Local wellbeing, local growth

Implementing Health in All Policies at a local level: practical examples

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About Public Health England

Public Health England exists to protect and improve the nation’s health and wellbeing, and reduce health inequalities. We do this through world-class science, knowledge and intelligence, advocacy, partnerships and the delivery of specialist public health services. We are an executive agency of the Department of Health, and are a distinct delivery organisation with operational autonomy to advise and support government, local authorities and the NHS in a professionally independent manner.

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The Local Government Association (LGA) is a politically led, cross-party organisation that works on behalf of councils to ensure local government has a strong, credible voice with national government.

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About this document

The 19 examples in this document illustrate how Health in All Policies (HiAP) has been put into practice in the UK and around the world. We have categorised these practical examples as strategic, programme and process according to the way councils and government have considered the issues:

- **strategic**: Focusing on a specific public health issue at a strategic level and identifying policy areas led by particular departments and sectors that impact upon the issue
- **programme**: Focusing on a key service or programme area that is evidenced to have significant health impacts
- **process**: Establishing and/or using a particular mechanism or process to enhance cross-departmental and cross-sectoral working, to introduce the approach and lever action for health, wellbeing and health equity
UK and International examples

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Haringey Borough Council

Health and Wellbeing in all Policies to improve local population health

Aim

To improve population health, avoid harmful health and reduce health inequalities through a system-wide shift towards prevention.

Summary

Public Health in Haringey Council have developed a Health and Wellbeing in All Policies (HiAP) approach by giving greater corporate recognition for the health of all residents, systematically taking into account the health implications of decisions, developing a systematic approach to understanding the policy levers that create health-enhancing environments and seeking synergies across corporate priorities.

Outcomes

- a dedicated new post in the form of a Healthy Public Policy Officer in the Public Health team to work across the council to embed health in the policy-making process
- strong political leadership of a ‘Health in all policies’ approach from the Cabinet Member for Health and Wellbeing
- the formation of the Haringey Obesity Alliance with a range of internal partners and external organisations making pledges to take action on reducing obesity
- working with the Council's Regeneration team to develop an overarching strategic approach to social regeneration
- supporting the development of a very strong Healthy Schools network

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Blackburn with Darwen Borough Council

2014 -17: Preventing harm, improving outcomes for local population

Aim

To prevent harm and improve outcomes through a whole-system, outcome-based alcohol strategy.

Summary

Blackburn with Darwen have adopted a Health in All Policies approach to the development of their strategic priorities. The priorities include responsible retailing, easier access to support for those who need it, ensuring everyone is supported to make informed choices about their alcohol use, protecting those most affected – and working with local communities to reduce alcohol-related crime and them safer places to live.

To implement the strategy, Public Health have both worked alongside other departments within the local authority – and engaged with external agencies, such as the police, Voluntary, Community and Faith sector and community networks.

Internally, the Communications Team have contributed by supporting a range of campaigns and good news stories – some being focussed on individuals who have received the right support and have been able to make positive changes, others being focussed on the view of the people. Public Health have worked with Community Safety with regards to tackle antisocial behaviour, street drinking, domestic abuse and violent crime. Culture Sports and Leisure have engaged as part of the wider ‘Refresh’ Wellbeing Service offer.

External partners include:

- volunteer networks, community champions and ambassadors: providing awareness-raising opportunities within protected groups, primary care, communities, key locations and partner agencies
- schools, young people and adults: developing a range of multimedia campaigns to raise awareness e.g. ‘Totally Wasted’, ‘Stop the Supply’ and ‘See What I See’
- CGL (Change Grow Live – formerly CRI) Go2 YP and Inspire Adult (drugs and alcohol service): providing primary prevention, education, advice and brief interventions, targeted prevention including assertive outreach, extended brief interventions and specialist prevention/support where needed for people across the
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life course. The service is growing its integrated offer working with a range of wider family and neighbourhood support services and community networks.

