

PROJECT INITIATION - RAPID HEALTH IMPACT ASSESSMENT (HIA)

Introduction

Everything the council and its partners do has an impact on health and health inequalities either positively or negatively. The aim of carrying out a HIA is to maximise the positive health effects and minimise the negative health effects of new plans, policies and strategies. HIAs are part of an approach known as Health in All Policies that is recommended by the Local Government Association as a way of reducing health inequalities¹. Furthermore, it is a commitment within the council's Corporate Strategy.

The HIA tool provides a framework and a process by which partners can collaboratively and systematically review and amend their plans to improve health and reduce health inequalities.

There are two kinds of HIAs:

- **Rapid** – can be undertaken by a single person spending an hour at their desk, or a group of stakeholders spending a few hours over one or two meetings
- **In-depth** – can take a few weeks or even months and can involve systematic literature reviews, new data collection and expert analysis

This document provides more information about HIAs and describes how to carry out a rapid HIA. Please talk to the Public Health Team for further advice.

Aim

A Health Impact Assessment (HIA) aims to provide those preparing plans, policies or strategies with a framework to use to assess the impact of their work on the health and wellbeing of residents of Croydon. This supports the Corporate Strategy focus on prevention by ensuring Croydon Council considers the prevention of ill health in all policies.

What is a HIA?

A Health Impact Assessment (HIA) can be described as “the estimation of the effects of a specified action on the health of a defined population”. It assesses the impact that economic, environment and social policies may potentially have on the health of residents by, for example:

- modifying the physical environment
- altering lifestyles
- improving leisure opportunities
- enhancing the training and employment prospects of local residents
- reducing stress, anxiety and fear
- strengthening control over people's lives and fostering empowerment
- improving access to public services
- modifying transport
- enhancing relationships between local residents and public sector agencies

¹ <https://www.local.gov.uk/sites/default/files/documents/health-all-policies-hiap--8df.pdf>

Undertaking a HIA therefore allows you to:

- Identify positive and negative impacts that a project may have on a population's health.
- Consider general, socioeconomic, cultural, environmental conditions; living and working conditions; social and community networks; and individual lifestyle factors within a project that may impact on a population's health (see Diagram 1 below).
- Identify any protected characteristics such as age, gender etc whose health may be impacted by a project that has not previously been identified in an Equality Impact Assessment (EIA)
- Identify evidence sources that support decisions around the impact
- Produce an action plan to maximise positive impacts and mitigate negative impacts.
- Identify any negative impacts that cannot be mitigated
- Outline any changes made to the project as a result of the HIA
- Include a summary of the HIA in Croydon Council strategy initiation paper

Why carry out the assessment?

Health is defined as 'a state of complete physical, mental and social well-being and not merely the absence of disease' therefore focuses on the causes of ill health rather than the symptoms.

It has been recognised that 20% of what determines an individual's health and wellbeing comes from traditional health services. The other 80% is influenced directly or indirectly by the work that we carry out in Croydon Council. That is why the wider determinants of health and wellbeing, which include education, employment, housing, income, social networks and the environment, must be considered during the planning of future projects and services (as demonstrated in the determinants of health diagram above).

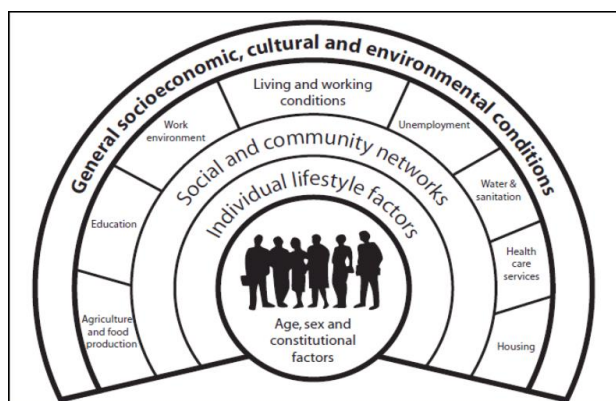


Diagram 1: The determinants of health (Dahlgren and Whitehead, 1991)

When should I do a HIA?

This rapid HIA should be conducted in the initiation phase alongside the equality impact assessment. It may also be useful to undertake a HIA when a policy, plan or strategy is being reviewed.

