



Doncaster
Council

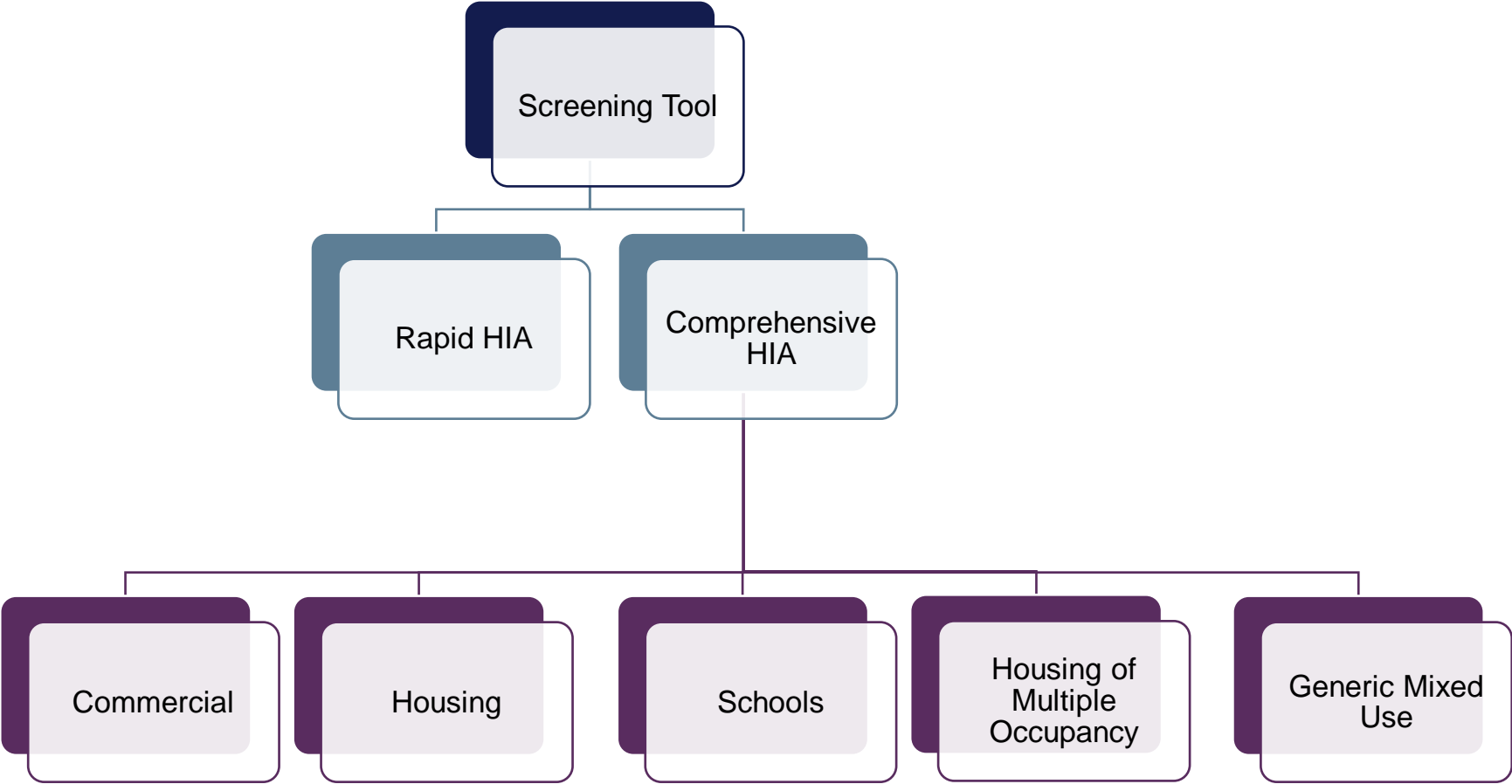
Finding the value

A local perspective on using Health Impact Assessments

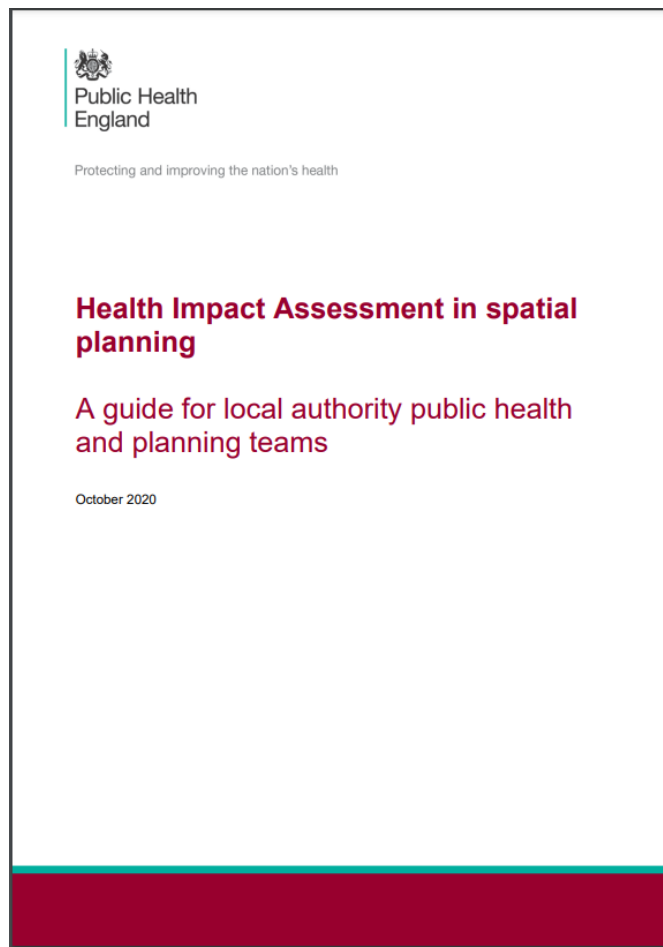
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Improvement Coordinator



Willingness to adapt



PHE Guidance



<https://www.gov.uk/government/publications/health-impact-assessment-in-spatial-planning>

Local Plan

Why a strategic policy?

