

Health Impact Assessment Training and Capacity Building Framework Technical Document

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Summary

The Wales Health Impact Assessment Support Unit was established in 2004 to support the development of Health Impact Assessment (HIA) practice in Wales. Its remit is to advise, train, facilitate and build capacity in HIA and raise awareness of how the process can support and contribute to improving health and well-being and reducing inequalities.

This technical document sets out an underpinning framework for the Wales Health Impact Assessment Support Unit's (WHIASU) approach to the design, development, delivery and evaluation of training and capacity building for HIA in Wales, the UK, and across the World Health Organization's European Region for the next five years. This document sets out to describe the process of development of the framework, the evidence, theory and principles that have informed the proposed approach, and to identify priorities for future development of WHIASU's training delivery. The audience for this report is primarily Public Health Wales and Welsh Government. However, it may also be of interest to academics and specialists in Health Impact Assessment or workforce development. The content will be adapted for more practical and accessible resources on capacity building in HIA for public bodies in Wales and future publications aimed at Member States in the World Health Organization's European Region.

A number of factors contributed to the initiation of this framework. Firstly and primarily, the legislative environment in Wales for HIA has significantly changed since WHIASU last published a training strategy in 2011. The *Well-being of Future Generations (Wales) Act 2015* has provided a government wide policy framework centred on the sustainable development principle in Wales. It has also enacted a 'Health in all Policies' approach by making a 'Healthier Wales' a required policy goal for all public bodies in Wales.

In addition, the *Public Health (Wales) Act 2017* (Welsh Government, 2017) (the *PH Act*) requires Welsh Government Ministers to make regulations about the circumstances in which public bodies in Wales must carry out HIAs. This will make HIA statutory for public bodies in certain circumstances. The regulations are anticipated to take effect in 2020. This is likely to lead to a significant increase in the need for practitioners and policy makers from both health and other sectors who are skilled in conducting and quality assuring HIAs and who have access to high quality tools, training and guidance. Furthermore, the *Public Health (Wales) Act 2017* names Public Health Wales as having a role in 'providing assistance' to public bodies in conducting HIAs. Whilst the legal definition of assistance is still being developed, WHIASU recognises that the *PH Act* has major implications for Public Health Wales and other public bodies in Wales and, as a consequence, for WHIASU's services. As a result of these new legislative drivers, WHIASU has taken a number of steps to review and update its services, products and processes for the new policy environment

in order to ensure that the Unit has the right models of delivery to meet the increased capacity building needs of public bodies.

A second driver for this publication was the need to review and evaluate WHIASU's last training strategy (Wales Health Impact Assessment Support Unit, 2011). A review and evaluation of the strategy is a timely and useful opportunity to identify the outcomes achieved, and to use this learning, along with other updated evidence, to inform its future approach. Lastly, WHIASU is now part of a World Health Organization Collaborating Centre for Investment in Health and Well-being (WHO CC). The Unit is providing an activity as part of the WHO CC focused on a quality framework for building capacity in HIA across the WHO Europe for member states and regions. This document provides the underpinning theory and evidence for that forthcoming activity.

Sections One and Two introduce the aims and objectives of this document and Section Three briefly sets Health Impact Assessment (HIA) practice in the context of a wider 'Health in all Policies' agenda in public health. Implementation of HIA, including training and capacity building, is then explored within a Welsh policy context in Section Four. Section Five details the methodology used to develop the training and capacity building framework. Sections Six and Seven provide the evidence base used to develop the framework including; a literature review on effective capacity building in HIA; selected literature on adult learning theory and competency based professional development; evaluation of WHIASU's training to date, and existing competency frameworks in public health and impact assessment.

Sections Eight to Eleven detail a new 'Skills and Knowledge Framework' and 'Development Pathway for HIA', which will underpin the future approach of WHIASU to training and capacity building. The 'Skills and Knowledge Framework' includes competencies adapted from the relevant sections of the UK Public Health Skills and Knowledge Framework (Public Health England et al. 2016) and it has been developed with reference to the National Occupational Standards for 'assessment of the impact of policies and strategies on health and well-being' (PHP 33 and PHP 34) (Skills for Health 2010a, 2010b).

The document concludes with a summary of the implementation plan for the framework highlighting key milestones over the next two years in Section Twelve, and an evaluation plan in Section Thirteen.

1 Introduction

This technical document sets out an underpinning framework for the Wales Health Impact Assessment Support Unit's (WHIASU) approach to the design, development, delivery and evaluation of training and capacity building for HIA in Wales, the UK, and across the World Health Organization's European Region for the next five years. This builds on the progress made during the period of the previous WHIASU training strategy (2011- 2018). It sets out to describe the process of development of the framework, the evidence, theory and principles that have informed the proposed approach, and to identify priorities for future development of WHIASU's training delivery.

The audience for this report is primarily Public Health Wales and Welsh Government. However, it may also be of interest to academics and specialists in Health Impact Assessment or workforce development. The content will be adapted into a number of other products including; a practical capacity building toolkit for public bodies in Wales; a skills audit tool; journal papers; and a quality framework for investment in training and capacity building in HIA for member states and regions as part of the World Health Organization (WHO) Collaborating Centre activities.

Health Impact Assessment (HIA) is not an end in itself. It is a process through which to support the development of healthy public policy, with the ultimate aim of improving the health and well-being of the population, and reducing inequalities. The proposals set out in this document are aimed at advancing HIA practice as a key tool in building overall capacity for a 'Health in all Policies' (HiAP) approach to public policy making in Wales and beyond.

The document starts with a description of the aims and objectives of the framework, how it has been developed, and an overview of the policy context in Wales in which it will be primarily implemented. Specific roles in HIA, a novel skills and knowledge framework for HIA and a new pathway for professional development in HIA are described, along with the underpinning evidence, values and principles. The ambitions and priorities that WHIASU will aim to deliver in the next five years are then outlined along with an evaluation plan.

2 Aims and Objectives

Aims:

- To support the development of healthy public policy through capacity building and training in HIA
- To inform the development and delivery of high quality professional development opportunities in HIA
- To support Welsh Government, Public Health Wales and public bodies in the implementation of the *Public Health (Wales) Act 2017* (Welsh Government, 2017) and *Well-being of Future Generations (Wales) Act 2015* (Welsh Government, 2015)

Objectives:

- Describe the evidence, principles and values underpinning WHIASU's approach to training and capacity building
- Describe a new set of roles for the effective implementation of HIA across sectors and identify the skills and knowledge required for each role
- Provide people from a wide range of disciplines and organisations with a clear development pathway and range of learning opportunities in HIA
- Describe a new skills and knowledge framework for HIA
- Provide the foundation for the potential future accreditation of WHIASU's training courses
- Identify priorities for the development and delivery of effective training and capacity building for HIA in Wales
- Continually improve the quality, value and impact of HIAs

3 About 'Health in all Policies' and Health Impact Assessment

'Health in All Policies is an approach to public policies across sectors that systematically takes into account the health implications of decisions, seeks synergies, and avoids harmful health impacts in order to improve population health and health equity. It improves accountability of policymakers for health impacts at all levels of policy making. It includes an emphasis on the consequences of public policies on health systems, determinants of health and well-being'.

World Health Organization (2014) Helsinki Statement on Health in All Policies (Page 2).

HIA is widely recognised as an important tool for achieving 'Health in all Policies' (HiaP) as it is a practical approach to building an awareness and consideration of health implications in the policy making process.

Kemm (2006) suggests that HIA supports a 'Health in all Policies' approach by:

- Describing the consequences of policy options on health
- Helping to improve decision making
- Recommending how positive impacts can be maximised and negative ones minimised
- Shaping the policy making environment to inform future policy making

Given the role of HIA as key tool for 'Health in all Policies', this framework is relevant to capacity building across a breadth of public health practice, as influencing policy making and legislation are central to effective action to promote and protect health across a range of settings and topics.

4 The Policy Context in Wales

The Welsh Government (WG) has taken a long-term policy interest and international lead in Health Impact Assessment (HIA) (Welsh Office, 1998). There has been a commitment to developing the use of HIA in policy and legislation to improve health and well-being and reduce inequalities. For example, the *Well-being of the Future Generations (Wales) Act* (Welsh Government, 2015) and the *Public Health (Wales) Act* (Welsh Government, 2017) share an ambition that Health Impact Assessment (HIA) and a 'Health in all Policies' approach are implemented more widely.

HIA has synergies with the ways of working towards sustainable development identified in *Well-being of the Future Generations (Wales) Act* (Welsh Government, 2015) i.e. taking a long-term, preventative approach to policy making and programme development, integrating health into all policy areas and building collaboration and involvement into policy and programme design at the earliest opportunity.

Recent changes to European Union Regulations on Environmental Impact Assessment also have implications for the health and well-being related skills and knowledge of professionals involved in planning. In the new European Union Environmental Impact Assessment (EIA) Directive (Official Journal of the European Communities, 2014) reference to health and well-being has been strengthened to ensure that population and human health are now considered within the Environmental Statement (the output of an EIA) rather than the previous reference to 'human health' alone. This offers an opportunity to strengthen the consideration of wider population health and well-being within the EIA process.

