Health Impact Assessment (HIA) Guidance Note

January 2021











Introduction

- 1. There is an increasingly widespread view in society that more has to be done to improve health and wellbeing and reduce health inequalities through tackling the root causes of illness and health inequality. This means addressing many issues like poverty, social exclusion, crime and disorder, transport and air pollution, issues which are beyond the control of health services. 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".
- 2. Health Impacts Assessments (HIAs) provide a systematic approach for assessing the potential impacts of development on the social, psychological and physical health of communities. Ensuring issues are considered at an early stage in developing planning proposals can lead to improvements in both the physical and mental health of the population. HIAs are designed to consider whether a development proposal might reinforce health inequalities and inadvertently damage people's health, or actually have positive health outcomes for the local community.
- 3. The purpose of this guidance is to establish a clear and transparent process for screening a development proposal's possible impacts and identify where a full Health Impact Assessment may be required for major developments. The checklist in Appendix 1 of this guidance is based on the NHS London Healthy Urban Development Unit's (HUDUs) HIA methodology but has been adapted to address City specific issues.

HUDU Healthy Urban Planning Checklist

Policy Context

4. National policy:

Government Guidance requires public health to be taken into account in accordance with guidance outlined in the National Planning Policy Framework (NPPF). This document is produced by the government to guide decisions regarding land use in the U.K, which all local and unitary authorities must take into account when developing local planning policies. Paragraph 91 of the NPPF in "Section 8: Promoting Healthy and Safe Communities" 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".

National Planning Policy Framework

5. Regional policy:

The Mayor of London produces the London Plan, which is a strategic document to guide decisions regarding land use in London. The 33 London Boroughs and the City Corporation must take the London Plan into account when formulating planning policies that guide land-use decisions in their local area.

The London Plan advises in "Policy GG3; Creating a Healthy City" that: "those involved in planning and development must assess the potential impacts of development proposals 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".

Intend to Publish London Plan 2020

6. The Mayor of London has also published supplementary planning guidance which offers further guidance on the development of HIAs; Social Infrastructure SPG 215.

Mayor of London's Social Infrastructure SPG 2015

7. Local policy:

Each local and unitary authority in the U.K must produce a local plan which sets out planning policies determining decisions on land use. The City Plan 2036 recognises that health issues underly all policies in the Plan and contains strategic and local policies on health issues. Policies in the Plan on health are informed by the City of London Joint Health and Well-being Strategy which prioritises good mental health, a healthy urban environment, health and social integration and health behaviours in the City's communities.

City of London Joint Health and Well-Being Strategy 2017-2020

8. The City Plan 2036 contains a policy on HIAs as follows:

Policy HL9: Health Impact Assessment (HIA)

The City Corporation will require development to deliver health benefits to the City's communities and mitigate any negative impacts by:

- 1. requiring all major development, and developments where potential health issues are likely to arise, to submit a Healthy City Planning Checklist;
- 2. requiring a Rapid or Full HIA to be submitted for larger-scale development proposals.

The scope of any HIA should be agreed with the City Corporation and be informed by City Corporation guidance on HIA. The assessment should be undertaken as early as possible in the development process so that potential health gains can be maximised, and any negative impacts can be mitiaated.

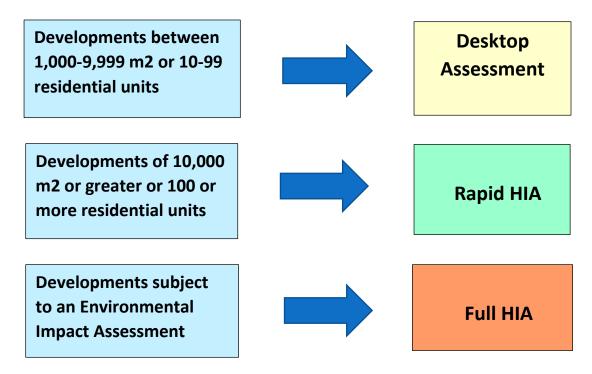
Draft City Plan 2036

Reason HIAs are required

- The City of London is a densely built up central urban location. The scale of development, the busy and congested streets and pavements, limited open space and large numbers of workers can impact on people's physical and mental health.
- 10. Major development can impact on health in a variety of ways including through noise and pollution during the construction phase, increased traffic movements and greater competition for limited open space. Equally, development can deliver improvements such as improved access by walking, cycling and public transport and the provision of opportunities to access open and green spaces, exercise facilities, cultural and community facilities and healthy food outlets.
- 11. HIAs provide a systematic framework to identify the potential impacts of a development proposal on the health and well-being of the population and highlight any health inequalities that may arise. HIAs can highlight mitigation measures that may be appropriate to enable developments to maximise the health of communities.
- 12. Appendix 2 provides a review checklist for applicants to ascertain whether their HIA structure and content is robust.

