

# Health Impact Assessments and Spatial Planning in the Wakefield District: Lessons learned over 11 years of practice

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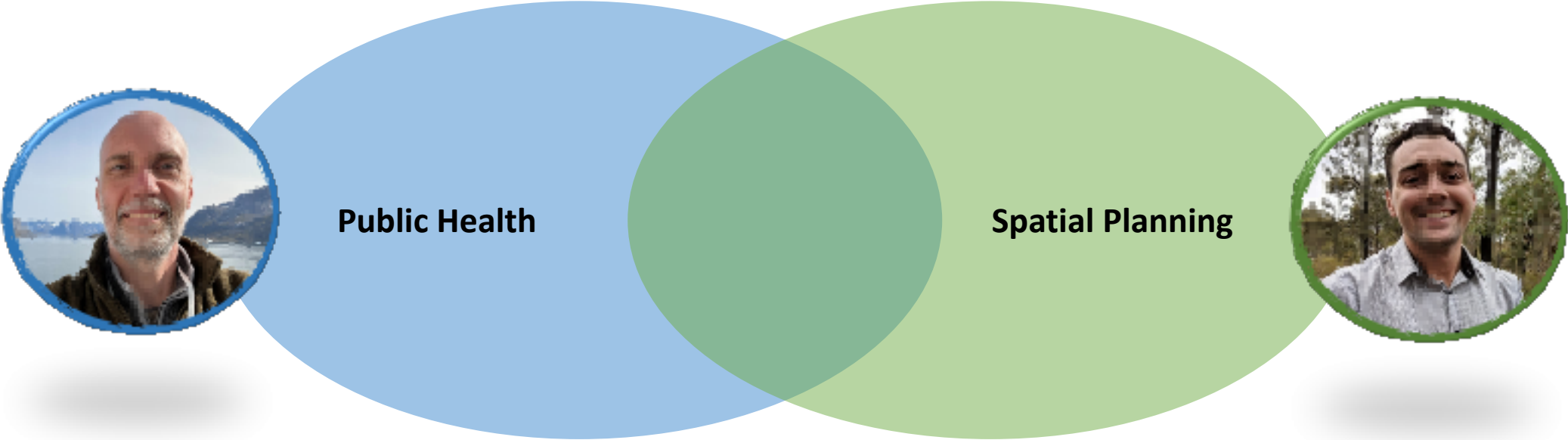
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# Today's session

- To share our practical experiences and learning from the development, implementation, evaluation and revision of a health impact assessment (HIA) for spatial planning framework in the Wakefield District, England
  - Background to use of HIA in Wakefield
  - Development of new HIA tool

# About us



# About the Wakefield District

## Wakefield District

- A medium-sized English Local Authority located at the at the centre of the UK.
- 339 square kilometres in area.
- Population of 353,802.
- 54th most deprived district in England (out of 317 districts).
- Average earnings in the Wakefield District are lower than regional and national rates.
- Life expectancy and healthy life expectancy both below national average.



# 2010-12: How our Health Impact Assessment Journey Started

- National move to bring **health** and **local government** closer together (Health & Social Care Act 2012)
- A **Wakefield District Joint Public Health Unit** was established to develop and drive a **whole system** approach to improving and protecting health.
- **Spatial Planning** was chosen as the first area to trial this approach.
- Use of **Health Impact Assessment** (HIA) selected as an effective way for spatial planning to have a great impact on health.

# 2012: HIA enshrined into local policy

Health input into **Wakefield District Site Specific Local Plan** which was formally adopted as part of a full Local Plan review:

- Identified priority sites where a HIA would be required as part of any planning application
- It also stated:

*“Where sites fall into areas of highest health deprivation the Council will require a health impact assessment to be submitted...”*

*Wakefield Site Specific Local Plan (paragraph 47.2)*



# 2012: HIA enshrined into local policy

## *Learning*

*Need to put measures in place to support the effective implementation of this policy e.g.*

- *Training*
- *Guides*
- *Tools*



# 2013: Developing our HIA Tool

- Draft tool created by Public Health
- Workshops held where tool shared with planning colleagues for comment
- Based on comments two versions of tool were developed:
  - Rapid HIA
  - Comprehensive HIA

What impact, if any, will the proposal have with regard to the themes listed below?

