

**Shropshire Council**  
**Equality, Social Inclusion and Health Impact Assessment (ESHIA)**  
**Stage One Screening Record 2026**

**A. Summary Sheet on Accountability and Actions**

<b>Name of proposed service change</b>
<p><b>Shropshire Local Plan</b></p> <p>The next Shropshire Local Plan will establish a vision, measurable outcomes and a spatial strategy for the sustainable development of Shropshire over the period to 2046. To support achievement of this spatial strategy the next Local Plan will include site allocations and local planning policy.</p> <p>The next Shropshire Local Plan will also form the next Mineral and Waste Plan for Shropshire. This enables a joined-up approach to planning in Shropshire.</p> <p><i>Stage: Scoping Consultation</i></p>

<b>Name of the officer carrying out the screening</b>
Daniel Corden – Principal Planning Policy Officer

<b>Decision, review, and monitoring</b>		
<b>Decision</b>	<b>Yes</b>	<b>No</b>
Initial Stage One ESHIA Only?	X	
Proceed to Stage Two Full ESHIA or HIA (part two) Report?		X

***If completion of a Stage One screening assessment is an appropriate and proportionate action at this stage, please use the boxes above, and complete both part A and part B of this template. If a Full or Stage Two report is required, please move on to full report stage once you have completed this initial screening assessment as a record of the considerations which you have given to this matter.***

<b>Assessment of likely neutral, negative impact or positive impact of the service change in terms of equality and social inclusion considerations</b>
<p>Subject to approval, the next Shropshire Local Plan will be at the ‘scoping’ consultation stage. This is the first of three formal stages of consultation to inform the next Local Plan, seeking views on:</p> <ul style="list-style-type: none"> <li>• The key priorities for the vision and measurable outcomes for the delivery of the next Local Plan.</li> <li>• The key considerations for identifying a spatial strategy to manage the level and distribution of development in Shropshire.</li> <li>• The approach to identifying and assessing potential site allocations.</li> <li>• Matters that would benefit from being addressed by local planning policies to complement new national decision-making policies.</li> </ul>

- How we should effectively engage communities and wider stakeholders during the plan-making process.
- The evidence required to support the next Local Plan.

At this stage, ahead of the proposed consultation, it is considered that this ‘scoping’ consultation will support the next Shropshire Local Plan in having Neutral to Low Positive impacts across the nine Protected Characteristic groupings defined by the Equality Act 2010.

This will be achieved through an inclusive vision, measurable outcomes and spatial strategy that is responsive to the characteristics of Shropshire and supports the delivery of development that meets the housing, employment and infrastructure needs of all groups in our communities.

Achievement of the vision, measurable outcomes and spatial strategy will be supported by site allocations and local planning policies:

- Identification of site allocations will be informed by a robust assessment process which includes social, environmental and economic considerations.
- Local policies will address such issues as the design and density of development, ensuring an appropriate housing mix - size, type and tenure and affordability, supporting the adaptation to and mitigation of climate change, promotion of health and wellbeing, delivery of infrastructure and open space, promoting new and enhancing existing employment opportunities and the vitality and viability of our town centres.

There is potential for this to rise to a Low to Medium Positive impact to be experienced in the intersecting Age and Disability Protected Characteristic groupings through an inclusive vision, measurable outcomes and spatial strategy that is responsive to the characteristics of Shropshire and supports the delivery of development that meets the housing, employment and infrastructure needs of these groups – informed by a supported specialist housing accommodation assessment, strategic housing market assessment, economic development needs assessment and infrastructure delivery plan.

There is likewise potential for a Neutral to Low Positive impact for the additional groupings of people that we think about in Shropshire, of Social Inclusion, Carers, and Young People Leaving Care. The Council also considers those in the grouping of veterans and serving members of the armed force and their families, in a separate grouping, in order to visibly demonstrate that ‘due regard’ is being given to people in this grouping, as per the requirements of the Armed Forces Act 2021.

Our additional categories help us to seek to ensure that we consider the needs of the following: rural households; households on low incomes; households in fuel poverty; and those we may consider to be vulnerable. This includes refugee families, people living in fuel poverty, people fleeing domestic violence, and those who are rough sleepers or at risk of homelessness for what may be a variety of circumstances. For these additional categories, there is also potential for the impacts to increase to Medium Positive, particularly given efforts envisaged to improve health and wellbeing outcomes across communities.

### **Assessment of likely neutral, negative or positive impact of the service change in terms of health and wellbeing considerations**

At this stage, it is considered that this 'scoping' consultation will support the next Shropshire Local Plan in having neutral to low positive health and wellbeing impacts, potentially increasing to medium positive impacts.

This will be achieved through an inclusive vision, measurable outcomes and spatial strategy that is responsive to the characteristics of Shropshire and supports the delivery of development that meets the housing, employment and infrastructure needs of all groups in our communities.

