

HEALTH IMPACT ASSESSMENTS DEVELOPMENT GUIDANCE NOTE

January 2024



1 PURPOSE

Policy DC3 of the Darlington Borough Local Plan 2016 – 2036 requires, in the case of development of 150 or more homes, and all other non-residential major development, the submission of a Health Impact Assessment as part of the application to explain how health considerations have informed the design.

The purpose of this note, and accompanying documents, is to provide applicants with further guidance on the importance of health and wellbeing in planning, on what Health Impact Assessments (HIAs) are, how to determine the level of detail required in a HIA, and to provide a framework which should be used when submitting applications to Darlington Borough Council.

DEFINITION:

The definition of health for the purpose of this guidance is:

'Health is a state of complete physical, mental and social wellbeing and not merely the absence of disease or infirmity'.

WHO, 1948



2.1 POPULATION HEALTH & WELLBEING IN DARLINGTON

Darlington has a population of approximately 108,000 people who experience varied levels of health compared with the England average.

Life expectancy for both men and women has increased over time but remains lower than the England average. Deprivation is higher than average and about 20% (3,940) of children live in lowincome households. There are also marked inequalities in health and wellbeing across the population with some groups of people experiencing very good health, whilst others experience poor health throughout their lifetime.

For example, the life expectancy of people living in the most deprived areas of Darlington is 13.7 years lower for men, and 9.5 years lower for women, than those living in the least deprived areas. There is also a similar gap in healthy life expectancy (years lived in good health) with those people from the most deprived areas living more of their life with disease and disability.

Many of the health issues affecting the population of Darlington are affected by the environment in which people live, work and play (Marmot, 2015). It is widely acknowledged that spatial planning can play an important role in helping to improve the health and wellbeing of the population and can be used to help address the inequalities in health that are seen between communities. It is crucial that new development is created with health and wellbeing in mind, so that existing health inequalities are designed out, and new health inequalities are not created.

DEFINITION:

Health Inequalities:

 Health inequalities are unfair and avoidable differences in health across the population, and between different groups within society. These include how long people are likely to live, the health conditions they may experience and the care that is available to them.



2.2 HOW CAN PLANNING INFLUENCE HEALTH & WELLBEING?

Many factors determine our health and wellbeing and hey often lie outside the health and social care system. These factors are rooted in the social, economic, and environmental circumstances into which we are born, grow, and live. These are often referred to as the wider **determinants of health**. They drive differences, or inequalities, in health and wellbeing between groups of people, and include:

- The quality and security of our housing.
- The environment we live in.
- Employment and education opportunities.
- Access to money and resources.
- Feeling safe and being part of a community.
- Opportunities to live healthy lifestyles.
- Access to healthcare services.

Planning has an important role in setting these determinants and addressing health inequalities. The way in which we build and shape the

environment has great potential to address public health issues, such as obesity and inactivity, which contribute to the burden of ill health in Darlington.

Quality developments can provide an attractive and distinctive environment, promote a healthy lifestyle through walking and cycling routes, provide access to greenspaces that promote mental wellbeing, and can enable the creation of vibrant communities through the provision of new employment opportunities and community services. Equally, poor-quality development can have a sustained long-term negative impact on health and wellbeing, resulting in a potentially avoidable burden on individuals, communities, and on health and care services.

The link between planning and health outcomes is long established and is fully integrated into the National Planning Policy Framework (NPPF), Planning Practice Guidance (PPG), and the National Design Guide. Locally, health and wellbeing is heavily integrated into the Darlington Local Plan (2016—2036).



Figure 1: the Dahlgren and Whitehead model of the main determinants of health.

2.3 VISION FOR A HEALTHY DARLINGTON

A healthy place is one which supports and promotes healthy behaviours and environments and a reduction in health inequalities for people of all ages. It will provide the community with opportunities to improve their physical and mental health, and support community engagement, social interaction, and wellbeing.

Healthy places support people across the life-course, meeting the needs of children and young people as they grow and develop, providing high quality housing and jobs, as well as being adaptable to the needs of an increasingly elderly population and those with dementia and other sensory or mobility impairments.

The Darlington Public Health Strategic Purpose identifies two key priorities:

- To increase life expectancy and healthy life expectancy – living healthier for longer across the life-course.
- To reduce inequalities and inequities between communities.

Addressing both of these priorities requires a focus on the underlying social and environmental factors that influence our health and wellbeing. This includes opportunities to improve health and wellbeing through our built and natural environment.

