# Health Promotion and Sustainability Through Environmental Design: A Guide for Planning

A qualitative review of Applications and Future Possibilities December 2010





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Grateful thanks to the key informants who talked about their use of the planning guide, Health Promotion and Sustainability Through Environmental Design (HPSTED), and shared their ideas for both the development of the guide and its future application to their work.

#### **Glossary of Terms**

**CCC** 

Christchurch City Council

**CDHB** 

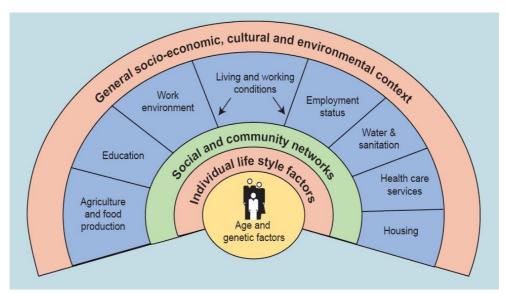
Canterbury District Health Board

#### C&PH

Community and Public Health, the Public Health Unit of the Canterbury District Health Board

#### Determinants of Health

Also called 'social determinants of health', determinants of health are those factors that influence our health. These factors are broad and include our own genetic makeup, how we live our lives, the type of community we live in, the quality of the air we breathe and our ability to access services. The work of a wide range of sectors and organisations can therefore be considered as influencing the health outcomes of a population. Dahlgren and Whitehead's representation (below) of the different influences on health and wellbeing shows that the further the influences are from an individual, the less control the individual has.



Ref: Dahlgren and Whitehead, 1991

#### Health Impact Assessment (HIA)

HIA is a combination of procedures, methods and tools by which a policy, programme or project may be judged as to its potential effects on the health of a population, and the distribution of those effects within the population.

#### Health in all Policies (HiAP)

Health in All Policies aims to address complex health challenges through an integrated policy response across portfolio boundaries. By incorporating a concern with health impacts into the policy development process of all sectors and agencies, it allows government to address the key determinants of health in a systematic manner. It also takes into account the benefit of improved population health for the goals of other sectors. Health in all Policies is committed to the achievement of sustainability and the health and wellbeing of both present and future generations.

#### **HPSTED**

Health Promotion and Sustainability Through Environmental Design, (HPSTED) is a Canterbury District Health Board (CDHB) and Christchurch City Council (CCC) good practice planning guide.

#### Local Government Act 2002

This Act charges local government with the responsibility of promoting the environmental, social, economic and cultural wellbeing of communities. These are commonly referred to as the four well-beings. There is a strong relationship between these and the broad social determinant view of health.

## Contents

Glossar	ry of Terms	3	
Executi	ive Summary	6	
1 Ba	ackground	7	
2 M	ethodology	7	
3 Us	se of HPSTED	8	
3.1	Literature review - embedding evidence on public health into transport planning	8	
3.2	A submission from CDHB to the City Council on a plan change application	9	
3.3	Literature review – potential health and social effects of intensified urban development	10	
3.4	Assessment of the draft objectives of the Christchurch Transport Plan (CTP)	10	
3.5	An urban design assessment of a private plan change application	11	
3.6	A framework to peer review the City Council's draft Strategic Outcomes	12	
3.7	Surface Water Strategy (SWS) Options analysis	12	
3.8	Social Impact Assessment (SIA) for the Christchurch South West Area Plan (SWAP)	13	
3.9	Integrated Recovery Planning Guide, October 2010.	13	
3.10	HPSTED Training Workshop for CCC staff (2007)	13	
3.11	HPSTED Workshop for C&PH, CDHB staff (2010)	14	
4 RI	ECOMMENDATIONS AND ACTIONS	15	
Referen	References		
Append	Appendix 1 Schedule of Questions		
Append	dix 2 HPSTED Checklist	20	

### **Executive Summary**

Health Promotion and Sustainability Through Environmental Design, (HPSTED) is a Canterbury District Health Board (CDHB) and Christchurch City Council (CCC) good practice planning guide. HPSTED identifies fourteen themes, each with a dedicated section, that contribute to community wellbeing. HPSTED was prepared to provide a framework for CCC policy planners to assess sustainability and health impacts of developments on the Christchurch community.

This report provides information about ways in which HPSTED has been used by CDHB and CCC personnel. The information was gained through in depth interviews conducted by the Canterbury Health Impact Assessment Project Officer. Feedback consistently described HPSTED as providing a comprehensive framework but that it was lacking guidance regarding how it could be used.