Achievement of the vision, measurable outcomes and spatial strategy will be supported by site allocations and local planning policies:

- Identification of site allocations will be informed by a robust assessment process which includes social, environmental and economic considerations.
- Local policies will address such issues as the design and density of development, ensuring an appropriate housing mix - size, type and tenure and affordability, supporting the adaptation to and mitigation of climate change, **promotion of health and wellbeing**, delivery of infrastructure and open space, promoting new and enhancing existing employment opportunities and the vitality and viability of our town centres.

There is potential for Low to Medium positive impacts to be achieved directly on an individual's health/mental health/wellbeing, indirectly on an individual's ability to improve their own health/wellbeing and directly on the community (social, economic and environmental living conditions) that would impact health.

This would be through an inclusive vision, measurable outcomes and spatial strategy that is responsive to the characteristics of Shropshire and supports the delivery of development that meets the housing, employment and infrastructure needs of these groups – supported by policies which address the design, density, health and wellbeing, and infrastructure and open space provision within development.

There is potential for Low to Medium positive impacts to be achieved on the demand for or access to health and social care services. This would be through an inclusive vision, measurable outcomes and spatial strategy that is responsive to the characteristics of Shropshire and supports the delivery of development that meets the housing, employment and infrastructure needs of these groups – supported by proactive engagement with infrastructure providers (including the ICB) and an infrastructure delivery plan.

### **Actions to review and monitor the impact of the service change in terms of equality, social inclusion, and health considerations**

This ESHIA is associated with the 'scoping' consultation, intended to inform preparation of the next Shropshire Local Plan.

It is envisaged that any issues or opportunities relating to equality, social inclusion and health considerations raised during this consultation will be reviewed when the

consultation process concludes and will inform and preparation of the next Shropshire Local Plan.

Further ESHIA's will be undertaken to inform development of the next Local Plan (in advance of two further stages of consultation). These assessments will inform consideration of the equality, social inclusion and health impacts.

These two further consultations will then provide further opportunity for stakeholders to identify equality, social inclusion and health considerations which will be reviewed following the conclusion of the consultation process and inform the continued preparation of the next Shropshire Local Plan.

The Council will draw upon the learning from pedestrianisation efforts in market towns in Shropshire, which are building upon Covid-19 measures that led to improved physical access around towns by people in Protected Characteristic groupings and those we may describe as vulnerable. The Council will also draw upon strategic policy around public transport infrastructure including Active Travel, and best alignment with economic growth strategy development and with implementation of cultural and leisure strategy actions. These strategies all very much include efforts to promote social inclusion and in so doing achieve equality of opportunity for people in Protected Characteristic groupings to safely access economic, leisure and cultural opportunities in market towns.

#### **Associated ESHIAs**

- ESHIA's for current and emerging Supplementary Planning Documents and other Planning Guidance prepared to support understanding and application of policies in the adopted Development Plan. This includes
  - The Ironbridge Gorge WHS SPD.
  - The Design of New Dwellings draft SPD.
  - The Design of Residential Extensions draft SPD.
  - Shrewsbury Town Centre Design Code.
- ESHIAs for the previous Shropshire Local Plan Review.
- ESHIAs for the Shropshire Economic Growth Strategy 2017-2021 and Shropshire Economic Growth Strategy 2022-2027.

#### **Assessment of likely neutral, negative or positive impact, and actions to review and monitor overall impacts, with regard to climate change impacts and with regard to economic and societal impacts**

Subject to approval, the next Shropshire Local Plan will be at the 'scoping' consultation stage. This is the first of three formal stages of consultation to inform the next Local Plan, seeking views on:

- The key priorities for the vision and measurable outcomes for the delivery of the next Local Plan.
- The key considerations for identifying a spatial strategy to manage the level and distribution of development in Shropshire.
- The approach to identifying and assessing potential site allocations.

- Matters that would benefit from being addressed by local planning policies to complement new national decision-making policies.
- How we should effectively engage communities and wider stakeholders during the plan-making process.
- The evidence required to support the next Local Plan.

It is considered that this ‘scoping’ consultation will support the next Shropshire Local Plan in positively contributing to climate change mitigation and adaptation and supporting positive economic and societal impacts.

It is expected that the next Shropshire Local Plan will positively contribute to climate change mitigation and adaptation. This will be achieved through a proactive vision, measurable outcomes and spatial strategy that is responsive to the characteristics of Shropshire and supports the delivery of development that meets the needs of our communities. In particular, it is expected that the vision and measurable outcomes of the next Shropshire Local Plan will seek to support the transition to net zero and the spatial strategy will be responsive to the connectivity of communities to services and facilities – thereby supporting the ability to travel via sustainable and active modes.

