

Report on Cross Government workshop on Improving Policy

Assessing the impacts of Public Service Agreements on Health and Wellbeing

24 March 2009

Background

Health Impact assessment is an important and useful tool for ensuring that health and health inequalities are considered by policy makers across government. The Council for Science and Technology recognised the utility of Health Impact Assessments (HIA) in their recent report¹ and the need to improve the way in which HIA's are undertaken. This workshop was organised in response to their recommendations and the Department of Health's desire to provide the appropriate support to those undertaking Health Impact Assessments.

Overview of Workshop

The aim of the workshop was to gain an insight into existing good practice in HIA in other government departments, barriers to delivering HIA and to identify measures that would improve the quality of HIA undertaken across government.

The workshop was a collaborative endeavour, it was organised by the HIA team in the Department of Health (DH) run by the National School of Government, funded by the Public Health Workforce Development (DH) and drew on expert speakers from a range of organisations.

The workshop comprised talks given by experts, and two sessions of small group work to discuss issues in more detail. The agenda is in Appendix 1. The small group sessions were divided into a morning session to discuss the way that HIA is currently

used and an afternoon session to suggest how to improve use of HIA. The group work discussions were captured electronically and were qualitatively analysed separately by two members of the HIA team at DH.

Outcomes

The workshop was well attended. There were 63 people at the event, of these there were 43 participants, 6 speakers, 7 HIA expert facilitators, 5 experts from National School of Government (graph 1 Appendix 2). There were representatives from nine other government departments, six arms length bodies and a number of other institutions.

Participants rated themselves as having greater awareness and knowledge of HIA after the workshop than prior to it (graph 2 Appendix 2).

Participants were asked to rank the most important issues for action to improve the use of HIA across government. The top three issues were;

1. Develop a contemporary evidence base for HIA (26%)
2. Integrate HIA into the policy making process (20%)
3. Improve understanding of need to develop policies across government (19%).

They then discussed the key actions needed to address the issues and the output from this, and other group discussions, was analysed to develop the recommendations for action.

1. Health Impacts - A Strategy Across Government (2006) <http://www.cst.gov.uk/cst/reports/#Health>



Key Recommendations

1. Central resource for HIA

HIA's are undertaken by a wide variety of professionals within government and as health is often not the focus of their work, they need easily accessible resources that support and guide them through the process of doing the HIA. The types of resources suggested were:

- expert advice on HIA for those unfamiliar with the process
- a well signposted website that gathers in one place the advice, guidance and links on HIA
- a cross government HIA forum to share learning and peer review HIA's .

2. Improve guidance on HIA

Revise the current HIA guidance so that it is simple and easy to use for those unfamiliar with public health. Suggestions on creating tools to support those doing HIA's were:

- An interactive template that guides people through the process of doing the HIA
- A case study that works through the HIA on a step-by-step basis
- Improve screening tools so that full HIA's are undertaken where there is the most potential health gain.

3. Quantitative and Qualitative Impacts

To ensure that the full range of impacts are described in the assessment, HIA's should include contributions from a range of experts including policy leads, analysts and stakeholder engagement specialists.

Methods for undertaking qualitative and quantitative analysis should be described in the HIA guidance.

The issues that came through as particularly challenging in quantification and where guidance would be welcomed were:

- a standard method for calculating Quality Adjusted Life Years (QALYs) agreed across government, the description of this method should include the underlying evidence base
- weighing the impacts described in the assessment, including issues of describing and valuing duration of impacts
- uncertainty analysis
- double counting benefits (and disadvantages) of impacts.

4. Use of evidence

The evidence on health impacts of new policy was difficult to access and use. An improved evidence base is needed for HIA, it was recognised that the evidence might exist but be difficult to access. One way to address this is to have 'more effective sharing of existing evidence across government' by, for example having a shared evidence website and a cross government group on health evidence.

Guidance was requested on approaches to balancing inconsistent and contradictory evidence.

Next Steps

- **A central resource in DH for conducting HIA to be identified and supported within DH**
- **Revise and update HIA guidance, tools, links to health evidence and DH webpage on HIA**
- **Set up cross government group on HIA to peer review HIA and support the use of health evidence.**