The recommendations below reflect the feedback provided through the interview process. It is hoped that their implementation might enhance the usability of HPSTED allowing the consideration of health, wellbeing and sustainability to become integral in determining strategies, policies and plans; and also prove influential in planning proposals, ultimately maximising health benefits for all Cantabrians.

- That HPSTED is further developed so that it is more user friendly and includes "how to" guides for different tasks and sectors.
- That the use of HPSTED by personnel, at both Christchurch City Council and Community and Public Health, Canterbury District Health Board, is supported.
- 3 That ways of working are developed that are both cross-sector and cross disciplinary. Personnel from local and regional government and CDHB are supported to work together to use HPSTED early in the life of a project.

#### 1 Background

The purpose of this paper is to record ways in which the Canterbury District Health Board (CDHB) and Christchurch City Council (CCC) planning guide entitled *Health Promotion and Sustainability Through Environmental Design* (HPSTED) has been used, and make recommendations to improve HPSTED.

Health Promotion and Sustainability Through Environmental Design (HPSTED) is a CDHB and CCC good practice planning guide and resource. It recognises that the design of urban environments can influence, directly and indirectly, health and wellbeing of individuals and communities. HPSTED is divided into fourteen themes or dimensions that identify the links between environmental design and community health and wellbeing. Each of the fourteen themes has a dedicated section which covers key points to be considered in the planning process. HPSTED is broad in scope and aims to integrate thinking across multiple perspectives and a range of disciplines.

HPSTED is built on the understanding that good health is a basic human right for all people. Health is defined by the World Health Organisation as a "state of complete physical, social and mental well-being, and not merely the absence of disease or infirmity" (Wilkinson and Marmot 2003). The design of urban environments can affect human health. Contemporary planning theories suggest good urban and environmental design can promote healthy behaviours and an active lifestyle, leading to improved health outcomes for the population. In New Zealand, an estimated 20% of all government public spending is on health, and a disproportionate amount of this money is spent on treating people for conditions relating to obesity, physical inactivity and mental health issues associated with modern living.

Sometimes the links between planning and/or policies and health can be immediately apparent; for instance, by providing resources and facilities that enable people to access health and social services. Other links are not as clear for example the nature of the transport system and low levels of physical activity and these require more investigation. HPSTED provides key points to stimulate awareness and consideration of the links between planning and health.

HPSTED was prepared to provide a framework for CCC policy planners to assess sustainability and health impacts of developments on the Christchurch community. The intention is to ensure that consideration of health, wellbeing and sustainability is integral in determining strategies, policies and plans; and to influence planning proposals to maximize health benefits for all Cantabrians.

### 2 Methodology

Information was gained through in-depth interviews, with seven key informants, conducted by the Canterbury Health Impact Assessment Project Officer during November 2010. Additional applications of HPSTED have also been presented in this review, including an adaption of the guide following the September, 2010 earthquake in Canterbury.

Interviews<sup>1</sup> at C&PH were conducted with a public health analyst, a public health registrar and a health protection officer. At CCC a team leader, an urban designer, a policy analyst and a transport planner were interviewed. Interview responses were recorded as handwritten notes, which were typed up in full following the interviews and subsequently approved as an accurate summary by the key informants.

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<sup>&</sup>lt;sup>1</sup> See Appendix 1 for the Schedule of Questions

Commentary provided by each interviewee has been incorporated into the relevant section within this report. This has enabled the interviewee's personal voice to be heard and clearly noted in the different sections. The interviews were held late in 2010, whilst the training opportunities were held earlier in 2010 and in 2007. This report therefore provides a snapshot of experience and opinion at that point in time.

Information was provided by CDHB and CCC personnel concerning eleven ways in which HPSTED had been used, in both project work and in training sessions. Suggestions for improving HPSTED were collated for each example. These were used to develop the recommendations and proposed actions suggested in Section 4.

#### 3 Use of HPSTED

#### 3.1 Literature review - embedding evidence on public health into transport planning

HPSTED was used by a CDHB public health analyst as a framework to guide a literature review. This review presented supporting evidence on the health impact of transport decisions for the Canterbury Regional Land Transport Strategy (CRLTS) and Christchurch Transport Plan (CTP). The public health physician who works at both CCC and C&PH requested that the 14 aspects of the wider physical and social environment in HPSTED be used as the framework for the literature review. Briefing papers were written on the impact of transport on each of the 14 aspects. It was very demanding to work across the different fields and required access to search tools beyond those normally used.