Darlington Borough Council is committed to using planning to improve health and wellbeing outcomes for its population. Ensuring that we plan and build a health-promoting environment, that improves the health and wellbeing of everyone who live, work, and visit Darlington.



2.4 LEARNING FROM NHS HEALTHY NEW TOWNS PILOT

In 2016, Darlington became an NHS Healthy New Towns pilot site, alongside nine other areas across England. The pilot focused on developing strong local partnerships to explore how the development of new places could provide opportunities to create healthier and connected communities, which have access to integrated, and high-quality health services. The pilot was informed by the latest best practice and research on key areas including green infrastructure, design, sustainable transport, placemaking and the public realm. The evidence and learning gained through this programme has reinforced the importance of embedding opportunities to improve health and wellbeing and tackle inequalities through place-based planning.

The pilot resulted in Darlington developing six Healthy New Towns Design Principles which have been integrated into the Darlington Borough Local Plan 2016 – 2036. Figure 2, from 2017, sets out the design principles. While some of the proposals in Figure 1 were not taken forward into the local plan, the diagram provides a useful framework for identifying opportunities to integrate health and wellbeing into new developments in Darlington.



HEALTHY NEW TOWNS - DESIGN PRINCIPLES

Figure 2: Darlington - Healthy New Towns - Design Principles

2 BACKGROUND

2.5 LEARNING FROM NHS HEALTHY NEW TOWNS PILOT

Additionally, the NHS produced four documents called *Putting Health Into Place* to highlight the results of the Health New Towns pilot programme and to provide guidance for how to consider health in the planning process. Of the four documents,

Deliver, Design & Manage is the most useful for applicants considering how to design health & wellbeing into their developments.



3 PLANNING POLICY CONTEXT

3.1 NATIONAL PLANNING POLICY FRAMEWORK

The National Planning Policy Framework (July 2021) has a presumption in favour of sustainable development. This is based around three dimensions: economic, **social**, and environmental.

The social aspect seeks to "support strong, vibrant and healthy communities, by ensuring that a sufficient number and range of homes can be provided to meet the needs of present and future generations; and by fostering well-designed beautiful and safe places, with accessible services and open spaces that reflect current and future needs and support communities' health, social and cultural well-being".

This aim is also expressed in NPPF Chapter 8: Promoting Healthy and Safe Communities, where Para. 91(c) states that planning policies and decisions should aim to achieve healthy, inclusive, and safe places which **'enable and support healthy lifestyles, especially where this would address identified local health and well-being needs'**.

Examples given in Para. 8(c) include; the provision of safe and accessible green infrastructure, sports facilities, local shops, access to healthier food, allotments, and development layouts that encourage walking and cycling.

The following paragraphs of the NPPF continue the theme of health and well-being and promote both priorities at the heart of the decision-making process:

- Paragraph 98 states that "access to a network of high-quality open spaces and opportunities for sport and physical activity is important for the health and wellbeing of communities".
- Paragraph 124(e) states that planning policies and decisions should support development that "makes efficient use of land, taking into account the importance of securing welldesigned, attractive and healthy places".

- Paragraph 130(f) states that planning policies and decisions should ensure that developments "create places that are safe, inclusive and accessible and which promote health and well-being, with a high standard of amenity for existing and future users".
- Paragraph 185 states that planning policies and decisions should "ensure that new development is appropriate for its location taking into account the likely effects (including cumulative effects) of pollution on health, living conditions and the natural environment, as well as the potential sensitivity of the site or the wider area to impacts that could arise from the development". In doing so they should:
 - mitigate and reduce to a minimum potential adverse impacts resulting from noise from new development – and avoid noise giving rise to significant adverse impacts on health and the quality of life;
 - identify and protect tranquil areas which have remained relatively undisturbed by noise and are prized for their recreational and amenity value for this reason; and
 - limit the impact of light pollution from artificial light on local amenity, intrinsically dark landscapes, and nature conservation.

NOTE:

Further suggested guidance on how to integrate health and wellbeing into developments is available in Section 6 of this guidance note.

