

Liverpool Health Impact Assessment Screening Tool and Support Notes.

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'Making an Impact'

Liverpool's Health Impact Assessment Capacity Building Project 'Making an Impact' has been running across Liverpool for the past 9 years.

This is a tripartite project which brings together the Local Authority and Public Health and is headed up by IMPACT, University of Liverpool. The project uses HIA, as a systematic tool, to support decision makers develop Health in all Policies.

As part of this Project a Health Impact Assessment (HIA) Screening Tool has been developed.

Purpose of this tool

The purpose of this Screening Tool is to provide a systematic approach to determine if an HIA is required and what type.

Developing the Scope for a HIA is also built into this Screening Tool.

See footnotes for details for further HIA Guidance.¹

When to use the screening tool

Ideally HIAs are best undertaken prospectively, at the start or initial stages (or draft stage) of the development of a policy, programme or strategy.

Undertaking a HIA, or at least screening for HIA has the best chance of influencing decision makers if undertaken at this point.

Screening is the **first stage** of a HIA.

How to use the screening tool

Ideally each HIA should have a HIA Steering Group consisting of about 10 people, preferably including the policy / proposal proponent, HIA facilitator and a multi-disciplinary group of people.

The Screening Tool comes in 3 sections:

- A. Proposal details,
- B. Screening questions and
- C. Scoping

The actual **screening** part has only 5 questions which enable initial health impacts (positive or negative to be identified).

Working through the screening questions, if 'yes' or 'unknown' is answered to questions 1, 2 and 3 it is recommended that a HIA should be undertaken.

If the screening determines a HIA is **NOT** required a pro forma is included for completion. The pro forma ensures and develops an audit trail.

Scope – upon completion of the screening and determination of a HIA being required, a set of scoping questions has been included to support the development of the HIA.

The Scope for a HIA sets the blueprint/parameters of the HIA.

Please note the actual screening tool is from pages 3 to 9 for print out purposes.

** SN (number) – Supporting Notes found pages 8 & 9**

¹ The Merseyside Guidelines for Health Impact Assessment, IMPACT (www.liv.ac.uk/ihia)
Health Impact Assessment: A Practical Guide, CHETRE (www.hiaconnect.edu.au)
HIA Guidance, Institute of Public Health in Ireland (www.hiagateway.org.uk)
General website for HIA www.hiagateway.org.uk

Screening of the Strategy / Policy / Programme (Proposal)

Step A - HIA Steering Group Formed – form for contact details on page 7 (SN1)

HIA Facilitator (name / contact details) -

Proposal Proponent (name / contact details) -

Commissioner of the HIA -

Section A – Policy Context

Title of Proposal -

Date of Screening -

Rationale of Proposal (please summarise aim and objectives of the Proposal).

1	Is the Proposal new or existing?	New <input type="checkbox"/> Existing <input type="checkbox"/>
2	Who does the Proposal belong to? (for example Public Health, Municipality/Local Authority/Community)	
3	Is the Proposal statutory? If no please give details –	Yes <input type="checkbox"/> No <input type="checkbox"/>
4	Are there links to existing or proposed strategies? If yes please give details –	Yes <input type="checkbox"/> No <input type="checkbox"/>
5	Which Directorate/Portfolio/Remit does the Proposal 'sit' within? (e.g Housing, Regeneration, Public Health)	
6	At what stage is the Proposal at? Other – please state:	Refresh <input type="checkbox"/> Draft <input type="checkbox"/> Consultation <input type="checkbox"/> Final <input type="checkbox"/> Other <input type="checkbox"/>
7	Location of the Proposal to be implemented (for example City Wide, a particular community), please state:	<u>Location</u>

Section B - Please answer the following screening questions to identify any known effects on health with the implementation of the Proposal

Screening Question	Yes/No/Unknown (Y/N/UK)	Justification/Description of likely health impact (- or +). Add as much detail as you can rather than just bullet points.
Question 1 – Identification of Health Impacts (List of examples of determinants of health can be found on page 10)		
(a) Will the Proposal have any positive impacts on the determinants of health?		
(b) Will the Proposal have any negative impacts on the determinants of health?		
Include the impact on mental health & well-being.		
Question 2 – Population Groups (see page 11 for examples)		
Are there any population groups likely to be affected by the Proposal (either positively or negatively)?		
Question 3 – Health Inequity²		
Are any of the negative impacts avoidable and therefore unfair?		
Question 4 - Community Concerns		
Is there any community concerns over the Proposal?		
Question 5 - Limitations		
Are there any limitations from a HIA or Proposal perspective? (e.g. evidence base, profile data)		

If the answer is **YES** or **UNKOWN** to questions 1, 2 or 3 then a HIA must be undertaken.

