

3.0 What is a Health Impact Assessment?

- 3.1 Health Impact Assessment (HIAs) are a method of assessing the prospective positive and negative health impacts of development on different population groups. This is achieved through a quantitative and qualitative appraisal of a development's impacts on the wider determinants of health and wellbeing.
- 3.2 HIAs also function as a guiding framework for the design and delivery of a development project, identifying how negative health impacts can be mitigated or prevented, how health benefits can be maximised, and how health impacts can be monitored in the long-term.
- 3.3 HIAs are beneficial because they can shape developments to reflect the health and wellbeing needs of the local population, as well as provide information on how to manage local health impacts. By predicting the negative impacts of development and highlighting health improvement opportunities, HIAs can help to maintain or improve local health and wellbeing standards in tandem with the provision of development that meets other local needs.
- 3.4 Where required, an HIA should be undertaken as early as possible in the planning process to ensure that a development's design, layout and composition can be made to reflect relevant health priorities.

Objectives of a Health Impact Assessment

- 3.5 HIAs provide a means to promote opportunities for people to live healthier lifestyles and make healthier choices, which, in turn, helps to reduce demand on health services. In broad terms, HIAs have three objectives:
 - **Objective 1:** Identify the potential positive and negative health and well-being impacts of the proposed development on planned new communities and existing communities in the vicinity of the development.
 - **Objective 2:** Highlight any differences in health impacts on sub-population groups, particularly those with protected characteristics such as the BAME communities, LGBTQIA+ communities and disabled people.
 - **Objective 3:** Make recommendations to mitigate against any potential negative health impacts and maximise potential positive health impacts, highlighting where possible the groups most affected by development.
- 3.6 Each HIA will have a unique contextual scope and may have unique objectives that are specific to a local area or population group. Any bespoke HIA aims and

objectives can be established during the Scoping stage of the HIA procedure (see Section 5.0 for additional details).

The Different Types of Health Impact Assessment

3.7 HIAs should be proportionate to the development proposal being considered. HIAs typically take one of the following forms:

- **Extended Screening or Desktop HIAs** – Encompasses a desk-based assessment of a development's prospective health impacts, drawing data from a literature review and analysis of relevant quantitative data. Where the desk-based review reveals that a development could affect a particular protected group, it will be expected that a small number of participants from the protected group are engaged to assess the proposal or plan.
- **Rapid HIAs** – Requires a small steering group and often uses the approach of a participatory stakeholder workshop. This typically involves a brief investigation of health impacts, including a short literature review of quantitative and qualitative research, and the gathering of knowledge and further evidence from a number of local stakeholders.
- **Comprehensive or Full HIAs** – An in-depth analysis of health impacts featuring an extensive literature review and the collection of both quantitative and qualitative data for analysis. This will include the comprehensive involvement of stakeholders in focus groups, panels or public consultations, and interviews.

3.8 Selecting the appropriate type of HIA for a particular project will depend on the nature and scale of the proposal and the timescales involved. The most appropriate type of HIA for a development project should be discussed with the LPA after the Screening stage of the HIA process to prevent complications during later stages of the HIA process (see Section 5.0 for further details).

Who Should Conduct a Health Impact Assessment?

3.9 HIAs are professional documents that often require input from a range of experts on human health, environmental health, and planning and development, as well as stakeholder groups. Therefore, HIAs need to be conducted and coordinated by suitably qualified and experienced people.

3.10 The Institute of Environmental Management and Assessment (IEMA) produced their guidance note on [Competent Expert for Health Impact Assessment including Health in Environmental Assessments](#) in 2024, providing best-practice

guidance on the qualification and experience of experts that should be involved in the production of HIAs.

- 3.11 The LPA will expect HIAs submitted as part of a planning application to follow this IEMA guidance (or any subsequent guidance or standards that supersede this current guidance) on competent professionals. **The qualifications and experience of HIA topic leaders and coordinators should be documented within the final HIA report to demonstrate adherence to best-practice guidance.** Failure to follow the IEMA guidance (or any subsequent guidance or standards that supersede this current guidance) without reason could result in delays during the decision-making process for a planning application.

Topics Relevant to a Health Impact Assessment

- 3.12 The topics covered by any HIA will be determined on a case-by-case basis. For development projects, this will involve discussions between the developer, the LPA and the relevant Public Health or Environment Health Officers.

- 3.13 Matters impacting on both physical and mental health that could appropriately be covered in the scope of an HIA are listed below:

- Safety for women and children.
- Community needs, barriers and identified areas of concern.
- Health and wellbeing inequalities.
- The degree of local accessibility and active travel (e.g. the quality of cycling, walking and wheeling infrastructure).
- Active Design (e.g. Sports England's [The 10 Principles of Active Design](#)).
- Housing design and affordability.
- Healthy Centres and Community Facilities (e.g. access to health and social care services and other social infrastructure).
- The quality of local green and blue Infrastructure.
- Crime reduction and community safety.
- Access to healthy and affordable food.

- Access to work and training for all.
- The level of social cohesion and inclusive design (e.g. consideration of external inclusivity guidance, such as the [Cambridgeshire and Peterborough All Age Autism Strategy](#)).
- Impacts of climate change on health (e.g. extreme heat or cold and extreme weather events).
- Healthy Homes that are appropriately warm, ventilated (single-aspect dwellings should be avoided as effective passive ventilation can be difficult or impossible to achieve), resource efficient, accessible, safe and secure, have good levels of natural light, have access to private external space, provide adequate space to prepare healthy meals, support productive working/studying from home, and provide an environment in which occupants can relax. Reference should be made to the [National Model Design Code: Part 2 Guidance Notes](#) which has a section on Homes and Buildings including health and wellbeing.

3.14 Please note, this list is not exhaustive, and other matters may be relevant to specific localities or development types.