DH INFORMATION READER BOX

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Contents

Executive summary				
Con	sultati	on	10	
1.	Pur	pose and benefits	13	
2.	Strategic Environmental Assessment		15	
	2.1	Strategic Environmental Assessment	15	
	2.2	SEA and consultation	10	
	2.3	Sustainability Appraisal	18	
	2.4	Other related forms of assessment	18	
	2.5	Relevant plans and programmes	21	
3.	Con	Considering the population's health in SEA		
	3.1	The European context	27	
	3.2	UK health policy	28	
	3.3	Health considerations in SEA	30	
	3.4	Direct and indirect effects on population health	34	
	3.5	Health in types of plans or programmes	34	
	3.6	SEA topics and health evidence	35	
	3.7	How health organisations contribute to the SEA process	36	
		Information sources	38	
	3.9	Performance management for population health	40	
4.	Stag	Stages in the SEA process		
	4.1	Overview	41	
	4.2	Stage A: Setting the context and objectives, establishing the baseline and		
		deciding on scope	43	
	4.3	Stage B: Alternatives and assessment	57	
	4.4	Stage C: Preparing the Environmental Report	62	
	4.5	Stage D: Consultation and decision making	62	
	4.6	Stage E: Monitoring implementation of the plan or programme	63	

Annex A: Devolved administrations information	65
Annex B: Health organisations in England – roles, responsibilities and information	67
Annex C: Health by types of plans and programmes	81
Annex D: SEA topics and health evidence	84
Annex E: Frequently asked questions	91
Annex F: Do's and don'ts (short summaries of the guidance)	94
Annex G: Workshop participants	99
Glossary	101
Bibliography	105

Abbreviations

APHO Association of Public Health Observatories

APHR annual public health report

CLG Department for Communities and Local Government

BMA British Medical Association

DA devolved administration

DASS Director of Adult Social Services

DfT Department for Transport

DH Department of Health

DPD development plan document

DPH Director of Public Health

DTI Department of Trade and Industry

EA Environment Agency

EHO Environmental Health Officer

EHIS environment and health information systems

EIA Environmental Impact Assessment

EQIA Equality Impact Assessment

ER Environmental Report

GLA Greater London Authority

HIA Health Impact Assessment

HPA Health Protection Agency

HPU Health Protection Unit

IPPC Integrated Pollution Prevention and Control

KSI key success indicator

LA local authority

-36-

LAA local area agreement

LDD local development document

LDF local development framework

LDP local felivery plan for primary care trusts

LINks Local Involvement Networks

LPA local planning authority

LRS local and regional services of the Health Protection Agency

LSP local strategic partnerships

LTA local transport authority

LTP Local Transport Plan

NHS National Health Service

NICE National Institute for Health and Clinical Excellence

ODPM Office of the Deputy Prime Minister

PAH polycyclic aromatic hydrocarbon

PCT primary care trust

PHO Public Health Observatory

PPS planning policy statement

PSA Public Service Agreement

QOF Quality and Outcomes Framework

RA Responsible Authorities

RBMP River Basin Management Plan

RES Regional Economic Strategy

RDPH Regional Director of Public Health

RIA Regulatory Impact Assessment

ROWIP Rights of Way Improvement Plan

RPHG regional public health group

RSS regional spatial strategy

RTPI Royal Town Planning Institute

SA Sustainability Appraisal

SCI statement of community involvement

SCS Sustainable Community Strategy

SEA Strategic Environmental Assessment

SHA strategic health authority

SPD supplementary planning document

THE PEP Transport, Health and Environment Pan-European Programme

UKPHA United Kingdom Public Health Association

WAG Welsh Assembly Government

WHO World Health Organization

Executive summary

This document supplements existing UK-wide guidance on Strategic Environmental Assessment (SEA) (A Practical Guide to the Strategic Environmental Assessment Directive (2005) ODPM et al), by providing a good practice guide to including the population's health in SEA. This document has been written by the Department of Health (DH) in close collaboration with the Health Protection Agency (HPA) and has been prepared in consultation with the Department for Communities and Local Government (CLG) and the Environment Agency (EA). The guidance is intended to help authorities assess the health effects of their plans and programmes more effectively and is based on current good practice. We are asking consultees for their views on the effectiveness of this guidance.

This guidance is relevant to SEAs that cover England, or England plus any other part of the UK, so will be relevant to plans at a UK level. It has two main audiences:

- health organisations, including primary care trusts (PCTs), the HPA and Public Health Observatories (PHOs) to help in engagement in and responding to the SEA process, thereby maximising public health gains; and
- organisations responsible for preparing plans and programmes subject to the SEA Directive (known as Responsible Authorities or RAs) to identify the right people to contact in health organisations, and where to obtain the most relevant information on the effects of plans and programmes on the population's health.