HIA to be undertaken **Yes** / **No**

If **NO** please proceed to the ‘No HIA required pro forma’ – found after Section C (**page 6**).

² Health inequalities/inequities are:

“Systematic, socially produced (and, therefore, avoidable or modifiable), unfair or unjust differences in health determinants or health outcomes between groups with different levels of underlying social advantage/disadvantage.” Health Equity Impact Assessment Project Report, IMPACT, 2010

Section C - Scoping Section 'Developing the HIA'

Date HIA to be completed?

Step B – Aims and Objectives of the HIA (see SN2).

Aim of HIA:-

Objectives of HIA:-

Step C – Determine type of HIA to be Undertaken (see SN3)

(**Bold/Circle** as appropriate)

Type of HIA	'When to' HIA
Desk-top	Prospective
Rapid	Concurrent
Comprehensive	Retrospective

Will Community Participation be undertaken as part of the HIA (e.g. Focus Groups/Workshops)

Yes

No

Step D – Associated Risks

The Steering Group should consider if there is likely to be any resource or budgetary risks associated with undertaking the HIA or the implementation of the Proposal, for example staffing resources/skills to undertake the HIA, costs for undertaking focus groups, HIA printing costs (see **SN4** HIA skills and training).

State identified associated risks in the box below.

Step E – Recommendations

Who will be responsible/oversee for ensuring the implementation of the recommendations?

How will the implementation of the recommendation be monitored/reported?

Step F – Dissemination of the HIA

Where will the HIA report be reported to and by whom? (Boards/committees)

Where –

Who –

Contact Steering Group Details – complete as required.

HIA Steering Group Details		
<i>Name</i>	<i>Organisation</i>	<i>Contact Details</i>

Screening Supporting Notes.

Section A – Takes the Steering (Screening) Group through a host of questions relating to the Proposal Policy Context.

Supporting Note 1
(SN1)

Purpose of HIA Steering Group

*The **Steering Group** will take responsibility for*

- *Screening the Proposal,*
- *agreeing the Terms of Reference for the HIA. Aspects to be considered and included within the Terms of Reference include:- geographical boundaries, those to be involved in the HIA process (Key informants, participants in focus groups) and dates of meetings,*
- *Ensuring the HIA be kept on schedule and with minuted meetings,*
- *Managing any barriers, difficulties or limitations that occur through the HIA process and*
- *Ensuring appropriate dissemination of the HIA and the HIA Recommendations.*

Section B – Supporting Notes relating to Section B questions.

Question 1 - Identification of positive or negative health impacts (a list of examples of determinants of health can be found on page 10). **Consider direct and indirect health impacts.** It is recommended that short sentences are used within the justification box rather than bullet points.

Question 2 – It is important to explore any **population groups** that may be adversely affected by the implementation of a Proposal. It is possible that if an Equalities Impact Assessment has been undertaken this may highlight any population groups that are likely to be affected (examples of population groups can be found on page 11).

Question 3 – This question incorporates **health equity** – it may be easier to consider if a health impact is unfair to either a group of people or an individual.

Question 4 – Community Concerns. This may or may not be an issue at the point of screening depending at what stage the Proposal development has reached. However, if there has been some public consultation/involvement with the Proposal it may be worth gathering the health impacts from any consultation to include within the screening.

Question 5 – Limitations - This question is designed to identify any potential problems that may occur if a HIA is undertaken. Identifying limitations early in the process will allow the HIA Steering Group to deal with them or be aware of any problems.

Section C – Supporting Notes relating to Section C questions – **Scoping the HIA**

This section takes the HIA Steering Group through the scoping process. This sets the blueprint or parameters for the HIA. This helps the group to develop the aims and objectives for the HIA, helps keep the HIA to timescales and engages with the Steering Group which allows ownership.

