Croydon Local Plan: Strategic Policies Partial Review and Detailed Policies and Proposals (Preferred and Alternative Options)

Health Impact Assessment Scoping Report

September 2015

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The Croydon Local Plan (Strategic Policies Partial Review and Detailed Policies and Proposals) Health Impact Assessment - Scoping Report - September 2015

Introduction

Background

The health and well-being of individuals is influenced by the communities in which they live. People's health is affected by the nature of their physical environment; living in poor housing, in a deprived neighbourhood with a lack of access to green spaces impacts negatively on physical and mental health.[1]

The overall vision for moving public health into the local authorities is to put health and wellbeing at the heart of everything they do, thereby helping people to lead healthier lives, both mentally and physically.[2] This means: Including health in all policies so that each decision seeks the most health benefit for the investment, and asking key questions such as "what will this do for the health and wellbeing of the population?" and "will this reduce health inequalities locally?"[3]

The Croydon Local Plan: Strategic Policies was adopted in April 2013 and sets out the spatial vision for the borough up to 2031. It contains strategic objectives and planning policies for the growth, planning and management of development in the borough. A partial review of the Strategic Policies is underway to take account of the Further Alterations to the London Plan (2015), changes to employment policies and a move from Local Areas of Special Character to Local Heritage Areas.

The Croydon Local Plan: Detailed Policies and Proposals is currently being prepared and will provide further detailed development management policies to the Strategic Policies. The plan will also contain site specific allocations for a range of uses including residential, schools, healthcare facilities, transport and gypsy and travellers. Once adopted the Detailed Policies and Proposals will replace the currently saved polices of the Croydon Unitary Development Plan.

Croydon like many other places has a number of health inequalities. The key facts and statistics surrounding some of these local health issues are highlighted in the 2015 Annual Public Health report. The Place and Public Health departments will work together to ensure health and wellbeing issues are considered and addressed in future planning activities. Croydon Local Plan: Strategic Policies – Policy SP 6 states the Plan will conserve and create spaces and buildings that foster safe, healthy and cohesive communities.

What is a Health Impact Assessment?

A Health Impact Assessment (HIA) is 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.[4]

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[1] Fair Society, Healthy Lives: The Marmot Review (2010)
[2] Department of Health (2011) Public Health in Local Government
[3] Department of Health (2011) Public Health in Local Government
[4] European Centre for Health Policy, WHO Regional Office for Europe. Gothenburg Consensus Paper (1999)

A HIA helps ensure that health and wellbeing are being properly considered in planning policies and proposals. HIAs can be done at any stage in the development process, but are best done at the earliest stage possible.[5]

<u>Why conduct a HIA on Croydon's Local Plan?</u>

Urban planning can have a significant impact on health and wellbeing of communities because many aspects of planning can influence the social determinants of health. Planning can support the creation of healthy communities and environments through good design, promoting active travel and physical activity and providing access to facilities and services and high quality open spaces.

The Marmot Review *(Fair Society, Healthy Lives)* published in 2010 confirmed that individual health is influenced by wider determinants such as income, education, local environmental quality and employment (determinants of health). The review set out the following six policy objectives for reducing health inequalities:

1. Give every child the best start in life
2. Enable all children, young people and adults to maximise their capabilities and have control over their lives
3. Create fair employment and good work for all
4. Ensure healthy standard of living for all
5. Create and develop healthy and sustainable places and communities
6. Strengthen the role and impact of ill-health prevention

National Context

Marmot's objective relating to the creation and development of healthy and sustainable places and communities informs the decision to conduct a HIA on the Local Plan. There is an established national policy and guidance framework which provides the context for this work:

- Paragraph 69 of the National Planning Policy Framework (NPPF) states that the planning system can play an important role in facilitating social interaction and creating health, inclusive communities.
- The National Planning Practice Guidance (NPPG) states that local planning authorities should ensure that health and wellbeing and health infrastructure are considered in local and neighbourhood plans and in planning decision making.
- Policy 3.2 of the London Plan: Improving health and addressing health inequalities states that the Mayor will take account of the potential impact of development proposals on health and health inequalities within London. It also states that the impact of major development proposals on health and wellbeing of communities should be considered, for example through the use of HIAs and that boroughs should monitor policies and interventions for their impact on reducing health inequalities.