Achievement of the vision, measurable outcomes and spatial strategy will be supported by site allocations and local planning policies:

- Identification of site allocations will be informed by a robust assessment process which includes social, environmental and economic considerations of direct relevance to mitigating / adapting to our changing climate.
- Local policies will address such issues as the design and density of development, **supporting the adaptation to and mitigation of climate change** and delivery of infrastructure and open space, promoting new and enhancing existing employment opportunities and the vitality and viability of our town centres.

It is expected that the next Shropshire Local Plan will support positive economic and societal impacts. This will be achieved through a proactive vision, measurable outcomes and spatial strategy that is responsive to the characteristics of Shropshire and supports the delivery of development that meets the needs of our communities. In particular, it is expected that the vision and measurable outcomes of the next Shropshire Local Plan will seek to support positive economic growth and the achievement of the housing needs of all in our communities and the spatial strategy will be responsive to economic needs and opportunities and the housing needs of our communities.

Achievement of the vision, measurable outcomes and spatial strategy will be supported by site allocations and local planning policies:

- Identification of site allocations will be informed by a robust assessment process which includes social, environmental and economic considerations.
- Local policies will address such issues as ensuring an **appropriate housing mix - size, type and tenure and affordability**, supporting the adaptation to and mitigation of climate change, promotion of health and wellbeing, delivery of infrastructure and open space, **promoting new and enhancing existing employment opportunities** and the vitality and viability of our town centres.

### Scrutiny at Stage One screening stage

People involved	Signatures	Date
Lead officer for the proposed service change Edward West		21/04/2026
Officer carrying out the screening Daniel Corden		21/04/2026
External support* Mrs Lois Dale Senior Insights and Research EDI Specialist		21/04/2026

**\*This refers to support external to the service and within the Council, e.g., the Senior Insights and Research EDI specialist, the Integration & Inequalities Officer – Public Health, other Insights and Research or Public Health colleagues, the Feedback and Insight Team, Climate Change specialists, etc.**

### Sign off at Stage One screening stage

Name	Signatures	Date
Lead officer's name Daniel Corden		21/04/2026
Service manager's name Edward West		21/04/2026

**\*This may either be the Head of Service or the lead officer**

## **B. Detailed Screening Assessment**

<b>Aims of the service change and description</b>
<p>The adopted Development Plan forms the 'starting point' when determining planning applications for development.</p> <p>In Shropshire, the adopted Development Plan comprises:</p> <ul style="list-style-type: none"> <li>• The adopted Local Plan, which consists of the Core Strategy (adopted 2011) and Site Allocations &amp; Management of Development (SAMDev) Plan (adopted 2015).</li> <li>• 'Made' (adopted) Neighbourhood Plans.</li> </ul> <p>Local Planning Authorities are required to regularly review their Local Plan - at least every five years. These reviews are to ensure our Local Plan remains 'up-to-date' and significant weight may be applied to its policies in decision making.</p> <p>Recent years have seen significant changes to the national planning picture, with the introduction of a new plan-making process and ongoing changes to the National</p>

Planning Policy Framework (NPPF) which sets out Government's planning policies in England. This has led to important contextual changes locally.

As a result, Shropshire Council considers there is a need to review its Local Plan (incorporating the entirety of the Mineral and Waste Plan for Shropshire). Therefore, subject to approval by Cabinet:

- A new Plan-Making timetable and Project Initiation Document detailing the timescales, key milestones and process to prepare the next Shropshire Local Plan will be issued.
- A notice of an intention to commence preparation of the next Shropshire Local Plan will be issued.
- A 'scoping' consultation, which constitutes the first of three formal stages of consultation to inform the next Shropshire Local Plan, will be undertaken.

This ESHIA is associated with the 'scoping' consultation, intended to inform preparation of the next Shropshire Local Plan. Subsequent ESHIA's will be undertaken alongside each of the consultations to inform the next Local Plan.

The next Shropshire Local Plan will establish a vision, measurable outcomes and a spatial strategy for the sustainable development of Shropshire to 2046. To support achievement of this spatial strategy the next Local Plan will include site allocations and local planning policy.

Maintaining an up to date Local Plan will support the Council's ability to deliver development that meets the housing, employment and infrastructure needs of all groups in our communities.

#### **Intended audiences and target groups for the service change**

- All those within our local communities.
- Local MP's, Councillors and Town & Parish Councils as the representatives of local communities.
- All those working in and visiting Shropshire.
- The voluntary and community sector.
- Organisations with strategic or cross boundary economic and environmental interests, including neighbouring local planning authorities
- A range of stakeholders, including the development industry, local businesses, housing associations, utilities companies, and the land based sector.
- Government Departments and Agencies.
- All other interested stakeholders.

#### **Evidence used for screening of the service change**

Key evidence that will support the screen of the service change includes:

- The requirements of national planning policy.
- The adopted Development Plan – particularly 'made' Neighbourhood Plans.