The strategy incorporated a number of actions:

- intervene early with individuals who are at risk of causing harm fuelled by alcohol, including harm within the home; intervene early with families seeking support and within our neighbourhoods, where alcohol is a particular risk factor for anti-social behaviour and violence.
- implement a robust approach, combining assertive outreach with bespoke innovative long-term support options and, where necessary, enforcement measures with known hazardous drinkers.
- support the pilot of an Early Action Police Liaison Role within the A&E Department at Royal Blackburn Hospital for a 12 month period. This is to provide a safe and integrated police support role within A&E to facilitate early referral into targeted services to improve outcomes for individuals and families and potentially reduce demand.

Early outcomes:

- good progress has been made with most of the initiatives and all partners and key stakeholders recognise the benefits of strong partnerships.
- many of those involved have accepted challenges and learnt lessons from each other.
- fragmentation can still occur with information-sharing often mentioned as a key challenge.
- as wider developments progress, it is recognised that ‘improved integration’ is key in terms of longer-term sustainability and improved outcomes, locally there is a real appetite to achieve these.
- we know that we need to improve the collection of data and evidence to support developments going forward, a range of benefits appear to have been demonstrated but often only supported by anecdotal evidence/self-reported feedback, there is still more to do.
- co-production and asset-based approaches have been recognised as key and are being well embraced by partners, community networks and the people of the borough.

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Kirklees Council

Economic, health & wellbeing strategy working as one in local government: Healthy people, healthy economy

Aim

To address health inequalities and support the local economy through transformational system change at a time of decreasing budgets.

Summary

A Health in All Policies approach has enabled a discussion of the role of public health with councillors and of how it could support their portfolio of work. The Kirklees Joint Health & Wellbeing Strategy (JHWS) and Kirklees Economic Strategy (KES) were aligned to take advantage of joint opportunities. The two groups also identified links and areas of congruency – with the principles of health and economy being mutually supportive. Councillors have signed up to the joint vision and outcomes.

This collaborative working ensures that relevant health and economic issues are considered and the joint goals of both strategies are embedded across policy and delivery. It also enables early identification of interdependencies, reduces duplication and provides a focus on identified priorities. Areas of duplication and work that can be linked have been identified through the Q1/Q2 reports for each directorate.

Through joint governance arrangements, input from key leaders and influencers is guaranteed and both organisations are accountable.

The council is being redesigned and restructured to put delivery of economic prosperity and better wellbeing and health at its core. This refocus includes organisational and performance structures, from service delivery plans through to individual appraisals.

Early signs of success

- the Kirklees Local Plan vision and objectives have been jointly developed to reflect how ambitions for personal prosperity and health, together with ambitions for jobs and business growth effect planning for new development
- CCGs are now routinely consulted regarding significant planning applications and how this may impact on health services
- in areas being considered for land development, a methodology has been developed to prioritise for health impact assessment review according to greatest health need.
• guidance for procuring for social value has been produced
• The Health and Wellbeing Board and the Economy & Skills Board are meeting every six months

For more information:
Wakefield Council

Developing wellbeing: creating health action plans for services responsible for the wider determinants

Aim

To create a health-promoting council by maximising the health improvement and protecting potential of non-health based council services. To develop public health skills in the wider public health workforce.

Summary

Council services, such as Transport, Housing, Environmental Health, Culture and Economic Development, have an influence on the wider determinants of health. Wakefield’s Health Improvement team has a dedicated small team based in the Regeneration Directorate who support these council services in order to protect and promote health and wellbeing.

The team has held workshops with their colleagues in the respective services to develop a shared understanding of how the services impact on health and wellbeing – and identify areas of good practice and opportunities for future development. They have worked together to produce Health Improvement Action Plans for each service detailing current activity and future priorities. These have been signed off by the management teams.

Common features of the plans include using evidence to inform the development of policies/projects, partnerships and information sharing, evaluating impacts of an intervention and training and development. Progress on the plans is monitored and reported back to management teams on a regular basis.

Early outcomes

- Public Health approaches are being used to inform the planning and delivery of policies and plans
- plans developed by the staff have clear lines of accountability – with health and wellbeing at their core

For more information: helenlaird@wakefield.gov.uk
Durham County Council

Alcohol Harm Reduction Strategy

Aim

To change the drinking culture in County Durham to reduce the harm caused by alcohol to individuals, families and communities while ensuring that adults who choose to drink alcohol are able to enjoy it responsibly.

