultant with actual responsibility for Built Environment) to keep health focus/pressure up
Content I would like to be covered in future

Examples of Health Impact Assessment
Planning process. Go through examples of actual HIA on specific projects/policies
Best practice case studies
More about what has been done using HIA and how it has affected planning decisions
Clear examples of wins and misses
Examples of best practice
Good practice example of HIA
Examples
Example of fully worked HIA
Practical examples of impact of HIA working well

Health Impact Assessment methods and application
Tools for carrying out HIA Health policies in local plans/LDF
Tool box for conducting HIA Example of HIA done at policy > project level
HIA in action
Assessing health outcomes associated with the HIA process. Interested in the cost/benefit analysis
Best practice. What to include in HIA
Information on the process of HIA
More practical/technical advice on doing an HIA
Tools and techniques

Promoting Health Impact Assessment and sharing knowledge
Ways of agreeing with colleagues. PH priority and how to promote this
More masterclass style work/sharing ideas on key areas: e.g. S106 contributions, green infrastructure, using HIA with sustainably community strategy, when and how to include stakeholders.
Progress & follow up support at regional level
Practical examples. How to get into planning departments and influence
More basic input into the practicalities and processes of how to engage with planners.

Health and planning
Brief overview of planning for public health
Brief overview of Public Health for planners

Other
More on how to do SEAs
More opportunities to bring PH/planners together
Could we have agreed checklist from a Public Health perspective that could be used to assess each main type/level of HIA/SEA etc
Impression of usefulness of the session

What was most useful

**The event**
All very useful.
Networking, the resources that have been promised to send us (slides and materials/email list) email networks
Contacts

**The mix on the day**
Useful starting point – essential to bring PH/Planning together.
Networking opportunities
Discussions
Networking
Networking with planners and PCT employees
Meeting people from across region and hearing ideas
Meeting people
Attending with a group from our area

**New understandings**
Raising awareness of the HIAs
Realising gap between planners and public health
Introduction to the topic and resources
How health can be involved in planning
Introduction to topic and raising understanding
Listening to colleagues from planning

**Morning, scoping activity in the SouthWest**
HIA landscape – hearing what else going on
Examples of HIAs in the local area
Reflecting on practice
Understanding of what is currently happening.
Hearing what others are doing.
Informal discussion to explain some of the basics!

**Spectrum outside**
Tool for checking local environment – but need benchmarking criteria.
Walking was good – but would have liked to have done the shopping centre.
Enjoyed walk and was useful
Practical local scoping exercise

**Afternoon, presentation of HIA**
Afternoon session on landscape of HIA
Presentation – wish it was first.
Probably Ben’s presentation
The afternoon sessions
Ben’s talk
Didactic session

**Late afternoon, agenda setting**
Regional momentum/support
Impression of usefulness of the session

What improvements that could be made

Pre-event handling: - invites
More planners invited to the event
- invitation directly to planners, not just via DPH
- involvement/evidence of cohesion between health/planning at a regional level

Use GOSW influence to get planners round the table.

Pre-event handling: - information
Clearer advance info re: objective
Better info beforehand to outline what the session is about – it was not clear

Morning, scoping activity in the SouthWest
Needed more basic introduction earlier in the day as the morning assumed some experience of doing an assessment
More interaction between PH and Planners – could have used knowledge in room more – find out what each priorities are and what pushes PH/Planners buttons
More work on first identifying/understanding shared/competing priorities

Spectrum outside
A bit more thought to the walking around exercise.
Couldn’t get to grips with the spectrum tool for HIA

Afternoon, presentation of HIA
Didactic session from afternoon should have been first

Agenda setting and wrap-up
Afternoon session was very rushed – didn’t really understand Forcefield analysis (none of us had used it before)

General: process
Timing seemed to get out of control so bits got rushed
More focus on what the day was trying to achieve

General: content
Examples of HIAs – what they look like – what difference they have made
I think the introductory nature of the day was useful but half room probably looking beyond this to more experience/challenging discussions.
More information on the process undertaken when completing a HIA
Need more examples of good practice
Give examples of good practice of HIA
More about mechanics of doing HIA

Handouts
Hand outs & tools techniques given out as an HIA template to the i.e. screen/scope/appraisal/action plan
More information to take away

All feedback based on transcripts of 25 completed feedback sheets handed in after the session. Analyzed and collated by «GreetingLine».
WHO Collaborating Centre for Healthy Urban Environments
2 December 2009