The HIA process

13. Developers will be expected to identify potential impacts on health resulting from all major developments in the City. In line with the Mayor of London's Social Infrastructure SPG, the level of HIA required will depend upon the scale and impact of the development.



Desktop assessment

- 14. This draws on existing knowledge and evidence, often using published checklists which provide a broad overview of potential health impacts. The City Corporation has prepared a Healthy City Planning Checklist for this purpose in Appendix 1.
- 15. The Healthy City Planning Checklist should be submitted with planning applications for developments of between 10 and 99 dwellings or between 1,000m² 9,999m² of commercial floorspace. It will also be required for developments considered to have particular health impacts, including those involving sensitive uses such as education, health, leisure or community facilities, publicly accessible open space, hot food take away shops, betting shops and in areas where air pollution and noise issues are particularly prevalent.

Rapid HIA

16. This would require a more focused investigation of health impacts which would normally recommend mitigation and/or enhancement measures. The City Corporation will adapt the London HUDU Rapid HIA Tool to reflect the City's circumstances and will expect this to be used for developments of 10,000m² or greater commercial floorspace or 100 or more residential units.

Full HIA

- 17. This involves comprehensive analysis of all potential health and wellbeing impacts, which may include quantitative and qualitative information, data from health needs assessments, reviews of the evidence base and community engagement. A full HIA will be required on those developments that are subject to an Environmental Impact Assessment and could be included within the Environmental Statement to avoid duplication.
- 18. HIAs must look at the issue of health comprehensively, and not focus solely on access to health services. Where significant impacts are identified, measures to mitigate the adverse impact of the development should be provided as part of the proposals or secured through conditions or a Section 106 Agreement.
- 19. HIA is commonly defined as "a combination of procedures, methods, and tools by which a [development] may be judged as to its potential effects on the health of a population, and the distribution of those effects within the population."
- 20. It is important that the applicant leads on the HIA as this is more likely to create ownership of the process as well as raising awareness of health impacts and how they can be mitigated or enhanced at an early stage of the development process. Whilst HIAs can be conducted prospectively, concurrently or retrospectively, the latter are not able to identify any changes to a proposal that

- may enhance positive health impacts or mitigate negative impacts. It is recognised that developers have incurred significant costs at the point that a planning application is submitted to the council.
- 21. Early, prospective assessments of a planning proposal are fundamental to ensuring that planning proposals are not advanced to a stage at which it is uneconomical or unrealistic for a developer to modify that proposal. Where a HIA is needed this will be submitted as part of the pre-application documentation so as to allow maximum scope for the health issues to be identified and addressed in the proposed scheme. The timescales for the HIA will be agreed with the case officer.
- 22. There is no one definitive methodology for HIA although several "toolkits" have been developed which may be helpful. A useful source for guides, examples of completed HIAs and a directory of HIA practitioners can be found on Public Health England's HIA gateway site.

 Health Impact Assessment in Spatial Planning
- 23. The aim of the assessment is to identify all the potential health impacts based on evidence and to recommend measures to enhance positive impacts and mitigate adverse impacts, building on the screening exercise. This will involve examining the key elements of the proposal, considering their relationship to the range of wider determinants of health and inequality, and deciding which impacts might require further assessment. Proposals may require a HIA that looks at specific potential impacts raised during the screening process or, if there is significant scope for health impacts to arise across a broad spectrum of determinants, a comprehensive HIA may be required.
- 24. Where a potentially significant health impact is confirmed, detailed actions that will be taken to mitigate adverse impacts should be submitted. Mitigation will only be required where evidence supports a potential and significant adverse impact on health. The planning case officer will offer support and advice in such instances.
- 25. HIA involves an evaluation of the quantitative evidence where it exists but importantly also recognises the importance of qualitative information. This may include the opinions, experience and expectations of those people who are potentially the most directly affected by a development. Therefore, HIA is not the preserve of any one disciplinary group. Instead, it draws on the experience and expertise of a wide range of "stakeholders", who are involved throughout the process. These may include professionals with knowledge relevant to the issues being addressed, relevant voluntary organisations and, perhaps most importantly, representatives of the communities whose lives will be affected by the development.

26. Recommendations arising from the HIA should aim to mitigate any adverse health impacts arising from the proposed development and enhance any potential beneficial impacts on health. A record of changes made to a development proposal as a result of an HIA should be made in the HIA report. At application stage a short statement is expected explaining the key health issues identified in the HIA and how they have been addressed. The original screening, and HIA should be appended to this for reference.