- Existing and emerging evidence base that will underpin the next Local Plan, as detailed in the Shropshire Local Plan Project Initiation Document. This includes:
  - Evidence on ‘baseline’ conditions, local issues and local opportunities – such as that from analysis of Census data and community demographic profiles.
  - Evidence base prepared to inform previous Local Plans that has been reviewed and considered appropriate to inform the next Shropshire Local Plan.
  - Wider Council strategies and associated evidence. This includes the draft Corporate Plan, Local Nature Recovery Strategy, current Economic Growth Strategy, Local Transport Plan, Local Cycling & Walking Infrastructure Plan, Health & Wellbeing Strategy, Housing Strategy, Social Care Market Position Statement, Independent Living and Specialist Accommodation Strategy, Cultural Strategy and Shropshire Hills Management Plan.
  - Further evidence considered necessary and proportionate to inform the next Local Plan e.g. from Census data analysis and IMD analysis.
- Responses to consultations undertaken to inform the next Local Plan – this includes the ‘scoping’ consultation.
- Technical assessments undertaken to inform the next Local Plan.

Evidence to inform the next Local Plan will be made available on the Council website via: <https://next.shropshire.gov.uk/planning-policy/next-local-plan/evidence-base/>

Additional contextual information about Shropshire provided on the information, intelligence and insight webpages via <https://next.shropshire.gov.uk/information-intelligence-and-insight/> will also be drawn upon.

### **Specific consultation and engagement with intended audiences and target groups for the service change**

This ESHIA is associated with the ‘scoping’ consultation to be undertaken before formally commencing preparation of the next Shropshire Local Plan. It seeks view on the scope of:

- The key priorities for the vision and measurable outcomes for the delivery of the next Local Plan.
- The key considerations for identifying a spatial strategy to manage the level and distribution of development in Shropshire.
- The approach to identifying and assessing potential site allocations.
- Matters that would benefit from being addressed by local planning policies to complement new national decision-making policies.
- How we should effectively engage communities and wider stakeholders during the plan-making process.
- The evidence required to support the next Local Plan.

The ‘scoping’ consultation constitutes the first of three formal stages of consultation to be undertaken to inform the next Shropshire Local Plan. Subsequent ESHIA’s will be undertaken alongside each of the consultations to inform the next Local Plan.

The proposed approach to engagement is detailed in the Shropshire Local Plan Project Initiation Document and is proposed to take place between May and July 2026.

As part of the remit of this ‘scoping’ consultation is to seek views on engagement, it may be subject to refinement as plan-making progresses.

Key principles within the proposed approach to engagement include:

- Clear engagement: use of plain-English and avoid unnecessary acronyms.
- Publicising engagement: use of the Council website, planning policy consultation database, digital press releases, social media, Town & Parish Council’s, VCSA mailings and Local Councillors as effective conduits into their communities, where appropriate displaying leaflets/posters in public buildings, and where appropriate undertaking public meetings/drop-in events.
- Easy access to consultation documents: use of the Council website, facilitation of digital access at libraries and ‘Shropshire Local’ facilities, and provision of a hard copy at the Council’s head office (Guildhall, Frankwell Quay, Shrewsbury, Shropshire, SY3 8HQ).
- Supporting responses: clear guidance on the purpose of the consultation, provision of a consultation response form and guidance on how to respond.
- Transparency of responses: production of a response summary.

The ‘scoping’ consultation sets out to demonstrate how we can ensure our consultations are clear, well publicised, accessible, convenient and transparent – supporting engagement across groupings including those who may often be under-represented.

**Initial equality impact assessment by grouping (Initial health impact assessment is included below this table)**

***Please rate the impact that you perceive the service change is likely to have for a grouping, through stating this in the relevant column, including if it is anticipated to be neutral (no impact).***

***Please also record in here your headline rationale for the ratings you have given.***

Protected characteristic groupings and other groupings locally identified in Shropshire	High negative impact Stage Two ESHIA required	High positive impact Stage One ESHIA required	Medium positive or negative impact Stage One ESHIA required	Low positive, negative, or neutral impact (please specify) Stage One ESHIA required
<u>Age</u> (including children, young people, young carers, young people leaving care, people of working age, older people. Some people may belong to more than one group e.g., a child or young person for whom there are safeguarding concerns e.g., an older person with a disability)				✓Neutral to low positive at this stage, potential to increase to medium positive

