

**Shropshire Council**  
**Equality, Social Inclusion and Health Impact Assessment (ESHIA)**  
**Stage One Screening Record 2024**

**A. Summary Sheet on Accountability and Actions**

<b>Name of proposed service change</b>
Oak Farm Consultation July 2024

<b>Name of the officer carrying out the screening</b>
Stewart Smith – Development Officer

<b>Decision, review, and monitoring</b>
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Decision	Yes	No
Initial (Stage One) ESHIA Only?	✓	
Proceed to Stage Two Full ESHIA or HIA (part two) Report?		✓

*If completion of a Stage One screening assessment is an appropriate and proportionate action at this stage, please use the boxes above, and complete both part A and part B of of this template. If a Full or Stage Two report is required, please move on to full report stage once you have completed this initial screening assessment as a record of the considerations which you have given to this matter.*

<b>Actions to mitigate likely negative impact or enhance positive impact of the service change in terms of equality and social inclusion considerations</b>
<p>At this time Oak Farm services for Adults with Learning Disabilities are commissioned by Shropshire Council and delivered by Bethphage, a charity that provides support to adults with learning and physical disabilities. The landowner of the site is the Ditton Priors Community Land Trust.</p> <p>Bethphage has been working on its vision for future service provision over recent years and has established a strong vision to purchase their own site for future service provision in a new location (Chelmarsh, Shropshire). Changes are therefore due to happen to the service before the end of 2024.</p> <p>This means that there is now a need to review the current service and commissioning arrangements. This change will impact on the approximately 30 individuals who currently access support via the farm, as well as their families / carers.</p> <p>As the ages of the individuals range from 69 years to early 20s, with a gender balance is approximately 3 men to 1 woman (21 men – 09 women), the individuals that are affected are those in the Protected Characteristic groupings of Age, Disability and Sex, as defined in the Equality Act 2010. There is intersectionality across these groupings and within the grouping of Disability, given that these are adults with a range of needs arising from their disabilities, primarily learning disabilities and neurodiverse conditions including autism. The Council also seeks to give consideration to the needs of individuals who are vulnerable by virtue of their circumstances, within an additional category of social inclusion. This is not a legal requirement but more a matter of good practice and enables</p>

the Council to also factor in due regard for circumstances, including access to services across what is a large and sparsely populated rural county.

It is recognised that any change to routine and service provision may have a negative equality and health and well being impact upon the individuals supported by Bethphage at Oak Farm. To mitigate this impact, the service provider is accordingly working with individuals and their families and carers in a positive way that encourages everyone to make informed choices about their future.

We are holding the consultation on this developing situation with the aim to gather information prior to any decisions being taken about the future of the day opportunities service.

Particular consideration will need to be given to how the consultation is approached in accordance with the gender of the individual, as for example women will need different toilet and changing room provision and a facilities audit will therefore be required to compare provision at Oak Farm with provision at other sites.

All options being considered for the future will involve individuals in reviews about their ongoing support with the Social Care Team. Discussions will take place with families and carers about future options so they will be able to support individual adults to make informed decisions about the future options.

### **Actions to mitigate likely negative impact or enhance positive impact of the service change in terms of health and wellbeing considerations**

Physical conditions at Oak Farm have become difficult in recent months as the onsite portacabin facility is no longer in use due to deterioration caused by age and bad weather. This is one of many changes faced by staff and individuals, the latter have been positively supported and encouraged to grasp the opportunity of alternative accommodation facilities.

There may be a positive impact to mental wellbeing through better facilities at new sites.

The views of individuals and their families/carers will be sought to inform decisions about the nature of the coming change. Individuals will be supported by staff from Bethphage and members of the Social Care Team to express their opinions on a range of future options.

### **Actions to review and monitor the impact of the service change in terms of equality, social inclusion, and health considerations**

Individuals will take part in reviews of their support with members of the Social Care Team before any changes are made to their support. Options and choices will be fully explained and discussed with people so that they are able to make informed decisions that best meet their needs, strengths and wishes.

There are a range of day opportunity support options across the county (this will include the new farm-based support offered by Bethphage at their new site in Chelmarsh). Support options may include using a direct payment to access other support that is appropriate to each individual within their own local community.