- HIAs not taken seriously
- Lack of response
- Think wider than the development boundaries



Policy 50: Health (Strategic Policy)

The Council will improve and promote strong, vibrant and healthy communities by ensuring a high quality environment is provided with local services to support health, social and cultural wellbeing. In order to help achieve this the Council will require:

- A) development to positively contribute to creating high quality places that support and promote healthy communities and lifestyles, such as maximising access by walking and cycling;
- B) provision of good access to leisure facilities, greenspace and the countryside;
- C) developments designed to encourage and support healthy lifestyles;
- D) that the healthcare infrastructure implications of any relevant proposed development have been considered and addressed when and where necessary;
- E) controlling the location of, and access to, Food and Drink Uses, and
- F) that proposals for development or change of use will be assessed against the Health Impact Assessment Screening Tool and, when determined if required, the developer will demonstrate they have undertaken, and responded to the findings of, a Health Impact Assessment (HIA).

It's now policy, what next?

- Weighting?
- Is it for all applications?
- How do we, as a team, ensure this adds value?
- How do we account for competing priorities?

What more can we be doing?

Member
Training

Benchmarking
Research

Strategic
Support

Communication

Alternative
perspectives

Consistency

Language we
use

Focus Group

Focus Group



Summary

Aims

- Feedback and opinions, constructive critiques
- Understanding challenges and barriers
- Reflection
- Ideas for bespoke training
- Opportunities for support
- Establish a working group
- Gain buy in for attendance at subsequent training

Attendees

- 12 internal (9 from Planning Team, including the Head of Planning)
- 5 external (range of developers)
- Held subsequent 1:1 with two developers

Format

- Virtual via Teams
- Combination of breakout rooms and general discussion
- Open invite
- Offer of 1:1s to those who couldn't attend

Findings

- Challenge assumptions
 - Internal colleagues
 - External developers
- Potential to broaden reach to stakeholders
- Clear policy foundation
- Clarity around managing expectations
- Bespoke training, tailored to audience
- Challenge of working virtually
- Account for changes in staff
- Earlier the better!
- Own house just as, if not more, important than external
- Support, availability, open door

Where next?



Within the next year...

- Training including suite of resources
- Supplementary Planning Document
- Closer working with colleagues
 - Planning
 - Internal Housing Providers
 - Challenge: Working from home
- Awareness raising across the system
 - Availability of Public Health colleagues
 - Stakeholder mapping
 - Continued engagement and updates
 - Regionally, as well as locally
- Proactive approach to using HIAs in the planning process
 - Pre-application stage, or even before this?

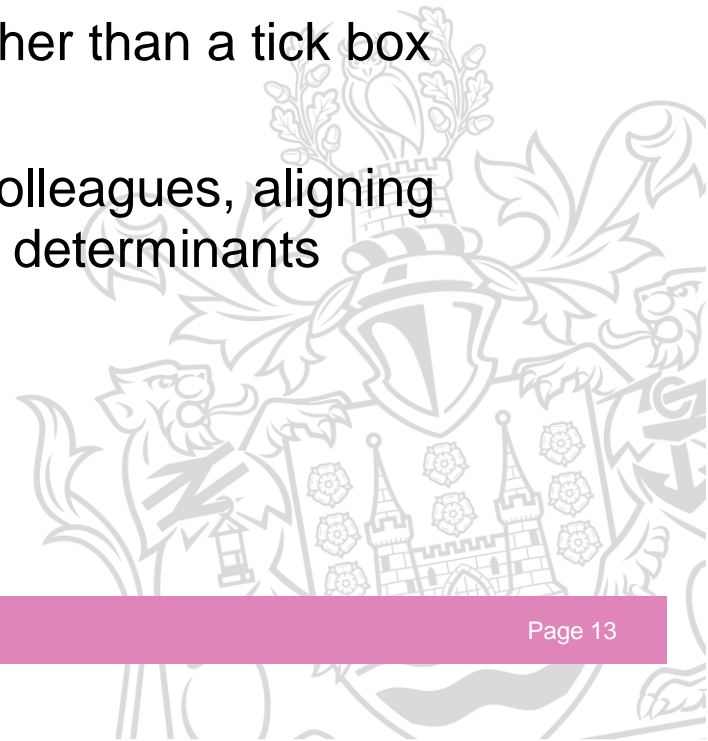


Longer term aspirations



We all see the value and realise the benefits

- Build an evidence base that supports the use and demonstrates the value added
 - Nose to tail review
 - Evaluation of HIA's impact
- Health proactively considered, becomes second nature
- Eliminate the need to request a HIA
- HIAs viewed as a valuable aide memoire, rather than a tick box exercise
- Closer working relationships with Planning Colleagues, aligning with Public Health principles especially wider determinants
- Persistence and resilience will pay off



Thank you.

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