A more in-depth HIA may be required at the strategy development stage, especially where extensive impacts have been identified during the rapid HIA. Please consult Public Health for advice.

Links to other impact assessments

The HIA has much in common with the more established Equality Impact Assessments (EQIA), and can therefore be carried out at the same time. Much of the evidence and data used for the EQIA will be relevant to the HIA.

Carrying out a HIA

A HIA should not be followed slavishly; if the suggested areas to be considered are not relevant they should not be used. If there are gaps then additional areas must be added so that a complete assessment is carried out.

Who should do the assessment?

In some cases, where the issues are straightforward, an individual can complete the assessment as a desk-top exercise in about an hour. Alternatively, a small group of people familiar with the issues can do the assessment together, allowing up to half a day for the exercise. This group may include a facilitator, a subject specialist, an analyst or someone who is familiar with the evidence, someone from public health and key partners. Where the work is more complex, the assessment can be included as part of engaging with stakeholders from the public and partner organisations and can inform Equality Impact Assessments.

When to carry out an assessment.

The assessment should be completed in conjunction with an Equality Impact Assessment (EIA). Ideally, the health effects should be considered at an early stage to reduce negative impacts and maximise improvements. The time taken to complete it must be appropriate for the impact of the strategy, plan or policy being considered.

Please consult the Public Health Team for further advice and for support where full Health Impact Assessment is required.

How to carry out an assessment:

1. Rapid HIA tool

NB: Please delete the comments in blue italics which are to be used as a guide only

Areas to be considered	Potential positive impacts	Potential negative impacts	Evidence
<p>General, socioeconomic, cultural and environmental conditions Consider the following: Air and water quality, recycling, built environments and open space, energy consumption, accessibility, mobility, transport, noise, poverty,</p>	<p><i>In this column you should identify the potential positive impacts from the proposal that could benefit the health of the population</i></p>	<p><i>In this column you should identify the potential negative impacts from the proposal that could harm the health of the population</i></p>	<p><i>In this column you should explain how you have identified the negative or positive impacts. Examples of evidence can be seen in Annex B</i></p>
<p>Living and working conditions Consider the following: Housing conditions, education, employment/work environment, leisure, accidents, agriculture and food production</p>			
<p>Social and community networks Consider the following: Social exclusion, community development, health services, social services, community safety and crime</p>			
<p>Individual lifestyle factors Consider the following: Diet, physical activity, smoking, alcohol, sexual behaviour, drugs, screening, immunisation, mental wellbeing</p>			
<p>Age, sex and constitutional factors Consider the following: Age, disability, gender reassignment, pregnancy and maternity, race, religion and belief, sex, sexual orientation, marriage and civil partnerships</p>			

2. Amendments to the proposals as a result of HIA

Change	Reason for change
In this column you should explain how the new/amended policy, service or function has changed from the original idea to the final proposal being considered.	In this column you should explain how your HIA led to this change. Identify the issue that you identified that meant the proposal needed to be amended.

You should use this section to describe any amendments that have been made to the original idea underpinning your new/amended policy, service or function as a result of conducting this HIA. This will show how the process of collecting information, engaging those affected and analysing the impact of the new/amended policy, service or function led to specific changes to the proposals.

3. Action plan

Potential impact (positive or negative)	Action needed to maximise positive impact or mitigate negative impact	By when	Owner

If your equalities analysis shows the new/amended policy, service or function could potentially have negative impacts on particular groups with protected characteristics, which cannot be fully addressed through changes to the proposal, you will need to use this section to outline any actions that could be put in place to mitigate them. As a result of your analysis you may also identify positive actions that could be put in place to promote equality opportunities and/or foster good relations.

4. Potential negative impacts that cannot be mitigated

If your assessment has identified potential negative impacts that cannot be mitigated, you should list them here. This does not mean the proposal has to be abandoned, but will allow decision makers to have 'due regard' to these matters when they make their decision.

Potential negative impact	Protected characteristic(s) that could be affected

5. Summary of key impacts and actions

This section will serve as an executive summary of the Health Impact Assessment and should be copied into the Public Health section of the strategic framework initiation reports. Please use the sub-headings provided.