HPSTED was useful as it is so broad and covers all relevant aspects of health. There is, however, a lot of overlap between these aspects, so repetition is likely. During the literature review peer review process, experts commented on the sections relating to their particular area of expertise. However, due to the overlap between sections, suggestions and feedback on one area were frequently found also in other sections. HPSTED could be used as an interim step, but then the findings need to be combined together in the final document.

HPSTED provided a really good robust and comprehensive framework for the literature review. It was reassuring that the peer reviewers didn't identify any major areas that had not been addressed (they did identify gaps in literature and data, which was useful). The review in turn, enabled a lot of information about health impacts of transport planning to be available for the subsequent steps of the HIA. It informed subsequent planning, simulation modelling, and wider community consultation activities. Local and regional councils gained new insights into the wider determinants of health.

Use of HPSTED will take people out of their particular fields of expertise to consider wider issues. In practice this is not so hard for people to understand, so it is a good document for learning and education purposes.

Suggestions for improving HPSTED:

- A user's guide would be good. It needs to be compact and usable. A lot of content is usable but disappears in the pictures etc. Becomes too 'feel good'.
- Need to have commitment from across the organisation to its use so that the process of pulling in people with the relevant expertise works as easily as possible.
- It can be difficult and time consuming to find where information is. It would be useful for HPSTED to provide a "where to go" to access information and data. These could be website links, what

information regional, local councils and other organisations hold, how it can be accessed etc. It could be as an appendix or in each actual section.

- Would a version of HPSTED just for the use in HIA work be useful? HPSTED for HIA could be a significantly different document in emphasis and become a "how to" without losing the core content that is in HPSTED now. It might give guidelines for the following areas:
  - O When to use HPSTED for an HIA (and when not)
  - Who should buy in to using HPSTED before the process begins
  - The scope of the HIA and whether to produce multiple literature review documents for each theme area or one overall document
  - o Adjusting the scale of the HIA work to the time and resources realistically available.
  - O A suggested framework for writing about each determinant e.g., for access: the importance of access to services for health; the evidence about existing inequalities in access; the evidence of the negative/positive consequences of not considering/considering access to services for various population groups in regard to whatever the particular intervention/planning is
  - Where to find the information suggested sources including New Zealand data and available research
  - o How to undertake a peer review process

#### 3.2 A submission from CDHB to the City Council on a plan change application

HPSTED was used by a CDHB health protection officer to guide a CDHB submission to the CCC about a plan change application. HPSTED is also referred to in other submissions to encourage the CCC to use it.

The public health physician encouraged and supported the use of HPSTED. It was used by making a checklist/table condensing the 14 theme areas in HPSTED and some of its key questions into one page. Developing the table was helpful as it enabled a thorough checklist type process<sup>2</sup>. The plan change application was then assessed against each of these areas. This necessitated input from others in the organisation due to the broad nature of HPSTED. There was only one month between notification and submission completion.

HPSTED makes for broad thinking ensuring a thorough job is done, and requires time and detail. Other teams within the organisation do not necessarily have the time or commitment to support a HPSTED approach to submission work. However, to cover all areas well then other expertise is essential.

HPSTED is a wordy document, the pictures etc seem to make it user unfriendly. It looks like nice ideas rather than usable.

#### Suggestions for improving HPSTED:

A user's guide would be good. It needs to be compact and usable. A lot of content is usable but disappears in the pictures etc.

If it is intended for developers/consultants as well, then how does this get out to them? It needs to be made easy and relevant for them.

Need to have commitment from across the organisation to its use so that the process of pulling in people with the relevant expertise works as easily as possible.

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<sup>&</sup>lt;sup>2</sup> See Appendix 2 for the HPSTED Checklist

A better place to use it would be when plans, policies etc are being developed rather than at a review stage. It is good for assessing the potential impact of a draft policy etc. It is not really a tool once the policy is in place.

# 3.3 Literature review – potential health and social effects of intensified urban development

HPSTED was used by a CDHB public health registrar to frame the recommendations for the literature review undertaken by CDHB for the CCC. It provided a good framework and included some of the questions that the CCC wanted answered in the review. Initially the literature review used the headings of HPSTED but there was not an easy alignment between the literature and these headings. Some areas of interest for this literature review did not fit under HPSTED headings. There are overlaps between the sections of HPSTED and they also operate at different levels.