Summary

Alcohol harm reduction has been identified as a cross-cutting priority by County Durham Partnership. This signifies the impact alcohol has not only on health, crime and disorder and on children and families, but also on the County Durham workforce and their productivity – as well as the local environment.

Durham County Council and its partners, during the course of this strategy are planning to commit to a declaration on alcohol. There are a number of actions, including:

- influencing national government to take the most effective, evidence-based action to reduce alcohol harm, particularly via the introduction of greater regulations around the price, promotion and availability of alcohol
- influencing national government to rebalance the Licensing Act in favour of local authorities and communities, enabling local licensing authorities to control the number, density and availability of alcohol according to local requirements
- developing evidence-based strategies and commissioning plans with our local communities and partners including the local NHS Acute Trust, Clinical Commissioning Groups and the police

Results/outcomes

- Durham have found that having alcohol harm reduction in HIAP and as cross-sector partnership working is particularly effective in reducing alcohol-related violent crime, reducing alcohol-related admissions to hospital per 100,000 (narrow measure/PHOF) and increasing the number of people in recovery or abstinent

For more information: Lynn.wilson2@durham.gov.uk
Bath and North-East Somerset

Multi-faceted approach to improving health and wellbeing and reducing health inequalities

Aims
To improve local health and wellbeing and reduce health inequalities by influencing the determinants of health and wellbeing.

Summary
Through its Health and Wellbeing Strategy, the Health and Wellbeing Board has developed a multi-faceted approach with a clear strategic framework and two clear priorities: “Creating healthy and sustainable places” and “Improving skills and employment”.

Strands of work include:

- economy and employment. Health and wellbeing has been included as a cross cutting theme in the Bath and North East Somerset (B&NES) Economic Strategy planning. Stronger relationships are being developed between Health and Planning colleagues in order to consider how good health and wellbeing can be supported through local planning processes
- Transport. The council has been working with partners such as Sustrans to make Bath and North East Somerset more accessible on foot and by bike. The Council’s Transport Plan for Bath ‘Getting Around Bath’ promotes walking and cycling, and sets the vision for a walking-friendly city
- Food strategy. Bath and North East Somerset has also developed a local authority-wide food strategy to promote healthy, sustainable and local food. The aim is to get healthy, affordable food to everyone and to transform their food culture to one that improves health and wellbeing, environmental sustainability and the local economy (e.g. communal food growing, cooking and growing skills and local food markets)
Devon County Council (1)

Supporting emotional health and wellbeing for school-aged children (5 to 19)

Aim

To support the emotional, psychological and social wellbeing needs of children and young people in Devon.

Summary

Public Health Devon has co-designed a new service and programme with schools, children and young people. The programme focuses on the promotion of emotional wellbeing and the prevention of mental illness, and the early identification and intervention to prevent problems and difficulties from escalating.

Extensive and robust consultation and co-design process with schools – and children and young people led to the successful commissioning and procurement of three strands, which started in September 2015:

- blended model of online and face-to-face counselling for children and young people aged 11-18. This includes online support and self-help information, online access to individual, one-to-one support, monitored peer support chat rooms and a pathway to face-to-face support from local providers, which is bookable online.
- targeted group parenting programmes for parents or carers of children aged 5 to 11 years. The need for parent support, particularly for primary school-aged children, a current gap in delivery, was strongly advocated by schools. The efficacy of parent support on children’s behaviour is well-documented, particularly through evidence-based parenting programmes.
- support for schools encompassing whole-school training, advice and clinical supervision. The programme of work consists of raising awareness and skilling up the existing school workforce – and making sustainable curriculum and environmental changes to increase the positive factors that influence the emotional health and wellbeing of pupils

Results/outcomes

Available Spring 2016.