Another option could be that individuals access other day opportunities closer to their home e.g. those who live in the central area of the County.

### **Associated ESHIAs**

[ESHIA Shropshire Plan for Council.pdf](#)

### **Actions to mitigate likely negative impact, enhance positive impact, and review and monitor the overall impacts with regard to climate change impacts and with regard to economic and societal impacts**

#### ***Climate change***

People attending Oak Farm at present travel from various locations in Shropshire including the urban areas of Shrewsbury, Ludlow and Bridgnorth as well as their surrounding rural areas. The proposed changes mean that individuals will either access more localised services closer to home communities, or in the case of the move to Bethphage's new farm site there should be a balancing of travel requirements as individuals travelling from Bridgnorth travel shorter distances while some from Ludlow and the south may travel slightly further. Individual reviews with the Social Care Team will consider support options for individuals such as those who live in Shrewsbury at day opportunities services which are at least 15 miles closer to home addresses.

All new developments at the new farm purchased by Bethphage will align to planning regulations and will aim to have positive climate impact.

#### **Economic and societal/wider community**

The provider of support services at Oak Farm will be moving to their new farm site and developing a range of support options on site for adults and young people with learning disabilities. Their plans for the future consider developments of supported living and respite options as well as day opportunities. They are also looking at a wider clientele for support such as individuals with mental health needs.

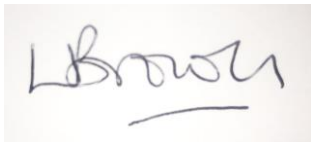
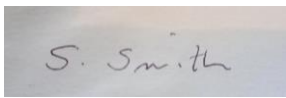


If necessary, the Landowner of Oak Farm will be looking at encouraging future tenants onto the site. These may not be related to Social Care support and adults with learning disabilities.

The Ditton Priors community is rightly proud of the learning disability support that has been provided at Oak Farm. With Bethphage's drive and decision to acquire their own farm site, consultation is necessary to determine the best steps for all supported individuals and stakeholders.

All members of staff employed by the care provider Bethphage are regularly informed of developments.

All individuals supported at Oak Farm will have the opportunity to review their present and future support arrangements with a member of the Social Care Team. At reviews individuals will be supported to make informed decisions about their care. All rights will be protected, and all individuals will have the opportunity to discuss matters with an independent advocate.

### **Scrutiny at Stage One screening stage**


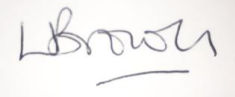
<b>People involved</b>	<b>Signatures</b>	<b>Date</b>
Lead officer for the proposed service change  Lesley Brown	Lesley Brown 	12.07.2024
Officer carrying out the screening  Stewart Smith		12.07/2024
Any other internal service area support*		
Lois Dale Rurality and Equalities Specialist		12.07.2024
Phil Northfield – Public Health Development Officer		12.07.2024
Any external support**		

\*This refers to other officers within the service area

\*\*This refers to support external to the service but within the Council, e.g, the Performance and Research Specialist for Rurality and Equalities, Public Health colleagues, the Feedback and Insight Team, performance data specialists, Climate Change specialists, etc.

### **Sign off at Stage One screening stage**

<b>Name</b>	<b>Signatures</b>	<b>Date</b>
Lead officer's name  Laura Tyler		12.07.2024

		
Service manager's name  Lesley Brown		12.07.2024

*\*This may either be the Head of Service or the lead officer*

## **B. Detailed Screening Assessment**

### **Aims of the service change and description**

Oak Farm is a day opportunities service located in Ditton Priors, South Shropshire. (WV16 6SS, nr Bridgnorth)

Oak Farm services are commissioned by Shropshire Council and delivered by Bethphage, a charity that provides support to adults with learning and physical disabilities. The landowner of the site is the Ditton Priors Community Land Trust. It took over ownership of the site from Shropshire Council in 2014.

Bethphage has been working on its vision for future service provision over recent years. They have established a strong vision to purchase their own site for future service provision in a new location, which is in Chelmarsh in Shropshire. This means that there is now a need to review the current service and commissioning arrangements. An important part of this review is obtaining feedback from service users and their families, stakeholders, and the wider community.