Appendix 1

Improving Policy

Assessing the impact of Public Service Agreements on Health

24th March 2009

Conference Agenda

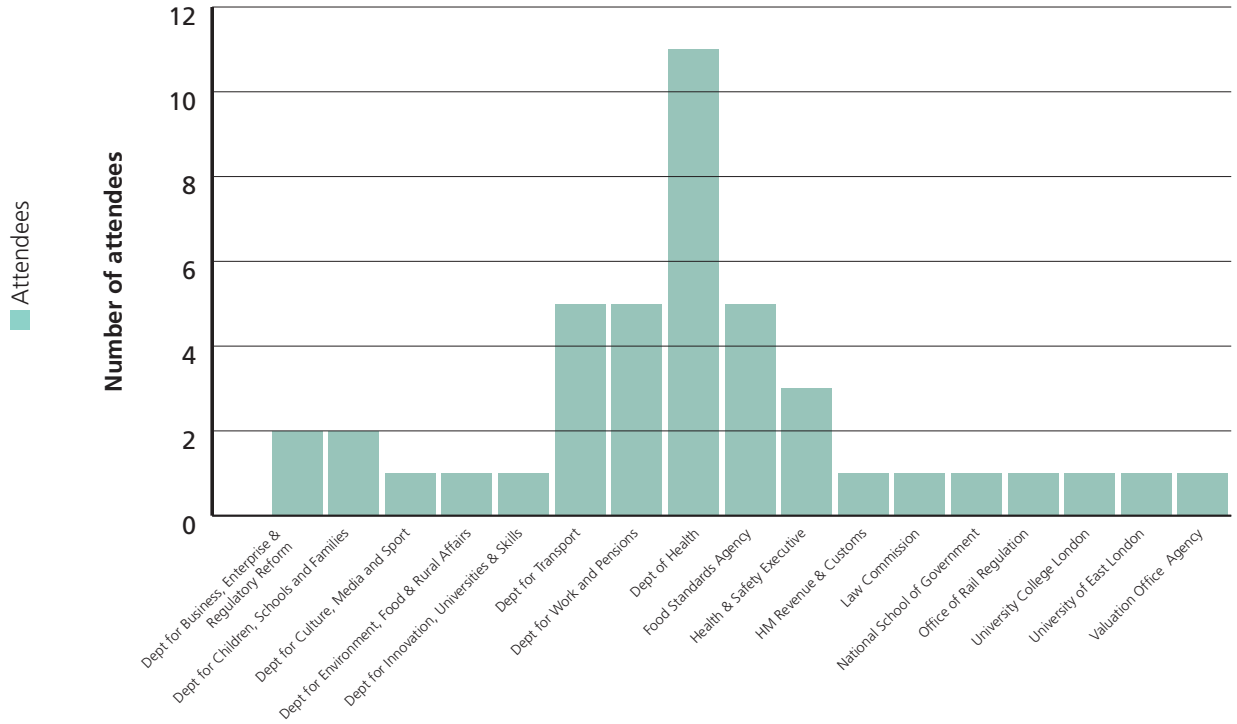
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|-------------|---|
| 09:15–09:30 | Coffee and registration |
| 09:30–10:00 | Welcome
<i>Council for Science and Technology view of Cross Government Approach to Assessing Health Impacts</i>
<i>Chair: Professor Dame Janet Finch</i> |
| 10:00–10:40 | Social Determinants of Health – Delivering win–wins on cross–cutting PSAs
<i>Richard Wilkinson, Emeritus Professor of Social Epidemiology</i> |
| 10:40–11:00 | Coffee |
| 11:00–11:20 | Assessing the Impact of Government policies on Health and Wellbeing
<i>David Buck, Health Inequalities Unit, Department of Health</i> |
| 11:20–11:45 | Two Case studies
<i>Rachel Carse – National Project Manager, Health Trainers</i>
<i>Dr. Salim Vohra – Director, Centre for Health Impact Assessment, Institute of Occupational Medicine</i> |
| 11:45–12:45 | Round table discussions |
| 12:45–13:30 | Lunch |
| 13:30–13:45 | Feed back from Round table discussion |
| 13:45–14:15 | Wellbeing and opportunities for smart working on cross government delivery
<i>John Kemm – Director West Midlands PHO</i> |
| 14:15–15:15 | Group work on problem solving |
| 15:15–15:30 | Tea |
| 15:30–15:45 | Feed back from group work |
| 15:45–16:00 | Expert Panel |
| 16:00–16:15 | Overview and next steps
<i>Professor Barry McCormick Chief Economist and Chief Analyst, Department of Health</i> |
| 16:30–17:45 | Expert surgeries – bring your questions for one-to-one advice |

Appendix 2

Attendance

The workshop was well attended; there were 63 people at the event, of these there were 43 participants, 6 speakers, 7 HIA expert facilitators, 5 experts from National School of Government (graph 1). There were representatives from nine other government departments, six arms length bodies and a number of other institutions. All of the attendees were very engaged for the duration of the workshop and provided particularly useful insights into how HIA practice could be improved.

Graph 1 Attendance breakdown



Outcomes

Participants rated themselves as having greater awareness and knowledge of HIA after the workshop than prior to it (graph 2).

Graph 2 Awareness of HIA

