



Committee and Date
Report to Cabinet 12 February
2020

Item

Health and Wellbeing in All Policies

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1. Summary

- 1.1 This report defines a proposed approach to Health and wellbeing in all Policies (HiAP) approach for all Shropshire Council policies to support the delivery of the Council's public health duties.
- 1.2 Health in All Policies has been defined by the World Health Organisation as an approach to public policies across sectors that systematically takes into account the health and wellbeing implications of decisions, seeks synergies between council policies and strategies, and avoids harmful health impacts to improve population health.
- 1.3 As part of the health reforms brought in by the Health and Social Care Act 2012, local authorities have a duty to take such steps as they consider appropriate for improving the health of the people in their area. The proposed introduction of the Health and Wellbeing in All Policies is aligned with the repositioning of the Public Health team in order that the Council's Public Health duties will be delivered through a Hub and Spoke model which will create greater connectivity and alignment with other Council services, support the delivery of a wide range of Health and Wellbeing priorities and demonstrate optimal return on Public Health investments.

2. Recommendations

That Cabinet approve:

- 2.1. The adoption of the Health and Wellbeing in All Policies approach by Shropshire Council
- 2.2. That phased "roll out" approach is taken to implementing the policy, focusing first on the Public Health Grant Substitutions and the "Healthy Environment" Strategic Priority
- 2.3. That the Health and Wellbeing in All Policies approach is underpinned by a Health Impact Assessment process that includes including a box into the Cabinet report and is supported with training and awareness raising.

3.0 REPORT

- 3.1 Health and health inequalities are largely determined by living conditions and wider social, economic, environmental, cultural and political factors, as opposed to any health condition. These are important factors over which Shropshire Council has significant influence.
- 3.2 The introduction of Health in All Policies is important because it supports populations in living better quality lives, and for longer; this in turn supports the delivery of local priorities, including economic priorities; it also supports the integration of wellbeing into local services.
- 3.3 The integration of the Health and wellbeing in All Policies Approach is shown in Figure 1.



Figure 1

- 3.4 Shropshire Council has committed to Innovate to Thrive and to address 6 strategic priorities over the next 12 -24 months.
1. More people with a suitable home
 2. Care for those in need at any age
 3. A good place to do business
 4. A healthy environment
 5. Sustainable places and communities
 6. Embrace our rurality
- 3.5 The public health team are working across Shropshire Council and with partners to embed health and wellbeing into projects, programmes and policies underpinning

the delivery of the six priorities and maximising in Shropshire Councils policies, improved health and wellbeing outcomes for the people of Shropshire.

- 3.6 It is proposed to act to formalise the embedding of Health in all Policies that are approved by Shropshire Council. This can be operationalised through formal and informal mechanisms. The formal mechanism is the introduction of health impact assessment for all policies; the informal mechanism is through identifying and analysing policy trends and shifts in sectors other than local government and taking advantage of those shifts e.g. place making, the sustainability and transformation partnership. Also, through embedding wellbeing and health into work practices, services and policies.

3.8 Formal mechanism to introduce health and wellbeing in all policies

- i. Health Impact Assessment (HIA) is the technical name for a common-sense idea. It is a process that considers the wider effects of local policies and initiatives and how they, in turn, may affect people's health and wellbeing.
- ii. Health Impact Assessment is a means of assessing both the positive and negative health impacts of a policy. It is also a means of developing good evidence-based policy using a structured process to review the impact.
- iii. A Health Impact Assessment seeks to determine how to maximise health benefits and reduce health inequalities. It identifies any unintended health consequences. These consequences may support the policy or may lead to suggestions for improvements.
- iv. The proposed framework sets out a clear pathway through which a policy can be assessed and impacts with outcomes identified. It also sets out the support mechanisms for maximising health benefits.
- v. It is proposed that a 5-stage approach to implementation Health Impact Assessment of Shropshire Council policies is applied to all policies that are subject to approval.
- vi. This Health Impact Assessment approach has a similar framework to the existing Equality and Social Inclusion Impact Assessment.
- vii. The 5 stages proposed are:

Stage 1: Screening – determining whether or not a Health Impact Assessment is necessary (Appendix 1). A HIA will not be required for every policy or programme.

Stage 2: Identifying health impacts – developing a long list of impacts on the health of the population

Stage 3: Identifying impacts with important health outcomes – determining whether impacts are universal: affect some community groups disproportionately; are permanent or reversible; are short, medium or long-term; could be publicly sensitive; or could have cumulative and synergistic effects.

Stage 4: Quantifying or describing important health impacts – reaching a qualitative and / or quantitative judgement about the important health impacts and their potential costs and benefits.

Stage 5: Recommendations to achieve most health gains – setting out how the policy or project could be amended to maximise health benefits and reduce health inequalities

Figure 2 is an overview of the process.