There are currently approximately 30 individuals accessing the service and support at Oak Farm (this number may change as individuals join and leave services). Ages range from 69 years to early 20s and the gender balance is approximately 3 men to 1 woman (21 men – 09 women).

This consultation aims to explore options for a new service and gather feedback from members of the public and stakeholders to inform future decision making. The outcome of the consultation will also need to consider relative costs of services for individuals to ensure best value for money and financial sustainability ongoing.

#### **Option 1:**

**Oak Farm Day Opportunities run by Bethphage ceases and appropriate alternative support is identified for each individual.**

Under this option the service at Oak Farm will finish. All individuals (along with their families and carers) will then be assisted to find the best alternative support available. This will be supported through a review.

There are different types of day opportunity support running across Shropshire. Each individual will have the chance to consider the support that best meets their needs, strengths and interests. This may include the new farm run by Bethphage, or other services and support based in communities across Shropshire.

**Option 2:**

**A new Day Opportunities provider is secured to deliver a service from Oak farm (subject to lease arrangements with landowner)**

Under this option, arrangements would be made to find a new provider to replace Bethphage at Oak Farm. It may not be easy to find a new provider who is interested or able to deliver the services in the time we have. Individuals would need to review their care and support and discuss their future needs with a member of the Social Care Team.

Everyone will have the chance to consider how the new support arrangements best meet their needs, strengths and interests.

**Option 3:**

**Support continues through an agreed move to the new farm location, which is Lower Sutton Farm, Sutton, Chelmarsh, WV16 6BQ**

Under this option arrangements will be made for individuals who are presently supported at Oak Farm to move across to the new Bethphage owned farm site. The support offered will be the same, although the site is different.

Each individual will have the chance to consider the support arrangements at the new farm to ensure that they best meet their needs, strengths and interests. Individual reviews with the Social Care Team will assist any individual who feels that they would like to move to alternative support.

For transparency, Shropshire Council's current preferred option is Option 1 as this promotes greater levels of choice for individuals. However, it is important to consult on all possible options and to invite service user, stakeholder and public views before any final decisions can be taken.

**Intended audiences and target groups for the service change**

Current service users at the site and their families and carers  
Stakeholders including Ditton Priors Community Land Trust and Ditton Priors Parish Council  
Bethphage  
Other providers  
Members of the public  
Shropshire and Telford and Wrekin ICS  
Other health care providers  
Transport providers

Portfolio Holder and local SC councillors

### **Evidence used for screening of the service change**

The plan to carry out a consultation on the future of the day opportunities service at Oak farm has come about due to the independent drive of the provider organisation to own and host their own day opportunities farm site. Bethphage have made a purchase of a new farm site (Sutton Farm, Chelmarsh) and they wish to develop this with supported living and respite opportunities as well as day opportunities for adults with learning disabilities.

In order to drive this work forward they have expressed their wish to move from Oak Farm by December 2024.

The consultation is planned to fully involve all individuals who are supported at the farm, along with families, carers and other stakeholders to inform Shropshire Council decisions about how best to respond to the planned move and development.

### **Specific consultation and engagement with intended audiences and target groups for the service change**

The aim is now to gather information prior to any decisions being taken. Shropshire Council asks those who attend Oak Farm and a wide range of other stakeholders to provide feedback to help determine what support might look like in the future, wherever that is offered. We want to explore options and people's views on those options. Discussions will also be focused on identifying if there should be a long-term relationship with Oak Farm or whether future options at other venues should be considered.

This consultation aims to explore options for a new service and gather feedback from members of the public and stakeholders to inform future decision making. The outcome of the consultation will also need to consider relative costs of services for individuals to ensure best value for money and financial sustainability ongoing.

The consultation is scheduled to commence 15<sup>th</sup> July and run for a period of 7 weeks, with the results then due to be shared with key stakeholders in the Autumn.