Protected characteristic groupings and other groupings locally identified in Shropshire	High negative impact <i>Stage Two ESHIA required</i>	High positive impact <i>Stage One ESHIA required</i>	Medium positive or negative impact <i>Stage One ESHIA required</i>	Low positive, negative, or neutral impact (please specify) Stage One ESHIA required
<u>Disability</u> (including cancer; HIV/AIDS; learning disabilities; mental health conditions and syndromes; multiple sclerosis; neurodiverse conditions such as autism; hidden disabilities such as Crohn's disease; physical and/or sensory disabilities or impairments)				✓Neutral to low positive at this stage, potential to increase to medium positive
<u>Gender re-assignment</u> (including associated aspects: safety, caring responsibility, potential for bullying and harassment)				✓Neutral to low positive at this stage
<u>Marriage and Civil Partnership</u> (including associated aspects: caring responsibility, potential for bullying and harassment)				✓Neutral to low positive at this stage
<u>Pregnancy and Maternity</u> (including associated aspects: safety, caring responsibility, potential for bullying and harassment)				✓Neutral to low positive at this stage
<u>Race</u> (including ethnicity, nationality, culture, language, Gypsy, Roma, Traveller)				✓Neutral to low positive at this stage
<u>Religion or Belief</u> (including Buddhism, Christianity, Hinduism, Islam, Jainism, Judaism, Nonconformists; Rastafarianism; Shinto, Sikhism, Taoism, Veganism, Zoroastrianism, and any others)				✓Neutral to low positive at this stage
<u>Sex</u> (including associated aspects: safety, caring responsibility, potential for bullying and harassment)				✓Neutral to low positive at this stage
<u>Sexual Orientation</u> (including associated aspects: safety; caring responsibility; potential for bullying and harassment)				✓Neutral to low positive at this stage

<b>Protected characteristic groupings and other groupings locally identified in Shropshire</b>	<b>High negative impact</b> <i>Stage Two ESHIA required</i>	<b>High positive impact</b> <i>Stage One ESHIA required</i>	<b>Medium positive or negative impact</b> <i>Stage One ESHIA required</i>	<b>Low positive, negative, or neutral impact</b> (please specify) Stage One ESHIA required
<u>Other: Social Inclusion</u> (including households in poverty or on low incomes; people for whom there are safeguarding concerns; people you consider to be vulnerable; people with health inequalities; refugees and asylum seekers; rough sleepers and those at risk of homelessness; and rural communities)				✓Neutral to low positive at this stage, potential to increase to medium positive
<u>Other: Carers</u> (including families and friends with caring responsibilities)				✓Neutral to low positive at this stage, potential to increase to medium positive
<u>Other: Veterans and serving members of the armed forces and their families (as per Armed Forces Act 2023)</u>				✓Neutral to low positive at this stage, potential to increase to medium positive
<u>Other: Young people leaving care</u>				✓Neutral to low positive at this stage, potential to increase to medium positive

**Initial health and wellbeing impact assessment by category**

***Please rate the impact that you perceive the service change is likely to have with regard to health and wellbeing, through stating this in the relevant column, including if it is anticipated to be neutral (no impact).***

***Please also record in here your headline rationale for the ratings you have given.***

<b>Health and wellbeing: individuals and communities in Shropshire</b>	<b>High negative impact</b> <i>Part Two HIA required</i>	<b>High positive impact</b>	<b>Medium positive or negative impact</b>	<b>Low positive negative or neutral impact</b> (please specify)
<b>Will the proposal have a <i>direct impact</i> on an individual's health, mental health and wellbeing?</b> For example, would it cause ill health, affecting social inclusion, independence and participation?				✓Neutral to low positive at this stage, potential to increase to medium positive

Health and wellbeing: individuals and communities in Shropshire	High negative impact <i>Part Two HIA required</i>	High positive impact	Medium positive or negative impact	Low positive negative or neutral impact (please specify)
<p><b>Will the proposal <i>indirectly</i> impact an individual's ability to improve their own health and wellbeing?</b> For example, will it affect their ability to be physically active, choose healthy food, reduce drinking and smoking?</p>				<p>✓ Neutral to low positive at this stage, potential to increase to medium positive</p>
<p><b>Will the policy have a <i>direct</i> impact on the community - social, economic and environmental living conditions that would impact health?</b> For example, would it affect housing, transport, child development, education, employment opportunities, availability of green space or climate change mitigation?</p>				<p>✓ Neutral to low positive at this stage, potential to increase to medium positive</p>
<p><b>Will there be a likely change in <i>demand</i> for or access to health and social care services?</b> For example: Primary Care, Hospital Care, Community Services, Mental Health, Local Authority services including Social Services?</p>				<p>✓ Neutral to low positive at this stage, potential to increase to medium positive</p>