The *Public Health (Wales) Act 2017* (Welsh Government, 2017) requires Welsh Ministers to make regulations about the circumstances in which public bodies in Wales must carry out HIAs. This will make HIA statutory for public bodies to use in certain circumstances. The regulations are anticipated to take effect in 2020. This ambition needs to be supported by increasing the numbers of practitioners and policy makers from both health and other sectors who are skilled in conducting and quality assuring HIAs and who have access to high quality tools, training and guidance.

The development of this framework has been informed by the review of implementation of other statutory and non-statutory impact assessments (IA) across Welsh Government by the Public Policy Institute for Wales (Grace, 2016) and a review of the use of Equality Impact Assessments (EQIA) in Wales (Welsh Local Government Association, 2013).

The Public Policy Institute for Wales (Grace, 2016) review of IAs highlighted that:

'.... the way that IAs are conducted and the degree of 'success' they enjoy is a function of multiple forces and choices.....Especially important is the 'authorising environment' which shows officials and others at a fairly high level why the government wants IAs undertaken, who should be doing them, how they should be conducted, and within what policy frame of reference' (p14).

The review also found:

'..a perceived lack of capacity among practitioners in departments to conduct effectively some of the more 'specialist' IAs, especially those that require fundamental knowledge and understanding of the field in order to make a meaningful assessment Actual production of the IAs appears often to be delegated too far down to be done with the requisite level of skill, judgement and experience' (p8).

The review recommended *'a cultural shift which should be underpinned through a **systematic training programme**' (p. 26).*

The Welsh Local Government Association (2013) also undertook an earlier review of the use of Equality Impact Assessments (EQIA) in Wales and found that staff can feel 'daunted and unsure' (p 15) of what is required when completing an EQIA for the first time. Many staff complete EQIAs infrequently which means that skills learnt from training or carrying out an EQIA are 'at risk of deteriorating' (p. 23). The review also recommended that training on equality and how to conduct EQIAs needs to be delivered to staff responsible for conducting EQIAs to ensure that they have the necessary skills to conduct EQIAs rigorously and to a high standard. The review also recommended that training should be provided to individuals with scrutiny functions and senior level support was essential to get best value out of the process.

These reviews have provided important learning for WHIASU to draw from to inform the approach to developing the skills and knowledge framework and the development pathway for HIA in Wales. Internationally, efforts to 'institutionalise' HIA and HiAP have long highlighted training and capacity building as key component of success and Section Six reviews the literature on key elements of effective approaches that can be drawn on to inform implementation in Wales.

5 Methodology: How the framework has been developed

This training and capacity building framework for HIA has been developed over an 18-month period and has involved:

- Evaluation of the WHIASU current training delivery via a follow up survey of participants
- A scoping review of the policy and practice environment in relation to the implementation of impact assessment in Wales and the development of the public health workforce more broadly
- Practice based reflection on WHIASUs HIA training delivery and outcomes
- Mapping of competencies relevant to HIA practice from the UK Public Health Skills and Knowledge Framework (Public Health England, Public Health Wales, NHS Scotland, Public Health Agency of Northern Ireland, 2016) and Skills for Health National Occupational Standards for impact assessment for health and well-being (Skills for Health 2010a and 2010b)
- The internal development of a draft Skills and Knowledge Framework, skills audit tool and development pathway for HIA
- Testing and reviewing of the draft Skills and Knowledge Framework and skills audit tool via workshops with three local public health teams, two cross sector engagement workshops, and feedback received by email or in person from HIA practitioners and academics (see Appendix A for a list of participants)
- Internal Public Health Wales Quality Assurance and governance processes
- A review of the literature with regard to training and capacity building in HIA

Key adaptations and additions made following the testing and engagement phase included:

- Ensuring that the language used in the skills and knowledge development framework is not health sector specific and more relevant to a cross-sectoral audience
- Reducing the complexity of the skills and knowledge framework
- Taking the advocate and authoriser roles out of the levels of practice. This was because it was felt that these are not HIA practitioner roles and need to reflect the roles of managers who may be authorising resource allocation but don't require in depth knowledge of HIA
- Ensuring that the capacity building needs of the third sector and communities in the implementation of the HIA regulations are addressed
- A number of ideas were discussed in the engagement sessions that have been included in the delivery plan including: the development of a more practical 'toolkit' on capacity building for public bodies to

support implementation of the *Public Health (Wales) Act 2017* HIA regulations; a multi-agency approach to capacity building support; and additional learning resources on the social determinants of health

6 Literature review of training and capacity building for HIA

Training and capacity building at the individual and organisational level are widely recognised in the literature as a crucial elements for achieving the institutionalisation of HIA (O'Mullane 2014; Goff et al. 2016; Ison 2013, Mindell and Boltong 2005; Linzalone et al. 2018; National Research Council Committee on Health Impact Assessment 2011). This section will review the learning from HIA programmes and research that are relevant to training and capacity building as a supporting strategy for the wider adoption and statutory implementation of HIA in Wales.

From their experience of capacity building for HIA in Australia, Hughes and Kemm (2007) put forward five key areas of action:

- Leadership
- Resource Allocation
- Organisational development
- Partnerships
- Workforce development

These five areas are used to theme the key findings from the literature reviewed and these will be explored in more detail below.

6.1 Leadership and Resource Allocation

It is widely recognised that the support of senior leaders who not only understand the value of HIA, but can also advocate and dedicate resources to HIA are critical to effective implementation (Goff et al. 2016; de Blasio et al. 2012; Schuchter 2013). This is also a conclusion of the review of IAs in Welsh Government (Grace, 2016) which highlighted the importance of the 'authorising environment' (p.14) for the effective use of a range of IAs.

Given the important role of senior leaders to the success or otherwise of the institutionalisation of HIA, programmes have highlighted the importance of providing **specific training or briefing sessions for leaders** to ensure key messages on the purpose and value of HIA were effectively communicated. In the USA this is seen as important in order for HIA to 'overcome barriers related to the lack of interagency

collaborative structures' (National Research Council Committee on Health Impact Assessment 2011, p.125).

6.2 Organisational Development

Organisational and political factors are also well recognised as influencing factors in capacity building for HIA (Ison 2013; de Blasio et al. 2012, Schuchter 2013). Schuchter (2013) reports that 'because many HIA practitioners belong to larger organizations whose mission does not fully align with HIA principles and budget does not accommodate HIA practice, organizational characteristics may be the key variable in determining the degree of adherence to HIA standards' (p.20). In the example of Healthy Cities in Hungary an organisational change impacted on the roles of the officers who had been trained in HIA and limited their ability to put the training into action (de Blasio et al. 2012). In response to this type of challenge, some authors recommend ensuring that HIA is written into job descriptions to ensure that people have **protected time** to implement HIA (Mindell and Boltong, 2005).

6.3 Partnerships

There is a need to recognise the roles of different people and stakeholders in HIA. Linzalone et al. (2018) explored the specific factors that would support the widespread use of HIA in Italy and identified that **clarity of roles** of different organisations and actors was important. Taking account of the roles of various stakeholders in the design of training was also seen as a success factor in a state-wide capacity building programme in the USA (Goff et al. 2016).

An HIA in the Republic of Ireland found that professionals and community stakeholders require **training and support** in order to play their role effectively in a HIA and to ensure meaningful community participation (Pursell and Kearns, 2013). In an evaluation of HIA training in the USA, Schuchter (2013) identified a need for 'a clearer understanding of precisely who should be trained and how they should be trained' (p79) as well as a need for the specification of roles in HIA, competencies and how to achieve them.

Establishing **networks** to support HIA practice has also been found to be a key component of effective capacity building and institutionalisation of HIA (Linzalone et al. 2018; Goff et al. 2016; Ison 2013). Goff et al. (2016) report that forming cross sector networks enabled practice sharing, shared problem solving, cross sector relationship building and accessing additional support and participation in HIAs. Linzalone et al. (2018) emphasise the need for a network of expert knowledge on data and evidence for HIA. A review of the implementation of Equality Impact Assessment (EQIA) in Wales also recommended that networks of staff that have completed EQIAs

are developed to share practice and support other staff completing their first EQIA. The review also recommended that networks of stakeholders be developed to act as 'critical friends' in order to improve the quality of EQIAs (Welsh Local Government Association, 2013).

6.4 Workforce Development

The importance of recognising that many people working in public services have a range of existing skills and knowledge that are highly relevant to HIA (e.g. community engagement, policy analysis, data management) and that capacity building programmes should aim to build on these competencies is highlighted in a number of papers (Goff et al. 2016; Ison 2013). For HIA to reach its potential, **cross-sectoral and interdisciplinary training** and learning opportunities that engage non health sectors are found to be important features of effective programmes (National Research Council Committee on Health Impact Assessment, 2011). Studies have found that cross-sectoral training can aid with relationship building, developing a common language, and improved shared understanding (Goff et al. 2016; Cooke and Stansfield 2009). Chinchilla and Arcaya (2017) highlight HIA as an ideal interdisciplinary teaching tool for bringing together public health and urban planning students and encouraging collaboration to tackle 'real world concerns' (p2.).