### **Initial equality impact assessment by grouping (Initial health impact assessment is included below this table)**

*Please rate the impact that you perceive the service change is likely to have on a group, through stating this in the relevant column.*

*Please state if it is anticipated to be neutral (no impact) and add any extra notes that you think might be helpful for readers.*

<b>Protected Characteristic groupings and other groupings locally</b>	<b>High negative impact</b>	<b>High positive impact</b>	<b>Medium positive or negative impact</b>	<b>Low positive, negative, or neutral impact</b>
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<b>identified in Shropshire</b>	<i>Stage Two ESHIA required</i>	<i>Stage One ESHIA required</i>	<i>Stage One ESHIA required</i>	<b>(please specify)</b> <i>Stage One ESHIA required</i>
<p><u>Age</u> (please include children, young people, young people leaving care, people of working age, older people. Some people may belong to more than one group e.g., a child or young person for whom there are safeguarding concerns e.g., an older person with a disability)</p>				<p>Neutral to low negative: Most supported individuals are in the 30-50 age range. A small number of individuals are in the age range 50-69. All will be supported to review their present and future support arrangements</p> <p>Neutral: Children below the age of 18 are not supported at Oak Farm.</p>
<p><u>Disability</u> (please include cancer; HIV/AIDS; learning disabilities; mental health conditions and syndromes; multiple sclerosis; neurodiverse conditions such as autism; hidden disabilities such as Crohn's disease; physical and/or sensory disabilities or impairments)</p>				<p>Neutral to low negative. The individuals present with a range of learning disabilities and neurodiverse conditions. All will be supported as individuals to review their present and future support arrangements</p>
<p><u>Gender re-assignment</u> (please include associated aspects: safety, caring responsibility, potential for bullying and harassment)</p>				<p>Neutral. All considered options will ensure that individuals receive support</p>



				to review their present and future support arrangements
<u>Marriage and Civil Partnership</u> (please include associated aspects: caring responsibility, potential for bullying and harassment)				Neutral. All considered options will ensure that individuals receive support to review their present and future support arrangements
<u>Pregnancy and Maternity</u> (please include associated aspects: safety, caring responsibility, potential for bullying and harassment)				Neutral. All considered options will ensure that individuals receive support to review their present and future support arrangements
<u>Race</u> (please include ethnicity, nationality, culture, language, Gypsy, Roma, Traveller)				Neutral. All considered options will ensure that individuals receive support to review their present and future support arrangements
<u>Religion or Belief</u> (please include Buddhism, Christianity, Hinduism, Islam, Jainism, Judaism, Nonconformists; Rastafarianism; Shinto, Sikhism, Taoism, Veganism, Zoroastrianism, and any others)				Neutral. All considered options will ensure that individuals receive support to review their present and future support arrangements

<p><u>Sex</u> (please include associated aspects: safety, caring responsibility, potential for bullying and harassment)</p>				<p>Neutral to low negative. The gender balance is 3 men to one woman. All will be supported as individuals to review their present and future support arrangements.</p>
<p><u>Sexual Orientation</u> (please include associated aspects: safety; caring responsibility; potential for bullying and harassment)</p>				<p>Neutral. All considered options will ensure that individuals receive support to review their present and future support arrangements</p>
<p><u>Other: Social Inclusion</u> (please include families and friends with caring responsibilities; households in poverty or on low incomes; people for whom there are safeguarding concerns; people you consider to be vulnerable; people with health inequalities; refugees and asylum seekers; rural communities)</p>				<p>Neutral to low negative due to changes in terms of physical access to services. Families and carers will be involved in discussions and consultation.</p>
<p><u>Other: Veterans and serving members of the armed forces and their families</u></p>				<p>Neutral. All considered options will ensure that individuals receive support to review their present and future support arrangements</p>

<u>Other: Young people leaving care</u>				Neutral. All considered options will ensure that individuals receive support to review their present and future support arrangements
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**Initial health and wellbeing impact assessment by category**

*Please rate the impact that you perceive the service change is likely to have with regard to health and wellbeing, through stating this in the relevant column.*

*Please state if it is anticipated to be neutral (no impact) and add any extra notes that you think might be helpful for readers.*

<b>Health and wellbeing: individuals and communities in Shropshire</b>	<b>High negative impact</b> <i>Part Two HIA required</i>	<b>High positive impact</b>	<b>Medium positive or negative impact</b>	<b>Low positive negative or neutral impact (please specify)</b>
<p><b>Will the proposal have a <i>direct impact</i> on an individual's health, mental health and wellbeing?</b></p> <p>For example, would it cause ill health, affecting social inclusion, independence and participation?</p>				<p>Neutral to low negative. All options being considered will make arrangement for ongoing preferred support for individuals. Day Opportunities support across Shropshire plays a key role in enhancing each supported person's ability to live their best life.</p>