Contacts

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City of London Health and Population Information:

City of London Corporation Joint Health and Wellbeing Strategy 2017-2020 https://www.cityoflondon.gov.uk/assets/Services-DCCS/health-wellbeing-strategy.pdf

City of London Resident Estimates and Projections 2020

https://www.cityoflondon.gov.uk/assets/Services-Environment/planning-emp-and-pop-stats-resident-estimates-and-projections-2020.pdf

City of London Resident Population Indices of Deprivation 2019

https://www.cityoflondon.gov.uk/assets/Services-Environment/planning-emp-and-pop-stats-indices-of-deprivation-2019.pdf

City of London Open Spaces and Recreation Audit 2020

https://www.cityoflondon.gov.uk/assets/Services-Environment/planning-land-use-report-open-spaces-audit-2020.pdf

City of London City Plan 2036 Draft Infrastructure Plan 2020

https://www.cityoflondon.gov.uk/assets/Services-Environment/infrastructure-delivery-planmarch-2020.pdf

Other resources:

Active Design (Sport England)

http://www.sportengland.org/facilities-and-planning/active-design/

Healthy New Towns Programme (NHS/TCPA)

https://www.england.nhs.uk/ourwork/innovation/healthy-new-towns/

Creating Healthy Places (Design Council)

https://www.designcouncil.org.uk/what-we-do/built-environment/creating-healthy-places

Healthy High Streets (PHE)

https://www.gov.uk/government/publications/healthy-high-streets-good-place-making-in-an-urbansetting

Creating Health Promoting Environments (TCPA)

https://www.tcpa.org.uk/tcpa-practical-guides-guide-8-health

Secured by Design

https://www.securedbydesign.com/guidance/design-guides

Appendix 1: Health Impact Assessment Checklist

This checklist has been designed to support an HIA. It provides questions to consider when assessing a proposal and examples to support implementation. The questions are not exhaustive, and not all questions will be of relevance to all proposals.

Topic	Issues to consider	Further points to consider/examples	Applicant response	
			Achieved	Not applicable
Engagement	Has engagement and consultation been carried out with the local community and voluntary sector?	Public website		
		Consultation events		
		Identifying relevant communities and stakeholders		
		Identifying difficult to reach groups/addressing language barriers		
Active lifestyles	Does the proposal promote cycling and walking?	Well-located, secure cycle storage		
		Workplace cyclist facilities e.g showers		
		Protection of existing cycle routes		
		Accessible building entrances		
		Easily navigable/legible routes		
	Does the proposal consider the safety of pedestrians and cyclists, including vulnerable road users?	 Safe access Lighting Passive/natural surveillance Separate cycling and walking routes Children, older people and disabled people road safety considerations Dementia-friendly paving 		
	Is the public realm connected to pedestrian, cycle and public transport networks?	 Well connected, attractive, safe, and legible streets, footpaths and cycle network. Public realm linked to existing networks 		
	Does the public realm allow all people to move easily between buildings and places?	 Step-free level access Inclusive design Legible pathways Clear entrances to buildings 		
	Does the proposal minimise the need to travel and support sustainable travel?	 Walkable neighbourhoods Co-location of services and facilities Parking for car-clubs Car-free proposal Cycle storage Links to public transport and pedestrian network Links to surrounding facilities 		

	Does the proposal retain, provide or improve any	Provision of open space on-site	
	type of open space?	Communal open space	
		Improved access to open space off-site	
	Does the proposal provide open space for children	Formal and informal play areas	
	and young people?	Natural play	
		Open space accessible to all children	
	Does the proposal provide or improve	Leisure facilities	
	indoor/outdoor sports facilities?	Improved access to playing fields or other facilities off-site	
	Does the layout and design promote opportunities	Provision of open space (where relevant)	
	for active lifestyles?	Pedestrian and cyclist priority	
		Walkable communities	
		Co-location of services and facilities	
		Internal design to encourage activity, e.g. stairs well-located to encourage	
		walking over use of lift	
Healthy	Does the layout and design maximise accessibility	Easy to navigate around different elements of a site	
environment and	and inclusivity?	Walking routes with dropped kerbs and clear signage	
design		Step free level public realm	
	Does the proposal include traffic management and	Installations to guide traffic for maximum safety to pedestrians	
	calming measures to help reduce and minimise	Reducing vehicle movements through Deliver and Management Service Plans	
	road injuries?	Visibility surrounding servicing areas	
	Does the proposal minimise construction impacts	Considerate Constructers scheme	
	for those living or working in the vicinity?	Dust impacts	
		Noise impacts	
		Visual Impacts including light	
		Odours and exhaust fumes	
		Construction/Demolition Environmental Management Plan	
	Does the design minimise exposure to sources of	Indoor/outdoor air quality	
	air and noise pollution for future and existing	Site layout and design	
	inhabitants?	Avoidance of "street canyons"	
		Proximity of habitable rooms from roadside	
		Electric vehicle charging infrastructure	
		Low-emission renewable energy	
		Sound insulation	
		Noise from heating/ventilation	
	Does the proposal maximize available BREEAM	• Lighting	
	health and wellbeing credits?	Sound insulation	
		Avoiding Volatile Organic Compounds	
		Inclusive design	
		Ventilation	