HPSTED assists the work to be relatively comprehensive and consider most relevant aspects of health. HPSTED operates in a linear way but in fact there is a web of interrelated systems interplaying. It needs to be linear to use it as less usable as a web or a complicated process diagram. It is challenging in a good way as it invites good thinking processes about a range of topics.

#### Suggestions for improving HPSTED:

The usefulness of HPSTED needs to be promoted. Maybe relate its theme areas to the Dahlgren and Whitehead rainbow diagram (refer to Glossary). Rename HPSTED – maybe include "wellbeing" in the name. Develop the use of HPSTED as the interaction/way of working between CCC and CDHB, unless there is good reason not to.

#### 3.4 Assessment of the draft objectives of the Christchurch Transport Plan (CTP)

HPSTED was used by the CCC to help assess the Christchurch Transport Plan draft objectives. This was part of the work of the transport planning Health Impact Assessment. The literature review undertaken as part of the HIA used HPSTED as a framework for the review. The findings of this review were used to support the workshops at which the draft objectives were assessed.

HPSTED was used because it is a CCC good practice document on how to incorporate sustainability and health principles into planning.

This assessment was useful at the start of the process of writing the CTP as a prompt for all the broad topics we needed to think about under sustainability. It widened the thinking process broader than just health or sustainability/environment. HPSTED and the literature review helped provide evidence for the direction of the CTP. This was supported by the whole HIA process. The assessment workshops helped direct and focus the Christchurch Transport Plan. The assessment workshops were the first critical look at the CTP objectives, it was good to take the time and do this.

HPSTED doesn't give information on how to use it. It is like a document of guidance but not application. It gives confidence that you have thought about everything. It helps good planning, provides evidence to support health and sustainability in planning. It takes time and resources to use. There is a lot of content in HPSTED, so need to filter to most relevant areas. It is not a tool at the moment. It is an information document.

Suggestions for improving HPSTED:

The information is great but it needs to be developed further into a "how to use HPSTED" to make it useful. A section on the different ways/how it can be used would be useful. (e.g. to guide a literature review, to assess objectives, to guide a workshop, for active scenarios such as out on the street doing assessment activities etc.)

#### 3.5 An urban design assessment of a private plan change application

HPSTED was used by an urban designer to make an urban design assessment of a private plan change application. This urban design assessment was requested by the planner who was responsible for the overall assessment of the application. The planner was required to undertake a Section 42a report, which is written when assessing a plan change application.

HPSTED is a good way to make sure that a wide range of aspects are considered, it ensures we think widely. It is a good CCC resource and should be used. The role of urban designers is about the big picture and positive and negative use of space. HPSTED supports this approach.

Working first with the overview document a list of the 14 theme areas in HPSTED was made. The main book was used to add to/refine knowledge. The plan change was assessed against each of these 14 areas, comments were made on the checklist. This was an overview assessment rather than an in depth one.

HPSTED encourages thinking about the range of themes. The key questions in the main book are very useful. HPSTED gives good direction and understanding. Some themes were not as relevant as others to this private plan change.

For s42a reports or evidence, it could be used and be informative, but to give it teeth it would need to be aligned with relevant City Plan objectives and policies. So, in this case, the HPSTED sustainability theme could be seen to align with city plan objectives at vol 2, sec 3 (energy) and some at sec 7 (transport) and then use HPSTED to assess whether the plan change meets the objectives and policies. This broad sustainability and wellbeing approach is not part of the District Plan sits outside the City Plan, there is a risk it can be rejected by the applicant and staff. If the principles underpinning HPSTED were in the City Plan and HPSTED was referred to in the City Plan then it could be used more widely.

HPSTED was a lovely document to use, a good tool; it is explicit and really useful. It is well laid out, colourful, easy to find way around, attractive, quality information and clear; simple enough to make easy to use, pictures are good. Currently it is good for higher level policy making and planning, but sits outside day to day consenting work.

Suggestions for improving HPSTED:

- Re title it "Better Spaces and Places" could be a good title.
- The matrix is too long and complex would take weeks to complete. Perhaps could use on a very long term project.
- Change the language referring to community outcomes.
- Make it useful to staff on the ground.
- Align it with the District Plan.
- Tailor so that all parts of CCC can use it e.g. library design, capital programmes (some are already using the ideas that are in HPSTED)

#### 3.6 A framework to peer review the City Council's draft Strategic Outcomes

HPSTED was used by a team leader to peer review the CCC's draft eight strategic outcomes with four layers underneath each outcome. These strategic outcomes are what will replace the current community outcomes subject to imminent changes with the Local Government Act (LGA).

