

Appendix 2: Summary of Comments Received and Officer Response.

Aberdeen Planning Guidance (APG): Health Impact Assessment

Sentiment expressed	Representation received	Officer Response	Action as a result of Representation
Individual			
	Excellent idea. Could be a burden for Council staff to assess. Consideration needs to be given to fast food restaurants and location to schools, and developments that increase anti-social behaviour in residential areas.	Comment noted and welcomed. Policies within National Planning Framework 4 relating to cluster of certain uses will be used to assess applications. Although anti-social behaviour is not regulated by the planning system, developments will be designed with safety in mind. Any internal resourcing matters will be managed by the Development Management Manager.	No action required.
	A well thought out document.	Comment noted and welcomed.	No action required.
	Complex document. Has good ideas, doubt they will be executed.	Comment noted.	No action required.
Dissatisfied	Impingement on citizens freedoms. Co2 levels have been safe since before the ULEZ and Bus Gates.	The document provides guidance for completing health impact assessments for planning applications or documents. The low emission zone and bus gates are subject to separate processes.	No action required.

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Dissatisfied	Historical references to health inequalities should be added in. Baselines needs to be added to show historic planning / socio-economic land uses.	Community Profiling is noted under paragraphs 2.6.10 – 2.6.11. This will include demographic data, and the social, cultural and economic features of the local area. This is expected to be completed as part of a health impact assessment.	No action required.
Dissatisfied	Add summaries; too long.	Summary can be added to the end of the document.	Summary added.
Dissatisfied	City Centre residents are being overlooked. Reopen / open exercise facilities in the City Centre.	The document does not allocate facilities or services. The document provides guidance for completing health impact assessments for planning applications or documents.	No action required.
Dissatisfied	High level ambition. Consideration is needed on evolution of earlier approved planning applications; review of health outcomes in communities; unintended consequences. Have readily accessible summary and detailed breakdown of health by age and geography, and a template to examine what-if scenarios.	Planning applications are assessed on their own merit. Community Profiling is noted under paragraphs 2.6.10 – 2.6.11. Data on health, demographics and location can be found within the references supplied under appendix 5 of the document. This ranges from city wide data to intermediate zone data. This is expected to be completed as part of a health impact assessment.	No action required.
Dissatisfied	Greater emphasis is needed on green space. Impact assessment does not mention mitigation, is that excluded because it is ineffective e.g. biodiversity offsetting? Communities need to be involved beyond commenting, they should be involved in deciding	A health impact assessment is based on the determinants of health, which includes the physical environment and green space. Ranking one element above another would not be equitable.	No action required.

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	what the impacts are and in assessing scoping and HIA reports.	<p>The document provides guidance for completing health impact assessments for planning applications or documents. It is based upon guidance from the Scottish Health and Inequalities Impact Assessment Network. The recommendations section of a health impact assessment will provide mitigation.</p> <p>The community are expected to be part of the stakeholder workshop therefore will be involved in creating the Health Impact Assessment and contributing to the impacts. There is no requirement for the communities to assess reports as this will be completed as part of the planning assessment, as is the case with many other assessments.</p>	
Happy		Sentiment noted	No action required.
Happy	Happy – para 2.2.3 – is poverty not defined in financial terms? People have an income in the lower % bands of earnings. If the actual area is quite well off, people in the lower % bands will not be as poverty stricken as people in a poorer area. Hence why the other determinants of poverty do not reflect the financial one.	Poverty is defined in financial terms. Other indicators of poverty can relate to health, and the data can have a time lag. The Population Needs Assessment text has changed, therefore this paragraph will be modified in the Planning Guidance.	No action required.

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	<p>Roads improvements to increase walking and cycling should be assessed through a Health Impact Assessment.</p> <p>Map on page 28 – not sure why the area south of Ashgrove Road, between Westburn Drive and Berryden Road is defined as a priority area.</p>	<p>The Health Impact Assessment is for planning applications and planning documents, if a road improvement application requires consent, and the impact of these scheme is deemed to be significant then a HIA may be considered.</p> <p>The Priority Neighbourhoods in Aberdeen are identified by Community Planning Aberdeen. The areas mentioned are with the north locality area. Data on this can be found on the Community Planning Aberdeen webpage https://communityplanningaberdeen.org.uk/community-planning-structure/our-localities/priority-neighbourhood-partnership/</p>	
Happy	<p>Clear and strongly evidences the need for HIAs. When a HIA is not required, community engagement may be minimal.</p> <p>Engaging with hard to reach groups may prove difficult and not happen. In Appendix 3 add the requirement for report author having to demonstrate that they have made every effort to meaningfully</p>	<p>Comment noted.</p> <p>There is a statutory requirement to allow for comments on planning applications. This will not be removed with the requirement or otherwise for a Health Impact Assessment.</p> <p>Appendix 3 notes the relevant populations and stakeholders have been involved, and that stakeholders and communities affected have had the opportunity to comment on findings. There needs to be</p>	No action required.

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	engage and involve communities, including seldom heard groups	a proportionate approach based on the size and scale of the application.	
Happy	Very easy to follow. Ensures a holistic approach, with consideration of all factors.	Comment noted.	No action required.
Neutral		Sentiment noted.	No action required.
Neutral		Sentiment noted.	No action required.
Neutral	No further comments.	Comment noted.	No action required.
Neutral		Sentiment noted.	No action required.
Neutral	Para 2.1.4 – With regard to an ageing population, the young should be prioritised with an emphasis on looking to long term solutions. Individual concerns need to be taken account of and can be difficult to have conversations about.	It would not be appropriate for the assessment to prioritise different age groups. It is expected it will outline who is affected by the proposed development, with age being one of the criteria to be assessed. The Health Impact Assessment is not to be used to assess individuals. It make assessments based on groups, as is outlined in Appendix 1.	No action required.
Neutral		Sentiment noted.	No action required.