				All individuals will have the opportunity to review their care and support arrangements
<p><b>Will the proposal <i>indirectly impact</i> an individual's ability to improve their own health and wellbeing?</b></p> <p>For example, will it affect their ability to be physically active, choose healthy food, reduce drinking and smoking?</p> <p>.</p>				<p>Neutral: All options being considered will make arrangement for ongoing preferred support for individuals. Day Opportunities support across Shropshire plays a key role in enhancing each supported person's ability to access health services and make informed decisions about their own wellbeing.</p>
<p><b>Will the policy have a <i>direct impact</i> on the community - social, economic and environmental living conditions that would impact health?</b></p> <p>For example, would it affect housing, transport, child development, education, employment opportunities, availability of green space or climate change mitigation?</p> <p>.</p>				<p>Neutral: All options being considered will make arrangement for ongoing preferred support for individuals. Day Opportunities support across Shropshire</p>

				plays a key role in enhancing each supported person's ability to live their best life and involve themselves in their chosen and local communities.
<p><b>Will there be a likely change in <i>demand</i> for or access to health and social care services?</b></p> <p>For example: Primary Care, Hospital Care, Community Services, Mental Health, Local Authority services including Social Services?</p> <p>.</p>				<p>Neutral:</p> <p>All options being considered will make arrangement for ongoing preferred support for individuals. Day Opportunities support across Shropshire plays a key role in enhancing each supported person's ability to access health services and make informed decisions about their own wellbeing.</p>

**Guidance Notes**

**1. Legal Context**

It is a legal requirement for local authorities to assess the equality and human rights impact of changes proposed or made to services. It is up to us as an authority to decide what form our equality impact assessment may take. By way of illustration, some local authorities focus more overtly upon human rights; some include safeguarding.

It is about what is considered to be needed in a local authority's area, in line with local factors such as demography and strategic objectives as well as with the national legislative imperatives.

Carrying out these impact assessments helps us as a public authority to ensure that, as far as possible, we are taking actions to meet the general equality duty placed on us by the Equality Act 2010, and to thus demonstrate that the three equality aims are integral to our decision making processes.

These are: eliminating discrimination, harassment and victimisation; advancing equality of opportunity; and fostering good relations.

These screening assessments for any proposed service change go to Cabinet as part of the committee report, or occasionally direct to Full Council, unless they are ones to do with Licensing, in which case they go to Strategic Licensing Committee.

Service areas would ordinarily carry out a screening assessment, or Stage One equality impact assessment. This enables energies to be focussed on review and monitoring and ongoing evidence collection about the positive or negative impacts of a service change upon groupings in the community, and for any adjustments to be considered and made accordingly.

These screening assessments are recommended to be undertaken at timely points in the development and implementation of the proposed service change.

For example, a Stage One ESHIA would be a recommended course of action before a consultation. This would draw upon the evidence available at that time, and identify the target audiences, and assess at that initial stage what the likely impact of the service change could be across the national Protected Characteristic groupings and our additional local categories. This ESHIA would set out intended actions to engage with the groupings, particularly those who are historically less likely to engage in public consultation eg young people, as otherwise we would not know their specific needs.

A second Stage One ESHIA would then be carried out after the consultation, to say what the feedback was, to set out changes proposed as a result of the feedback, and to say where responses were low and what the plans are to engage with groupings who did not really respond. This ESHIA would also draw more upon actions to review impacts in order to mitigate the negative and accentuate the positive.

Meeting our Public Sector Equality Duty through carrying out these ESHIAs is very much about using them as an opportunity to demonstrate ongoing engagement across groupings and to thus visibly show we are taking what is called 'due regard' of the needs of people in Protected Characteristic groupings.

If the screening indicates that there are likely to be high negative impacts for groupings within the community, the service area would need to take advice on whether or not to carry out a full report, or Stage Two assessment. This is resource intensive but will enable more evidence to be collected that will help the service area to reach an informed opinion.