Programmes have also found that **practice based learning** or 'learning by doing' is an effective strategy for capacity building in HIA (Chinchilla and Arcaya 2017; Goff et al. 2016, Hughes and Kemp 2007). The evaluation from a programme across several states in the USA found that starting with a rapid HIA was an effective approach to capacity building and that there was 'no substitute for the experience of conducting a HIA' (Goff et al. 2016, p. E13). The authors of a proposed model curriculum for a university based module on HIA also advocate undertaking a HIA in collaboration with other students and stakeholders as a key learning strategy (Pollack et al. 2014). An evaluation of HIA training in USA found that training participants valued practical application and case studies that were relevant to their context of work (Schuchter , 2013).

Developing **in depth learning opportunities** with academic rigour in HIA is also flagged as important, especially in the context of HIA as a developing field of practice (Pollack et al. 2014; National Research Council Committee on Health Impact Assessment, 2011) that requires more advanced practitioners and people who can commission and review HIAs (Harris-Roxas et al. 2012). This supports the call for a clear **development pathway** for HIA practice (Schuchter , 2013) that enables people to progress from initial 'learning by doing' in rapid HIAs, to conducting a number of HIAs and accessing higher level learning opportunities.

Authors have also highlighted the need to address specific skills and knowledge gaps when implementing HIA. A review of HIAs conducted in

Australia and New Zealand found that there is a need to increase **technical data skills** in people carrying out HIAs (Haigh et al. 2013). A programme to implement HIA as part of Healthy Cities in Hungary found that local government officers charged with undertaking HIAs lacked sufficient confidence and competence in health issues to apply HIA effectively. In this case, further preparation and training was needed to motivate and support them by 'creating a stronger link between health and their daily routine work area' (de Blasio et al. 2012,p.220). This second example underlines the importance of **recognising and communicating HIA as a core tool for achieving 'Health in all Policies'** in capacity building programmes (Goff et al. 2016) and ensuring that new HIA practitioners have a good foundation of knowledge in the social determinants of health and how this evidence is relevant to their work.

Finally, **improving the quality of HIAs through the use of guidance, practice standards, quality assessment tools and peer review** is also widely recognised as an important aspect of effective capacity building in HIA (Haigh et al. 2013; Linzalone et al; 2018; Goff et al. 2016; National Research Council Committee on Health Impact Assessment, 2011).

6.5 Summary of key learning points

- Supportive senior leaders who understand the value, purpose, benefits and policy context for HIA and can dedicate resources to HIA are key to successful implementation. Specific training needs to target leaders
- Recognise and build on existing skills, knowledge and competencies across sectors
- Recognise different roles exist in HIA and ensure that training addresses these different roles
- Recognise the specific training needs of communities, community organisations and public bodies in order to facilitate community participation in HIA
- Cross-sectoral and interdisciplinary learning opportunities that engage non health sectors are important features of effective programmes
- Practice based learning or 'learning by doing' is an effective strategy for capacity building in HIA
- Higher level and academic learning opportunities are an important for the development of the field of HIA
- There is a need for a clear development pathway for HIA practice that enables people to progress from initial 'learning by doing' in rapid HIAs to conducting a number of HIAs and accessing advanced and in depth learning opportunities

- Address specific skills and knowledge gaps when implementing HIA e.g. health data, community engagement, social determinants of health
- Communicate that HIA is a core tool for achieving 'Health in all Policies' and not an end in itself
- Establish networks to support HIA practice and to act as 'critical friends' to ensure quality improvement
- Work with key organisations to identify the roles of people who will be undertaking HIAs and explore how this can be integrated into their job descriptions
- Continually improving the quality of HIAs through the use of guidance, practice standards, quality assessment tools and peer review is also an important aspect of effective capacity building in HIA

7 WHIASU's Approach to Learning and Development

7.1 Review of WHIASU's existing training provision

WHIASU last published a training strategy for HIA in Wales in 2011 (Wales Health Impact Assessment Support Unit, 2011). A significant amount of progress has been made since then in developing a structured and targeted approach to training and capacity building for HIA. There now exists a range of training programmes and resources including:

- The development and launch of an online introductory HIA e-learning module
- Publishing a Quality Assurance Review Framework for HIA and a Quality Assurance training course
- Provision of multi-agency introductory HIA training
- Desktop and Comprehensive HIA courses endorsed by the Chartered Institute of Environmental Health (Wales Directorate) which include completion of a HIA and practice assessment

Appendix B contains a summary of WHIASU's current training delivery programme.

A notable success is the development of a two-day Desktop HIA competency course delivered in partnership with the Chartered Institute of Environmental Health for Environmental Health Officers (EHOs), planning officer and public health practitioners. This has developed a significant number of local authority EHOs with skills and knowledge in HIA, who in turn have carried out HIAs that have influenced policy and practice on a range of determinants of health in their localities and, in some cases, nationally (for example, Welsh Government 2018).

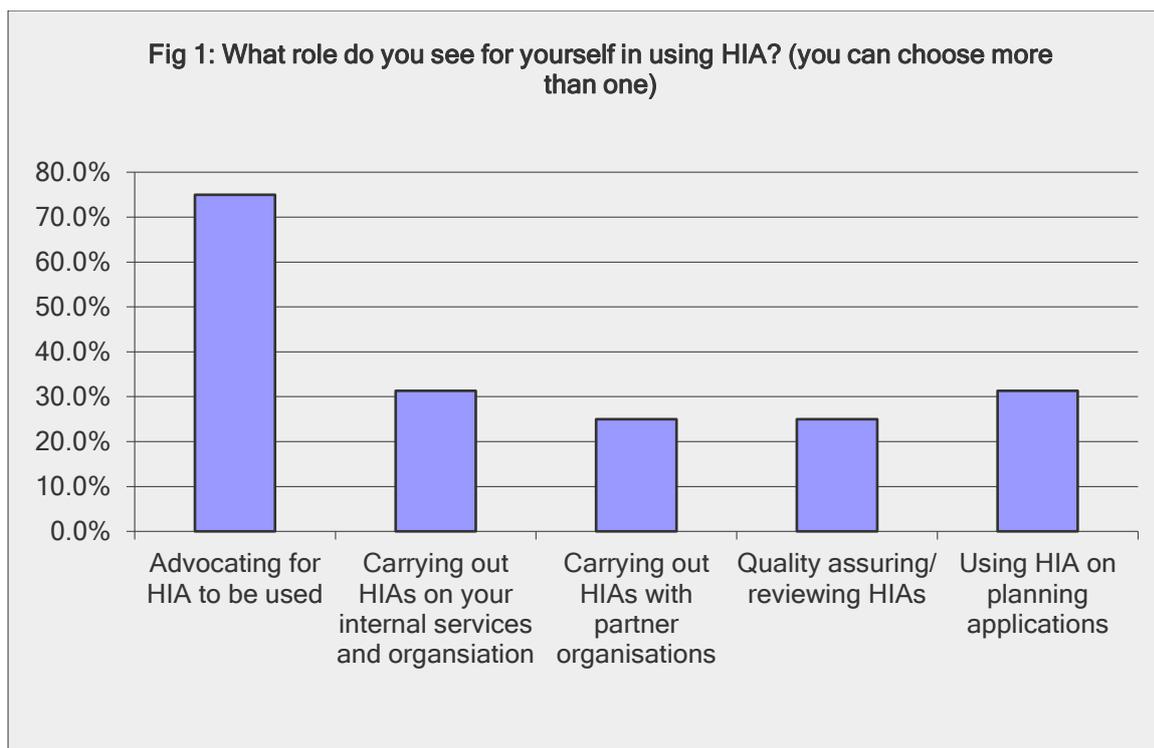
There has also been increasing success in engaging housing associations, public bodies and local authorities. WHIASU has developed and supported bespoke HIA tools for key stakeholders to enable further integration of HIA into practice in priority sectors e.g. a Health and Well-being Impact Assessment tool for Natural Resources Wales (Natural Resources Wales and WHIASU 2016) and a Wellbeing Impact Assessment online screening tool for Denbighshire County Council.

Evaluation forms completed immediately after HIA training courses consistently rate the training as being high quality, effective in meeting learning outcomes and useful.

A follow up online survey was distributed to 88 people in June 2017 who had been participants in a range of HIA training starting between August 2015 and February 2017. There was a response rate of 26% to the survey equating to 23 individual responses. Around a half of respondents had attended a one-day introduction to HIA course, and 28% had attended a two-day competency course.