	Does the proposal provide any green infrastructure	Green roofs, green walls, trees, planting	
	and conserve and increase biodiversity?	Water features	
		• Gardens	
	Does the proposal include appropriate toilet	Publicly accessible toilets at ground level	
	provision?	Accessible toilets and changing Place facilities	
		Community Toilet Scheme	
	Does the proposal reduce the risk of flooding from	Site sequential design	
	all sources?	SUDS, such as permeable paving	
		Green infrastructure	
	Is the proposal designed to avoid internal and	Passive cooling	
	external over-heating?	Shading in public realm	
	0	Green infrastructure	
	Does the proposal include opportunities to	Access to free drinking water	
	increase access to healthy food?	Avoiding clusters of hot-food takeaways	
	more success to meaning room.	Community/communal kitchen space	
	Does the proposal provide opportunities for food	Provision of food growing space/roof gardens e.g raised beds or gardens	
	growing?	Incorporation of fruit and/or nut trees (edible landscaping)	
	growing:	Incorporation of allotments/food growing space	
	Does the proposal take into account age/Alzheimer	Clear signage and access routes	
	friendly design?	Slip resistant surfaces	
	inentity designs	Defined edges	
	Describe annual landade design elemente to		
	Does the proposal include design elements to	Barriers around public rooftop areas	
	minimise the risk of suicide?	Planting near rooftop edges to deter access to the edge	
		Barriers or netting on bridges	
	Does the proposal include attractive, flexible public	High quality materials	
	spaces, streets and buildings that provide	• Benches	
	opportunities for social interaction?	Shading	
		Communal areas	
	Does the proposal ensure that buildings and public	Ventilation	
	spaces are designed to respond to winter and	• Shading	
	summer temperatures?	Landscaping	
Healthy	Are the dwellings accessible and adaptable?	Design and layout of parking, entrances, hallways and internal space	
Housing		Step-free access and level threshold	
		Future-proofed to accommodate changing needs	
		Lifts/accessible stairways	
		Adaptable homes (Building Regulations M4 (2))	
	Are any of the dwellings suitable for occupation by	Design and layout of parking, entrances, hallways and internal space	
	a wheelchair user?	Step-free access and level threshold	
		Entrance-level bedroom and living space	
		2	

		Building Regulations M4 (3)
	Do the dwellings meet nationally described	Adequate bedroom sizes, storage, ceiling heights and level access
	internal space standards and have access to	Natural daylight
	natural light, especially to habitable rooms?	
	Do the dwellings include any private outdoor	Private balcony, patio, roof terrace
	amenity space, or communal outdoor space where	Shared amenity space
	applicable?	Space for sitting, drying clothes, and storage
	Is a mix of types, tenures and sizes of dwellings	Proportion of unit size mix to meet local needs
	provided?	Mix of market and affordable housing
		Flatted and non-flatted
		• Family homes
		• Starter homes
		Build to rent
	Are a proportion of the dwellings provided	Onsite provision where required
	affordable?	Integrated throughout the scheme
		Mix of tenures
		Proportion of unit size mix to meet local needs
	Are the dwellings energy efficient?	Passive design and orientation; maximising natural light
		High fabric performance
		Low carbon, low-emission solutions/technologies
		Connection to existing/future decentralised energy schemes
	Indoor air/noise quality – is exposure to	Site layout and design
	sources of air and noise pollution minimised?	Proximity of habitable rooms from roadside
		Low-emission renewable energy
		Sound insulation
-		Noise from heating/ventilation
Safe & vibrant	Does the proposal consider measures to reduce	Sufficient space for escape routes
neighbourhoods	the risk of terrorism?	• CCTV
		Planters/bollards to prevent hostile vehicles
	Has the potential for impact on health and social	• Impacts on GPs, dentists, pharmacists, hospitals, A&E, community health
	care services been considered?	services, mental health services and social care.
		Health facility in scheme where appropriate
	Does the proposal provide any community facilities	• Community centre
	and encourage social inclusion by allowing people	Community/communal kitchen space
	to interact?	Accessibility of space Collegation of facilities
		Co-location of facilities Debits and the second formula and a seco
	Danatha anno antina anno a fair a dh'	Public realm space for cultural and community events Clearly defined hours desire.
	Does the proposal incorporate features to help	Clearly defined boundaries Anaropaire with a file and uses.
	deter crime and promote safety?	Appropriate mix of land uses

		Passive/natural surveillanceLightingHigh quality materialsSecure by Design	
Access to work	Does the proposal provide opportunities for local	Local Employment Scheme	
and training	employment or training, including temporary	Training and apprenticeships	
	construction and permanent 'end-use' jobs (Jobs	Non-construction jobs for local people via local procurement	
	created within one year of completion)?		
	Does the proposal provide childcare facilities?	Public or private childcare	
		Employee childcare	
	Does the proposal include managed and affordable	Affordable rents	
	workspace for local businesses?	Subsidised space for start ups	
	Does the proposal encourage supply chain	Local sourcing of materials	
	opportunities for local businesses through the	Local procurement of ongoing products and services	
	construction and post-construction phase?		
	Does the proposal encourage educational	Indoor space and facilities for school groups	
	opportunities?	Public realm art/interpretation boards/historical and social context	

Appendix 2: Review checklist of HIA

This review checklist is intended to be a tool for applicants to check their HIA has covered the necessary elements and for officers to check the submitted HIA's are robust.

1.0	Context			
1.1	Site description and policy framework			
	The report should describe the physical characteristics of the project site and the surrounding area			
	The report should describe the way in which the project site and the surrounding area are currently used.			
	The report should describe the policy context and state whether the project accords with relevant policies that protect and promote wellbeing and public health and reduce health inequalities.			
1.2	Description of project			
	The aims and objectives and final operational characteristics of the project should be described.			
	The estimated duration of construction and operational phases should be given (and decommissioning if appropriate).			
	The relationship of the project with other proposals should be stated.			
1.3	Public health profile			
	The public health profile should establish an information base from which requirements for health protection, health			
	improvement and health services can be assessed.			
	The profile should identify vulnerable population groups and describe, where possible, inequalities in health between			
	population groups and should include the wider determinants of health e.g social, cultural, economic and environmental factors that influence the health status of individuals or populations.			
	The information in the profile should be specific about timescales, geographic location and population groups.			
2.0	Management			
2.1	Identification and prediction of health impacts			
	The report should describe the screening and scoping stages of the HIA, and the methods used in these stages.			
	A description of how the quantitative evidence was gathered and analysed, where appropriate.			
	A description of how the qualitative evidence was gathered and analysed, where appropriate.			
2.2	Governance			
	The terms of reference for the HIA should be available and the geographical and population scope explained.			
	Any constraints or limitations in preparing the HIA should be explained e.g resources, accessibility of data.			
2.3	Engagement			
	The report should identify relevant stakeholder groups responsible for enabling health and well-being in the area which should be involved in the HIA.			

	The report should identify vulnerable population groups which should be involved in the HIA.				
	The report should describe the engagement strategy and consultation methods for the HIA.				
3.0	Assessment				
3.1	1 Description of health effects				
	The potential beneficial and adverse health effects of the project should be identified, including timescales.				
	The identification of potential health impacts should consider wider health determinates e.g socioeconomic, physical and mental health factors.				
	The causal pathway leading to health effects should be outlined, and underpinning evidence explained.				
3.2	Risk Assessment				
	The nature of the potential health effects should be detailed.				
	The findings of the assessment should explain the level of certainty or uncertainty of predictions of health effects.				
	The report should identify and justify any standards and thresholds used to assess the significance of health impacts.				
3.3	Analysis of distribution of effects				
	The affected populations should be explicitly identified.				
	Inequalities in the distribution of predicted health impacts should be investigated & any effects of the inequalities stated.				
	Effects on health should be examined based on the population profile and particular demographic or vulnerable groups.				
4.0	Reporting				
4.1	Discussion of results				
	The report should describe how the engagement undertaken has influenced the results, conclusions or approach taken.				
	The report should state the effect on the health and wellbeing of the population of any considered options or alternatives.				
	The report should justify any conclusions reached and justify if some evidence has been afforded more weight.				
4.2	Recommendations				
	There should be a list of recommendations to facilitate the management and enhancement of beneficial health effects.				
	The level of commitment of the project proponent to the recommendations and mitigation methods should be stated.				
	There should be a plan for monitoring future health effects by relevant indicators and a suggested process for evaluation.				
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