For more information: Becky.carmichael@devon.gov.uk
Devon County Council (2)

Devon Local Nature Partnership: Naturally Healthy Priority

Aim

To promote health equality and improve health through championing Devon’s natural environment. To support the environmental sector to embed the health benefits of the natural environment into their strategic priorities and to improve access for members of the public. To specifically target initiatives for children, young people and families at those living in areas of deprivation or with long-term health conditions.

Summary

Partners from the health, Local authority, public, voluntary and environmental sectors have formed a working group to oversee delivery of the Naturally Healthy priority. There was also a social marketing behaviour change scoping review by Public Health Devon to develop an evidence-based practical resource and ensure energies are directed into the right elements.

The scoping review was disseminated through a workshop with 50+ partners from the environment, voluntary, health and physical activity sector. It was used to develop the national parks Naturally Healthy project and the green prescription pilot. This aims to demonstrate the health and wellbeing benefits both to individuals (from target communities) and to health professionals of visiting Dartmoor & Exmoor National Park and of having experiences in the natural environment.

The review has also been used to shape the specification for the Naturally Healthy Devon Schools pilot and influence the work of the Green Infrastructure LNP priority.

Results

- The University of Plymouth is evaluating the Naturally Healthy project across both National Parks and supporting the evaluation of the Naturally Healthy Devon Schools project.

For more information: Kirsty.Priestly@devon.gov.uk
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Medway Council

Collaborative Working Agreements (CWA): Embedding health throughout council departments

Aim

To reduce health inequalities and to improve health by ensuring the council works collaboratively.

Summary

Medway adopted a HIAP approach, identifying shared objectives and developing Collaborative Working Agreements (CWA) between council services and Public Health. Since 2014, 12 signed CWAs have been put in place with 25 services collaborating. Medway is continually exploring and agreeing to opportunities for further work, as a means of ensuring the process is continuous and monitored. Support from the Corporate Management team has been critical to overcome the key barriers of fear and misconception of intent.

Results/outcomes

The CWA process has been successfully established between several services within the Council. It has proven to be a useful format to engage and retain a joint working approach.

- Road safety: joint working with the Road Safety team started as financial support for some initiatives. The current service plan reflects how their work impacts not just on the physical injuries but the emotional and mental wellbeing of the residents. Area profiles are considered when implementing engineering and educational initiatives. Both services attend public events jointly, consult on all shared objectives and deliver key health campaigns in unison, also retweeting each other’s messages and sharing them on Facebook.
- Strategic housing services: A CWA between Housing and Public Health has forged strong collaborative links, a commitment from Housing to contribute to the JSNA and the Annual Public Health reports. Public Health was involved in the new Housing Strategy developments and several of the strategy actions are discussed at CWA monitoring. Public Health Officers are now invited to be more closely involved in services with established shared objectives, such as Homelessness services, Housing provider forums and adaptions

For more information: Kscott.elliott@medway.gov.uk
Derbyshire County Council

Embedding health impact assessment in an equality impact assessment process

Aim

To advance equality of opportunity, eradicate unlawful discrimination and harassment, and promote good community by embedding the systematic consideration of health into Council decision-making.

Summary

As part of its equality impact assessment (EqIA) process, Derbyshire County Council has worked to advance equality of opportunity, eradicate unlawful discrimination and harassment, and promote good community. The transfer of Public Health to local authorities presented an opportunity to extend the process to include the systematic consideration of health. The proposal was led by the Director in Public Health and supported by senior officers and members. The Council has developed and piloted a health impact assessment (HIA) screening tool, which included a consideration of mitigations.

During the pilot (March-June 2015), six Cabinet reports requiring an EIA were submitted. Of these, four had the HIA screening tool completed, including potential reductions to children’s centres and the revised specification of the Council’s domestic abuse services contract. One further checklist will be completed for the residential provision for older people. A further rapid, prospective, participatory health impact assessment of a major infrastructure development in Chesterfield (value: £21m) has begun. The Council intends to embed HIA screening into all Council EIAs and evaluate the impact of HIA screening.

Early learnings

- embedding HIA screening into Council EqIAs has been welcomed by members and officers and it has been a low-cost process (public health staff time + minimal officer time)
- it has led to full HIAs, which have resulted in recommendations likely to improve health and to mitigate harms to health and increased engagement of affected communities and partner agencies into the decision-making process.