Theme	Impact	Priority	Description of Impact	Recommendation to minimise or mitigate impact
Living				

**Rapid Health and Wellbeing Impact Assessment for Planning (HIA) Tool**

**Proposal Name:** \_\_\_\_\_ **Planning Ref:** \_\_\_\_\_

**How to use this tool**


**Impact** – Think about what impact the proposal may have with regard to each of the themes listed and if this impact will be positive or negative. Tick the + column for positive impacts and - for negative impacts. If the proposal will benefit or affect different groups or individuals of the community (for example, children),

**Priority** – Think about how on the proposal affects different groups or individuals. As far as possible, give the most priority to groups or individuals who are most vulnerable. Tick the 2 column if you are a priority or impact will occur and if you are certain / have evidence an impact will occur.

**Description of Impact** – Give details how the proposal will impact on each specific group or population.

**Recommendation** – Write recommendations in this column detailing how positive impacts could be maximised and negative impacts minimised. This may include further research that is needed to improve the quality of your assessment.

Further guidance on the use of impacts which may occur can be found in the Comprehensive Health and Wellbeing Impact Assessment Handbook.

[www.wakefield.gov.uk](http://www.wakefield.gov.uk) 



## What impact, if any, will the proposal have with regard to the themes listed below?

Theme	Impact		Certainty		Description of impact	Recommendation (to minimise or maximise impact)
	+	-	?	!		
<b>Housing</b> Think about any effects the proposal may have on the affordability, location, variety, accessibility and construction of housing.						
<b>Physical Activity</b> Think about how the proposal may create an environment that promotes or hinders physical activities such as sport, active play and active travel.						
<b>Diet and Nutrition</b> Think about how the proposal could encourage or discourage people from making healthy food choices and/or growing their own food.						
<b>Air Quality &amp; Noise</b> Think about how noise and air pollution can be minimised both during construction and once the proposal is in use.						

# 2013: Developing our HIA Tool

## Learning:

- Important to **talk** to planners and more importantly to **listen** to them (Co-production)
- Not all planners work for the planning authority
- Find out where health and planning agreed and disagreed
- Recognise that planners aren't one homogenous group (e.g. Spatial Policy, various DM teams, various individuals.)
- Compromise essential
- Important not to forget other stakeholders (e.g. developers, decision makers)



## 2013-15: Making it work

- Rolled out the HIA tool (both versions) which started to be used by developers almost immediately. (Comprehensive ended up being most used.)
- Tool provided:
  - Trigger for inviting PH comments on particular schemes
  - A basis for these comments on development schemes.
  - Need to be aware of public health capacity (Quality v quantity)

**However, these comments appeared to have little or no impact on the submitted schemes.**



# 2013-15: Making it work

## First Review - the Planning and health “culture clash” etc

- Need common language
- Planning policy is king
- Timing is key: earlier the better – pre-applications
- Capacity needs to be managed - screening
- Ironing out the consultation and review process with planning
- Better tools – key issues matrix
- Choose your battles – “if everything is a priority then nothing is”
- Progress not guaranteed – you can’t win em’ all



# More tools

## Health Impact Assessment (HIA) for Planning Priority Themes by Ward

The table below identifies the key themes in each of the twenty one Wakefield Council wards, where evidence suggests a Health Impact Assessment should initially focus. It is important to note that the table is intended purely as a guide to the potential priority themes in each ward. Those carrying out Health Impact Assessments should examine all themes and not just those identified as a priority below.