Relevant contacts for Wales, Scotland and Northern Ireland are listed in Annex A. The Welsh Assembly Government (WAG) will be producing separate health and SEA guidance later this year.

Key messages are as follows:

- SEA consultation must be carried out with the public and certain named organisations (known as Consultation Bodies). As a health organisation is not included amongst the Consultation Bodies, this guidance encourages interaction between RAs and health organisations to ensure that the population's health is assessed during the SEA process.
- SEA is a major opportunity to prevent ill health and tackle health inequalities as set out in the White Papers *Choosing Health* and *Our health, our care, our say.*

- RAs should know and understand how health is affected by their plans and programmes so that, in assessing them, major relevant health issues are covered, maximising positive effects and preventing, offsetting or minimising negative ones, and promoting healthier planning as set out in the White Paper Strong and Prosperous Communities.
- Health organisations should be effectively engaged in the process, with the health needs of the population being addressed in the SEA process.

SEA assesses the effect of certain plans and programmes on the environment, including on the population and human health (see Resource box 2). To cover these, this guidance refers to the population's health.

The guidance is designed to be a resource for further information and is set out as follows.

- Chapter 1: Sets out the benefits of integrating health assessment within SEA for plan makers and health organisations.
- Chapter 2: Introduces the SEA and Sustainability Appraisal (SA) process, including links to other forms of assessment and related plan making processes.
- Chapter 3: Presents information for considering the population's health in SEA.
- Chapter 4: Sets out the stages of SEA and contains detailed information on how to consider possible effects on health throughout the assessment process.
- Annex A: Contains information on devolved administrations and their health consultation links.
- Annex B: Provides an overview of health organisation roles, responsibilities, information and resources.
- Annex C: Gives more detailed information on health effects in types of plans.
- Annex D: Provides examples of evidence for topics covered by SEA.
- Annex E: Contains frequently asked questions for quick reference.
- Annex F: Sets out two sets of "do's and don'ts", one for PCTs and one for RAs. These have been designed as a form of quick access to essential information.

Annex G: Lists the participants in stakeholder workshops that have informed this guidance.

A glossary of terms is provided to explain the terminology used in the document and there is a bibliography with websites for key documents.

The guidance is illustrated by a number of examples, case studies, resources and key point boxes. These are not intended to represent best practice, but simply to show how health has been addressed in SEA to date. These are colour coded for ease of reference:

Example box	Case study box
Resource box	Key point box

The Government is committed to ensuring that any net additional cost of new burdens placed on local authorities is funded as required under the new burdens rules.

Consultation

The consultation document is available on the Department of Health website at www.dh.gov.uk/consultations. The consultation period is from 19 March to 19 June 2007.

All consultation responses should be sent to:

Colleen Williams
Department of Health
Room 580D
Skipton House
80 London Road
London SE1 6LH

Email: Colleen.Williams@dh.gsi.gov.uk

Consultation events

There will be a number of events during the consultation period in each of the Government Regions, where PCTs, RAs, EA, HPA, PHOs, Government Offices and public health groups can discuss the practical details of considering health issues as an integral part of SEA. To find out more about these and other events still being planned, please contact the regional public health group in your area through the Regional Government website.

Confirmed events are as follows:

North East Region March

East of England End of March event on planning and health

East and West Midlands Combined event March/April

The guidance will be available at related professional conferences including the Institute of Environmental Management and Assessment (IEMA) SEA Forum on 14 March in Leeds, UK Public Health Association (PHA) on 28–29 March in Edinburgh, and Chartered Institution of Water and Environment Management (CIWEM) on 26 April in Birmingham.

10

The consultation criteria

This consultation is being conducted in accordance with the Government's Code of Practice on Consultation. The criteria below apply to all UK national public consultations on the basis of a document in electronic or printed format. The criteria are as follows:

- 1. Consult widely throughout the process, allowing a minimum of 12 weeks for written consultation at least once during the development of the policy.
- 2. Be clear about what your proposals are, who may be affected, what questions are being asked and the timescale for responses.
- 3. Ensure that your consultation is clear, concise and widely accessible.
- 4. Give feedback regarding the responses received and how the consultation process influenced the policy.
- 5. Monitor your department's effectiveness at consultation, including through the use of a designated consultation coordinator.
- 6. Ensure your consultation follows Better Regulation best practice, including carrying out a Regulatory Impact Assessment if appropriate.

A summary of responses will be published on the Department of Health website at www.dh.gov.uk/news

Unless you specifically state that your response, or any part of it, is confidential, we shall assume that you have no objection to its being made available to the public on the Department of Health website.

The final document will be published in summer 2007 and will be supplemented by additional web-based information regarding the evidence base on human health impacts.

Complaints

If respondents have comments or complaints about the consultation process, these should be directed to:

Consultations Coordinator Department of Health Skipton House 80 London Road London SE1 6LH

Email: mb-dh-consultations-coordinator@dh.gsi.gov.uk

Consultation questions

Your views about the relevance and content of the advice is sought through responses to the following questions, the questions at the end of each chapter and any other comments you wish to make. Comments and suggestions are welcome on all aspects of the document. These will be used to inform the final document to be published later this year.

- 1. Is it clear how the consideration of human health can be covered in the SEA process and how this can be achieved?
- 2. Are the right health organisations and contacts referred to and included in this guidance?
- 3. Does this provide you with the right type of information and data sources for considering the population's health in the SEA process?
- 4. Does the guidance make clear the process for obtaining information and advice on the population's health?
- 5. Is the type of health-sector input appropriate for the five stages of SEA?
- 6. Is the health organisations' input provided at the most appropriate time within the process?
- 7. What additional information, if any, would be helpful for RAs when addressing health in the SEA process?
- 8. Do you feel there are any other issues relating to equality that should be covered?
- 9. Do you think the length of the document and level of detail is appropriate?
- 10. What impact do you anticipate this guidance will have on the work of your organisation (NHS and RAs)?
- 11. Are there any other comments you would like to make?

Chapter 1: Purpose and benefits

European Directive 2001/42/EC, known as the Strategic Environmental Assessment or SEA Directive, requires a formal environmental assessment of certain plans and programmes. In undertaking this assessment, the likely significant effects on the environment of implementing these plans and programmes must be considered, including the effects on population and human health.

Strategic Environmental Assessment (SEA) and Sustainability Appraisal (SA) provide a significant opportunity for the population's health to become a central part of assessing plans undertaken by plan makers (identified in the UK SEA Regulations as Responsible Authorities (RAs)). RAs include local authorities, the Environment Agency and others whose plans and programmes are captured by the SEA Directive. The guidance is intended to help authorities assess the health effects of their plans and programmes more effectively and is based on current good practice.

For Responsible Authorities, this guidance will assist them in meeting their obligations to take account of human health in SEA.

For health organisations, the SEA process presents an opportunity to prevent ill health and promote good health through influencing the wider determinants of health (transport, housing, education, employment, community safety and the built environment). Further benefits are detailed in Example box 1.

Example box 1: Potential benefits to primary care trusts (PCTs) in engaging in the SEA process

- improvements in the health of the population through providing the right environment for healthier lifestyles;
- ensuring the wider determinants of health are considered by plan makers where relevant;
- reduction in health inequalities;
- reduction in the financial burden on the PCT both by reducing the prevalence of ill health and by preventing illness at an earlier stage;
- aid in meeting PCT national and local targets (eg Public Service Agreement targets);

- strengthened partnerships between planning and health stakeholders;
- capacity building will increase the ease of dealing with other assessment processes requiring potential PCT involvement (eg Environmental Impact Assessment and Integrated Pollution Prevention and Control) via the systematic, rigorous, integrated consideration of health issues in strategic planning decisions;
- other organisations encouraged to help the PCT deliver its health targets;
- the opportunity to focus on longer-term health objectives, tackling the causes of ill health rather than 'fire fighting' present problems; and
- improved community engagement.

SEA presents an opportunity and broad framework for bringing plan makers and health organisations together to achieve healthy planning, as set out in *Choosing Health*, *Our health, our care, our say*, and *Strong and Prosperous Communities*.

Chapter 2: Strategic Environmental Assessment

Key point box 1: Health and Strategic Environmental Assessment

"The environment in which we live is a major determinant of health and well-being. Recent concerns about levels of physical activity, obesity, asthma and increasing environmental inequality have put health back on the planning agenda. It is widely recognised that public health is being compromised by both the manner of human intervention in the natural world and the manner of development activity in our built environment." (Larkin, 2003)

2.1 Strategic Environmental Assessment (SEA)

The SEA Directive (Directive 2001/42/EC) came into effect on 21 July 2004 and has been transposed into UK law by the Environmental Assessment of Plans and Programmes Regulations 2004 and in Scotland by the Environmental Assessment (Scotland) Act 2005. A Practical Guide to the Strategic Environmental Assessment Directive, 2005 (the SEA "Practical Guide") was prepared and issued jointly by the administrations responsible for implementation throughout the UK, and provides information on the requirements of the Directive and ways of meeting them.

Resource box 1: SEA guidance

 The SEA Practical Guide (ODPM et al, 2005) is available at: www.communities.gov.uk/index.asp?id=1501988

The SEA Directive requires an environmental assessment of certain plans and programmes which are likely to have significant effects on the environment. Key activities for organisations responsible for preparing and/or adopting a qualifying plan or programme (identified in the Regulations as Responsible Authorities) include:

- prepare an Environmental Report on the likely significant environmental effects of implementing the plan or programme;
- consult statutory environmental authorities and the public on the plan or programme and its accompanying Environmental Report;
- take the report and the results of the consultation into account during the preparation process and before the plan or programme is adopted; and

 make information available about the plan or programme as adopted and how the environmental assessment was taken into account.

SEA is an independent assessment of the plan or programme and is carried out concurrently. RAs will either carry out the assessment themselves or commission consultants to assist.

The Department for Communities and Local Government (CLG) has overall responsibility for implementing the SEA Directive throughout the UK, and for subject plans and programmes in England, whilst the Scottish Executive, Welsh Assembly Government and the Department of the Environment in Northern Ireland have similar responsibilities in Scotland, Wales and Northern Ireland respectively.

Key point box 2: SEA in the devolved administrations

Where plans relate to England (or England plus any other part of the UK), the UK regulations will apply. Where they relate to Scotland, Wales or Northern Ireland only, under devolved powers, SEA legislation adopted by the devolved administrations will apply.

Resource box 2: Article 5 and Annex I of the Directive

This specifies that an Environmental Report should be written that includes an assessment of... "the **likely significant** effects on the environment, including on issues such as biodiversity, **population**, **human health**, fauna, flora, soil, water, air, climatic factors, material assets, cultural heritage including architectural and archaeological heritage, landscape and the interrelationship between the above factors." (Footnote: "These effects should include secondary, cumulative, synergistic, short, medium and long-term permanent and temporary, positive and negative effects.")

2.2 SEA and consultation

Consultation requirements

The SEA Directive requires RAs to consult other authorities with certain environmental responsibilities (referred to as Consultation Bodies) at the screening stage in determining the requirement for SEA; on the scope and level of detail required in the Environmental Report; and on the draft plan or programme and accompanying Environmental Report itself. The SEA Regulations specify three Consultation Bodies in England:

- Natural England (formerly English Nature and the Countryside Agency);
- English Heritage; and
- Environment Agency.

The Consultation Bodies have produced a description of the services and standards that Responsible Authorities can expect:

www.environment-agency.gov.uk/commondata/105385/sea_service_standards_838433.pdf

The Environment Agency holds information useful in assessing health impacts, specifically in relation to the environmental quality of soil, water and air and the impact of flooding: www.environment-agency.gov.uk/

Natural England promotes access, recreation and public well-being: www.naturalengland.org.uk/

Consultation in relation to health

However, in order to cover the full range of potential health effects in SEA, it is recommended that RAs contact the relevant Director of Public Health (DPH) (see Key point box 3 and Figure 1) for an opinion at the same time as they engage with the Consultation Bodies, particularly at the scoping stage and during consultation on the draft plan or programme and Environmental Report. See Annex A for all Consultation Bodies in the UK.

RAs may already have direct links with a number of professionals such as Environmental Health Officers (EHOs) and other health organisations such as Health Protection Units and Public Health Observatories. It is recommended that these should be consulted as appropriate, at key stages of the SEA process.

Key point box 3: Who to contact in relation to the health sector

The relevant health organisations are:

- national plans and programmes Department of Health, Health Improvement Directorate;
- regional plans and programmes make contact in the first instance with the Regional Director of Public Health;
- **local plans and programmes** where the plan or programme covers the same geographical area as the local primary care trust (PCT), make contact in the first instance with the Director of Public Health for the relevant PCT; and
- regional/local where a plan or programme covers more that one PCT, consult with both the Regional DPH and each of the relevant PCTs for the area.