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West Yorkshire and Partners

West Yorkshire Air Quality and Health Strategy Project: behaviour change toolkit and communication tool

Aim

To reduce ambient air pollution in the region by promoting behaviour change at an individual level, by encouraging communities to engage in active travel, and by influencing policy decision-making at a local and regional level through raising awareness of air quality and its impact on health.

Summary

Five West Yorkshire Local Authorities, Public Health England and METRO (within the Combined Authority portfolio) are working together with experienced researchers from the Bradford Institute for Health Research (NHS) and the University of Leeds.

The project will harness a range of skills and experience to translate health research outputs directly into municipal policy-making to improve air quality and health. One of the outputs from the project will be a behaviour change toolkit that can be adopted by Local Authorities and a communication tool for policy decision-makers and Air Quality Management teams.

Results/outcomes

Researchers from BIHR and the University of Leeds will conduct the research for this project, which will be completed in December 2016.

For more information: sara.ahern@bradford.gov.uk
Swindon Borough Council (1)

Working across Public Health and New Development Planning

Aim

To create a healthy environment within a new housing development that is relevant from retirement to end of life – and attractive to potential buyers.

Summary

Public Health is working with the Planning team to support and influence new communities so that thinking about health is integrated from the beginning. The teams are working together to develop the vision and strategy for Phases 2 and 3 of the Wichelstowe development.

The team has conducted research to understand the evidence of the benefits of creating a healthy environment and of promoting inclusive housing design. This has included synthesising available evidence as to the potential impact on house prices of creating a healthier and therefore more desirable development. Public Health have also facilitated the sharing of best practice about what works – and encouraged the consideration of practical measures to promote health that can be proposed to developers:

- making the retail centre smoke free
- incorporating green gyms and a wellbeing centre
- welcome packs to residents with information about leisure opportunities
- best practice in dementia design.

Results/outcomes

Evaluating impact and evidencing the commercial benefits from investing in a healthy environment are challenging. Swindon Council is exploring whether a cohort study is feasible to follow residents over time and understand the impact of the new community on health.

For more information: Cherryjones@swindon.gov.uk
Swindon Borough Council (2)

Multi-sectorial weight management strategy

Aim

To reduce levels of obesity and increase physical activity in Swindon.

Summary

Swindon has adopted a Health in All Policies approach to its healthy weight strategy by bringing together multi-sectorial partners, including: Planning; Transport; Housing; Localities; Adult, community and family learning/ routes to employment; the Learning disability services; the Healthy schools programme and Public Health. Swindon CCG, local NHS providers, and local community and voluntary groups have also partnered in its development.

Results/outcomes

Programmes to tackle obesity involve a range of stakeholders:

- community healthy cookery programmes: these are commissioned by Public Health, and delivered by Adult and Family Learning, working with the Housing department to target priority groups; the Learning disability service and other local providers
- weight management programmes for adults and children, which are promoted by the Housing department and other local providers to their clients

For more information: Fdickens@swindon.gov.uk
Coventry City Council

Coventry: A Marmot City

Aim

To reduce health inequalities through working together with partners to develop initiatives which would address the six Marmot policy objectives. To embed proportionate universalism in the day-to-day work of local departments, teams and organisations and to ensure that the impact on health and inequalities is considered in everything that they do.

Summary

To improve the health, wellbeing and life chances of the people of Coventry, reducing inequality is vital. The transfer of public health to local authorities in April 2013 provided Coventry with an opportunity to broaden the ownership of the health inequalities agenda. Coventry committed to delivering rapid change in health inequalities and was one of seven cities in the UK invited to participate in the Marmot Network and become a Marmot City, addressing the six Marmot policy objectives:

- giving every child the best start in life
- enabling all children, young people and adults to maximise their capabilities and have control over their lives
- creating fair employment and good work for all
- ensuring a healthy standard of living for all
- creating and developing healthy and sustainable places and communities
- strengthening the role and impact of ill health prevention

This has provided Coventry with access to the international expertise of the Marmot Team based at University College London.