The results identified the following strengths and challenges to the effectiveness of the training:

- **Strengths:** high quality of training courses, people came away with a good understanding of HIA and health inequalities, people using the framework to inform their thinking and practice, people value the practical application exercises. Participants identified a range of roles that they saw themselves taking in HIA following training (see Figure 1). Key findings include that 75% of participants identified themselves as advocates for HIA following the course and 25% saw a role in collaborating with partner agencies to undertake HIA



- **Challenges:** 60% had not been able to use HIA in practice. Lack of time and HIA not being part of people's current work role were the most frequent barriers mentioned. There were some different perspectives on expectations concerning whether people felt able to do an HIA at the end and whether this was the expected outcome
- **Requests:** 73% would like follow up training and 60% said that additional input like refresher training or in depth training would help them apply it in practice

Key findings from the evaluations that have informed this framework were:

- Follow up training: providing a clear development pathway from undertaking an introductory course in HIA to using HIA in practice, provide refresher training, continue flexible mentoring and develop a team based action-learning offer
- Expectations: making it clearer what key roles, skills and knowledge are needed in order to undertake a HIA
- Advocacy: have a clear message that undertaking training in HIA is not only about 'doing HIA' but also about becoming an advocate for 'Health in all Policies' and HIA

The implementation of statutory HIA across public bodies is expected to provide more opportunities for staff across sectors to carry out HIA and so this is likely to reduce the barriers to using the knowledge gained on courses in practice

7.2 Practical and theoretical approach

WHIASU has taken a 'learning by doing' approach to developing skills and knowledge in HIA and actively applies strategies to enhance learning transfer and the retention of learning such as: interactive training; application of learning during training sessions via case studies and exercises; action planning, mentoring and alignment to the work environment (Ratcliff Daffron and Wehby North, 2009).

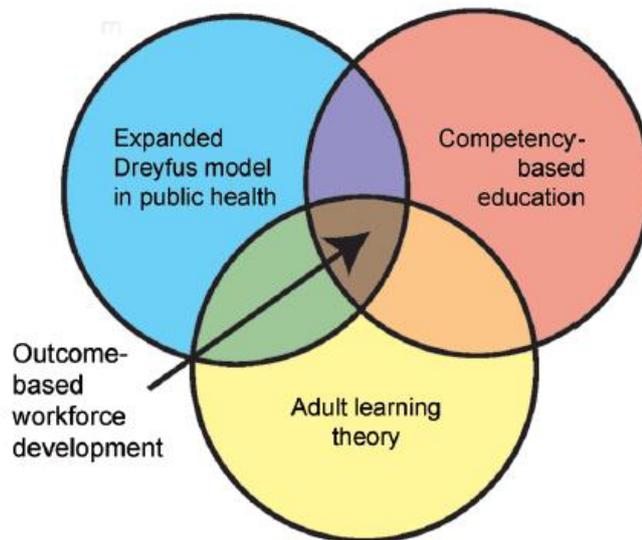
The development of this training and capacity building framework has also been informed by the 70-20-10 conceptual approach to work based learning which emphasises the importance of practice based and collaborative learning (Blackman et al. 2016). In this model the numbers indicate a percentage of the relative amount of time to be spent on each learning or development activity as follows: 70% of development time being focused on experiential work based learning; 20% to social forms of learning, for example, coaching, networks, communities of practice; and 10% to formal learning in courses and programmes (Blackman et al. 2016).

The three combined approaches for outcome based workforce development in public health put forward by Koo and Milner (2010) (Figure 1 below) are also reflected in the Unit's approach to learning and professional development. These are:

- Adult learning theory
- Competency based education
- The Dreyfus model of professional skills progression

These are now discussed below with examples of how they are addressed in WHIASU's training and capacity building framework.

Figure 1: Koo and Milner (2010) Outcome based workforce development



7.2.1 Adult learning theory

Adult learning takes place when learners are able to build on their existing knowledge and experience, where the content is made relevant to them, the purpose and outcomes of training are clear, and when there are opportunities to apply learning in practice.

WHIASU's approach to capacity building and training design addresses adult learners' needs in a number of ways. WHIASU training courses provide opportunities to apply learning to practice through the use of relevant case studies and practice with HIA tools. Action learning and reflection are integrated into the design of the Desktop and Comprehensive HIA courses that are recognised as providing a deeper learning experience (Matthews, 2017). Participants can choose the topic and context of their HIA project from their work or community environment. WHIASU has also developed guides and tools to support people to identify opportunities in their work to apply HIA and HiAP thinking and practice (e.g. WHIASU, Town and Country Planning Association 2016). WHIASU's ambitions for the next five years include developing a HIA practitioners' network, multi-agency training opportunities that will enable collaborative learning and developing secondment opportunities that provide individuals with an opportunity to enhance their knowledge and skills in HIA.

7.2.2 **Competency based education**

The value of a competency-based approach to workforce development is that it creates a clear set of expected outcomes for adult learners and supports the design and evaluation of educational interventions.

A new competency framework for HIA has been developed by WHIASU: the 'Skills and Knowledge Framework for HIA' has been developed which provides a clear structure for defining learning outcomes for training delivery and development and will also enable people to identify how their existing skills and knowledge are relevant and can be applied through HIA. A set of roles in HIA have also been developed which enable people to clearly identify where their existing skills, knowledge, experience and work role are relevant to the practice of HIA and 'Health in all Policies' and what the expectations of these roles are.

7.2.3 **The Dreyfus model of professional skills progression**

This model provides a developmental perspective of professional development recognising that individuals do not go immediately from knowing something to be able to perform as an expert.

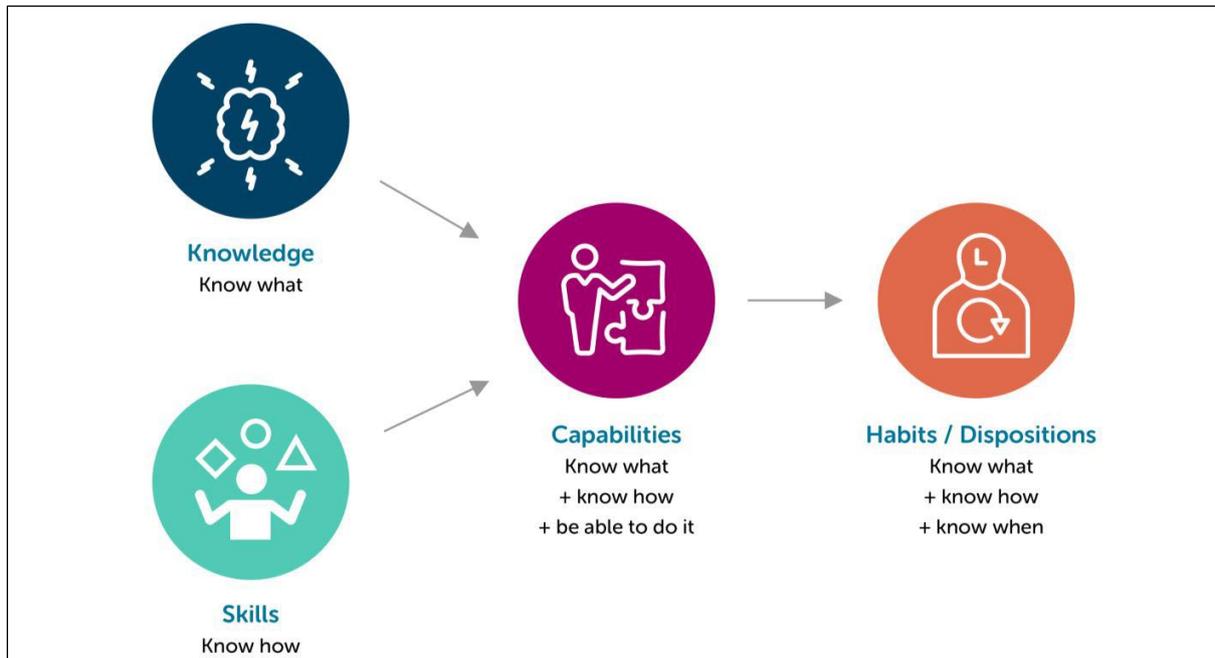
The WHIASU HIA development pathway provides a clear framework for progression, enabling people to identify their current level of practice and plan learning opportunities to develop further if desired. The WHIASU Skills and Knowledge Framework for HIA includes knowledge areas relating to understanding what HIA is, why it is used, the theoretical underpinnings of HIA, and the key skills required to conduct a HIA. Mentoring and action learning give participants the chance to use this learning in practice and 'do HIA'. The experience of conducting HIAs and delivering training in HIA has also highlighted the key importance of 'knowing when' to use HIA and identifying relevant opportunities for HIA to influence policy/programmes. This area of expertise is central to the effective application of HIA in practice, and often becomes more developed as individuals gain more experience of HIA.