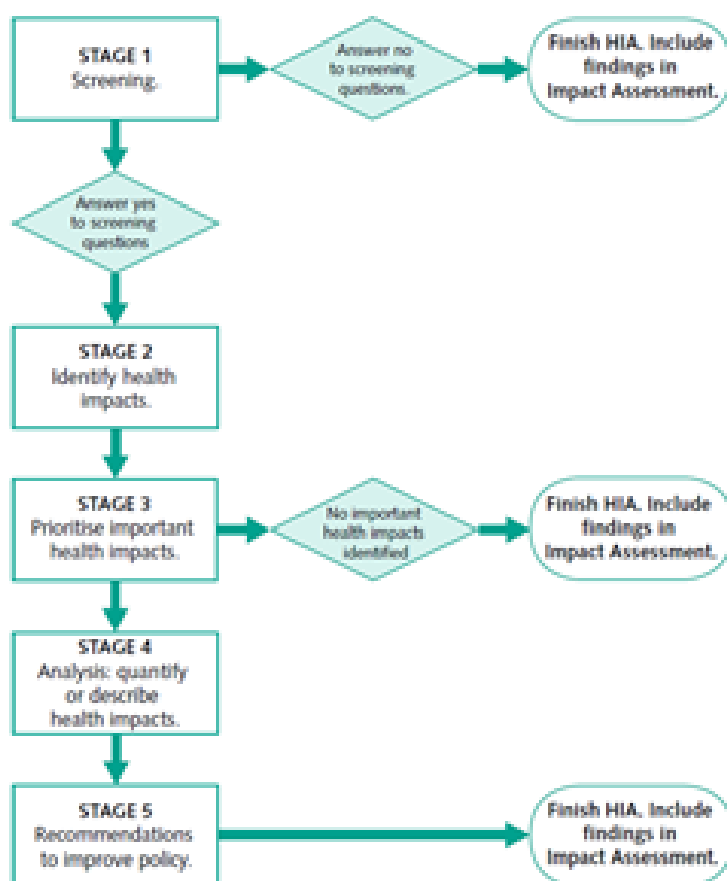


Figure 2: Health Impact Assessment Process

Source: Department of Health (2010) *Health Impact Assessment of Government Policy* p.7.

- viii. When policies are highlighted through screening as having an impact on prevention and wellbeing but there is no indication that a full Health Impact Assessment is needed the responsible officer will be supported to make the necessary evidence-based changes to the policy before seeking full approval.
- ix. When policies that are highlighted through screening to have a significant negative impact on the health of certain groups of people across Shropshire or in specific locations the responsible officer will be supported to facilitate a full Health Impact Assessment
- x. If this outline approach is approved the following approach will be taken:

- a. A full suite of Health Impact Assessment supporting documents will be written and presented to Cabinet for approval
- b. Appropriate Health Impact Assessment E-learning for managers training will be identified
- c. The mode for rolling out training across Shropshire Council will be agreed

3.9 Informal mechanism to support health and wellbeing in all policies

- i. It is proposed to further embed health and wellbeing into work practices, services and policies.
- ii. It is proposed to embed wellbeing and prevention into practices by embedding knowledge and skills into team job descriptions where appropriate and reviewing the knowledge and skills of staff during professional appraisal. This process has already begun with service teams that are signed up to the Public Health grant substitutions Memorandum of Understanding¹.
- iii. It is proposed to enhance practices by requiring Council staff in defined roles to maintain and update knowledge and skills in wellbeing and prevention so that staff have knowledge of wellbeing, mental and physical, e.g. Healthy Conversations, Making Every Contact Count + & Mental Health First Aid. The defined roles are yet to be agreed.
- iv. One way of supporting staff development is to incorporate skills and knowledge training into LEAP. It is proposed to investigate the opportunities to deliver staff update through e-learning.
- v. It is proposed to further embed wellbeing and prevention into services by supporting and enabling staff to:
 - a. support residents and communities through other integrated health and social care programmes e.g. Let's Talk Local, the social prescribing programme, neighbourhood care networks etc.

4. Risk Assessment and Opportunities Appraisal

- 4.1. Service delivery is driven by policies. Policies are important means of minimising negative health impacts and maximising positive health impacts for the population of Shropshire.
- 4.2. Clear and concise guidance documents will be required to ensure that the Health Impact Assessment process is understood by all those who need to understand. The process is a similar approach to Environmental Health Impact Assessments and the time commitment to produce would be estimated to take a similar time, however, on larger programmes more resource maybe required to complete the work as outlined in this paper.

¹ Public health substitutions Memorandum of Understanding are held between services receiving Public Health grant funding and the Director of Public Health.

- 4.3. Skills in undertaking Health Impact Assessment will be required by Officers. It is planned to source and offer e-training in Health Impact Assessments to managers. It is also planned to source and offer training and e-training in Healthy Conversations, Making Every Contact Count Plus, and Mental Health First Aid; resources for this training have already been identified at no cost to the organisation.
- 4.4. Resources will be required to support the implementation of the Health Impact Assessment process. The specialist support resources will be provided by the Public Health Team.
- 4.5. Resources will be required to support the implementation of skills and knowledge development. The specialist support resources will be provided by the Public Health Team, training resources will be sought through other means including external funding.
- 4.6. In-depth full Health Impact Assessment requires specialist expertise which may need to be procured externally. The Public Health Team will provide support to any team that is required to procure a Health Impact Assessment.
- 4.7. Protected groups are at greater risk of poor health, the Health Impact Assessment process reduces health inequalities, particularly for protected groups.