In practice, Stage Two or Full Screening Assessments have only been recommended twice since 2014, as the ongoing mitigation of negative equality impacts should serve to keep them below the threshold for triggering a Full Screening Assessment. The expectation is that Full Screening Assessments in regard to Health Impacts may occasionally need to be undertaken, but this would be very much the exception rather than the rule.

## **2. Council Wide and Service Area Policy and Practice on Equality, Social Inclusion and Health**

This involves taking an equality and social inclusion approach in planning changes to services, policies, or procedures, including those that may be required by Government. The decisions that you make when you are planning a service change need to be recorded, to demonstrate that you have thought about the possible equality impacts on communities and to show openness and transparency in your decision-making processes.

This is where Equality, Social Inclusion and Health Impact Assessments (ESHIA) come in. Where you carry out an ESHIA in your service area, this provides an opportunity to show:

- What evidence you have drawn upon to help you to recommend a strategy or policy or a course of action to Cabinet or to Strategic Licensing Committee.
- What target groups and audiences you have worked with to date.
- What actions you will take in order to mitigate any likely negative impact upon a group or groupings, and enhance any likely positive effects for a group or groupings; and
- What actions you are planning to monitor and review the impact of your planned service change.

The formal template is there not only to help the service area but also to act as a stand-alone for a member of the public to read. The approach helps to identify whether or not any new or significant changes to services, including policies, procedures, functions, or projects, may have an adverse impact on a particular group of people, and whether the human rights of individuals may be affected.

There are nine Protected Characteristic groupings defined in the Equality Act 2010. The full list of groupings is: Age; Disability; Gender Reassignment; Marriage and Civil Partnership; Pregnancy and Maternity; Race; Religion or Belief; Sex; and Sexual Orientation.

There is also intersectionality between these. Eg a young person with a disability would be in the groupings of Age and Disability, and if they described themselves as

having a faith they would then also be in the grouping of Religion or Belief. We demonstrate equal treatment to people who are in these groups and to people who are not, through having what is termed 'due regard' to their needs and views when developing and implementing policy and strategy and when commissioning, procuring, arranging, or delivering services.

For the individuals and groupings who may be affected, ask yourself what impact do you think is likely and what actions will you currently anticipate taking, to mitigate or enhance likely impact of the service change? If you are reducing a service, for example, there may be further use you could make of awareness raising through social media and other channels to reach more people who may be affected.

Social inclusion is then a wider additional local category we use in Shropshire, in order to help us to go beyond the equality legislation in also considering impacts for individuals and households with regard to the circumstances in which they may find themselves across their life stages. This could be households on low incomes, or households facing challenges in accessing services, such as households in rural areas, and veterans and serving members of the armed forces and their families, or people that we might consider to be vulnerable, such as young people leaving care or refugee families.

Please note that the armed forces are now a grouping to whom we are required to give due regard under recent Armed Forces legislation, although in practice we have been doing so for a number of years now.

We are now also identifying care leavers as a distinct separate local grouping due to their circumstances as vulnerable individuals.

When you are not carrying out an ESHIA, you still need to demonstrate and record that you have considered equality in your decision-making processes. It is up to you what format you choose.-You could use a checklist, an explanatory note, or a document setting out our expectations of standards of behaviour, for contractors to read and sign. It may well not be something that is in the public domain like an ESHIA, but you should still be ready for it to be made available.

**Both the approaches sit with a manager, and the manager has to make the call, and record the decision made on behalf of the Council.**

*Carry out an ESHIA:*

- If you are building or reconfiguring a building.
- If you are planning to reduce or remove or reconfigure a service.
- If you are consulting on a policy or a strategy.
- If you are bringing in a change to a process or procedure that involves other stakeholders and the wider community as well as particular groupings

*Carry out and record your equality and social inclusion approach:*



- If you are setting out how you expect a contractor to behave with regard to equality, where you are commissioning a service or product from them.
- If you are setting out the standards of behaviour that we expect from people who work with vulnerable groupings, such as taxi drivers that we license.
- If you are planning consultation and engagement activity, where we need to collect equality data in ways that will be proportionate and non-intrusive as well as meaningful for the purposes of the consultation itself.
- If you are looking at services provided by others that help the community, where we need to demonstrate a community leadership approach

### **3. Council wide and service area policy and practice on health and wellbeing**

This is a relatively new area to record within our overall assessments of impacts, for which we are asking service area leads to consider health and wellbeing impacts, and to look at these in the context of direct and indirect impacts for individuals and for communities.