The model of the development of capabilities through education developed by Lucas (2017) (Figure 2 below) illustrates this. It identifies that 'knowing when' to apply a new skill is part of the progression of development of capabilities that occurs further along a development pathway. The WHIASU Skills and Knowledge Framework for HIA contains knowledge areas relating to this for example:

- K2.5: Knows how HIA can be applied in a range of contexts
- K4.1: Knows the policy and legal drivers that support the use of HIA and 'Health in all Policies'

- K4.2 Knows what type of decision making, administrative and reporting processes HIAs may influence in their organisation

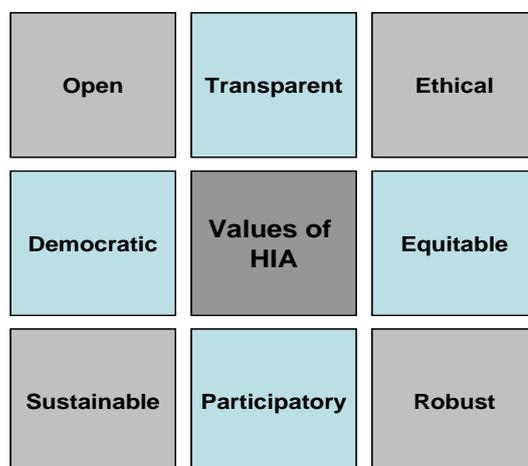
Figure 2: Building capabilities through education (Lucas and Spencer, 2017)



7.3 Ethical practice and accountability

WHIASU's approach to professional development in HIA is underpinned by the ethics and values of HIA (Figure 3), the ethical underpinning of the Public Health Skills and Knowledge Framework and the code of conduct of key professional groups. The forthcoming statutory regulations on HIA in Wales will bring a stronger focus on accountability and quality in HIA practice, for example, there will be a requirement to publish any HIA conducted to meet the requirements of the Public Health (Wales) Act (2017). Therefore, ethics and professional responsibility will need to continue to be an explicit element in all of WHIASU's training and capacity building work.

Figure 3: The values of HIA (WHIASU, 2012)



The review of Impact Assessments in Wales by Public Policy Institute for Wales (Grace, 2016) recommended that:

'The revised arrangements should emphasise responsibility and judgement on the part of officials in assessing the consequences of the potential interventions on which they are advising, and place reliance on people as much if not more than on procedures' (p.26).

This statement supports the approach to quality and accountability in HIA that Green et al (2017) set out in the Quality Assurance Review Framework for HIA published by WHIASU where the importance of a critical, rather than procedural, approach to quality assuring HIAs is emphasised. There is no 'one size fits all' HIA and each HIA should be judged on the objectives and in the context that it was undertaken (Green et al. 2017; Schuchter 2013). On this basis, professionals involved in a HIA need to assess for each HIA what skills and knowledge are needed and to make a judgement as to whether they have the requisite skills individually, can draw on them across a team, or if external expertise should be sought.

The code of conduct of key professional groups including planners, environmental health officers, nurses and health and social care staff all include clauses on acting within the limits of their own knowledge, skills and competence (Royal Town Planning Institute 2016; Chartered Institute Environmental Health 2014; Nursing and Midwifery Council 2015; Health and Care Professionals Council 2016) and this applies to the practice of HIA. Therefore, where a HIA is required and the screening or scoping highlights elements of the HIA that cannot be met within the skills of

individuals involved then they will have a duty to make this known to senior managers and seek appropriate additional support and advice.

HIAs frequently involve bringing together potentially conflicting interests, perspectives, and bodies of knowledge. Conflicts of interest may arise where an officer may be asked to support a HIA which may be reviewing their own work, or a service/decision that impacts on them personally or professionally. Acting in an honest and trustworthy manner, impartiality, transparency and avoiding conflict of interest are also highlighted in codes of conducts and contracts for many professional groups and therefore these codes should be followed for HIA practice.

In order to recognise and highlight these elements of ethical practice and accountability, the HIA development pathway is underpinned by a statement on ethical and professional practice and recognising limits of competence. In addition, the Skills and Knowledge Framework for HIA contains knowledge and skills areas for ethics and governance that will provide learning outcomes for training.

8 Overview: Skills and Knowledge Framework and Development Pathway for HIA

The following three sections details a new Skills and Knowledge Framework and a development pathway for HIA which will underpin the future approach of WHIASU to training and capacity building. The Skills and Knowledge Framework includes adapted competencies drawn from the relevant sections of the UK Public Health Skills and Knowledge Framework (Public Health England et al. 2016) and has been benchmarked against the National Occupational Standards for 'assessment of the impact of policies and strategies on health and well-being' (PHP 33 and PHP 34) developed by Skills for Health (2010a, 2010b).

The Framework and Pathway include:

- **Role descriptors for seven roles in HIA:** to help people locate their potential contribution to HIA, identify skills and knowledge for specific roles, target training, and to encourage public bodies to take an organisational and system wide approach to building capacity for HIA
- **A Development Pathway:** which maps the different levels of practice in HIA and learning opportunities available to support development and progression
- **A Skills and Knowledge Framework for HIA:** This is a competency framework which can provide a clear set of learning outcomes for training and development opportunities in HIA and also enable staff from all sectors to identify how their existing skills and knowledge can contribute to HIA practice, and where there are areas for development

9 Roles in HIA

The table below describes a range of roles that are essential for effective capacity building and the wider adoption of HIA.

The aim of describing these different roles is to help people more easily locate their potential contribution to HIA, identify skills and knowledge for specific roles¹, to design and target training effectively, and to encourage public bodies to take a team, organisational and system wide approach to building capacity for HIA. Individuals may also play more than role in a HIA or their day-to-day work.

Role	Definition
Advocate	Advocates for 'Health in all Policies', champions the use of HIA, provides leadership and identifies opportunities to use HIA
Authoriser	Commissions and/or allocates resources to HIA and integrates HiAP into organisational structures and work plans. Holds overall ownership and accountability for HIAs that they authorise or commission
Stakeholder	Participates in a HIA as a key stakeholder, community member, lay representative etc.
Contributor	Contributes to a HIA with a particular skill set or knowledge
Reviewer	Carries out quality assurance reviews, monitoring and evaluation of HIAs. Provides clear feedback to commissioners and decision makers
Lead HIA Practitioner (Intermediate) Screening and Desktop HIAs	Leads the planning, design, delivery and evaluation of Desktop HIAs or HIA Screenings focused on a discrete project, policy or service area. Ensures that the HIA process follows guidance and benchmarks for high quality HIA
Lead HIA Practitioner (Advanced) Comprehensive, complex and participatory HIAs	This role leads the planning, design, delivery and evaluation of participatory, complex, contentious and/or large scale comprehensive HIAs. Ensures that the HIA process follows guidance and benchmarks for high quality HIAs

¹ A detailed breakdown of the knowledge and skills required for each role is available as unpublished Supplementary Information