3 PLANNING POLICY CONTEXT

3.2 NATIONAL DESIGN GUIDANCE

Health and wellbeing has been extensively integrated into the National Design Guide. The key message is that by doing the basics well, and thereby creating a well designed development, there can be a significant positive impact on health and wellbeing, and harmful negative impacts can be avoided. The National Design Guide presents **10 Characteristics** of a well-designed place which should be used to ensure design quality:

- Context: the location of the development and the attributes of its immediate, local and regional surroundings.
- Identity: the way that buildings, streets and spaces, landscape and infrastructure combine together and how people experience them.
- 3. **Built Form**: the 3D arrangement of blocks, streets, buildings and open spaces. It is the interrelationship between these elements that creates an attractive place to live, work and visit.
- 4. Movement: patterns of movement are integral to well-designed places. They include walking and cycling, access to facilities, parking and the convenience of public transport. Success is measured by how they contribute to the quality and character of the place, not only how well they function.
- Nature: natural features are integrated into well-designed development. They include natural and designed landscapes, high quality public open spaces, street trees, and other trees, grass, planting and water.

- Public Spaces: streets, squares, and other spaces that are open to all.
- Uses: well-designed neighbourhoods need to include an integrated mix of tenures and housing types that reflect local housing need and market demand.
- Homes and Buildings: well-designed homes and buildings are functional, accessible and sustainable. They support the health and wellbeing of their users. Successful buildings also provide attractive, stimulating and positive places for all.
- Resources: conserve natural resource including land, water, energy and materials.
- Lifespan: well-designed places sustain their beauty over the long term. They add to the quality of life of their users and as a result, people are more likely to care for them over their lifespan.



3 PLANNING POLICY CONTEXT

3.3 HEALTH & WELLBEING IN LOCAL POLICY

The following policies of the adopted Darlington Borough Local Plan 2016 – 2036 embed the Healthy New Towns Design Principles required to plan for healthy communities:

- Policy DC1: Sustainable Design Principles and Climate Change
- Policy DC3: Health and Wellbeing
- Policy DC4: Safeguarding Amenity
- Policy DC5: Skills and Training
- **Policy H4**: Housing Mix
- Policy H8: Housing Intensification
- Policy H9: Gypsy and Travellers Accommodation
- Policy ENV1: Protecting, Enhancing and Promoting Darlington's Historic Environment
- Policy ENV4: Green and Blue Infrastructure
- Policy ENV6: Local Greenspace
- Policy ENV9: Outdoor Sports Facilities
- Policy IN1: Delivering a Sustainable Transport Network
- Policy IN2: Improving Access and Accessibility
- Policy IN4: Parking Provision including Electric Vehicles
- Policy IN10: Supporting the Delivery of Community and Social Infrastructure







4 HEALTH IMPACT ASSESSMENTS

4.1 WHAT IS A HEALTH IMPACT ASSESSMENT?

A Health Impact Assessment (HIA) is a practical approach used to evaluate the impacts a proposed development may have on the health and wellbeing of different groups of people. The HIA process also supports developers to work with local communities to develop proposals that improve population health and wellbeing and tackle health inequalities.

The findings of HIAs are used to make recommendations to decision makers as to how any positive health impacts of a particular scheme may be increased and any negative impacts reduced.

HIAs are used to promote sustainable developments that support the creation of strong, vibrant and healthy communities, by:

- **Demonstrating** that the health impacts on different population groups have been properly considered when preparing, evaluating, and determining development proposals.
- Ensuring developments contribute to the creation of a strong, healthy, and equitable society.
- Helping applicants to show that they have worked closely with those directly affected by their proposals to produce designs that take account of the views of the community.
- Identifying and maximising any beneficial impacts on health and wellbeing of a particular development.

4.2 PRINCIPLES OF A HEALTH IMPACT ASSESSMENT

The European Centre for Health Policy (1999) Gothenburg Consensus makes explicit the values of HIA. The HIA process should be:

- open, involving a wide range of stakeholders;
- transparent, including the documenting of the process;
- **ethical**, in its use of evidence and methods of participation;
- equitable, through a presumption in favour of reducing health inequalities;
- **robust**, in its methods for consideration of evidence and participation;

- participatory, by actively engaging with and involving stakeholders from a wide range of organisations through appropriate methods;
- sustainable, through consideration of impacts that are short and long term, direct and indirect, in order to inform sustainable policies, programmes and projects; and
- democratic, emphasising the rights of people to participate in major decisions that affect their lives and, through HIA, enabling people to actively participate and contribute to decision making processes.

HIA's submitted to Darlington Borough Council should demonstrate these values.

4 HEALTH IMPACT ASSESSMENTS

4.3 WHICH DEVELOPMENTS NEED TO UNDERTAKE A HIA?

Policy DC3 of the Local Plan requires, in the case of development of 150 or more homes and all other non-residential 'major' development,

the submission of a Health Impact Assessment as part of the application to explain how health considerations have informed the design.