Partners from different parts of Coventry City Council, NHS Coventry and Rugby Clinical Commissioning Group, West Midlands Police, West Midlands Fire Service and Voluntary Action Coventry have worked together to embed the Marmot principles into the core functions of the council and its partners. This means that the impact on health, equality and social value is considered in everything that these organisations do.

Results

The work is now in its second phase and will be continuing until 2019.
Between April 2013 and 2015, the life expectancy gap in Coventry between the most affluent and most deprived has narrowed (from 11.2 years to 9.4 years for men), and there have been improvements in educational development, health outcomes, life satisfaction, employment and reductions in crime in priority locations:

- nearly 60% of reception pupils in 2014 left their first year of education with a ‘good level of development’. This is an increase of 4% compared to 2013, and Coventry is now above the regional average and in line with the national average
- 42.3% of reception pupils with free school meal status left their first year of education with a ‘good level of development’, significantly above the regional and England average of 36%
- there has been a 22.5% reduction in crime in priority locations

In 2015, Coventry City Council produced a case study report, focusing on the real stories of people who have been affected by the work of the Marmot City programme, and a video, which features key senior leaders and their thoughts on what it has meant to Coventry to be a Marmot City. See: [http://www.coventry.gov.uk/info/176/policy/2457/coventry_a_marmot_city](http://www.coventry.gov.uk/info/176/policy/2457/coventry_a_marmot_city)

For more information: Georgia.faherty@coventry.gov.uk
Pan-UK

Mental Wellbeing Impact Assessment

About the tool

Mental Wellbeing Impact Assessment (MWIA) is a practical tool that can improve services, programmes and initiatives by assessing their impact on the mental health and wellbeing of the target population. The tool also identifies how the commissioners of services, programmes and initiatives can maximise opportunities to promote mental wellbeing, minimise risks to wellbeing, and identify ways to measure success. Virtually all areas of both commissioning, and provision of goods and services are capable of impacting wellbeing and producing it to some extent.

History

MWIA was developed in the UK and is in use globally both at a strategic and grassroots level. It is cited as an example of good practice in national and internationally strategies and policy guidance. The tool has been used on over 950 programmes in the UK and has been downloaded over 30,000 times since being made available online in 2011. Many of the pioneering initial MWIAs were carried out in South London and tested across England. See:
http://www.mentalhealthandwellbeing.eu/assets/docs/publications/MHiAP%20Final.pdf

Rationale

MWIA uses Health Impact Assessment methods and focuses on the psycho-social factors that are known to promote and protect health:

- a sense of control over one’s life, including having choices and skills
- communities that are capable and resilient
- opportunities to participate, eg in making decisions, through work
- being included: having friends, family, work colleagues

There is frequently a strong business case for seeking to maximise mental wellbeing in the area of public, voluntary or commercial activity that is being considered. Individuals, communities, and employees who have positive mental wellbeing are more likely to contribute to the economy, to communities, and to their families. They are also more resilient under stress, therefore less of a burden on services. They are also more likely to be healthier and to stick to positive lifestyle changes. At a community level, high levels of wellbeing lead to neighbourhoods where people trust one another, democratic participation and volunteering and lead to less antisocial and criminal behaviour.
Outcomes

The benefits of using MWIA include the attention to granular detail that the process provides, the broader social impacts it draws attention to, and the target group-led decision-making process.

MWIA has been useful for robust, transparent decision-making, and developing shared stakeholder understanding and narrative on mental wellbeing.

There is strong qualitative evidence that MWIA has a positive impact on the way initiatives are implemented. See: https://wbcnsw.net/mental-wellbeing-impact-assessment/nsw-education-and-communities-mental-wellbeing-impact-assessment/


http://www.mentalhealthandwellbeing.eu/assets/docs/publications/MHiAP%20Final.pdf
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International examples: Finland

Improving child health: curbing childhood obesity by integrating health in all policies

Aim

Improve health outcomes for children by tackling obesity.