Local Context

The two Local Plan documents; Strategic Policies and the Detailed Policies and Proposals are key strategy and statutory documents for local growth and development. Whilst there is no statutory requirement, conducting an HIA is considered best practice because it enables planners to engage key health and wellbeing stakeholders in the planning process to

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[5] The London Healthy Urban Development Unit (HUDU)

address the health impacts of Local Plans and development and regeneration proposals to improve health outcomes in new and existing communities.[6]

<u>Objectives of the HIA</u>

The main of objective of conducting a HIA is to ensure that where possible, the Strategic Policies and Detailed Policies and Proposals of Croydon's Local Plan actively promote health and wellbeing in the local population, reduce health inequalities and do not actively damage health and wellbeing.

Undertaking the HIA also builds upon previous work undertaken by the Spatial Planning team, Public Health and NHS partners in assessing the impact of proposed developments on existing health infrastructure and identifying where additional facilities may be required over the lifetime of the Plan. The HIA can also identify where proposed development may impact on health and wellbeing services required in the borough.

The HIA will also act as an initial test case for collaboration between the Place Department and Public Health within the Council with a view to promoting new collaborative engagements in the future.

Proposed Approach to the Health Impact Assessment

The proposed approach is to conduct a HIA of the Strategic Policies and the Detailed Policies and Proposals. The HIA will be undertaken in tandem with the production of the Strategic Policies and the Detailed Policies and Proposals and will inform the Proposed Submission and Submission versions of both documents. The HIA will be undertaken jointly with officers in the Council's Spatial Planning and Public Health teams.

<u>HIA Process</u>

The process of HIA will be informed by the 2010 Department of Health publication 'Health Impact Assessment of Government Policy'. The stages of the proposed HIA are as follows:

- Stage 1 – Screening
- Stage 2 – Identify health impacts
- Stage 3 – Identify impacts with important health outcomes
- Stage 4 – Quantify and describe impacts
- Stage 5 – Recommendations for action and monitoring

The Local Plan policies will be initially screened and assessed against four questions to determine whether or not there will be a health impact (Appendix 3, Table 1). The screening questions are below:

1. Will the policy have a direct impact on health, mental health and wellbeing?
2. Will the policy have an impact on social, economic and environmental living conditions that would indirectly affect health?
3. Will the policy affect an individual's ability to improve their own health and wellbeing?
4. Will there be a change in demand for or access to health and social care services?

If the answer to any of the screening questions is yes, it is proposed that the policies are evaluated against a selection of outcomes determined to be priority areas for Croydon from

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[6] The London Healthy Urban Development Unit (2013). HUDU Planning for Health. Rapid Health Impact Assessment Tool

three sources; the first three priorities of Croydon's Joint Health and Wellbeing Strategy (Appendix 1), the Public Health Outcomes Framework (Appendix 2) and the JSNA Key Dataset produced by Croydon's public health intelligence team. It is proposed that the outcomes are selected by the stakeholders during the engagement process and the selected outcomes used to identify, quantify and describe potential health impacts. The HIA will then identify possible mitigation measures and will make recommendations which will inform the production of the Local Plan (Appendix 3, Table 2).

For the Proposals (site allocations) the HIA will assess the impact of proposed developments on the health and wellbeing of specific populations and specific places of the borough using the identified priorities and outcomes above (Appendix 3, Table 3).

The final stage of the HIA will identify recommendations for monitoring and parameters for evaluating and updating the HIA. Specifically, the evaluation process[7] will be in three parts:
- The process evaluation which will gauge the HIA's quality according to established standards and the original plan for the HIA
- The impact evaluation which will assess the HIA's impact on decision-making and its success according to the stated objectives
- The outcome evaluation which will assess the changes in health status and health determinants as the decision is implemented where feasible

Monitoring tracks indicators that can be used to inform process, impact and outcome evaluations.[8]

Timeline of the HIA

The HIA Scoping Report will be consulted on in November 2015 alongside Preferred and Alternative Options consultation on the Strategic Policies Partial Review (Preferred and Alternative Options) and the Detailed Policies and Proposals (Preferred and Alternative Options).