In general there are three types of HIA: Desktop, Rapid, and Comprehensive. Darlington Borough Council considers that the Local Plan has set a high bar to trigger the need to undertake a HIA. Therefore, it is expected that proposals that meet this threshold should undertake a **Comprehensive Health Impact Assessment** using the Darlington BC Comprehensive HIA Tool.

However, it is recognised that some non-residential major applications, by their nature, may have a limited health impact, and that the scale of a HIA should be proportionate to the scale of development proposed. In such circumstances, the applicant needs to make contact with the **Public Health Team** to discuss the proposal and the level of detail provided in the HIA.

Residential developments of **less than 150 homes** can still have a significant health impact. Therefore, residential developments of 50+ homes are highly encouraged to undertake a HIA of a level of detail proportionate to the development. Such developments are advised to make contact with the Public Health Team at pre-application stage to discuss the HIA process.

NOTE:

A non residential major development is any one or more of the following:

- the winning and working of minerals or the use of land for mineralworking deposits;
- waste development;
- the provision of a building or buildings where the floor space to be created by the development is 1,000 square metres or more;
- development carried out on a site having an area of 1 hectare or more.

NOTE: EARLY ENGAGEMENT

In the case of any development requiring, or considering carrying out a HIA, early engagement with Darlington Borough Council's Public Health Team is strongly encouraged. This will aid in identifying potential health and wellbeing concerns and opportunities early in the design process.

4 HEALTH IMPACT ASSESSMENTS

4.4 HEALTH IMPACT ASSESSMENT PROCESS

A Health Impact Assessment (HIA) is most beneficial when initiated during the design phase of a development, rather than merely serving as a summary report after the fact. The HIA process should commence at a point in the proposal's develop-

ment where the nature and purpose of the proposal are clear, yet early enough to shape its design and implementation. This should occur well before any plans are submitted for a planning application. The assessment needs to be carried out



5 CREATING A HEALTH IMPACT ASSESSMENT

5.1 DARLINGTON COMPREHENSIVE HIA TOOL

Darlington Borough Council has developed a Comprehensive HIA tool to aid applicants in summarising the results of the HIA process. Applicants are expected to use this tool to set out how health and wellbeing has been considered during the design of new developments, to set out how any negative health impacts will be mitigated, and how any positive health impacts will be enhanced.

It is crucial that HIAs consider the impact of a development on a wide-range of factors which influence health and wellbeing. Therefore, the Comprehensive HIA tool is split into twelve themes which have been determined by Darlington Borough Council's Public Health Team, in order to clearly assess the impact of a development on health and wellbeing. Within these themes are various headings and prompt questions that can be used to guide the assessment. HIAs for developments in some areas should pay closer attention to themes that are of particular importance for the local population living in that Ward. The **Ward Level Health Themes Table** (provided on the Council website) identifies areas where evidence suggests a HIA should pay particular attention.

HIAs can use this to initially focus their efforts. However, it must be noted that the Ward Level Health Themes Table is intended purely as a guide, and **applicants should examine all themes and not just those identified as a priority**. HIAs not engaging all the relevant health themes may not be considered acceptable.

Housing	Physical Activity	Diet & Nutrition	کے کی Air Quality & Noise
Transport	Crime & Community Safety	Substance Misuse, Alcohol & Smoking	Mental Health & Wellbeing
Employment & Economy	ကြိုင် မြီဆီဆီ Education & Skills	Climate Change	Access to Services

Figure 3: Darlington's 12 HIA Assessment Themes

5 CREATING A HEALTH IMPACT ASSESSMENT

5.2 USING THE COMPREHENSIVE HIA TOOL - SECTIONS 1-5

The following section provides guidance on how the Comprehensive HIA Tool is structured, and provides some notes on important details that need to be evidenced:

- Section 1: Asks which specific population groups will be most impacted by the proposed development. Applicants will also need to detail where and how specific population groups will be impacted throughout the other sections of the Comprehensive HIA Tool.
- Section 2: Asks which wards of the Borough will be most impacted by the proposal. This helps provide a general overview of the health impact of the scheme but throughout the HIA applicants should still consider the effects of the development beyond the immediate wards their development is located in.
- Section 3: Asks for a brief summary of the proposal. This should include a physical summary of the development (*e.g. 500 dwellings at Douglas Gardens...*) and a introduction to the key health impacts identified in the HIA.
- Section 4: Asks for details of the various sources of information used to identify potential health impacts, as well as actions that can be taken to minimise negative or maximise positive impacts. It is not necessary to give a detailed review of health indicator data for Darlington. Focus on what is relevant to your application. This is also where applicants should detail any relevant literature reviews as well as experts/

practitioners/agencies with specialist knowledge who have been consulted/ engaged during the HIA process.