There was limited time to undertake the peer review before the document went to managers for consideration. A framework was needed and HPSTED is a relevant CCC document to provide this framework. It is a dynamic document with good information. HPSTED was used as the second step in a three step process.

- 1. The first step considered the overall sense and logic of the document
- 2. The second step considered whether all the fourteen theme areas of HPSTED were addressed
- 3. The final step looked at relative emphasis of the outcomes and groupings of issues

The fourteen sections of HPSTED cover the four well-beings as required by the Local Government Act. HPSTED provides a good expression of what is meant by the well-beings in the Local Government Act. It was used to ensure a health perspective was included in the development of the council's strategic outcomes.

The use of HPSTED stimulated thinking and was good as time was limited. It was useful in highlighting gaps in the draft document and affirming what had been covered well. It provided a framework which is different to that used for the project itself. This enhances the robustness of the work and reduces the risk of something falling though the gaps. Some sections have defining statements e.g. the equity section. These are more useful than the quotes that appear in other sections. Some of the questions were not helpful for this project; they would be OK for a different piece of work.

When thinking of the LGA and its four well-beings, there is no direct relationship with the sections of HPSTED. There is overlap within the themes, making for duplication in the assessment. The environment section is not broken down sufficiently into the different environment resources. Ideally the use of HPSTED should be integrated into the framework at the beginning of the project, not at the end. The sooner it is integrated the more effective it potentially can be.

Suggestions for improving HPSTED:

- Have defining statements for every section, as with the equity section
- Make deliberate the connections with the LGA. Explain how the 14 theme areas hang together. Locate these under tabs for the four well-beings of the LGA. A 'how to' for the Act.
- Develop the environment section.
- Use HPSTED to inform and be included in the District Plan review.

#### 3.7 Surface Water Strategy (SWS) Options analysis

The Surface Water Strategy (SWS) project initially investigated using the HPSTED criteria to assess surface water management options during the preparation of the SWS. However, the Council's Natural Asset Management Strategy (1999) and Waterways, Wetlands and Drainage Guide (2003) advocates a multi-value approach (similar to HPSTED criteria, but specific to surface water concerns) to surface water management. The values identified as important to surface water management were Ecology, Landscape, Recreation, Heritage, Culture and Drainage. The values were reassessed during preparation of the Surface Water Strategy and an additional value (Tangata Whenua) was identified. The drainage value was also revised to take into consideration greater understanding of values waterways have, with regards to managing water quantity and the importance of water quality.

The Surface Water Strategy was adopted in 2009 and identifies seven values the community places on Christchurch's surface water. These are Tangata Whenua, Water Quantity and Quality, Ecology, Recreation, Community involvement, Heritage and Landscape. The Strategy assessed and prioritised surface water management options against these values.

Although HPSTED was not used to assess options, similarities between the HPSTED criteria and SWS values highlight that the Council's ability and willingness to think holistically is not a new concept. HPSTED is a good tool, however, in order to encourage Council staff to use HPSTED, it needs to be become part of the expected method used to assess strategies, plans and projects.

#### Suggestions for improving HPSTED:

Communication about HPSTED and how it can be used needs to be ongoing and consistent. There should also be regular reviews of HPSTED to ensure it is updated and revised in line with new information.

# 3.8 Social Impact Assessment (SIA) for the Christchurch South West Area Plan (SWAP)

HPSTED was one of the Council documents analysed as part of the Social and Health Impact Assessment for the Christchurch South West Area Plan. It was one of fourteen 'policy' documents assessed as to the extent to which they addressed the nine Long Term Community Council Plan (LTCCP) outcomes. HPSTED was assessed as successfully addressing all nine of the LTCCP outcomes.

#### 3.9 Integrated Recovery Planning Guide, October 2010.

In response to the 7.1 magnitude earthquake on September 4, 2010 in Canterbury, a revised edition of HPSTED was produced. The Integrated Recovery Planning Guide is intended to assist with recovery action planning and setting priorities in the medium and long term phases of earthquake recovery. The guide is broad in scope and aims to integrate thinking across multiple perspectives and a range of disciplines. The earthquake recovery process, although complex, presents a unique opportunity to work towards improving the health and wellbeing of the community.