Once the consultation period has concluded, the HIA will take place to inform both versions of the Plan to be submitted for Examination in late 2016.

Internal and External Engagement

The HIA will be jointly undertaken by Spatial Planning and Public Health. Other stakeholders will include other Council departments such as housing, transport, environmental health and pollution. NHS partners will also be involved in the HIA process including the Croydon CCG, NHS England, NHS Property Services and Croydon Health Services NHS Trust.

The HIA Scoping Report will also be consulted on as part of the consultation on the Local Plan in November 2015. It is proposed that input from external stakeholders is captured through stakeholder meetings or focus groups on the proposed approach and elements of the HIA. These will form part of the consultation events on the Local Plan.

The stakeholders that will be targeted include representatives from voluntary and community groups as well as other groups and individuals who can provide experience and advice on the potential impact a policy may have on specific groups and how these can be mitigated.

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[7] The Pew Charitable Trusts (2014) The Health Impact Project. The HIA Process
[8] The Pew Charitable Trusts (2014) The Health Impact Project. The HIA Process

Comments are welcome on the proposed approach set out in this Scoping Report for undertaking a HIA on the Strategic Policies Partial Review and the Detailed Policies and Proposals. The Council welcomes comments on the following questions:

1. Do you agree with the Council's methodology for undertaking a Health Impact Assessment on the Strategic Policies and Detailed Policies and Proposals?
2. Do you agree with the approach to assess the Local Plan using indicators from the Croydon Joint Health and Wellbeing Strategy, the Public Health Outcomes Framework and Croydon's JSNA Key Dataset?
3. Which indicators from the Public Health Outcomes Framework are the most appropriate for the HIA? Are there any others which should be used?

Evaluating the HIA

The evaluation of the HIA will be undertaken jointly by Spatial Planning and Public Health. There will be a number of opportunities during the consultation and production process of the Strategic Policies and the Detailed Policies and Proposals to evaluate sections of the HIA. The evaluation will seek to answer the following questions:

1. Is there evidence that findings from the HIA have had an impact on revisions to the Local Plan?
2. Has the HIA improved collaboration between public health and planning?
3. Have results and recommendations from the HIA been submitted to cabinet?
4. Have the HIA results had an impact on related work in other council departments?
5. Is the HIA an essential tool to embed public health in key Council decisions?

Appendix 1 – Croydon Joint Health and Wellbeing Strategy: Priorities for action

1. Giving our children a good start in life	2. Preventing illness and injury and helping people recover	3. Preventing premature death and long term health conditions
Reduce **low birth weight**	Reduce **smoking** prevalence	Early detection and management of people at risk for **cardiovascular diseases and diabetes**
Increase **breastfeeding** initiation and prevalence	Reduce **overweight and obesity** in adults	Early detection and treatment of **cancers**
Improve the uptake of childhood **immunisations**	Reduce the harm caused by **alcohol** misuse	
Reduce **overweight and obesity** in children	Early diagnosis and treatment of **sexually transmitted infections** including HIV infection	
Improve children's **emotional and mental wellbeing**	Prevent illness and injury and promote recovery in the **over 65s**	
Reduce the proportion of **children living in poverty**		
Improve **educational attainment** in disadvantaged groups		

Appendix 2 - Public Health Outcomes Framework indicators

1	Improving the wider determinants of health

Objective

Improvements against wider factors which affect health and wellbeing and health inequalities

Indicators

1.1 Children in poverty
1.2 School readiness
1.3 Pupil absence
1.4 First time entrants to the youth justice system
1.5 16-18 year olds not in education, employment or training
1.6 Adults with a learning disability/in contact with secondary mental health services who live in stable and appropriate accommodation
1.7 People in prison who have a mental illness or a significant mental illness
1.8 Employment for those with long-term health conditions including adults with a learning disability or who are in contact with secondary mental health services
1.9 Sickness absence rate
1.10 Killed and seriously injured casualties on England's roads
1.11 Domestic abuse
1.12 Violent crime (including sexual violence)
1.13 Re-offending levels
1.14 The percentage of the population affected by noise
1.15 Statutory homelessness
1.16 Utilisation of outdoor space for exercise/health reasons
1.17 Fuel poverty
1.18 Social isolation
1.19 Older people's perception of community safety