<b>Initial health equity assessment</b>	
<p><b>For the following categories, please complete with the expected impacts of this service change on wider inequalities, not just those that are health-related (whether positive, negative, or neutral) – include any additional information you feel is pertinent or useful. Consider and record which you can control, which you can influence, and which may be out of your control.</b></p>	
<p>Which population groups / demographics will face health impacts as a result of this change (if any)?</p> <ul style="list-style-type: none"> <li>• Socio-Economically Deprived</li> <li>• Geographic Deprivation (inc. Rurality) – <i>if so, where?</i></li> <li>• Inclusion Health &amp; Vulnerable Groups<sup>1</sup></li> <li>• Other</li> </ul>	<p>It is expected that the next Shropshire Local Plan will positively contribute to the health equality of all groups in Shropshire.</p> <p>This will be achieved through an inclusive vision, measurable outcomes and spatial strategy that support the delivery of development that meets the housing, employment and infrastructure needs of all groups in our communities.</p> <p>The vision, measurable outcomes and spatial strategy will be informed by and responsive to the characteristics of Shropshire, particularly its rurality and the pockets of socio-economic deprivation across</p>

	<p>the county. It will also set out to be responsive to the needs of all groups within our communities.</p> <p>Achievement of the vision, measurable outcomes and spatial strategy will be supported by site allocations and local planning policies:</p> <ul style="list-style-type: none"> <li>• Identification of site allocations will be informed by a robust assessment process which includes social, environmental and economic considerations.</li> <li>• Local policies will address such issues as the design and density of development, ensuring an appropriate housing mix - size, type and tenure and affordability, supporting the adaptation to and mitigation of climate change, promotion of health and wellbeing, delivery of infrastructure and open space, promoting new and enhancing existing employment opportunities and the vitality and viability of our town centres.</li> </ul>
<p>What mitigations / enhancements are already in place, or what mitigations / enhancements do you plan to include for the foreseeable consequences of these changes?</p>	<p>The next Local Plan will include a vision, measurable outcomes and spatial strategy which set out to be responsive to the characteristics of Shropshire and the needs of all groups within our communities. This will positively contribute to the enhancement of health equality.</p> <p>Furthermore, local policies within the next Local Plan will address such issues as the design and density, housing mix - size, type and tenure and affordability, climate adaptation / mitigation, health and wellbeing, infrastructure and open space provision and employment opportunities. These policies will positively enhance the contribution the next Local Plan makes to health equality and positively contribute to the mitigation of any adverse effects on health equality. ESHIA's will be undertaken alongside each of the consultations to inform the next Local Plan. This cyclical process will ensure that equality, health and social inclusion is proactively considered throughout the plan-making process.</p>

*1- Inclusion health is an umbrella term used to describe people who are socially excluded, who typically experience multiple overlapping risk factors for poor health, such as poverty, violence, and complex trauma. This includes people who experience homelessness, drug and alcohol dependence, vulnerable migrants, Gypsy, Roma and Traveller communities, sex workers, people in contact with the justice system and victims of modern slavery. Health impacts for this wide grouping will therefore potentially be the same as those recorded under the Social Inclusion category in the equality impact table.*

## **Guidance Notes**

### **1. Legal Context**

It is a legal requirement for local authorities to assess the equality and human rights impact of changes proposed or made to services. It is up to us as an authority to decide what form our equality impact assessment may take. By way of illustration, some local authorities focus more overtly upon human rights; some include safeguarding. It is about what is considered to be needed in a local authority's area, in line with local factors such as demography and strategic objectives as well as with the national legislative imperatives.

Carrying out these impact assessments helps us as a public authority to ensure that, as far as possible, we are taking actions to meet the general equality duty placed on us by the Equality Act 2010, and to thus demonstrate that the three equality aims are integral to our decision-making processes. These are: eliminating discrimination, harassment and victimisation; advancing equality of opportunity; and fostering good relations.

These screening assessments for any proposed service change go to Cabinet as part of the committee report, or occasionally direct to Full Council, unless they are ones to do with Licensing, in which case they go to Strategic Licensing Committee.

Service areas would ordinarily carry out a screening assessment, or Stage One equality impact assessment. This enables energies to be focussed on review and monitoring and ongoing evidence collection about the positive or negative impacts of a service change upon groupings in the community, and for any adjustments to be considered and made accordingly.

These screening assessments are recommended to be undertaken at timely points in the development and implementation of the proposed service change.

For example, a Stage One ESHIA would be a recommended course of action before a consultation. This would draw upon the evidence available at that time, and identify the target audiences, and assess at that initial stage what the likely impact of the service change could be across the national Protected Characteristic groupings and our additional local categories. This ESHIA would set out intended actions to engage with the groupings, particularly those who are historically less likely to engage in public consultation eg young people, as otherwise we would not know their specific needs.

A second Stage One ESHIA would then be carried out after the consultation, to say what the feedback was, to set out changes proposed as a result of the feedback, and to say where responses were low and what the plans are to engage with groupings who did not really respond. This ESHIA would also draw more upon actions to review impacts in order to mitigate the negative and accentuate the positive.

Meeting our Public Sector Equality Duty through carrying out these ESHIAs is very much about using them as an opportunity to demonstrate ongoing engagement across groupings and to thus visibly show we are taking what is called 'due regard' of the needs of people in Protected Characteristic groupings.