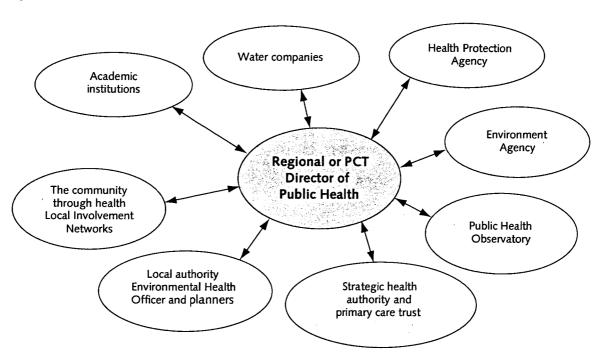


Figure 1: Sources of information for Directors of Public Health when consulted by RAs

2.3 Sustainability Appraisal (SA)

In the UK, most plans and programmes subject to SEA are spatial plans. Sustainability Appraisal (SA) must be undertaken for spatial plans, and involves an assessment of the economic, social and environmental effects of implementing such plans as Regional Spatial Strategies (RSSs), development plan documents (DPDs) and supplementary planning documents (SPDs). Health considerations are relevant to all three components of assessment. The requirements of SEA have been fully incorporated into SA in England.

Resource box 3: SA guidance

 The CLG guidance on SA is available at: www.communities.gov.uk/index.asp?id=1164579

2.4 Other related forms of assessment

The population's health can be incorporated in many forms of assessment. The relationship between some of these is set out in Figure 2. For presentational purposes, the relationship between the planning hierarchy and different forms of assessment has been simplified (eg only some plans/programmes are subject to SEA, and only some projects are subject to an Environmental Impact Assessment (EIA). A Health Impact Assessment (HIA) can be applied outside the context shown here as well.

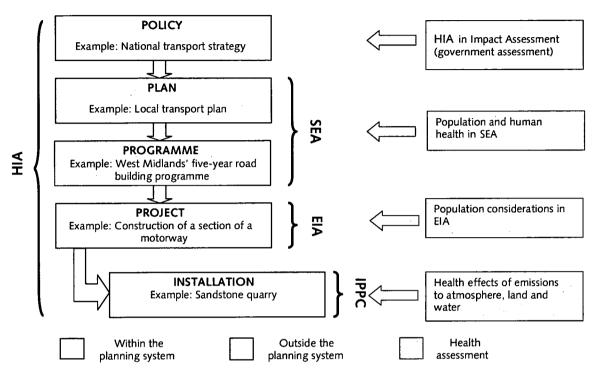


Figure 2: Other assessments and their relationship to health

Source: DH and HPA

Health Impact Assessment (HIA)

HIA assesses the impact of the potential and sometimes unintended effects of a policy, plan, programme or project on the population's health and well-being and the distribution of those effects within the population. It uses both quantitative and qualitative information, data from population needs assessments, literature reviews of the evidence base, and stakeholders and local people's experience and knowledge. It suggests how adverse effects could be mitigated and beneficial ones enhanced to inform decision-makers.

HIA is not a statutory requirement for SEA; however, health considerations should be integrated within the SEA process and other forms of assessment where relevant. An example of how an HIA and SEA have been integrated is shown in Case study box 1.

For further information on HIA, see the HIA gateway website: www.hiagateway.org.uk/page.aspx?o=hiagateway

Case study box 1: Incorporating health in the assessment of the London Plan – the Mayor's Spatial Development Strategy

The need to consider health, sustainability and equalities issues in all policy making is set out in the Greater London Authority (GLA) Act.

An innovative approach is being taken to the SEA of the further alterations to the London Plan: the HIA has been integrated into the SEA. The key aspects of the method are:

- a health representative involved in all aspects of the assessment;
- a literature review of the relevant health evidence;
- key findings from the initial assessment tested on a health stakeholder workshop and the outcome from the workshop fed into the assessment; and
- a report bringing together the health findings of the assessment.

The advantage of integrating health into the SEA process is that this is an iterative process that aims to influence the plan as it develops, so health is considered at an early stage of plan or policy development. There was a close dialogue between policy makers, the SEA team and health professionals.

This resulted in:

- health stakeholders being involved during every stage of drafting the plan;
- a close dialogue between policy makers, the SEA team and health professionals;
- health input into scoping workshops and developing objectives;
- improved access to the health evidence base;
- alternatives being tested on health stakeholders;
- the Environmental Report containing a health section; and
- a separate publication of a summary of the health assessment and literature review.

For further information see: www.londonshealth.gov.uk/urban.htm

Environmental Impact Assessment (EIA)

EIA is a procedure that must be followed for certain types of projects prior to determination of an application for development consent. It requires the developer to compile an environmental statement describing the likely significant effects of the development on the environment, including the effects of a project on human beings (which may include the