A better understanding across the Council of these impacts will also better enable the Public Health colleagues to prioritise activities to reduce health inequalities in ways that are evidence based and that link effectively with equality impact considerations and climate change mitigation.

#### **Health in All Policies – Health Impact Assessment**

Health in All Policies is an upstream approach for health and wellbeing promotion and prevention, and to reduce health inequalities. The Health Impact Assessment (HIA) is the supporting mechanism

- Health Impact Assessment (HIA) is the technical name for a process that considers the wider effects of local policies, strategies and initiatives and how they, in turn, may affect people's health and wellbeing.
- Health Impact Assessment is a means of assessing both the positive and negative health impacts of a policy. It is also a means of developing good evidence-based policy and strategy using a structured process to review the impact.
- A Health Impact Assessment seeks to determine how to maximise health benefits and reduce health inequalities. It identifies any unintended health consequences. These consequences may support policy and strategy or may lead to suggestions for improvements.
- An agreed framework will set out a clear pathway through which a policy or strategy can be assessed and impacts with outcomes identified. It also sets out the support mechanisms for maximising health benefits.

The embedding of a Health in All Policies approach will support Shropshire Council through evidence-based practice and a whole systems approach, in achieving our corporate and partnership strategic priorities. This will assist the Council and partners in promoting, enabling and sustaining the health and wellbeing of individuals and communities whilst reducing health inequalities.

## **Individuals**

### **Will the proposal have a *direct impact* on health, mental health and wellbeing?**

For example, would it cause ill health, affecting social inclusion, independence and participation?

Will the proposal directly affect an individual's ability to improve their own health and wellbeing?

This could include the following: their ability to be physically active e.g., being able to use a cycle route; to access food more easily; to change lifestyle in ways that are of positive impact for their health.

An example of this could be that you may be involved in proposals for the establishment of safer walking and cycling routes (e.g., green highways), and changes to public transport that could encourage people away from car usage. and increase the number of journeys that they make on public transport, by foot or on bicycle or scooter. This could improve lives.

### **Will the proposal *indirectly impact* an individual's ability to improve their own health and wellbeing?**

This could include the following: their ability to access local facilities e.g., to access food more easily, or to access a means of mobility to local services and amenities? (e.g. change to bus route)

Similarly to the above, an example of this could be that you may be involved in proposals for the establishment of safer walking and cycling routes (e.g. pedestrianisation of town centres), and changes to public transport that could encourage people away from car usage, and increase the number of journeys that they make on public transport, by foot or on bicycle or scooter. This could improve their health and well being.

## **Communities**

Will the proposal directly or indirectly affect the physical health, mental health, and wellbeing of the wider community?

A *direct impact* could include either the causing of ill health, affecting social inclusion, independence and participation, or the promotion of better health.

An example of this could be that safer walking and cycling routes could help the wider community, as more people across groupings may be encouraged to walk more, and as there will be reductions in emission leading to better air quality.

An *indirect impact* could mean that a service change could indirectly affect living and working conditions and therefore the health and well being of the wider community.

An example of this could be: an increase in the availability of warm homes would improve the quality of the housing offer in Shropshire and reduce the costs for households of having a warm home in Shropshire. Often a health promoting approach also supports our agenda to reduce the level of Carbon Dioxide emissions and to reduce the impact of climate change.

Please record whether at this stage you consider the proposed service change to have a direct or an indirect impact upon communities.

### **Demand**

**Will there be a change in demand for or access to health, local authority and social care services?**

For example: Primary Care, Hospital Care, Community Services, Mental Health and Social Services?

An example of this could be: a new housing development in an area would affect demand for primary care and local authority facilities and services in that location and surrounding areas. If the housing development does not factor in consideration of availability of green space and safety within the public realm, further down the line there could be an increased demand upon health and social care services as a result of the lack of opportunities for physical recreation, and reluctance of some groupings to venture outside if they do not perceive it to be safe.

***For further advice: please contact  
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