5. Climate Change Appraisal

- 5.1 **Energy and fuel consumption.** Delivery of the proposed action will be on-line and through a low value tender by an external Health in All Policies training provider. Proposed on-line action will have a neutral impact on heating and energy bills and the need to travel. The proposed low value tender will adhere to the Council's Procurement Strategy <https://www.shropshire.gov.uk/media/5849/procurement-strategy.pdf> which requires environmentally sustainable purchasing.
- 5.2 **Renewable energy generation.** Delivery of the proposed action will embed Health in All Policies through formal and informal processes to assess the impact of policies on health and wellbeing and to support the workforce to embed health and wellbeing into practice. These actions will have a neutral impact on renewable energy generation.
- 5.3 **Carbon offsetting and mitigation.** Delivery of the proposed action will embed Health in All Policies through formal and informal processes to assess the impact of policies on health and wellbeing and to support the workforce to embed health and wellbeing into practice. These actions will have a neutral impact on carbon offsetting and mitigation.
- 5.4 **Climate Change adaptation** Delivery of the proposed action will embed Health in All Policies to embed health and wellbeing into policy and practice. These actions will support Shropshire to adapt to the effects of extreme weather and improve resilience to increased risks to the health and well-being of Shropshire's residents and economy.

Extreme weather: To deal with the impact of extreme weather conditions e.g. increases in the number of exposures to high temperature days each year. The

proposed action will build health and wellbeing protection and prevention measures into Council policies. A prevention measure would be consideration of tree bough shade to protect against heatwaves in summer months. This requirement would be embedded in the Local Development Plan as a requirement of the Green Infrastructure Strategy. A measure of outcome would be excess summer deaths.

Improved resilience to increased risks to health and wellbeing:

The proposed action will build a health impact assessment into the development of each Council policy. The health impact assessment will include a requirement to consider the climate change risks to health and wellbeing and to address those risks. The Health in All Policies approach provides Shropshire Council with a process for future proofing policy against health and wellbeing climate change risks. An example is health impact assessment of the Local Transport Strategy as a structured approach to identifying the risks and mitigations to children and adults of exposure to poor quality air, particularly particulates; alternatively identifying the benefits, risks and mitigations of active travel.

6. Financial Implications

- 6.1 A World Health Organisation analysis of Health in All Policies found it is a cost-effective intervention². Health in All Policies is a transformative process that requires interorganisational and intersectoral working; staff with a skill set and knowledge to implement the principles of Health in All Policies.
- 6.2 The return on investment is dependent on the intervention, return on investment for return to employment is approximately £3.00 for every £1.00 spent, return on investment for social care, reduction in social isolation £3.75 for every £1.00 spent and the benefit of getting one more child walking to school could be up to £768³.
- 6.3 Resources required to implement Health in All Policies are expertise, leadership, project management, staff skills and knowledge, governance. The absolute costs are not currently known, approximate initial costs are included below:

Training costs:

£2000 to localise Health in All Policies training package

£5000 to deliver training (funding has been secured externally for 2019/20)

Investment of staff time approximately 30-45 minutes per member of staff

Intersectoral workshops: £500:

Staffing Time and Resources

It is proposed that the investment costs above are funded from budgets allocated within the Public Health ring fenced grant and will not impact on Council base budgets.

- 6.4. Staff resources would be required to support embedding Health in All Policies. In the short-term it is proposed to review policies and strategies linked to healthy environment e.g. Transport plan, Climate Change Strategy, Health and Wellbeing

² http://www.euro.who.int/_data/assets/pdf_file/0007/188809/Health-in-All-Policies-final.pdf

³ <https://www.kingsfund.org.uk/sites/default/files/media/making-case-public-health-interventions-sep-2014.pdf>

Strategy. In the long -term Shropshire Council has in excess of 40 strategies which would require review and update in the long term.

7. Background

- 7.1 The proposed introduction of the Health and wellbeing in all Policies is an outcome of the need to embed prevention and wellbeing into Shropshire Council policies and practices.
- 7.2. The proposed introduction of the Health and Wellbeing in All Policies is aligned with the repositioning of the Public Health team in order that the Council's Public Health duties will be delivered through a Hub and Spoke model which will create greater connectivity and alignment with other Council services, support the delivery of a wide range of Health and Wellbeing priorities and demonstrate optimal return on Public Health investments.

List of Background Papers (This MUST be completed for all reports, but does not include items containing exempt or confidential information)

Department of Health (2010) Health Impact Assessment of Government Policy

Cabinet Member (Portfolio Holder)

Dean Carroll

Local Member

All

Appendices

Appendix 1