2	Health improvement

Objective

People are helped to live healthy lifestyles, make healthy choices and reduce health inequalities

Indicators

2.1 Low birth weight of term babies
2.2 Breastfeeding
2.3 Smoking status at time of delivery
2.4 Under 18 conceptions
2.5 Child development at 2-2½ years
2.6 Excess weight in 4-5 and 10-11 year olds
2.7 Hospital admissions caused by unintentional and deliberate injuries in under 18s
2.8 Emotional well-being of looked after children
2.9 Smoking prevalence – 15 year olds
2.10 Self-harm
2.11 Diet
2.12 Excess weight in adults
2.13 Proportion of physically active and inactive adults
2.14 Smoking prevalence – adults (over 18s)
2.15 Successful completion of drug treatment
2.16 People entering prison with substance dependence issues who are previously not known to community treatment
2.17 Recorded diabetes
2.18 Alcohol-related admissions to hospital
2.19 Cancer diagnosed at stage 1 and 2
2.20 Cancer screening coverage
2.21 Access to non-cancer screening programmes
2.22 Take up of the NHS Health Check programme – by those eligible
2.23 Self-reported well-being
2.24 Injuries due to falls in people aged 65 and over

3	Health protection

Objective

The population's health is protected from major incidents and other threats, whilst reducing health inequalities

Indicators

3.1 Fraction of mortality attributable to particulate air pollution
3.2 Chlamydia diagnoses (15-24 year olds)
3.3 Population vaccination coverage
3.4 People presenting with HIV at a late stage of infection
3.5 Treatment completion for Tuberculosis (TB)
3.6 Public sector organisations with a board approved sustainable development management plan
3.7 Comprehensive, agreed inter-agency plans for responding to public health incidents and emergencies

4	Healthcare public health and preventing premature mortality

Objective

Reduced numbers of people living with preventable ill health and people dying prematurely, whilst reducing the gap between communities

Indicators

4.1 Infant mortality
4.2 Tooth decay in children aged 5
4.3 Mortality rate from causes considered preventable
4.4 Under 75 mortality rate from all cardiovascular diseases (including heart disease and stroke)
4.5 Under 75 mortality rate from cancer
4.6 Under 75 mortality rate from liver disease
4.7 Under 75 mortality rate from respiratory diseases
4.8 Mortality rate from infectious and parasitic diseases
4.9 Excess under 75 mortality rate in adults with serious mental illness
4.10 Suicide rate
4.11 Emergency readmissions within 30 days of discharge from hospital
4.12 Preventable sight loss
4.13 Health-related quality of life for older people
4.14 Hip fractures in people aged 65 and over
4.15 Excess winter deaths
4.16 Estimated diagnosis rate for people with dementia

0	Vision

Objective

To improve and protect the nation's health and wellbeing and improve the health of the poorest fastest

Indicators

0.1 Increased life expectancy and healthy life expectancy
0.2 Reduced differences in life expectancy and healthy life expectancy between communities

Appendix 3 – Matrices for the HIA

Table 1: Screening

Strategic Objective/Policy	Will the policy have a direct impact on health, mental health and wellbeing?	Will the policy have an impact on social, economic and environmental living conditions that would indirectly affect health?	Will the policy affect an individual's ability to improve their own health and wellbeing?	Will there be a change in demand for or access to health and social care services?	Is a Health Impact Assessment Required?

Table 2: Health Impact Assessment for Strategic Policies and Detailed Policies

Strategic Objective/Policy	Assessment of impact of policy on Croydon's health and well-being priorities	Assessment of impact of policy against relevant indicators from the PHOF	Key evidence	Recommendations

Table 3: Health Impact Assessment for Detailed Proposals

Detailed Proposal	Assessment of impact of proposal on Croydon's health and well-being priorities	Assessment of impact proposal against relevant indicators from the PHOF	Will the proposal have an impact on the health and wellbeing of the existing population/place?	Recommendations