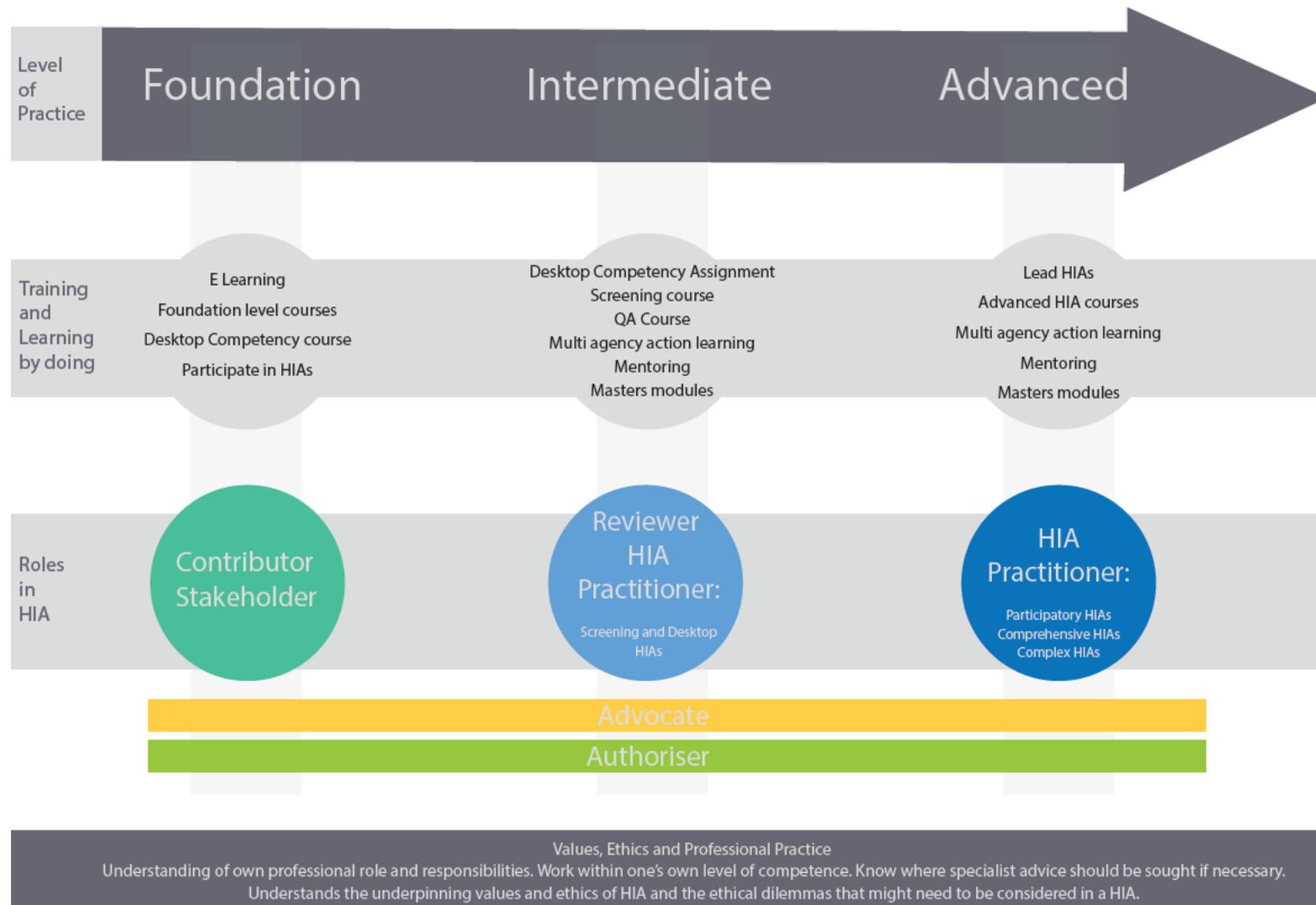
10 Development Pathway for HIA

Description

The development pathway overleaf (Figure 4.) aims to provide a visual representation of the future approach to building skills, knowledge and capacity for HIA in Wales. The pathway describes:

- Three levels of practice: Foundation, Intermediate and Advanced
- A range of roles in using HIA are specified to enable people to locate opportunities to apply their skills and knowledge in HIA in practice in the workplace. These are described above
- The learning opportunities available to help people progress along the development pathway from foundation level to advanced practice
- The whole framework is underpinned by the importance of core HIA values and principles and the active use of professional ethics

Figure 4: WHIASU Development Pathway for HIA

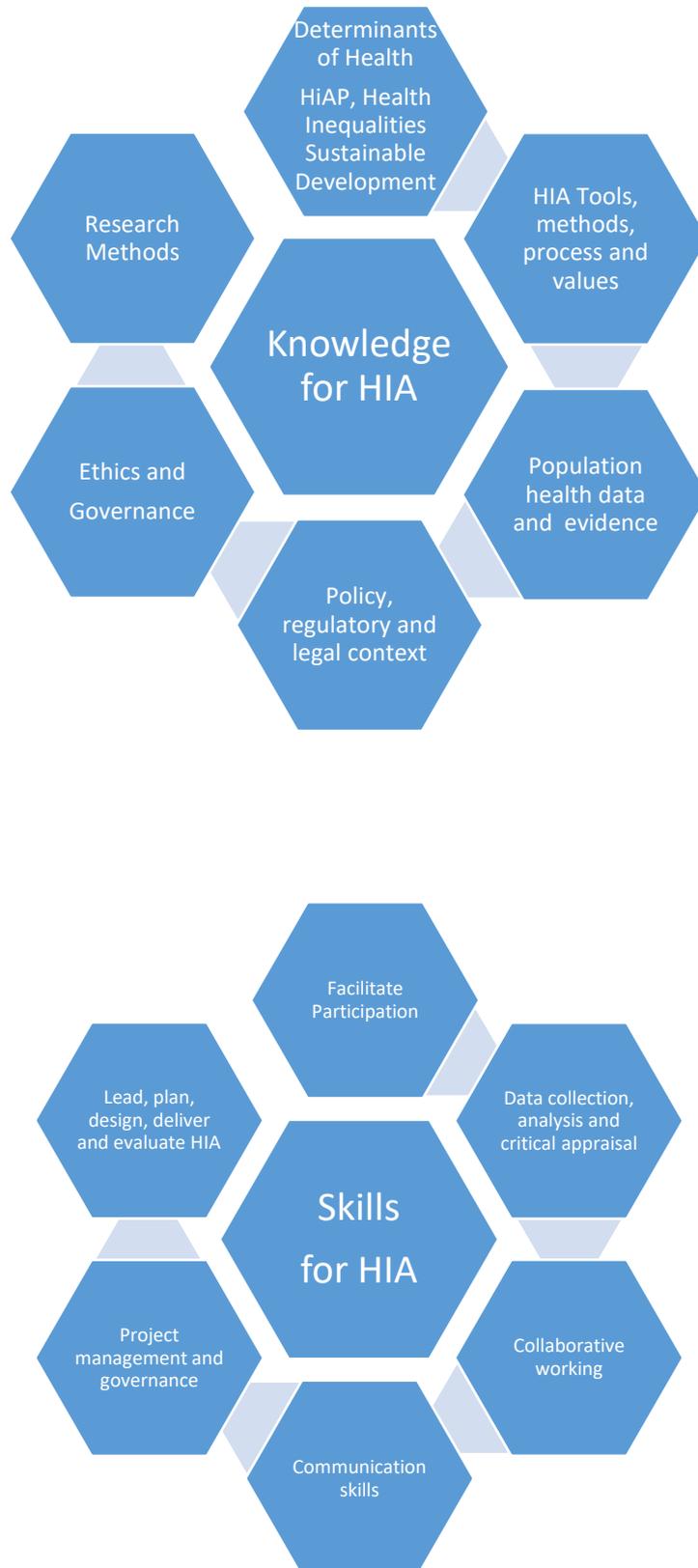


11 Skills and Knowledge Framework for HIA

Description

This is a competency framework (see Figure 5) which can provide a clear set of learning outcomes for training and development opportunities in HIA and also enable staff from all sectors to identify how their existing skills and knowledge can contribute to HIA practice, and where there are areas for development. These areas of knowledge and skills need to be covered by the team of people engaged in the HIA. The lead HIA Practitioner for the HIA does not necessarily have to have expertise in carrying out each area, but does need to understand what is required to complete a high quality HIA, be capable of drawing together and coordinating the requisite skill set, and be accountable for the final HIA and its recommendations. A full breakdown of each knowledge area and skills sets are detailed in Appendix C.

Figure 5: Overview of the Skills and Knowledge Framework for HIA



12 Ambitions and Delivery

The implementation of the *Public Health (Wales) Act 2017* regulations for HIA is anticipated to require a scaling up of training and capacity building in HIA across public bodies in Wales. In addition, capacity building in HIA is a key area of activity agreed for Public Health Wales' designation as a World Health Organisation Collaborating Centre on Investment for Health and Well-being (2018-2022).

Engagement and research conducted in the development of this framework have indicated that a number of additional approaches to training and capacity building will be needed in addition to the current provision. For example: the development and description of distinct roles and related skills and knowledge in HIA make it possible to design and tailor training for defined roles, making training more effective and targeted; facilitating local and regional multi-agency collaboration on HIA practice and developing a national HIA practice network can support a sustainable approach to HIA capacity building.

WHIASU will continue to offer the following:

- E-learning in HIA
- Introductory courses
- Desktop HIA course (2-day)
- Comprehensive HIA course (3-day)
- Lectures on HIA for Masters in Public Health courses
- Mentoring and shadowing

12.1 Ambitions for development in 2019 – 2024 are to:

- Explore options for accreditation of the desktop and comprehensive HIA courses
- Systematically apply the HIA roles and Skills and Knowledge Framework into the learning outcomes for WHIASU training and adapt content as needed
- Develop a bespoke briefing session on HIA for leaders, advocates and authorisers to facilitate implementation of the *Public Health (Wales) Act 2017* regulations
- Develop a short course on HIA for communities and the third sector with a focus on the role of communities in HIA, ensuring effective participatory approaches in HIA, and good practice in the continuation of the voluntary use of HIA

- Develop a model of action learning for teams / multi-agency teams to enable a collaborative approach to implementation of the *Public Health (Wales) Act 2017* regulations
- Collaborate with the Knowledge Directorate in Public Health Wales to develop evidence and data products to support HIAs on key wider determinants e.g. housing
- Work with partners to develop short courses on key skills for HIA e.g. health intelligence, evidence review, community participation
- Review and update the WHIASU course in Quality Assurance of HIAs
- Create additional content on the social determinants of health within WHIASU's e- learning platform
- Work in partnership with academic institutions to develop multidisciplinary modules on HIA
- Establish a HIA Practitioner Network in Wales - to enable sharing of learning, evidence and impact and provide a network of 'critical friends'
- Provide refresher training
- Develop a capacity building toolkit and skills audit to support public bodies with the implementation of the *Public Health (Wales) Act 2017* HIA regulations
- Adapt the training framework and skills audit for WHO Collaborating Centre regions

Target audiences will include:

- Welsh Government
- Public health practitioners
- Local Health Boards
- Local authority officers and members
- Officers from all designated public bodies in Wales
- Land use and transport planners
- Environmental Health Officers
- Third sector and community groups
- Housing association staff
- Academia
- WHO European Region agencies and member states

12.2 WHIASU HIA Training and Capacity Building Framework Implementation Plan Overview 2019-2021

Title	Activity needed	Timescale	Resources
Option papers on accreditation and income generation	Develop	2019/2020	WHIASU core
E-Learning On HIA	Review and update	2019/20	WHIASU core
E-Learning: develop additional content on social determinants	Develop	2019/20	WHIASU core
Introduction to HIA	Review	Ongoing	WHIASU core
Refresher training	Develop	2019/20	WHIASU core
Bespoke Briefing on HIA for Leaders using webinars	Develop	Autumn 2019	WHIASU core
Short HIA course on HIA for communities and third sector	Develop	2020/21	WHIASU core
Rapid Desktop HIA	Continue to deliver	Ongoing delivery	WHIASU core
Action Learning in HIA for teams or multi-agency teams	Develop and pilot	2019/20	WHIASU core
Mentoring	Continue on request	Ongoing	WHIASU core

Technical skills based short courses e.g. health intelligence, evidence for HIA	Develop in partnership	2020/21	Develop and mobilise partnership delivery
Multidisciplinary academic modules on HIA	Develop in partnership	2020/2021	Develop and mobilise partnership delivery with academic partners
Comprehensive HIA Course (3 days)	Continue to deliver	Ongoing delivery	WHIASU core
Quality Assurance for HIA	Review/Update	March 2019	WHIASU core
A HIA Practitioner Network in Wales	Develop	By March 2020	WHIASU core
HIA capacity building framework/toolkit for public bodies	Develop for Wales	March 2020	WHIASU core
	Adapt for WHO CC regions	2020/21	WHO CC
HIA Skills Audit Tool	Develop for Wales	March 2019 for Wales	WHIASU core
	Adapt for WHO CC regions	2019/20 for WHO Regions	WHO CC

13 Evaluation

The impact, effectiveness and implementation of this framework and accompanying delivery plan will be evaluated on an annual basis using the following methods and indicators:

- Bi-annual monitoring of the implementation of key deliverables in the plan for 2019-2024
- Monitoring and analysis of quantity, type and quality of training delivery and requests for training e.g. uptake of e-learning, monitoring requests for assistance
- Evaluation of every training course to include:
 - Quantitative rating on achievement of learning outcomes
 - Net promoter score
 - Qualitative feedback
- Follow up survey of training participants six months post training:
 - Level of learning transfer/implementation
 - Assess further training needs
 - Opportunities and barriers to implementation
- The development of further case studies of capacity building within organisations and teams
- Engagement, reflection and qualitative feedback with professionals, students, public bodies across sectors and member states in the WHO European Region
- Use of skills audits and training needs analysis where indicated/requested
- A review of the framework after 2 years of implementation

14 Conclusion

The development of this training and capacity-building framework has provided WHIASU with an opportunity to examine and reflect on the policy context, evidence base and theoretical underpinning of the Unit's approach to learning, training and professional development in HIA. A significant process of analysis and reflection on HIA practice, delivery of educational opportunities in HIA, and existing professional competency frameworks has resulted in the creation of a new skills and knowledge framework and pathway for learning and professional development in HIA. This work will provide a strong foundation for capacity building in HIA with public bodies in Wales as they take on new statutory duties to conduct HIA, and member states across the WHO European Region who wish to increase their investment in HIA.

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Appendix A: Participants in the development of the Skills and Knowledge Framework

Workshop participants (held February and March 2018):

- Bob Baines, Betsi Cadwaldr University Health Board Public Health Team, Public Health Wales
- Sally Baxter, Betsi Cadwaladr University Health Board
- Bronia Bendall, Natural Resources Wales
- Karen Clarke, Natural Resources Wales
- Tracey Good, NHS Centre for Equality and Human Rights, Public Health Wales
- Helen Green, Office of the Future Generations Commissioner
- Lara Griffiths, Denbighshire County Council
- Emma Horan, Denbighshire County Council
- Delyth Jones, Betsi Cadwaldr University Health Board Public Health Team, Public Health Wales
- Richard Lewis, Health and Sustainability Hub, Policy and International Health, WHO Collaborating Centre on Investment for Health and Well-being, Public Health Wales
- Heather Ramasseur-Marsden, Screening Division, Public Health Wales
- Huw Arfon Thomas, Ynys Mon / Isle of Anglesey County Council
- Lisa Williams, Cardiff and the Vale University Health Board
- Angharad Wooldridge, Wales Health Impact Assessment Support Unit, Public Health Wales

Local Public Health Teams:

- Hywel Dda University Health Board Area
- Abertawe Bro Morgannwg University Health Board Area
- Betsi Cadwaldr University Health Board Public Health Team

People who provided individual feedback:

- Andrew Buroni, RPS HIA
- Anthea Cooke, Health and Well-being Specialist
- Mariana Dyakova, Policy and International Health, WHO Collaborating Centre, Public Health Wales
- Eva Elliot, Cardiff University

Appendix B: WHIASU's current training offer

Type	Roles	Brief Description	Who
General awareness (bespoke sessions on request)	Advocate Authoriser	Outcomes - knowledge of the HIA process and how it could support their work	Wide range of teams across sectors including 3 rd Sector/Community, Housing
E-learning	Advocate Authoriser Contributor	Basic knowledge of HIA Understanding of the wider determinants and HiAP approach to policy making Understanding of when and how HIA can be used and the types of evidence it involves Knowledge of different methods, tools, and stakeholders involved	For anyone with no prior or little knowledge of HIA
Bespoke Introductory Training	Advocate Authoriser Contributor	Teams/projects/organisations Outcomes - basic understanding of HIA and insight into application in their own organisation or contribution to external HIA	Teams/projects/organisations across sectors
Academia	Advocate Authoriser Contributor	Lectures as part of Masters modules e.g. Master's in Public Health Outcomes - gain a basic understanding of HIA, policy context, principles and process and practical application via case studies and undertaking a screening of a proposal	Cardiff University School of Medicine Glyndwr University
Chartered Institute of Environmental Health '6 pack' and EHO Student '6 Pack'	Advocate Authoriser Contributor	Outcomes - gain a basic understanding of HIA, policy context, principles and process and insight into undertaking a screening of a proposal	Practising Environmental Health Officers (EHO) and Student EHO's

<p>Public Health Wales Learning and Development programme Introduction to HIA</p>	<p>Advocate Authoriser Contributor</p>	<p>Learning outcomes include:</p> <ul style="list-style-type: none"> • Know the resource, skills and knowledge requirements for completing a HIA - and where your skill set is relevant • Understand the purpose of applying HIA • Know the policy drivers that support the use of HIA • Know the benefits and outcomes that HIA can achieve • Know how HIA can be applied in a range of contexts • Understand the ethical principles and values that inform HIA • Understand the HIA process and methods 	<p>All public health professionals/workers across a range of sectors/settings</p> <p>(e.g. planning/environmental health/health care settings/PHW/housing/3rd sector)</p> <p>Little or no prior knowledge of HIA/refresher of basics</p>
<p>Rapid HIA Competency Training</p> <p>Endorsed by the Chartered Institute of Environmental Health</p>	<p>Advocate Authoriser Contributor Rapid (Desktop) practitioner</p>	<p>Learning outcomes include:</p> <ul style="list-style-type: none"> • Know the resource, skills and knowledge requirements for completing a HIA - and where your skill set is relevant • Understand the purpose of applying HIA • Know the policy drivers that support the use of HIA • Know the benefits and outcomes that HIA can achieve • Know how HIA can be applied in a range of contexts • Understand the ethical principles and values that inform HIA • Understand the HIA process and methods • Practical experience using HIA tools <p>Options for</p>	<p>Day 1</p> <p>Aimed at officers (EHO's, Planning, Public health, regeneration) who wish to understand and contribute to a Rapid HIA in practice but have received little training on the subject.</p> <p>Day 2</p> <p>Aimed at officers to build confidence and understanding to carry out a Rapid HIA in practice. Completing both days and the assignment enhances the delegates degree of knowledge, understanding and confidence through 'learning by doing'</p>