If the screening indicates that there are likely to be high negative impacts for groupings within the community, the service area would need to take advice on whether or not to

carry out a full report, or Stage Two assessment. This is resource intensive but will enable more evidence to be collected that will help the service area to reach an informed opinion.

In practice, Stage Two or Full Screening Assessments have only been recommended twice since 2014, as the ongoing mitigation of negative equality impacts should serve to keep them below the threshold for triggering a Full Screening Assessment. The expectation is that Full Screening Assessments in regard to Health Impacts may occasionally need to be undertaken, but this would be very much the exception rather than the rule.

## **2. Council Wide and Service Area Policy and Practice on Equality, Social Inclusion and Health**

This involves taking an equality and social inclusion approach in planning changes to services, policies, or procedures, including those that may be required by Government. The decisions that you make when you are planning a service change need to be recorded, to demonstrate that you have thought about the possible equality impacts on communities and to show openness and transparency in your decision-making processes.

This is where Equality, Social Inclusion and Health Impact Assessments (ESHIA) come in. Where you carry out an ESHIA in your service area, this provides an opportunity to show:

- What evidence you have drawn upon to help you to recommend a strategy or policy or a course of action to Cabinet or to Strategic Licensing Committee.
- What target groups and audiences you have worked with to date.
- What actions will you take in order to mitigate any likely negative impact upon a group or groupings, and enhance any likely positive effects for a group or groupings; and
- What actions you are planning to monitor and review the impact of your planned service change.

The formal template is there not only to help the service area but also to act as a stand-alone for a member of the public to read. The approach helps to identify whether or not any new or significant changes to services, including policies, procedures, functions, or projects, may have an adverse impact on a particular group of people, and whether the human rights of individuals may be affected.

There are nine Protected Characteristic groupings defined in the Equality Act 2010.

The full list of groupings is: Age; Disability; Gender Reassignment; Marriage and Civil Partnership; Pregnancy and Maternity; Race; Religion or Belief; Sex; and Sexual Orientation.

There is also intersectionality between these. Eg a young person with a disability would be in the groupings of Age and Disability, and if they described themselves as having a faith they would then also be in the grouping of Religion or Belief. We demonstrate equal treatment to people who are in these groups and to people who are not, through

having what is termed 'due regard' to their needs and views when developing and implementing policy and strategy and when commissioning, procuring, arranging, or delivering services.

For the individuals and groupings who may be affected, ask yourself what impact do you think is likely and what actions will you currently anticipate taking, to mitigate or enhance likely impact of the service change? If you are reducing a service, for example, there may be further use you could make of awareness raising through social media and other channels to reach more people who may be affected.

Social inclusion is then a wider additional local category we use in Shropshire, in order to help us to go beyond the equality legislation in also considering impacts for individuals and households with regard to the circumstances in which they may find themselves across their life stages. This could be households on low incomes, or households facing challenges in accessing services, such as households in rural areas, or people that we might consider to be vulnerable, such as refugee families or rough sleepers.

Please note that veterans and serving members of the armed forces and their families are a grouping to whom we are required to give due regard under Armed Forces legislation, although in practice we have been doing so for a number of years now.

We also identify two further distinct separate local groupings due to their circumstances: care leavers, as vulnerable individuals, and carers, due to the support they give and the support they need.

When you are not carrying out an ESHIA, you still need to demonstrate and record that you have considered equality in your decision-making processes. It is up to you what format you choose.-You could use a checklist, an explanatory note, or a document setting out our expectations of standards of behaviour, for contractors to read and sign. It may well not be something that is in the public domain like an ESHIA, but you should still be ready for it to be made available.

**Both the approaches sit with a manager, and the manager has to make the call, and record the decision made on behalf of the Council.**

*Carry out an ESHIA:*

- If you are building or reconfiguring a building.
- If you are planning to reduce or remove or reconfigure a service.
- If you are consulting on a policy or a strategy.
- If you are bringing in a change to a process or procedure that involves other stakeholders and the wider community as well as particular groupings

*Carry out and record your equality and social inclusion approach:*

- If you are setting out how you expect a contractor to behave with regard to equality, where you are commissioning a service or product from them.
- If you are setting out the standards of behaviour that we expect from people who work with vulnerable groupings, such as taxi drivers that we license.

- If you are planning consultation and engagement activity, where we need to collect equality data in ways that will be proportionate and non-intrusive as well as meaningful for the purposes of the consultation itself.
- If you are looking at services provided by others that help the community, we need to demonstrate a community leadership approach

### **3. Council wide and service area policy and practice on health and wellbeing**

This is an area to record within our overall assessments of impacts, for which we ask service area leads to consider health and wellbeing impacts, and to look at these in the context of direct and indirect impacts for individuals and for communities.