 Section 5: Asks for details of the community engagement undertaken as part of the HIA process. Involving the local residents, councillors, and other local stakeholders, is essential to assessing how a proposal may negatively or positively impact on their living conditions, a perspective that can only come from lived experience. Local people can provide the contextual knowledge that is often missing from purely quantitative evidence.

5 CREATING A HEALTH IMPACT ASSESSMENT

5.2 USING THE COMPREHENSIVE HIA TOOL - SECTION 6

Section 6 sets out a series of tables based around the twelve themes. Each theme is then subdivided into several headings that enquire into specific elements of proposals. Not all headings will be relevant to all proposals. However, do not delete headings that are not considered - simply record that the application will have no impact.

Each theme also comes with a series of prompt questions. These are to provide inspiration as to which health and wellbeing issues could need to be considered for each heading. They are not a definitive list.

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.

Assess the impact using the following coding:

Symbol	Coding
++	Definitively Positive
+	Probably Positive
0	No Change
-	Probably Negative
	Definitely Negative
?	Unclear

If the proposal will impact on different groups or populations differently please list these separately. Section 6 asks applicants to consider the **impacts** of a proposal and **certainty** (based on strength of evidence) that impact will occur.

The tool then contains a field where a **description** of the impact (and how it may impact different groups of the population) should be completed.

Finally, in Action the applicant should detail measures to be used to mitigate any negative impacts on health and wellbeing and actions to enhance positive impacts.

CERTAINTY

Think about how certain you are about your assessment for each impact. As far as possible your decisions should be supported using available evidence.

Assess the certainty using the following coding:

Symbol	Coding
!!!	High Certainty
!!	Medium Certainty
!	Low Certainty
?	Uncertain

NOTE:

Each section must clearly set out what evidence (E.g. Literature & Policy Review, Health Data, Best Practice Examples) has been used to arrive at the impacts and actions detailed.

6 GUIDANCE, SUPPORT & RESOURCES

6.1 GUIDANCE DOCUMENTS

The following guidance documents have been selected as examples of best practice for creating developments that put health and wellbeing at the heart of places.



6 GUIDANCE, SUPPORT & RESOURCES

6.1 GUIDANCE DOCUMENTS



TRANSPORT: The 20-Minute Neighbourhood

An introductory guidance document on 20-minute neighbourhood for local planning authorities. It outlines a set of principles for success with case studies from across England.

<u>Access</u>



CRIME & COMMUNITY SAFETY: Secured by Design

A series of authoritative Design Guides to assist the building, design and construction industry to incorporate security into developments

<u>Access</u>



MENTAL HEALTH & WELLBEING: RTPI Practice Advice

Advice on how planners can take account of mental health when making changes to the built environment.





MENTAL HEALTH & WELLBEING: Suicide Prevention

General guidelines on suicide prevention methods. While new development in Darlington has few highrise buildings, the information is just as relevant to structures and therefore needs to be considered.

<u>Access</u>

6 HELP, SUPPORT & USEFUL RESOURCES

6.2 CONTACTS

Help and support is available from:

- DBC Public Health Team at public.health@darlington.gov.uk
- DBC Planning Policy Team at planning.policy@darlington.gov.uk

Developers are encouraged to seek advice at an early stage to ensure that considerations around health and wellbeing can be incorporated into proposals prior to final submission. Applicants are encouraged to submit a statement as part of a pre-application which analyses the potential impact on health and wellbeing, particularly considering health inequalities, and sets out initial design concepts which will enable the creation of a healthy place.

6.3 DATA SOURCES

The following data sources providing data on the health needs of the local population may be of use for those undertaking HIAs:

TITLE	LINK	DESCRIPTION
Darlington Borough Council Ward level data	<u>https://</u> darlington.communityinsight.org/	Community mapping and reporting tool with instant access to neighbourhood level data. View, compare and report on datasets through maps, dashboards and reports
Local Health	https://localhealth.org.uk/	Provides health profiles for geographical areas through- out England.
Neighbourhood Statistics	<u>http://</u> neighbourhood.statistics.gov.uk/	Datasets describing the characteristics of a neighbour- hood, with a particular focus on deprivation. Includes results from the 2001, 2011 and 2021 Census and other official government statistics.
NOMIS	https://www.nomisweb.co.uk/	Official census and labour market statistics for local areas throughout the UK.