#### 3.10 HPSTED Training Workshop for CCC staff (2007)

Several CCC staff from a number of departments took part in training shortly after HPSTED was released. Participants were provided with an introduction to HPSTED and given a case study to assess HPSTED against. The feedback from the training is summarised in this section. The full report is available as a companion document.

Participants agreed that HPSTED was a useful document however, responses tended to be divided into two camps; those who saw HPSTED exclusively as a Strategy and Planning Group (SPG) document, and those who could envisage its wider application throughout the CCC.

SPG participants indicated specific projects for HPSTED use including: being trialled in the Surface Water Strategy Options analysis; useful in assisting in setting up the Housing Strategy; used in the Social Impact Assessment (SIA) for the South West Area Plan (SWAP); could provide prompts to consider various issues when reviewing aspects of the City Plan. Staff outside SPG identified barriers such as the lack of statutory weight behind HPSTED to implementing it within their processes.

In addition it was identified that it would be useful in a visionary sense, and could be used in a number of ways (e.g. a checklist for what needs to be considered, a framework for identifying impacts on health/sustainability and a tool to prompt discussion on health and sustainability). Staff also highlighted the need for organisational buy-in/recognition to ensure other groups within CCC made use of HPSTED and that HPSTED could also be useful in discussion with Councillors and external organisations (such as developers).

#### Suggestions for improving HPSTED:

- Give HPSTED some sort of statutory weight so it could be easily put into a "rules-based" framework that people within Capital Programme and Environmental Policy and Approvals could use
- Make the document more process orientated and provide better context/linkage to other units.
- Include Banks Peninsula. When HPSTED was developed, the definition of Christchurch did not include the wider Banks Peninsula area (i.e. it was based on the Urban Development Strategy (UDS) pre-amalgamation areas). Akaroa and the wider Banks Peninsula area should be included in the next edition.

#### 3.11 HPSTED Workshop for C&PH, CDHB staff (2010)

Seventeen C&PH staff attended a workshop about HPSTED in June 2010. The workshop included a document overview, verbal accounts from five people who had used HPSTED and an exercise that gave participants the opportunity to practice using it. The feedback from the workshop is summarised in this section. The full report is available as a companion document.

- **3.11.1** The session provided me with new information and understandings. I would briefly describe this/these as .........
  - Better understanding of the ways to use HPSTED. Useful to hear from users of HPSTED about its relevance and applicability. Noted its value as an assessment tool or question checklist. A systematic approach to viewing planning. Ways of integrating the approach in my day to day work. How to use this document
  - Widened perspective on health issues. A useful breakdown of concepts when considering the determinants of health
  - I have been using HPSTED already. Value in promoting its use elsewhere/more widely (as have for past 2 years)
  - The whole session was new information to me. Not used this tool before. Previously not aware of document and potential use. Actually looking at the document.
  - I didn't realise the City Plan references were in the document.

#### **3.11.2** I could apply, or pass on, this new information in the following way(s)

- Will distribute through networks. Encourage colleagues/other sectors/other districts. Pass on to district planners. Will share the doc with other colleagues in other sectors. Making other agencies aware of such an approach during consultation processes
- Assessing consents applications, council plans etc for the C&PH risk assessment/resource management processes. In screening of planning documents
- Through formal submissions and dialogue with general public. Submissions on council issues
- Not sure yet
- Discuss learning's with colleagues. Mainly through my future work
- Perhaps we could extend to other councils as we cover 5-6 councils it would impact more on workload. But, just using the questions was good.

#### **3.11.3** Something I will do differently as a result of attending today's session is

- Read this document. Take a look at this again.
- Implement/use the HPSTED framework more frequently (esp. RMA applications). Will continue to use this. Try to look at the broader picture. New perspective on future work. Refer to HPSTED more frequently. More systematic assessments. Use HPSTED process to assess impacts of plans and policies on public health. Including some of the broader aspects such as equity, social capital etc. Try to apply principles to planning work. Wide consideration of issues in submissions

#### **3.11.4** Other Comments

• It would have been great to hear more from Council about their sustainability approach and opportunities for: up skilling our health work force on understandings on how we can contribute to sustainability; collaboration at both strategic and operational levels; current Council planning strategic priorities compared with health priorities and where they overlap; what Council want from us.

#### **3.11.5** Recommendations

- Document the case studies of how HPSTED has been used for future training purposes and possible (yet to be identified) conference and/or publication purposes
- An interview with those who have used HPSTED but whose work was not profiled at the workshop is recommended. This will build the case study base.
- To report back to participants on their feedback of the training, their ongoing use of HPSTED and suggestions to improve the document.
- To consider the usefulness of HPSTED as a way of working at C&PH. The thinking being that, if what it brings as a tool is useful, then should its use should be mandated by the organisation rather than left to the individual.

#### 4 RECOMMENDATIONS AND ACTIONS

Personnel who have used HPSTED consistently provided positive feedback. These quotes are from the interviewees.

"I felt confident that I had done a good job as HPSTED ensures broad thinking". Health Protection Officer

"HPSTED provided a really good robust and comprehensive framework for the literature review. It was reassuring that the peer reviewers didn't identify any major areas that had not been addressed". Public Health Analyst.

"Yes, it is challenging in a good way as it invites good thinking processes about a range of topics". Public Health Registrar.

"It was useful at the start of the process of writing the CTP as a prompt for all the broad topics we needed to think about under sustainability. It widened the thinking process broader than just health or sustainability/environment". Transport Planner

"HPSTED provides a good expression of what is meant by the four well-being's in the Local Government Act". Team leader

"It provided a framework which is different to that used for the project itself. This enhances the robustness of the work and reduces the risk of something falling though the gaps". CCC team leader

The following three recommendations with specific actions are proposed as ways of enhancing the use and application of the planning guide HPSTED.

1. HPSTED is further developed so that it is more user friendly and includes "how to" guides for different tasks and sectors.

To support personnel to embed a health and sustainability approach in their work, it is recommended that HPSTED is revised. Revisions need to address its applicability to a range of different contexts, personnel and projects.

#### **Actions**

- To include a user's guide or 'how to use' section embracing the different ways it can be used. It needs to be compact, easy to use, contain tables and checklists to guide its use.
- Create a new title/name health is generally understood as meaning heath services rather than the wider influences on our health
- Provide a "where to go" to access information and data. These could be website links, what information regional, local councils and other organisations hold, how it can be accessed etc. It could be as an appendix or provided in each section
- Ensure it is up to date with legislative changes e.g. Local Government Act and latest census data.
- Make it easily cross referenced with and integral to the CCC's District/City Plan
- Explain the inter-relationship of the different themes and consider reducing the overlaps between the themes
- Have defining statements for every section ( such as currently in the equity section)
- Develop the environment section
- Include all of Banks Peninsula
- Provide a 'how to' for the Local Government Act; make deliberate the connections with the Act
- Develop a health sector focused approach. Identify the relevant MOH or CDHB objectives in each theme to sit alongside the CCC Strategic Objectives
- Make it relevant for developers/consultants and find ways to train them in its use
- Consider a version just for the use in HIA; literature review work be useful

## 2. That the use of HPSTED by personnel, at both Christchurch City Council and Community and Public Health/Canterbury District Health Board is supported.

#### **Actions:**

- Encourage the use of HPSTED as a common tool to enhance interaction/ and joint work opportunities between CCC and CDHB.
- Ensure decision makers and personnel in both organisations are aware of its relevancy to their work; its purpose and principles.

- Develop linkages between specific roles and the Local Government Act. A common barrier stated was the dominance of Resource Management Act (RMA) at the implementation or resource consents levels
- Promote as a "cross-organisational" document. Tailor so that all parts of CCC can use it e.g. library design, capital programmes.
- Use HPSTED to inform and be included in the District Plan review.
- Find a context in CCC base documents HPSTED is in line with Strategic Directions. Needs to be referenced in same way in order to get recognition as core thinking. Could have a council policy statement based on it e.g. 'These are the priorities for council planning'
- Reach developers/landowners early on in their planning processes
- Establish a working team that includes City Plan and Resource Consents to adapt HPSTED to become more process-oriented
- Incorporate HPSTED within the Strategy Monitoring and Evaluation Framework. The HPSTED principles could be applied at the earliest stage of developing the briefs. An assessment using the HPSTED matrix, or an amalgamation of the HPSTED matrix and the Strategic Impact Assessment, could be the process in the Options Analysis stage to the process.
- Undertake training workshops to assist understanding of HPSTED and how to use it. Demonstrate to people that it is a useful and practical tool
- Gain commitment from across C&PH so that when using HPSTED, resources and people with the relevant expertise can be mobilised easily.
- 3. Ways of working that are developed that are both cross-sectorial and cross disciplinary. Personnel from local and regional government and CDHB are supported to work together to use HPSTED early in the life of a project.
- Personnel from local and regional government and CDHB are supported to work together to undertake both health impact assessment and the use of HPSTED early in the life of a project.

#### References

HPSTED is available at <a href="http://resources.ccc.govt.nz/files/HPSTED.pdf">http://resources.ccc.govt.nz/files/HPSTED.pdf</a>

The transport planning literature review is at <a href="http://ecan.govt.nz/our-responsibilities/Regional-Land-Transport/Pages/hia.aspx">http://ecan.govt.nz/our-responsibilities/Regional-Land-Transport/Pages/hia.aspx</a>

Wilkinson, R. and Marmot, M. (2003) *Social Determinants of Health: The Solid Facts* (2<sup>nd</sup> Edition). Copenhagen: World Health Organisation.

The Integrated Recovery Planning Guide, a revised HPSTED in response to the Canterbury Earthquake is at <a href="http://www.cph.co.nz/About-Us/Health-in-all-Policies/Default.asp">http://www.cph.co.nz/About-Us/Health-in-all-Policies/Default.asp</a>

The report of the workshop that used HPSTED to assess the draft objectives of the Christchurch Transport Plan will be available at <a href="http://www.cph.co.nz/About-Us/Health-Impact-Assessment/">http://www.cph.co.nz/About-Us/Health-Impact-Assessment/</a>

South West Area Plan Social and Health Impact Assessment <a href="http://www.moh.govt.nz/moh.nsf/Files/hiareport/\$file/chch-southwest-area-plan-hia-2008-v2.pdf">http://www.moh.govt.nz/moh.nsf/Files/hiareport/\$file/chch-southwest-area-plan-hia-2008-v2.pdf</a>

## **Appendix 1** Schedule of Questions

1.	With what piece of work did you use HPSTED?
2.	Please outline the reasons why you decided to use HPSTED as part of this work.
3.	Please describe how HPSTED was used as part of this work.
4.	What were the most helpful and least helpful aspects for you/your project in the use of HPSTED?
5.	What contribution has this use of HPSTED made to the project?
6.	Please describe what you consider to be the advantages/benefits of using HPSTED.
	Please describe the challenges/constraints you faced in using HPSTED.
8.	Please share your thoughts on the suitability of HPSTED as a tool to assess the impact of planning policies and proposals on community wellbeing.
9.	What changes would you make to HPSTED to make it more useful to you in your job?

### Appendix 2 HPSTED Checklist

Several interviewees created a check list sheet of HPSTED. The checklist list was then used for the health assessment with the comments placed alongside each of the criteria. An example of such a check list is provided below.

HPSTED Check list			
Determinant of Health	Assessment comments		
Active lifestyles			
Healthy walking or cycling routes to facilities			
Opportunities for play and exercise			
Open Space			
Green space and parks for everyone			
Playing fields			
Transport Accessibility			
Access for people with disabilities, youth, low income, older young			
Transport network- cycle and pedestrian friendly			
Affordable public transport readily available			
Access to employment, shops, services			
Equity			
Potential opportunities for all members of the community to engage			
services			
Dev does not disadvantage any community group			
Any existing health inequalities addressed			
Social and Community			
Opportunities for social interaction, leisure activities and local			
empowerment			
Avoidance if community severance by major roads or commercial			
schemes			
Cultural Diversity			
Principle of Treaty observed			
Promotion of cross-cultural relations and cultural understanding			
Appropriate consultation			
Promote acceptance of cultural diversity			
Neighbourhood Amenity Promote an attractive environment			
Good urban design			
High quality public spaces			
Walking cycling and public transport			
Conserve existing quality townscape and heritage			
Public Services			
Access to			
Right type of services in right place			
Multi use of different public services			
Sustainable design of public building			
Co-siting with neighbourhood centres			
Community participation			
Housing Stock			
Good design			
Relationship to public spaces			
Economic Development			
Community Safety			
Injury prevention			

Road safety	
Crime reduction	
Effective security	
Good design for community safety	
Environment – Natural capital	
Promotion of air, water, and soil quality	
Min air water soil and noise pollution	
Water sensitive urban design	
Threats to water supply quality and quantity	
Resource Sustainability	
Min water and energy use	
Promote water sensitive urban design	
Min land contamination	
Env sustainable suppliers, products and services	
Community Resilience	
Adapting to a modifying climate	
Min production of greenhouse gases	
Reduce energy use	
Provision of shade	
Surface water management	
Food Security	
Protecting productive land from development	
Allowance city farms, allotments and community gardens	
Productive use of green spaces, parks and gardens	