Ward Name	Housing	Physical Inactivity	Diet	Air Quality	Noise	Traffic & Transport	Crime and ASB	Licensing (Smoking & Alcohol)	Economy & Employment	Education & Skills	Environment	Inequalities	Access to services
Ackworth, North Elmsall and Upton	○	○	○	○	○	○	○	●	●	○	○	●	●
Alredale and Ferry Fryston	●	○	○	○	○	●	●	○	●	○	○	●	●
Altofts and Whitwood	○	○	●	●	○	○	○	○	○	○	○	●	●
Castleford Central and Glasshoughton	○	○	○	●	○	○	○	○	○	○	○	●	●
Crofton, Ryhill and Walton	○	○	○	○	●	○	○	●	●	○	○	●	○
Featherstone	○	○	○	○	○	○	○	○	○	○	○	●	●
Hemsworth	○	○	○	○	○	○	○	○	○	○	○	●	●
Horbury and South Ossett	○	○	○	○	○	○	○	○	○	○	○	●	●
Knottingley	○	○	○	○	○	○	○	○	○	○	○	●	●
Normanton	○	○	○	○	○	○	○	○	○	○	○	○	○
Ossett	○	○	○	○	○	○	○	○	○	○	○	○	○
Portefract North	○	○	○	○	○	○	○	○	○	○	○	○	○
Portefract South	○	○	○	○	○	○	○	○	○	○	○	○	○
South Elmsall and South Kirkby	○	○	○	○	○	○	○	○	○	○	○	○	○
Stanley and Outwood East	○	○	○	○	○	○	○	○	○	○	○	○	○
Wakefield East	○	○	○	○	○	○	○	○	○	○	○	○	○
Wakefield North	○	○	○	○	○	○	○	○	○	○	○	○	○
Wakefield Rural	○	○	○	○	○	○	○	○	○	○	○	○	○
Wakefield South	○	○	○	○	○	○	○	○	○	○	○	○	○
Wakefield West	○	○	○	○	○	○	○	○	○	○	○	○	○
Wrenthorpe and Outwood West	○	○	○	○	○	○	○	○	○	○	○	○	○

● Indicates themes where evidence suggests Health Impact Assessments (HIAs) of developments within that ward should pay particular attention.

# 2016-21: Fine tuning

Started a rolling process of gradual improvement of the HIA tool and process.

## Learning

- Evaluation
  - Often takes a long time to see impacts
  - Impacts often invisible
- Need to stay vigilant
- Need for great capacity around planning and health



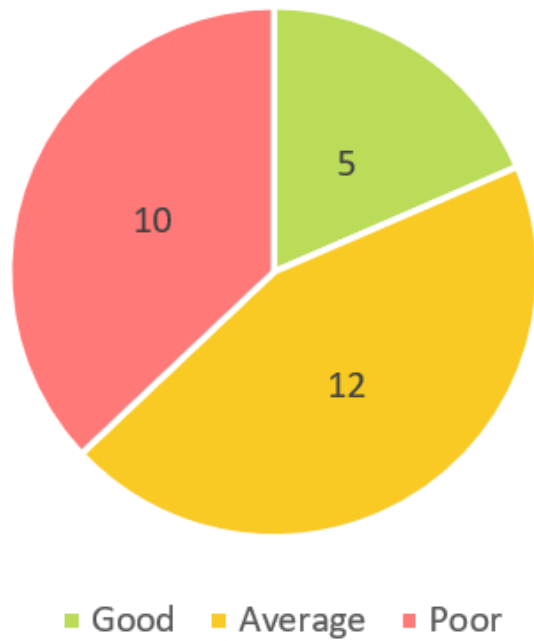
# 2022-23: “Fresh eyes”

## High-level review of the overall framework

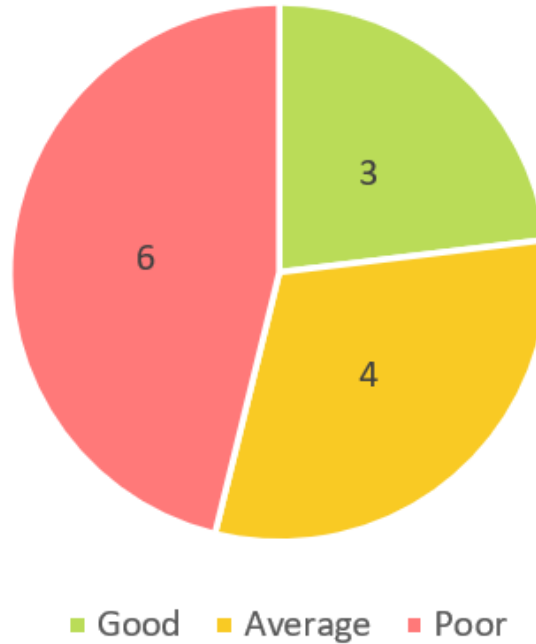
### Key findings from HIAs between 2017-2022:

- Reluctance to acknowledge any negative impacts
- A lack of recommendations to improve the scheme
- Fields incorrectly populated by ‘copied and pasted’ text
- Irrelevant descriptions that don’t respond to the prompt. These are often duplicated from similar prompts
- Incomplete HIAs where blank fields are incorrectly justified as not being relevant
- Overly brief assessments, with essential information missing
- Inaccurate assessments and descriptions which don’t align with the proposed plans and other documentation

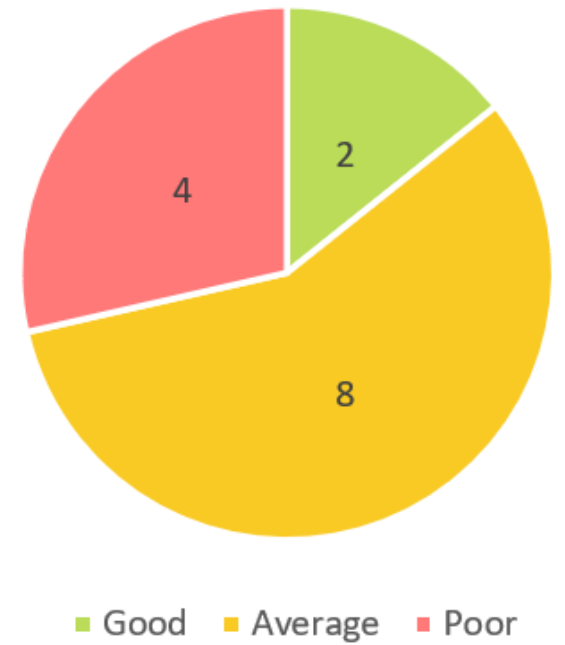
All HIAs (n = 27)



Comprehensive HIAs (n = 13)



Rapid HIAs (n = 14)





What impact will the proposal have on?						
Crime Reduction and Community Safety	Impact		Certainty		Description of impact	Recommendation (to minimise or maximise impact)
	+	-	?	!		
<b>Crime prevention</b> (e.g. reducing opportunities for people to commit crime.)	✓			✓	The detailed layout will demonstrate, designing out crime has been an important element in the development of this scheme Approaches taken in order to design out crime are outlined within the Design and Access Statement.	The layout creates a safe and accessible environment where opportunities for crime are designed out and promote community safety.
<b>Reducing the fear of crime</b> (e.g. creating a safe and unthreatening environment.)	✓			✓	The detailed layout will demonstrate, designing out crime has been an important element in the development of this scheme Approaches taken in order to design out crime are outlined within the Design and Access Statement.	The layout creates a safe and accessible environment where opportunities for crime are designed out and promote community safety.
<b>Promoting optimum use of buildings and public spaces by a variety of different groups.</b>	✓			✓	The detailed layout will demonstrate, designing out crime has been an important element in the development of this scheme Approaches taken in order to design out crime are outlined within the Design and Access Statement.	The layout creates a safe and accessible environment where opportunities for crime are designed out and promote community safety.
<b>Promoting a sense of ownership, respect, territorial responsibility and community.</b>	✓			✓	The detailed layout will demonstrate, designing out crime has been an important element in the development of this scheme Approaches taken in order to design out crime are outlined within the Design and Access Statement.	The layout creates a safe and accessible environment where opportunities for crime are designed out and promote community safety.



## Health Impact Assessment (HIA) for planning tool

Updated November 2023

**Proposal name:**

**Reference/application number  
(if known):**

# Summary

## Proposal summary

Provide a brief summary of the proposal

For example:

*Mixed use development of 56 dwellings, three shops, and new public open space at 12-38 Example Street, Wakefield.*

*The 56 dwellings comprise of 14 one-bed apartments, 28 two-bed apartments, and 14 three-bed houses. The 3 shops include one larger space of 125m<sup>2</sup>, and two smaller shops with 75m<sup>2</sup> floor space each.*

*The public open space is 1,200m<sup>2</sup> and includes mature landscaping, a small play space, and pedestrian connections to existing neighbourhood.*

## About the author

Provide some details about who is completing this HIA, including their relevant qualifications and years of experience.