		<p>Day 1: - certificate of attendance</p> <p>Day 1&2 + assignment Certificate of Attendance + Certificate of Competence</p>	
<p>Comprehensive HIA</p> <p>Endorsed by the Chartered Institute of Environmental Health</p>	<p>Rapid (participatory and comprehensive) Practitioners</p>	<p>3-day action learning</p> <p>Application and gaining experience of planning and completing a comprehensive HIA</p> <p>Certificate of Attendance and Competence</p>	<p>This course builds on the theoretical knowledge and practical application demonstrated as part of the Rapid HIA Competency Course</p> <p>Participants on the comprehensive course MUST have successfully completed and be certified in Rapid HIA</p> <p>Aimed at those who need to be capable of conducting, understanding and reviewing a complex or comprehensive HIA and how to use its findings in practice e.g. public health practitioners, environmental health practitioners, planning officers</p> <p>Timeframe is over 12months, with 3 days attendance, and completion of comprehensive HIA assignment</p>
<p>Mentoring</p>	<p>Rapid (Desktop) practitioners to Rapid (participatory and comprehensive) Practitioners</p>	<p>Offer to shadow/contribute to HIA's led by an experienced advanced HIA practitioner where appropriate to expand their learning and confidence</p>	<p>Those who have undertaken WHIASU HIA training and wish to experience HIA in action</p>
<p>Quality Assurance in HIA</p>	<p>Reviewers</p>	<p>1 Day attendance</p> <p>Completion of an assignment</p> <p>If accepted and passed certificate of competence for QA HIA's Completion</p>	<p>Those that have completed Foundation or Rapid HIA training and wish to extend their learning and who will in the course of their work receive completed HIA's as part of planning and development applications</p>

Appendix C: Skills and Knowledge Framework for Health Impact Assessment

Knowledge for Health Impact Assessment

	Knowledge Area 1: Determinants of Health, Health Inequalities, Sustainable Development and 'Health in all Policies'
K1.1	Know the social determinants of physical and mental health and well-being
K1.2	Understand the concepts of risk and protective factors for health and well-being
K1.3	Understand the impact that socioeconomic inequalities and all forms of discrimination have on health and well-being
K1.4	Understand the concepts of equality and equity in relation to health and well-being
K1.5	Understand the principles of Sustainable Development and 'Health in all Policies' approaches and their relationship to improving health and well-being

	Knowledge Area 2: HIA Tools, methods, process and values
K2.1	Understand the purpose of HIA
K2.2	Know the key stages, methods and tools used in HIA
K2.3	Understand the assessment frameworks and tools used in HIA
K2.4	Understand the relationship of HIA to other forms of impact assessment
K2.5	Know how HIA can be applied in a range of contexts

K2.6	Know the benefits and outcomes that HIA can achieve
K2.7	Understand the resources, skills and knowledge required for completing a HIA
K2.8	Understand the role and importance of stakeholder engagement and community participation in HIA
K2.9.	Understand the precautionary principle and how the concepts of likelihood, scale and severity of impact are used in HIA
K2.10	Know the key criteria for a high quality HIA e.g. WHIASU (2017) Quality Assurance Review Framework for HIA

	Knowledge Area 3: Population health data and evidence
K3.1	Know key indicators of population health and where this data can be accessed
K3.2	Know how to identify data needs for a specific HIA
K3.3	Know how to interpret and present data and information
K3.4	Know how to predict future data needs and develop methods to collect data
K3.5	Know how to search for published evidence on health topics
K3.6	Know how to critically appraise a range of research evidence and sources, synthesise and draw appropriate conclusions

	Knowledge Area 4: Policy, regulatory and legal context
K4.1	Know the policy and legal drivers that support the use of HIA and ‘Health in All Policies’ approaches
K4.2	Know what type of processes and decision-making HIAs may influence in their organisation.
K4.3	Understand the role of impact assessment in policy development

Knowledge Area 5: Ethics and Governance	
K5.1	Understand the underpinning values, principles and ethics of HIA
K5.2	Understand the ethical dilemmas that might need to be considered in a HIA
K5.3	Understand own professional role and responsibilities, the importance of working within one's own level of competence and know where specialist advice should be sought if necessary
K5.4	Know the relevant policies and protocols concerning confidentiality, data protection and information sharing
K5.5	Know the legal, decision making, administrative and reporting processes and requirements within which a HIA may need to be managed

Knowledge Area 6: Research Methods	
K6.1	Know the range of quantitative and qualitative research methods that may be used in a HIA e.g. focus groups, questionnaires, quantitative data analysis, thematic analysis
K6.2	Know how to identify the most suitable data collection methods for a specific HIA
K6.3	Know the value and role of qualitative data in HIA

Skills for Health Impact Assessment

Skills Area 1: Lead, plan, design, deliver and evaluate HIA	
S1.1	<p>Lead a screening/initial assessment of a proposal in collaboration with key partners/stakeholders using an appropriate assessment framework which identifies:</p> <ul style="list-style-type: none"> • Potential positive impacts/opportunities for health and well-being • Potential negative impacts/unintended consequences on health and well-being • Population groups who may be affected • What evidence is currently available to support each impact identified
S1.2	<p>From the findings of a screening, work collaboratively to scope a HIA, and develop a project plan for undertaking the HIA which includes:</p> <ul style="list-style-type: none"> • The aims and objectives of the HIA • Governance arrangements for the HIA and any organisational decision making, administrative and reporting processes, and timeframes that need to be considered • The scale, scope and focus of the HIA • The tools, assessment frameworks and data collection methods to be used in the HIA • The types of evidence to be sourced • Key stakeholders to engage and how they are to be engaged • The roles, skills and resources required to undertake the HIA • A project plan with agreed timeframes, milestones and roles and responsibilities • How the HIA will be evaluated
S1.3	<p>Work collaboratively with others to assess the proposal using an appropriate assessment framework and methods ensuring that:</p> <ul style="list-style-type: none"> • Any positive impacts or opportunities to maximise health and wellbeing outcomes are identified and how they were identified are presented clearly. • Any negative impacts, gaps or unintended consequences are identified and how they were identified are presented clearly. • Possible cumulative impacts of related policies or projects in the vicinity are considered.

	<ul style="list-style-type: none"> • All sources of evidence are triangulated and used to inform the assessment and identifications of impacts. • It is made clear how each impact identified is supported by the evidence gathered. • It is clear who will be impacted and any potential inequalities in the distribution of impacts are identified. • The degree of likelihood and severity of specific impacts is distinguished.
S1.4	<p>Work collaboratively to make recommendations as a result of the HIA that are:</p> <ul style="list-style-type: none"> • Specific, measurable, appropriate, realistic and time bound • Clearly linked to the impacts identified • Prevent or mitigate potential negative impacts or unintended consequences. • Maximise the benefits and opportunities of positive impacts. • Clear on who is expected to take action
S1.5	<p>Present the context, methods, findings and recommendations of the HIA in a report ensuring that:</p> <ul style="list-style-type: none"> • The intended audience for the report is clear and the language, information and tone of the report are suitable for this audience. • The structure of the report is clear and there are relevant and logical sections • There is transparency in reporting key decisions, methods and data collection used in the HIA. • There is a clear link between the evidence gathered, assessment and recommendations.
S1.6	<p>Identify a process for monitoring the implementation of recommendations made in the HIA and where possible identify indicators to monitor key health and well-being impacts</p>
S1.7	<p>Identify a process for a review, reflection and evaluation of the HIA including consideration of whether the aims, objectives and scope of the HIA have been met.</p>

Skills Area 2: Facilitate Participation	
S2.1	Design, plan and enable participation with individuals, groups and communities likely to be affected by a planned intervention or change
S2.2	Facilitate discussions and dialogue with individuals, groups and communities likely to be affected by a planned intervention or change e.g. stakeholder workshop facilitation
S2.3	Identify ways to overcome barriers to engagement and participation

Skills Area 3: Data collection, analysis and critical appraisal	
S3.1	Access, analyse and interpret data on population health and well-being e.g. employment, income, housing, physical activity, rates of specific conditions
S3.2	Identify, obtain and present a clear population health profile for an area that contains indicators of physical and mental health and well-being relevant to the project under assessment
S3.3	Write a narrative which explains the population data collected and how it is relevant to the HIA and the specific context of the assessment
S3.4	Carry out an evidence review with a clear search strategy meeting the following criteria: <ul style="list-style-type: none"> • The methodology and sources used are relevant to the project and scale of the HIA. • The quality and depth of evidence is sufficient to inform the assessment of likely impacts • There is some critical assessment of the literature used

Skills Area 4: Collaborative working	
S4.1	Identify the stakeholder groups who are relevant to making an assessment of health impact for a defined project and plans how they could be engaged in the HIA
S4.2	Engage stakeholders and partner agencies (including service users/community members) in a HIA
S4.3	Influence, negotiate and co-ordinate the engagement of other departments and organisations in a HIA

Skills Area 5: Communication skills	
S5.1	Communicate a range of (sometimes complex) information to diverse audiences using different methods and ensure language used in stakeholder and community engagement is appropriate, inclusive and accessible
S5.2	Engage with others, build relationships, encourage contribution and sustain commitment to a shared project
S5.3	Work with stakeholders to manage potentially conflicting objectives and viewpoints
S5.4	Formulate clear, realistic, specific and measurable recommendations

Skills Area 6: Project management and governance	
S6.1	Develop and manage a project plan, resources, budget and scope within a clear governance framework
S6.2	Identify and apply ethical frameworks to a HIA/project
S6.3	Manage a project/ HIA within organisational decision making, administrative and reporting processes
S6.4	Adapt plans, manage uncertainty and solve problems within clear lines of accountability