Key impacts (positive and/or negative)	
Changes you have made to the proposal as a result of the HIA	
Key mitigating actions planned to address any outstanding negative impacts	
Potential negative impacts that cannot be mitigated	

6. Six Month Evaluation

	Agreed Actions	Changes at six months post HIA completion
Key impacts (positive and/or negative) on people with protected characteristics		
Changes you have made to the proposal as a result of the HIA		
Key mitigating actions planned to address any outstanding negative impacts		
Potential negative impacts that cannot be mitigated		

Appendix A: HIA tools and further information

Health Impact Assessment Tools

<https://www.gov.uk/government/publications/health-impact-assessment-tools>

World Health Organisation

<https://www.who.int/hia/en/>

Health in all Policies – Local Government Association

<https://local.gov.uk/health-all-policies-manual-local-government>

Wider Determinants of Health

<https://fingertips.phe.org.uk/profile/wider-determinants>

Appendix B. HIA Meeting resources

Rapid Health Impact Assessment Meeting 1 Agenda

Purpose

The purpose of the session is undertake a rapid Health Impact Assessment to assess the potential positive and negative impacts of proposals to [insert details of proposals].

Outcomes

At the end of the session participants will have:

- a shared understanding of the proposals
- contributed to the completion of the HIA framework
- identified the key groups that may be affected by the proposals
- identified the key potential impacts within the 5 key themes identified in the framework
- Identified actions to collate evidence to confirm or refute the impact

Agenda

1. Welcome and purpose
2. Overview of HIA
3. Overview of the proposal
4. Introduction to core tasks
5. Discussion and Completion of assessment
6. Identify key potential impacts
7. Identify actions
8. Next steps
9. Feedback on process

Meeting 1 – Facilitators notes

Item	Method	Resources	Who
Welcome and purpose			
Overview of HIA	Provide a brief overview of the HIA process and rationale		Facilitator
Overview of the proposal	Present an overview of the proposal		Project lead
Introduction to core tasks	<p>Provide an overview of the tasks that will be undertaken by the group:</p> <ul style="list-style-type: none"> • Session 1: Scoping the effects <ul style="list-style-type: none"> - Identification of the groups affected - Identification of potential health impacts (positive and negative) • Session 2 <ul style="list-style-type: none"> - Understanding and appraising the evidence of the impacts - Assessment and verification of the potential health impacts - Action planning and recommendations • Six months post assessment <ul style="list-style-type: none"> - Evaluation and follow-up 		Facilitator
Discussion and Completion of assessment	<p>Whole group discussion Which groups are likely to be affected by the proposal? Who is most likely to be affected? (Refer to EIA)</p>	EIA section	ALL
Identify key potential impacts	<p>Either as a whole group discussion or in smaller groups</p> <ul style="list-style-type: none"> • Identify the impacts against each of the areas in 7c • Discuss each impact and agree or discount • Identify what evidence is needed to assess the reality of the impact, what is already available locally, regionally and nationally and what may need to be collated. 	Handout 1 Dahlgren and Whitehead model	ALL
Identify actions	<ul style="list-style-type: none"> • Who is going to look into the various impacts and collate the evidence • Set actions 		Facilitator

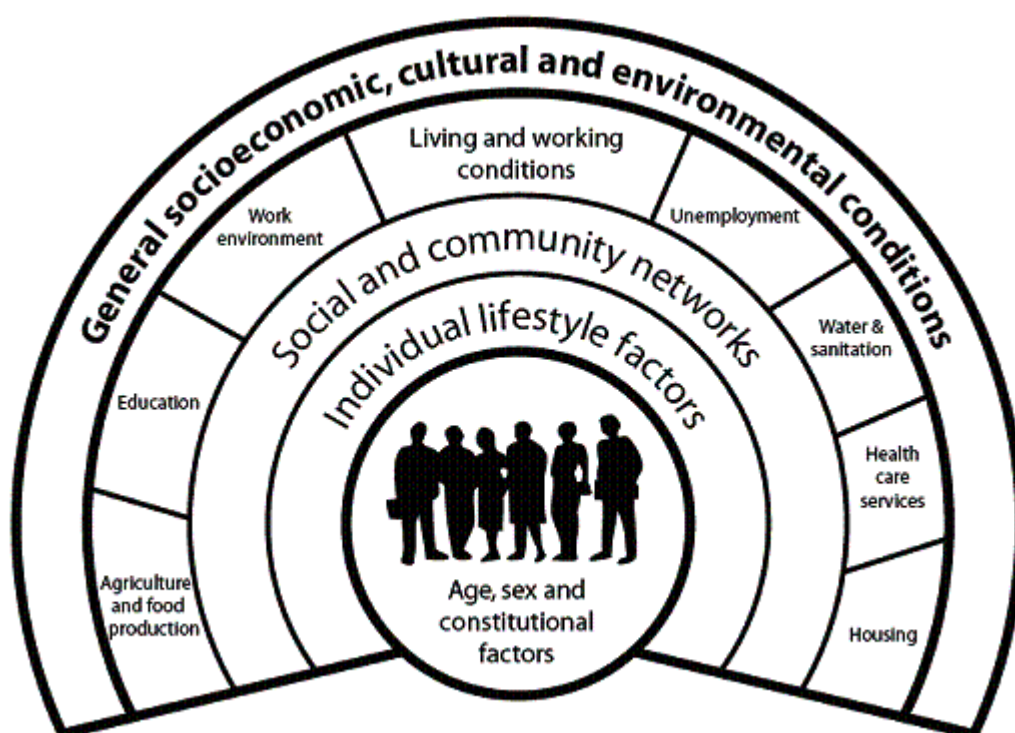
Next steps	Overview of session 2 and agree date and time of next meeting		Facilitator
Feedback on process (optional)	Ask participants to post one comment for each of the following: One thing you have learned One thing that you found useful One improvement that could be made to the process		Facilitator

HIA Meeting Participant Information

A Social Model of Health

Social and environmental determinants can impact positively or negatively on health and wellbeing. Dahlgren and Whitehead's model provides a visual of these determinants. The individual is at the centre with a set biological factors determining gender, age and genetic factors. The first layer is individual lifestyle factors and ways of living that can promote or damage health - e.g. choice to smoke or not. The next layer considers the role of social and community influences such as engagement with the local community, community safety, peer pressure, social stigma etc. The third layer is concerned with the physical environment in which people live and work such as housing conditions, access to and quality of health services, working conditions, access to services and provision of essential facilities.

Recognising the significant impact that these social determinants have on health enables us to assess the potential effect of council decisions to inform planning.



Dahlgren and Whitehead, 1991

Considerations

Area to be considered	Examples of things to consider
Equality	<p>Will the proposal impact on:</p> <ul style="list-style-type: none"> • Discrimination against groups of people • Promoting equality of opportunity • Tackling harassment • Promoting positive attitudes • Promoting relationships between groups • Building community cohesion between communities
Lifestyles	<ul style="list-style-type: none"> • Diet and nutrition • Exercise and physical activity • Substance use: tobacco, alcohol, drugs • Sexual health
Social environment and community networks	<ul style="list-style-type: none"> • Volunteering opportunities • Income • Parenting • Crime and disorder • Criminal justice systems • Social welfare systems • Social distance between conflicting groups • Economic inequality and concentrated poverty • Cultural norms that support violence • Life skills and opportunities for youth • Gender equality • Safeguarding children and adults • Social or family support • Community cohesion • Social capital • Valuing diversity and challenging stigma • Participation and inclusion • Community assets • Autonomy • Social barriers and opportunities to accessing services (health, leisure, social)
Physical Environment - Living and working conditions	<ul style="list-style-type: none"> • Living conditions • Quality of housing stock • Neighbourhood appearance • Travelling communities • Access to or quality of public or green space • Impact on rental or housing value • Education learning and skills • The relative social status of different groups • Staff in lower paid grades • Employment • Local businesses • Physical access to services (health, leisure, social) • Unintentional injury
General, socioeconomic and environmental conditions	<ul style="list-style-type: none"> • Likelihood of transmission of infectious disease by food, water, blood or direct contact

	<ul style="list-style-type: none">• Agricultural controls, water pollution, provision of clean water, controls on food• Carbon emissions• Changes in levels of transport• Encourage or discourage active transport• Involve development of major infrastructure
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HIA Meeting 2 Agenda

1. Overview of impacts identified in session one
2. Review actions from previous meeting
3. Analysis of evidence and assessment of impacts
4. Confirm negative impacts that cannot be mitigated
5. Amendments to the proposals and action required
6. Feedback and conclusions
7. Agree follow-up and evaluation

Meeting 2 – Facilitators Notes

Item	Method	Resources	Who
Welcome and purpose			Facilitator
Overview of impacts identified in session one		Flip chart/slide of impacts	Facilitator
Review actions from previous meeting		Flip chart/slide of actions	Facilitator
Analysis of evidence and assessment of impacts	<p>Whole group discussion or smaller groups take an area each</p> <p>Using the evidence for each of the impacts agree:</p> <ul style="list-style-type: none"> • Is there sufficient evidence to confirm the impact? • What is the scope of the impact? (likelihood of occurrence, severity, which groups/geographies would it effect, when would the effect occur) <p>Agree a list of the confirmed positive and negative impacts</p>	Section 7c	Project Lead
Amendments to the proposals	<p>Whole group discussion or smaller groups take an area each</p> <ul style="list-style-type: none"> • Discuss interventions that could be implemented to change or alter the impact in health - what changes could be made to the proposal to prevent, minimise or moderate the negative impacts on health? • What changes could be made to realise and /or maximise potential positive impacts on health? 	Section 8	Facilitator
Action Planning	Confirm the actions required to maximise positive impact and mitigate negative impacts	Section 9	Facilitator
Confirm negative impacts that cannot be mitigated	Discuss which of the negative impacts could not be mitigated and why Agree whether these should be flagged up elsewhere in the council or with key partners	Section 10	Facilitator
Agree follow-up and evaluation	Agree when you will return to the actions to review your action plan and the impact of the changes to the proposal	Section 12	Project Lead

Appendix C. Evidence

There is a vast amount of evidence available to support the assessment of health impacts. Many of which is cross-cutting in relevance to the areas to be considered. Below provides a list of the evidence that is available offering concise summaries to aid with decision making.

PHOF NICE guidance and public health outcomes

<http://www.nice.org.uk/advice/LGB5/chapter/introduction>

Croydon Observatory

<https://www.croydonobservatory.org/>

Encouraging people to have NHS Health Checks and supporting them to reduce risk factors

<http://www.nice.org.uk/advice/LGB15/chapter/Introduction>

Health inequalities and population health

<http://www.nice.org.uk/advice/LGB4/chapter/Introduction>

Alcohol

<http://www.nice.org.uk/advice/LGB6/chapter/introduction>

Tackling drug use

<http://www.nice.org.uk/advice/LGB18/chapter/introduction>

Domestic violence and abuse: how services can respond effectively

<http://www.nice.org.uk/advice/LGB20/chapter/Introduction>

Social and emotional wellbeing for children and young people

<http://www.nice.org.uk/advice/LGB12/chapter/introduction>

Looked after children and young people

<http://www.nice.org.uk/advice/LGB19/chapter/Introduction>

Workplace health

<http://www.nice.org.uk/advice/LGB2/chapter/Introduction>

Community engagement to improve health

<http://www.nice.org.uk/advice/LGB16/chapter/Introduction>

Improving access to health and social care services for people who do not routinely use them

<http://www.nice.org.uk/advice/LGB14/chapter/Introduction>

Social and emotional wellbeing for children and young people

<http://www.nice.org.uk/advice/LGB12/chapter/introduction>

Body mass index thresholds for intervening to prevent ill health among black, Asian and other minority ethnic groups

<http://www.nice.org.uk/advice/LGB13/chapter/Introduction>

Preventing obesity and helping people to manage their weight

<http://www.nice.org.uk/advice/LGB9/chapter/Introduction>

Physical activity

<http://www.nice.org.uk/advice/LGB3/chapter/introduction>

Walking and cycling

<http://www.nice.org.uk/advice/LGB8/chapter/introduction>

Tobacco

<http://www.nice.org.uk/advice/LGB1/chapter/introduction>

Contraceptive services

<http://www.nice.org.uk/advice/LGB17/chapter/introduction>

HIV testing

<http://www.nice.org.uk/advice/LGB21/chapter/introduction>