## Evidence

Provide details of the various sources of information that has been used to inform this Health Impact Assessment. For example:

- Local community members/groups including any consultation responses;
- Data from healthcare providers and primary care services. In particular, GPs, dentists, and pharmacy provision;
- Scientific literature (e.g., systematic reviews and meta-analyses)
- Advice from relevant experts such as environmental health professionals, public health professionals or transport and highways engineers;
- National and local health policies including priorities from the Wakefield District Health and Wellbeing Strategy;
- Relevant regulatory standards
- Reports and documents such as Air Quality Assessments and Travel Plans

You may wish to submit a copy of any relevant supporting evidence alongside this form

# Housing HI - High Quality Housing

## 1. Does the scheme include any residential component?

Yes

Complete this section

No

[Skip to next section](#)  
[Physical Activity PA1 - Walking]

## Examples of positive and negative aspects

Tick where relevant. Aspects will contribute to positive and negative health impacts

### Will contribute to positive impacts:

- Homes designed so that it is difficult to visually determine the tenure of properties
- Homes that have suitable internal space, private outdoor space, and are NDSS compliant
- All homes have access to natural light and an outlook
- Homes can be ventilated effectively to prevent damp and mould, especially in bathrooms
- Homes are designed to ensure privacy of occupiers and neighbours
- Apartments, flats, and maisonettes are provided with some private outdoor amenity space such as gardens on the ground floor, and balconies and terraces for homes above the ground floor
- Other positive aspects:

### Will contribute to negative impacts:

- External design dictated by tenure or affordability
- Homes that are too small and risk being overcrowded
- Habitable rooms without windows
- Design compromises the privacy of occupiers and neighbours
- Apartments, flats, and maisonettes have no private outdoor amenity space
- Other negative aspects:

### Remember:

Acknowledging negative aspects is an important part of the HIA process. It is unrealistic to claim a proposal is 100% positive.

## 2. Considering the list of positive and negative aspects listed in this section, what will the health impact be?

Positive

Negative

Neutral

Unsure

## 3. Describe the details and explain how the health impact has been assessed

This should consider the certainty, severity, and/or balance of the positive and negative impacts and aspects

## 4. List ways that the scheme can minimise any negative health impacts and maximise any positive impacts

This should outline recommendations to make amendments to the scheme or summarise improvements that have already been made

## 5. Including the recommended action(s), how well does the scheme improve public/human health?

Above and beyond

Quite well

A little bit

Not at all

If worsens public health

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A little bit

Not at all

It worsens public health



# Air Quality and Noise

## Examples of positive and negative aspects

Tick where relevant. Aspects will contribute to positive and negative health impacts

### Will contribute to positive impacts:

- Schemes located in sustainable locations that won't generate additional traffic
- Safe distances between sources of air pollution and noise and sensitive land uses, such as housing
- Noise attenuation measures (e.g., good acoustic design and tree lining) to reduce the impacts of noise created elsewhere, such as roads, industry, and late-night land uses
- Internal ventilation where higher-specification glazing is required to reduce the impacts of nearby noise
- Measures to reduce the noise created on-site
- Smoke-free workplaces and public spaces, particularly at entry points
- Dedicated smoking and vaping areas that promote local stop smoking services
- Apartment buildings that provide access from a deck, rather from internal corridors
- Other positive aspects:

### Will contribute to negative impacts:

- Dust, traffic congestion and noise caused during construction
- Developments that increase traffic
- Land uses that pollute the air and generate disturbing levels of noise
- Sensitive land uses located close to sources of air pollution and noise
- Car-centric design features, such as drive-throughs
- Smoking areas located close to entrance points or windows regularly opened
- Other negative aspects:

**Remember:**  
Acknowledging negative aspects is an important part of the HIA process. It is unrealistic to claim a proposal is 100% positive.