Summary

Recognising that most of the factors that influence child and adolescent health lie outside the health sector, Finland is taking a Health in All Policies approach in its Health Care Act by directing cities, like Seinäjoki, to incorporate health into all of their decision-making areas.

The municipality’s health department has worked with the Childcare, Education, Nutrition, Recreation and Urban planning departments to ensure all day care centres and schools provide the same quality of services. It took time for all the different departments to understand how each influences health and the role each must play to promote it.

The urban planning department improved school playgrounds. Recreation implemented more physical activity in schools. Nutrition worked with day care centres to eliminate sugary snacks and with schools to serve healthier lunches. The Health department instituted comprehensive yearly health examinations in schools, which included parent education on healthy eating.

Municipalities can regularly track their progress on national monitoring websites, share best practice and attend training on implementing legislation through a Health In All Policies approach.

Outcome

As a result of intervention, the proportion of five-year-olds who are overweight or obese has been halved in Seinäjoki city. The work continues across Finland and as a result of these efforts, childhood obesity is starting to stabilise across the country.

For more information: http://www.who.int/features/2015/finland-health-in-all-policies/en/
Seattle/King County (USA)

Adopting HiAP in Big Cities

Aim

To integrate health and equity across the county government’s activities.

Summary

The Seattle and King County government established strong cross-sectoral partnerships with planning, transportation, and housing officials. This work helped lay the foundation for the county’s adoption in 2014 of a strategic plan and ordinance that aim to integrate health and equity across the county government’s activities.

The county government established a multiagency task force and set out 14 determinants of equity and health against which county activities will be gauged. Yearly progress reports will document achievements.

Outcomes

Since the adoption of the 2014 ordinance, there have been:

- changes to the Natural Resources and Park’s budget to provide better opportunities for physical activity in low-income neighbourhoods by the building of trails
- initiatives to improve educational outcomes in low-income and migrant communities, and collaboration between the criminal justice and education departments to reduce the number of students expelled from school
- funding for several adult and criminal justice early intervention programs to reduce incarceration rates and improve employment options for at-risk low-income and minority residents
- the inclusion of health-based metrics and objectives in city and county land use and transportation plans.

For more information: http://www.ncbi.nlm.nih.gov/pmc/articles/PMC4243805/#R13
California

Health in All Policies Taskforce: a multi-agency collaborative effort towards health and sustainability goals

Aim

To promote health, equity and sustainability, support intersectoral collaboration, benefit multiple partners, engage stakeholders and create structural or procedural change.

Summary

The Health in All Policies Task Force considers the breadth of state policies that impact important health outcomes across California. This work is organised into Action Plans in six areas:

1. Healthy food
2. Healthy housing and indoor spaces
3. Parks, Urban Greening, and Places to be Active
4. Active Transportation
5. Community Safety through Violence Prevention
6. Healthy Public Policy

Action Plans are renewed when required and developed collectively using a consensus process of:

- reviewing existing state efforts and best/promising practices used by other jurisdictions and agencies
- identifying barriers to and opportunities for interagency/inter-sector collaboration
- convening regular public workshops and solicits input from stakeholders
- developing and implementing multi-agency programmes to improve the health of Californians

Action plans are available at: http://sgc.ca.gov/Initiatives/HiAP-Action-Plans.html

For more information:
South Australia

Pulling in the same direction: a collaborative approach

Aim

To support the delivery of South Australia’s cross-government strategic plan by formulating new approaches to health, wellbeing and health governance.

Summary

In 2007, South Australia’s Strategic Plan was adopted as the key vehicle to enable joined-up government so that tackling health determinants would become a reality. The approach benefited from a high-level mandate from central government. As well as promoting health, there was also a commitment to advancing the core business of other government departments and sectors, and to assisting them to achieve their objectives.

Other features of the approach were an overarching framework that was supportive of a diverse programme of work, a commitment to work collaboratively and in partnership across agencies, and a strong evaluation process.

Results

Initial evaluation findings suggest that the HiAP approach has been successful in developing robust processes to enable action on the wider determinants of health and has effectively navigated a complex and fast changing policy environment.

For more information: