

Health Impact Assessment (HIA) Guidance for Developers

Public Health



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1. Purpose of the Health Impact Assessment Guidance

1.1. This guidance is to support existing policies in the adopted Richmond Local Plan¹ and draft Local Plan² and explains:

- The purpose of Health Impact Assessments (HIAs)
- How the planning process can improve people's health and wellbeing
- Why health matters in Richmond and the policy context
- When HIAs should be prepared and what they should contain

2. Who is the guidance for and what is its purpose?

2.1. The aim of this document is to provide additional advice and guidance on undertaking HIAs for developments within Richmond. This document expands the existing policy within the adopted Local Plan (Policy LP 30 Health and Wellbeing, B.1) and 25.13 under the new draft Local Plan (2022) which states that HIAs must be submitted with all major development proposals. In practical terms the guidance is aimed at helping applicants and developers undertake HIAs by:

- Identifying which planning applications require assessment
- Providing a lens through which to view healthy design and development
- Describing the HIA process and how it fits with the planning application process
- Giving advice and information on how to carry out a robust assessment
- Providing a set of assessment tools and criteria for both rapid and detailed HIAs

2.2. Both the adopted and new draft Local Plans seek to ensure that development contributes towards a healthy built environment at all levels and recognises that the built environment plays a key role in shaping people's health and wellbeing.

¹ Richmond Local Plan (adopted 2018). Source: https://www.richmond.gov.uk/local_plan

² Richmond draft Local Plan (2021). Source: https://www.richmond.gov.uk/services/planning/planning_policy/local_plan/draft_local_plan/draft_local_plan_pre_publication_version

2.3. HIAs allows us to assess how new developments impact on the health and wellbeing of people living, working, and moving through the borough. Via the planning process HIAs can contribute to ensuring new developments maximise health and wellbeing benefits.

2.4. HIAs also allow us to identify population groups with greater needs and address some of the existing health inequalities within Richmond considering both the short and long-term impacts of developments.

2.5. Development proposals will need to look through the lens of health and take into consideration health issues in the design process including healthy neighbourhoods, housing, active travel, the food environment, and open space. Further information can be found within the Spatial Planning for Health³ document produced by Public Health England (now called the Office for Health Improvement and Disparities).

3. How can planning influence health and well-being?

3.1. Health is referred to in this guidance as a state of complete physical, mental, and social wellbeing and not merely the absence of disease or infirmity (World Health Organisation definition of health, as outlined in its constitution, 1948).⁴ This is consistent with the biopsychosocial model of health, which considers physiological, psychological, and social factors in health and illness, and interactions between these factors. It differs from the traditional medical model, which defines health as the absence of illness or disease and emphasises the role of clinical diagnosis and intervention.

3.2. Evidence shows the built environment can impact directly and indirectly on health and wellbeing. For instance, living near a busy road can affect air quality and noise levels, with direct impacts on our physical and mental health. Proximity and ease of access to public transport, green infrastructure, local services and amenities, availability of affordable housing and employment opportunities can also impact on choices people make. This includes what they eat and how physically or socially active and connected they are.

3.3. Planning for health involves thinking about the interrelated factors that affect physical and mental health, including social and psychological elements such as wellbeing and fulfilment.

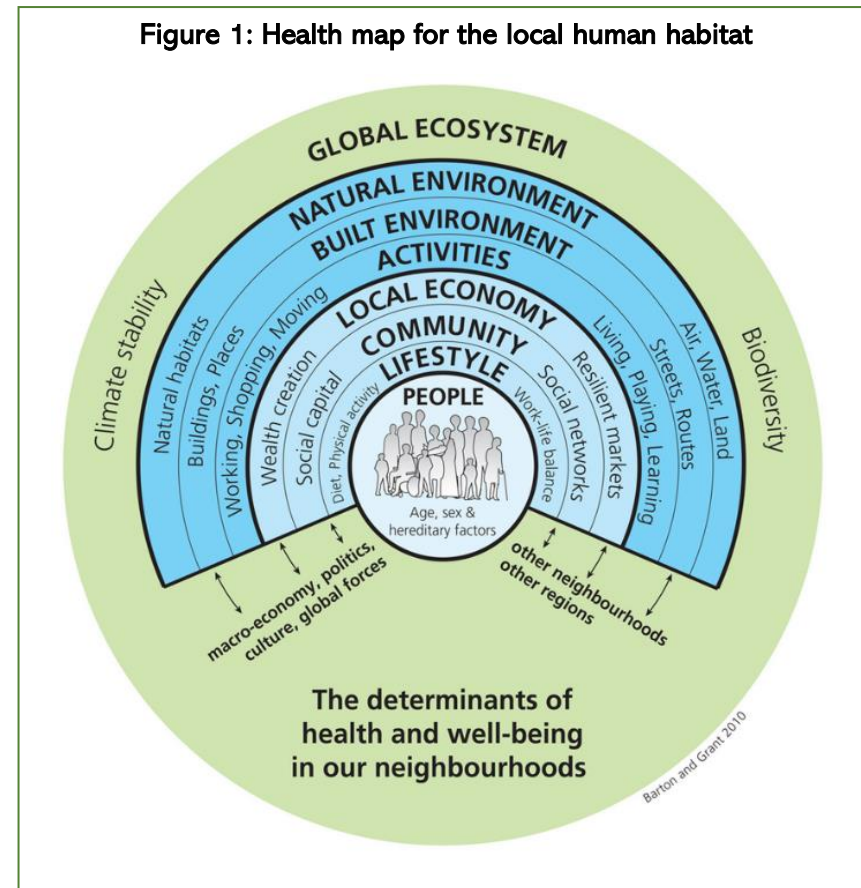
³ Public Health England (2017), Spatial Planning for Health An evidence resource for planning and designing healthier places. Source: https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/729727/spatial_planning_for_health.pdf

⁴ World Health Organisation Constitution (1948). Source: <https://www.who.int/about/governance/constitution>

3.4. The wider determinants of health are the conditions in which people are born, grow, work, live and age, and the wider set of forces and systems shaping the conditions of daily life.⁵ A healthy place is one that can contribute to the prevention of ill health and provide the environmental conditions to support positive health and wellbeing.

3.5. Figure 1 highlights the complexity of the relationship between health and our environment. Differences in health reflect the differing social, environmental, and economic conditions of local communities. How healthy we are is determined by a myriad of factors, many of which are influenced by development and planning. Whether that's lifestyle behaviours, work, social networks, living conditions, or the socio-economic and environmental conditions in which we live. These can be both positive and negative for our health and affect us as individuals and communities. Land use planning contributes to health and well-being the across wider determinants including:

- Economic impacts
- Built and natural environment
- Food environment
- Transport and active travel
- Social and community cohesion
- Accessibility to facilities and services



Source: Barton, H. and Grant, M. (2006)⁶

⁵ World Health Organisation definition of the wider determinants of health. Source: <https://www.who.int/health-topics/social-determinants-of-health>

⁶ Barton, H. and Grant, M. (2006), A health map for the local human habitat. The Journal for the Royal Society for the Promotion of Health, 126 (6). pp. 252-253. ISSN 1466-4240 developed from the model by Dahlgren and Whitehead, 1991. Dahlgren G, Whitehead M (1991). "The main determinants of health" model, version accessible in: Dahlgren G, and Whitehead M. (2007) European strategies for tackling social inequities in health: Levelling up Part 2. Copenhagen: WHO Regional Office for Europe. Source: <https://apps.who.int/iris/handle/10665/107791>

4. Which developments need to undertake HIAs?

4.1. All major developments are required to complete and submit a HIA as part of the planning application process including:

- All residential developments over 10 units (through conversion or new build)
- Residential development on a site of at least 0.5 hectares
- Creation or change of use of a commercial development, where the floorspace is 1,000 square metres or more
- A non-residential development on a site of at least 1 hectare.

5. What type of HIA should be undertaken

5.1. The WHO defines an HIA as:

“a combination of procedures, methods and tools by which a policy, programme or project may be judged as to its potential effects on the health of a population, and the distribution of those effects within the population”⁷

5.2. An HIA aims to systematically identify the health and wellbeing impacts of a plan or planning application and then make recommendations to:

- Maximise the positive health and wellbeing impacts.
- Minimise the negative health and wellbeing impacts.
- Reduce health inequalities.

It is important to note that HIAs should be done before any development proposals are finalised and should be initiated at the earliest stages of the appraisal process and not at the end



⁷ World Health Organisation (1999), Definition of health impact assessment (HIA). Source: <https://www.euro.who.int/en/health-topics/environment-and-health/health-impact-assessment/definition-of-health-impact-assessment-hia>

5.3. Rapid and detailed HIA:

The scope of any assessment will need to be proportionate to the type and scale of application it relates to. Whilst the stages and questions asked are the same for both rapid and detailed HIAs, the level of detail required in the analysis will be different as well as the need for public consultation. Note detailed HIAs must incorporate community consultation engagement and feedback. The following criteria apply.

- Developments - 10 to 50 residential units will be able to undertake rapid HIAs. These should be scoped out at the initial development brief stage. It should also outline how the developers have sought to engage with the public around health and wellbeing
- Developments - 50 to 100 residential units. HIA templates such as from NHS Healthy Urban Development Unit (HUDU)⁸ can be used however they will need to be in significant detail including whether development meets or exceeds Local Plan and London Plan policy standards. It should also outline how they have involved the public on health and wellbeing elements of the development including, for instance design workshops.
- Developments over 100 residential units will need to undertake a more comprehensive and detailed HIA; rapid HIAs such as the HUDU template will not be accepted. More extensive community engagement around health and wellbeing will be required. Detail around these requirements can be discussed with Planning/Public Health.
- Creation or change of use of a commercial development (floorspace over 1,000 square metres or more) and residential developments on sites of 0.5 hectare and non-residential developments on sites of 1 hectare require a discussion with Planning/Public Health to talk about HIA requirements

5.4. The table below explains what is required at each stage of the HIA process and what information should be provided in the HIA report. For HIA quality assurance framework and more details on how to draft an HIA report see, for example, the Review Package for HIA Reports of Development Projects produced by Ben Cave and Associates.⁹

5.5. The HIA should be initiated at the beginning of the process before the scheme design is solidified. Relevant information and data should be considered in the scheme design process to minimise negative and maximise positive impacts. Once the HIA has been completed it should be submitted with the planning application with a notification copy to RWHIA@richmondandwandsworth.gov.uk

⁸ NHS Healthy Urban Development Unit (HUDU), Rapid HIA Template. Source: <https://www.healthyrbandevelopment.nhs.uk/wp-content/uploads/2019/10/HUDU-Rapid-HIA-Tool-October-2019.pdf>

⁹ Ben Cave and Associates (2009), Review Package for HIA Reports of Development Projects. Source: <https://www.scamb.gov.uk/media/5749/hia-review-package-ben-cave-assoc.pdf>

Table 1: Applicant requirements

Stage	Purpose of that stage	What does it mean for applicants? What are applicants required to do?
Screening	To determine if a HIA is required. If so, which type?	<p>Policy LP 30 (B.1) adopted Local Plan (2018) requires all major applications to submit HIAs. This is retained in the new draft Local Plan (2021) under Policy 51 (B.1).</p> <p>For this stage, applicants are only asked to:</p> <ul style="list-style-type: none"> • Identify whether their application requires a HIA. • Identify whether the application meets the policy threshold for detailed HIA and a community consultation?
Scoping	<p>To develop a plan for conducting the HIA, including considering whether public engagement is needed</p> <p>To identify the potential risks and benefits.</p>	<p>For this stage applicants are required to identify the following:</p> <ul style="list-style-type: none"> • Who will conduct the HIA and generally ensure that a project management plan is identified for completing the HIA (smaller schemes might require just one person to conduct the HIA, large schemes will need a team). • Methods used for assessing the impact, including considering the geographical scope and timescale of impact (during construction and post-delivery). • For detailed HIAs: Local community groups and stakeholders will need to be engaged (consultation is optional for rapid HIAs). <p>NB: It is recommended that scoping is conducted during pre-application meetings for larger developments.</p>
Assessment	<p>To describe the baseline health of the affected communities and analyse the health impacts.</p> <p>Using various methods and available evidence (including evidence from the community in the case of detailed HIAs).</p>	<p>Rapid and detailed HIAs cover the same questions: scale and scope of the assessment will need to be proportionate to the type of applications it relates to. Applicants will need to:</p> <ul style="list-style-type: none"> • Establish the baseline: <ul style="list-style-type: none"> - Who are the population groups more likely to be affected when the site changes (during construction and once operational)? - What population groups will be most affected, i.e., who are the most vulnerable groups? - How is the health profile of the population likely to be impacted? - What existing infrastructure and services are in the area? <p>NB: To identify the population and infrastructure baselines, applicants are encouraged to use, for instance, the borough's data website (www.datarich.info), the Joint Strategic Needs Assessment for the borough and the Health and Wellbeing Strategy, all of which are available on the Council's website. Applicants are encouraged to refer to other sources including Government and NHS data.</p>

Recommendations		<ul style="list-style-type: none"> Engage with local communities and stakeholders to identify how the scheme could affect their health, to test proposed mitigation measures and give a local perspective on risks. <u>- Only applicants who need to produce a detailed HIA will need to involve communities and stakeholders.</u> However, it is advisable that all developers front load health and wellbeing as part of the community engagement and feedback process including highlighting issues and mitigation including those identified via design workshops and recommendations. Conduct the assessment: <ul style="list-style-type: none"> Respond to the questions in appendix 1 using a variety of qualitative and quantitative methods according to the risks. New data (e.g., consulting local groups) or existing data (e.g., statistics produced by Richmond Council, national statistics) can be used as evidence considering the potential positive and negative impacts of the scheme. For each question, scale and nature of impact will have to be explained as well as what groups will be affected. NB: Applicants are asked to use the tables in appendix 1 to conduct the assessment.
	<ul style="list-style-type: none"> To develop practical strategies that can be implemented to minimise health risks and maximise health benefits 	<p>Applicants should explain how impacts identified in the assessment can be addressed or health benefits secured through:</p> <ul style="list-style-type: none"> changes to the design of the proposals. mitigation measures controlled through planning conditions or obligations. contributions to off-site facilities, public realm, or connections. <p>NB: Applicants should prioritise more significant impacts in their recommendations. The view of stakeholders on significance of impact must be considered in detailed HIAs. A balance will need to be struck between conflicting recommendations if relevant. See appendix 1.</p>
Reporting	<ul style="list-style-type: none"> To present results and recommendations to the local planning authority, local communities, and other stakeholders 	<p>Applicants should:</p> <ul style="list-style-type: none"> Provide a HIA report as part of their planning application documents. Ensure that the HIA report is accessible to non-expert audience and where relevant share the findings with local communities and stakeholders (detailed HIA).
Monitoring	<ul style="list-style-type: none"> To monitor the changes in health or health risks 	<p>Applicants should:</p> <ul style="list-style-type: none"> Ensure that their HIA report explain clearly when the healthy design (e.g., housing, play area, cycle parking) will be delivered, if management plans are needed and who will be responsible for managing the place (it could be private companies, voluntary sector or even Council services). Ensure that the HIA includes a recommendation to carry out future monitoring of the health impacts that result from the development proposal, so that corrective action can be taken to address any unforeseen impacts. <p>The larger the scheme planned, the more important this section is.</p>

Appendix 1: HIA Checklist

Applicants are strongly advised to use table 1 when developing their HIA regardless of whether it is rapid or detailed. It is to check that the procedural steps of the HIA have been followed and the HIA can be read by planners and members of the public as a standalone document.

Please ensure you can answer all the questions below (NB: the level of detail provided should be in proportion to the scale of the development)
1. Has the HIA process started at the earliest design initiation of the scheme (before built elements become fixed)? Please provide details/evidence
2. Have the site and proposed uses been described in the HIA?
3. Have applicants engaged constructively with the community to scope and assess the health impacts of the proposed scheme to produce the HIA? Please provide details.
4. Have the public health and infrastructure baselines been identified? Applicants are expected to respond to the following: <ul style="list-style-type: none"> - Who are the population groups more likely to be affected when the site changes (during construction and once operational)? - How is the health profile of the population likely to be impacted? - What existing infrastructure and community services are in the area (within a 20-minute walking distance)?
5. Has the assessment of impact been conducted? Have specific examples of how the design has evolved and a description of measures taken to mitigate negative impacts and maximise benefits to health and wellbeing been given?

Template for responding to assessment questions:

Assessment criteria	Details/evidence of impact. Are impacts positive or negative?	Explain how impacts can be addressed or benefits secured.
Questions	<ul style="list-style-type: none"> - What is the scale of each impact? - Are impacts temporary or permanent? - What is the nature of the impact i.e., is it direct, indirect, secondary, or cumulative? - How are different individuals and groups affected? - What groups will be particularly advantaged/disadvantaged compared to others? - What value do local people place on each impact? 	<p>It is important to explain:</p> <ul style="list-style-type: none"> - changes to the design of the proposals related to health and wellbeing before finalised application. - outline mitigation measures controlled through planning conditions or obligations such as contributions to off-site facilities, public realm improvements etc. - outline any monitoring plans which may be required and how this would be delivered. <p>NB: you can use visual drawings to show new measures/ revised design</p>

Useful resources

The Wales Health Impact Assessment Support Unit (WHIASU), Health Impact Assessment A practical guide (2020) https://phwwhocc.co.uk/whiasu/wp-content/uploads/sites/3/2021/05/HIA_Tool_Kit_V2_WEB-1.pdf

The Wales Health Impact Assessment Support Unit (WHIASU), Population Groups and Health and Wellbeing Determinants Checklist (2020) https://phwwhocc.co.uk/whiasu/wp-content/uploads/sites/3/2021/05/WHIASU_Population_Groups_Checklist.pdf

The Wales Health Impact Assessment Support Unit (WHIASU), Quality Assurance Review Framework for Health Impact Assessment (2020) https://phwwhocc.co.uk/whiasu/wp-content/uploads/sites/3/2021/05/WHIASU_2017_QA_Review_Framework_for_HIA_FINAL_GUIDANCE-1.pdf

Office for Health Improvement and Disparities, Spatial Planning for Health An evidence resource for planning and designing healthier places (2017) https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/729727/spatial_planning_for_health.pdf

Office for Health Improvement and Disparities, Healthy High Streets: good place making in an urban setting (2018) https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/699295/26.01.18_Healthy_High_Streets_Full_Report_Final_version_3.pdf

Sport England, Active Design Planning for health and wellbeing through sport and physical activity (2015) https://sportengland-production-files.s3.eu-west-2.amazonaws.com/s3fs-public/spe003-active-design-published-october-2015-high-quality-for-web-2.pdf?VersionId=uCz_r6UyApzAZlaiEVaNt69DAaOCmkIQ

Transport for London, Healthy Streets for London (2018) <https://content.tfl.gov.uk/healthy-streets-for-london.pdf>

NHS Healthy Urban Development Unit. Rapid Health Impact Assessment Tool (2019) <https://www.healthyurbandevlopment.nhs.uk/our-services/delivering-healthy-urban-development/health-impact-assessment/>