## 1. Considering the list of positive and negative aspects listed in this section, what will the health impact be?

- Positive  Negative  Neutral  Unsure

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- Above and beyond  Quite well  A little bit  Not at all  It worsens public health

## Desire paths

Desire paths or desire lines typically emerge as convenient shortcuts where more deliberately constructed paths take a longer or more convoluted route, have gaps, or are non-existent.

Desire paths provide indisputable evidence of the preferences and activity of pedestrians and cyclists and should therefore be formalised with constructed paths to provide a safer and more comfortable experience.

[Back to Physical Activity PA1 - Walking](#)

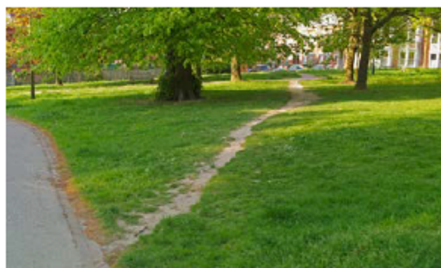


Image credits: Alamy and Alessandro Bahgat

## Drive-through designs

Most commonly associated with fast food restaurants, drive-through (or drive-thru) design enables customers to make transactions without leaving their car. Drive-throughs are now being incorporated into the designs of coffee shops, pharmacies, banks, and supermarkets, among other land uses. While they may offer a certain level of convenience for motorists, the negative health and urban design impacts of drive-throughs certainly outweigh the positives. These include:

- **Increased congestion:** drive-through queues often spill out onto the highway network during peak-times, blocking lanes and compounding the issues of peak-hour traffic. Drive-through design also encourages trips to be made by car, rather than other modes of transport, also creating more congestion on the road network
- **Air quality:** increased traffic and congestion also has a negative impact on air quality. Poor air quality is largest environmental risk to public health in the UK, as long-term exposure to air pollution can cause chronic conditions such as cardiovascular and respiratory diseases as well as lung cancer, leading to reduced life expectancy

- **Car-centric design:** development that prioritises vehicular movement discourages walking. This occurs because urban environments become less pleasant to walk, become safer and more convenient to drive, and the accumulative space required for car-centric design creates lower density neighbourhoods which creates longer walking distances
- **Increased potential conflict points:** drive-throughs often include zebra crossings for pedestrians; however, poor driver behaviour, the complicated nature of drive-through and carpark design, and crossing footpaths all lead to a less-safe walking environment for pedestrians

[Back to Air Quality and Noise](#)

[Back to Transport T1 - Well Designed Places](#)



Image credit: The Telegraph

## Dual aspect buildings

A dual aspect, or double aspect, building has been designed with openable windows and/or doors on two or more walls, creating views towards more than just one direction.

This is often used where buildings are situated on corners or have street access to the front and the rear.

Dual aspect design prevents large blank walls from fronting streets, which can limit passive surveillance, or 'eyes on the street', which improves community safety.

[Back to Crime Reduction and Community Safety CR1 - High Quality Design](#)



Image credit: Warner Gray

# Air Quality and Noise

## Examples of positive and negative aspects

Tick where relevant. Aspects will contribute to positive and negative health impacts

### Will contribute to positive impacts:

- Schemes located in sustainable locations that won't generate additional traffic
- Safe distances between sources of air pollution and noise and sensitive land uses, such as housing
- Noise attenuation measures (e.g., good acoustic design and tree lining) to reduce the impacts of noise created elsewhere, such as roads, industry, and late-night land uses
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- Smoke-free workplaces and public spaces, particularly at entry points
- Dedicated smoking and vaping areas that promote local stop smoking services
- Apartment buildings that provide access from a deck, rather from internal corridors
- Other positive aspects:

### Will contribute to negative impacts:

- Dust, traffic congestion and noise caused during construction
- Developments that increase traffic
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- Sensitive land uses located close to sources of air pollution and noise
- Car-centric design features, such as drive-throughs
- Smoking areas located close to entrance points or windows regularly opened
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- Positive  Negative  Neutral  Unsure

## 2. Describe the details and explain how the health impact has been assessed

This should consider the certainty, severity, and/or balance of the positive and negative impacts and aspects

## 3. List ways that the scheme can minimise any negative health impacts and maximise any positive impacts

This should outline recommendations to make amendments to the scheme or summarise improvements that have already been made