A better understanding across the Council of these impacts will also better enable the Public Health colleagues to prioritise activities to reduce health inequalities in ways that are evidence based and that link effectively with equality impact considerations and climate change mitigation.

#### **Health in All Policies – Health Impact Assessment**

Health in All Policies is an upstream approach for health and wellbeing promotion and prevention, and to reduce health inequalities. The Health Impact Assessment (HIA) is the supporting mechanism

- Health Impact Assessment (HIA) is the technical name for a process that considers the wider effects of local policies, strategies and initiatives and how they, in turn, may affect people's health and wellbeing.
- 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 and strategy using a structured process to review the impact.
- 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 policy and strategy or may lead to suggestions for improvements.
- An agreed framework will set out a clear pathway through which a policy or strategy can be assessed and impacts with outcomes identified. It also sets out the support mechanisms for maximising health benefits.

The embedding of a Health in All Policies approach will support Shropshire Council through evidence-based practice and a whole systems approach, in achieving our corporate and partnership strategic priorities. This will assist the Council and partners in promoting, enabling and sustaining the health and wellbeing of individuals and communities whilst reducing health inequalities.

## **Individuals**

### **Will the proposal have a *direct impact* on health, mental health and wellbeing?**

For example, would it cause ill health, affecting social inclusion, independence and participation?

Will the proposal directly affect an individual's ability to improve their own health and wellbeing?

This could include the following: their ability to be physically active e.g., being able to use a cycle route; to access food more easily; to change lifestyle in ways that are of positive impact for their health.

Provision or change to a service that allows greater reach to those most in need, this can involve relocation, pooling of resource/efficiency changes, or digitisation of some provision. It may also involve greater opportunities for employment, decreasing socio-economic inequality. Physical alternatives to be made available (where practical) to be offered wherever possible to avoid digital exclusion and reduce social isolation. These changes can be either positive or negative depending on the proposal.

An example of this could be that you may be involved in proposals for the establishment of safer walking and cycling routes (e.g., green highways), and changes to public transport that could encourage people away from car usage. and increase the number of journeys that they make on public transport, by foot or on bicycle or scooter. This could improve lives. It could also involve virtual support sessions/appointments to avoid unnecessary travel and provide greater flexibility with individuals work schedules. It may involve greater internet connectivity, to improve remote working opportunities and air pollution concerns, or improved communications coverage through closer partnership working – targeting those most in need of specific information.

### **Will the proposal *indirectly impact* an individual's ability to improve their own health and wellbeing?**

This could include the following: their ability to access local facilities e.g., to access food more easily, or to access a means of mobility to local services and amenities? (e.g. change to bus route)

Similarly to the above, an example of this could be that you may be involved in proposals for the establishment of safer walking and cycling routes (e.g. pedestrianisation of town centres), and changes to public transport that could encourage people away from car usage, and increase the number of journeys that they make on public transport, by foot or on bicycle or scooter. This could improve their health and wellbeing.

## **Communities**

Will the proposal directly or indirectly affect the physical health, mental health, and wellbeing of the wider community?

A *direct impact* could include either the causing of ill health, affecting social inclusion, independence and participation, or the promotion of better health.

An example of this could be that safer walking and cycling routes could help the wider community, as more people across groupings may be encouraged to walk or engage in active travel. Increasing physical activity and minimising the time spent sitting down helps to maintain a healthy weight and reduces the risk of cardiovascular disease, type 2 diabetes, cancer, and depression. The UK Chief Medical Officers recommend that adults should do at least 150 minutes of moderate activity, or 75 minutes of vigorous activity, each week. At a wider level, reductions in vehicular emission lead to better air quality, and a reduction in NO<sub>2</sub> in the atmosphere.

An *indirect impact* could mean that a service change could indirectly affect living and working conditions and therefore the health and wellbeing of the wider community.

An example of this could be: an increase in the availability of warm homes would improve the quality of the housing offer in Shropshire and reduce the costs for households of having a warm home in Shropshire. This can reduce the risks of cold related health effects, as well as reduce the financial burden on the population, whose ability to shoulder these costs can vary. Often a health promoting approach also supports our agenda to reduce the level of Carbon Dioxide emissions and to reduce the impact of climate change.

Please record whether at this stage you consider the proposed service change to have a direct or an indirect impact upon communities.

## **Demand**

### **Will there be a change in demand for or access to health, local authority and social care services?**

For example: Primary Care, Hospital Care, Community Services, Mental Health and Social Services?

An example of this could be: a new housing development in an area would affect demand for primary care and local authority facilities and services in that location and surrounding areas. If the housing development does not factor in consideration of availability of green space and safety within the public realm, further down the line there could be an increased demand upon health and social care services as a result of the lack of opportunities for physical recreation, and reluctance of some groupings to venture outside if they do not perceive it to be safe.

***For further advice: please contact***

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