Supporting Note 2
(SN2)

Developing aims and objectives for the HIA

Aim – The aim gives the HIA direction, principally a statement of what the HIA wants to achieve.

Objectives – These are essentially the stepping stones developed to support achievement of the aim.

Supporting Note 3 (SN3)

HIA Options (types and timescale)

Type of HIA & ‘when’ a HIA is undertaken.

****Please note that where possible it is seen as more opportune to undertake a HIA at the start of a new Proposal, although this in reality may not be the case and not always possible.****

There are a range of options of the type and depths of HIA. The decision of which type and to what depth will be influenced by a number of scoping questions such as:-

- time,
- resources and
- HIA skills/knowledge.

Types of HIA:-

- *Desk-top HIA* - Undertaken with limited resources, unlikely to include any community participation.
- *Rapid HIA* - Includes a broader evidence search and **some community participation**. Still undertaken with some constraints (such as limited resources and time).
- *Comprehensive HIA* - More in-depth and carried out over a longer period of time.

Community participation/focus groups etc can play an important part to gathering a wide range of potential impacts beyond identified by the Steering Group. Consider such aspects as timescales, cost and facilitation skills.

The “when” is an important factor to consider and will be determined by what stage the strategy, proposal or program is at.

‘When’ to undertake a HIA:-

- *Prospective HIA* - Conducted before a proposal is implemented.
- *Retrospective HIA* - Conducted after proposal implementation.
- *Concurrent HIA* - Conducted during proposal implementation.

Supporting Note 4 (SN4)

Training / up-skilling requirements suggestions to carry out a HIA:

◆ 2 hour briefing session.	◆ ½ day awareness raising of HIA.
◆ 1 day HIA training course.	◆ Action Learning Set (ALS).

It may not be possible to undertake specific training, up-skilling requirements as suggested above for a number of reasons (such as time, geography of participants etc) but please contact IMPACT at www.liv.ac.uk/psychology-health-and-society/research/impact/about/ for HIA training and up-skilling resources.

A final word - Experience has taught the Liverpool HIA Researcher Fellow/Officer the importance of screening and creating a solid scope for the HIA. With these two sections of the HIA methodology completed the rest will follow naturally, not necessarily without thought provoking discussions, but the screening and scoping will allow a tighter hold on the HIA.

List of determinants of health (please note this list is not exhaustive)

Categories of health determinants	Specific health determinants
Socio-economic, cultural & environmental conditions	<p>International, national and local public policies (e.g. economic, health, employment, education, defence, transport, housing, foreign, immigration, welfare policies). International, national and local public/population-based services (e.g., emergency services, policing, health and social care, immigration, education, transport, welfare, child care, leisure). Expressed/perceived social/cultural values and norms (e.g. discrimination, fear of discrimination, attitudes to different population groups, equity and fairness). Relationship between state and citizen.</p>
Living and working conditions (physical environment)	<p>Housing (e.g. conditions, availability). Working conditions (e.g. exposure to hazards). Quality of air, water, soil. Noise. Waste disposal. Energy use and sustainability of resources. Land use. Biodiversity. Accessibility to people, places, products.</p>
Social and community influences (socio-economic environment)	<p>Social support and integration. Social exclusion. Community spirit. Community involvement in public policy decision-making. Employment (e.g., availability, quality). Education/training (e.g. availability, quality, affordability).</p>
Individual lifestyle factors	<p>Personal behaviours (e.g. diet, activity, smoking, alcohol consumption, drug misuse). Personal safety. Employment status. Educational attainment. Income, including disposable income. Self-esteem and confidence. Attitudes, beliefs - 'locus of control.'</p>
Biological factors	<p>Age, sex, genetic factors.</p>

List of Population Groups

Entire Population	Pregnant women
New Mothers	Children (0-4)
Children (5 - 12)	Young people (13-16)
Young people (17-25)	Older People
Unemployed people	Employees
People affected by divorce	People experiencing bereavement
People living in poverty	Carers
Homeless people	People with physical disabilities/illness
People with learning disabilities	People with mental health problems
People with alcohol problems	People with drug problems
People who experience abuse of any kind	Gay men, lesbians, bisexual people
People who experience domestic violence	Specific ethnic groups
Other	Geographic area

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