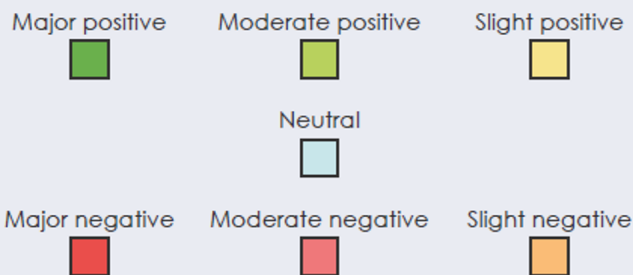
## 4. Including the recommended action(s), how well does the scheme improve public/human health?

- Above and beyond  Quite well  A little bit  Not at all  It worsens public health

# Conclusion

## 1. Based on a combined and balanced consideration of all themes within the HIA, what is/are the overall health impact(s) of the scheme?

Refer to the adjacent table for explanations. Tick all that apply



## 2. What are the recommended next steps for this scheme?

Tick all that apply

- Proceed with the recommended actions detailed in the assessment
- Refer to the Public Health Department for advice
- Further work is required to gain a better understanding of the potential health impacts (detail below)
- Revise the design and supporting documentation of the scheme in order to reduce any negative impacts and/or maximise any positive impacts
- Withdraw the application based on the overall negative impact
- Other recommended next steps (detail below)

**Explanations for overall impact terminology.** Note: It will often be the case that relevant criteria span categories of level, e.g., a high scale of change, but over a short-term duration. In these instances a professional judgement is made on the most appropriate level taking into account all relevant criteria.

Major positive	Major negative	Major impacts based on: high exposure or scale; long-term duration; continuous frequency; severity predominantly related to mortality; majority of population affected; permanent change; and substantial service quality implications. Prevention measures are required for major negative impacts.
Moderate positive	Moderate negative	Moderate impacts based on: low exposure or medium scale; medium-term duration; frequent events; severity predominantly related to moderate changes in morbidity; large minority of population affected; gradual reversal; and small service quality implications. Prevention or mitigation measures are required for moderate negative impacts.
Slight positive	Slight negative	Slight or non-significant impacts based on: very low exposure or small scale; short-term duration; occasional events; severity predominantly related to minor change in morbidity; small minority of population affected; rapid reversal; and slight service quality implications.
Neutral		Neutral impacts based on: negligible exposure or scale; very short-term duration; one-off frequency; severity predominantly relates to a minor change in quality-of-life; very few people affected; immediate reversal once activity complete; and no service quality implication.

## i Evaluation and review

The completed HIA will be reviewed for quality, completeness and accuracy, including the extent to which opportunities for public health have been explored by the Wakefield Public Health Department, or their appointed consultants. Substandard HIAs may be rejected as not valid or given low weight in the planning determination.

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### Quality assurance

Wakefield's HIA framework does not include its own quality assurance guidance; however, the Wales Health Impact Assessment Support Unit (WHIASU) have published a useful resource that indicates the process of evaluation.

[The Quality Assurance Review Framework for HIA published by the WHIASU is available online through this link \(external link\).](#)

# About us



**Public Health**

What happens, for example, when your progress does not register as the system would expect?

Name	Event	Outcome	Description of impact	Recommendation for review or monitoring required
<b>Public Health</b> This section is reserved for public health issues in the planning system, covering accessibility and consultation of planning.				
<b>Planning</b> This section is reserved for planning issues, including the provision of housing, affordable and non-affordable, within the planning system.				
<b>Other</b> This section is reserved for other issues, including those that are not covered by the other sections.				
<b>Not in scope</b> This section is reserved for issues that are not in scope of the system, including those that are not covered by the other sections.				

**Spatial Planning**



# 2024 and beyond

- January 2024 revised Wakefield District Local Plan adopted
- February 2024 Healthy Places Offer in post
- March 2024 New HIA Tool adopted
- April – May 2024 Matrix update
- Ongoing – Evaluating Impact



Health Impact Assessment  
(HIA) for planning tool  
Updated November 2023

Proposal name:

Reference/application number  
(if known):

wakefieldcouncil

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