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Satisfied		Sentiment noted.	No action required.
Satisfied		Sentiment noted.	No action required.
Satisfied	Good to see consequences of new builds being looked at in terms of tenants requirements before things are built.	Comment noted.	No action required.
Satisfied	GP's need to spend more time during appointments listening to patients and their concerns.	The document does not have remit over the functioning of GP's. The document is to be used to consider the impact of development on groups of people.	No action required.
Satisfied	<p>2.2.4 – 50% of deaths in Aberdeen are as a result of health issues accelerated by poor infrastructure. This needs to be ACC's focus</p> <p>2.5.2 – Health needs to be the priority in all planning applications. There needs to be an assumption to turn negative health impacts into positive health impacts.</p> <p>Focus on health and wellbeing is positive. Needs to have teeth to work. Fast Food drive throughs have terrible consequences.</p>	<p>Health Impact Assessment will look to address a number of health related issues. The impact of active travel provision will be considered within a Health Impact Assessment, if the scale of the development requires active travel.</p> <p>Health and wellbeing has been identified as one of the priorities for planning. It will not be possible to always turn negative impacts into positive, the Health Impact Assessment will provide recommendations which can be incorporated into the design of a development, as is shown in para 2.6.19.</p>	No action required.

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		The Health Impact Assessment will work in conjunction with other local and national policies. A number of material considerations are assessed in the decision making process.	
Satisfied	Look good, but wait to see what happens	Comment noted.	No action required.
Satisfied		Sentiment noted.	No action required.
Satisfied	Detailed document. It will hopefully be beneficial.	Comment noted.	No action required.
Unhappy	Font needs to be modified, more spacing. Bigger graphics and more contracting colours.	The document, if adopted, will be published in line with accessibility standards and Aberdeen City Council's graphics guidance.	No action required.
Unhappy		Sentiment noted.	No action required.
Organisations			
	NHS/ ACC Seems clear. Example HIA could be added.	Comment noted. Example's of Health Impact Assessments can be found in the Scottish Health and Inequalities Impact Assessment Network website. The text will be updated to make this clearer.	Text added to para 2.3.6.

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Happy	SEPA Welcome the strong links being made between local environment, climate change and health.	Comment noted.	No action required.
Neutral		Comment noted.	No action required.
Satisfied	Historic Environment Scotland Welcome the recognition of the connection between built environment, local character and distinctiveness and health and wellbeing of communities. We support the inclusion of the consideration of these elements as part of the health assessment checklist process, as reflected in the civic, stewardship, spaces and resources topic.	Comment noted.	No action required.
Happy	Scottish Water We support the provision of clean water and sanitation, as per the United Nations Sustainable Development Goals. Support the expansion of Blue and Green Infrastructure which provides natural and sustainable management of surface water and creates sustainable, liveable places which encourages people to spend more time outdoors.	Comment noted. The comments relating to development within close proximity to wastewater treatments works are noted. Further assessments will be part of the planning application process, if they are deemed necessary. The Health Impact Assessment may recommend change to protect or improve health, and to prevent or reduce inequalities. The measures noted in the comments may already be or become part of a	No action required.

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	<p>Development Within Close Proximity to Wastewater Treatment Works</p> <p>Evaluating potential odour nuisances when planning new development near Waste Water Treatment Works (WWTW) needs to be considered. Applicants looking to develop near WWTW may be required to commission an Odour Impact Assessment. Mitigation may be required, this may impact on design and layout. Access is required to operational plants 24 / 7. Site design of new dwellings must consider the noise impact from this.</p> <p>Acknowledge WWTW may cause concern within communities. There are many measures available to minimise and manage odour, noise, pollution and other relevant hazards, some are lower carbon and nature based, offering amenity, biodiversity and placemaking benefits. WWTW provide a protection service to the community and wider environment.</p>	<p>planning application after the Health Impact Assessment, or other regulatory service input.</p>	
Neutral	<p>NatureScot</p> <p>Para 1.3 – Strongly support the relationship between climate change and health. It is also important to consider the relationship between health and biodiversity. Creating nature-rich places including blue and green spaces, will help to address climate</p>	<p>Comment on health and climate change is welcome. The relationship between health and biodiversity is noted – a health impact assessment looks at the determinants of health and wellbeing, which includes the social, economic, environmental and cultural</p>	<p>Para 1.3 – add text in about biodiversity.</p> <p>Section 2.5.3 modified to note HIA can be</p>

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	<p>change as well as support creating healthy, attractive places. Biodiversity or nature is a key thread throughout the document and is introduced in this section.</p> <p>Overview – What is a health impact assessment? (page 9) The consideration of positive and negative impacts, mitigation and enhancement measures is welcome.</p> <p>Development Planning and Development Management (p. 10) - It would be useful to understand how the EIA and HIA processes and outcomes will align.</p> <p>Assessment questions and significance (p. 14) - In line with environmental assessments, it could be useful to understand whether the health impacts are likely to be short, medium or long-term, and whether there are any cumulative/synergistic impacts.</p>	<p>factors that indirectly influence health and wellbeing, of which climate stability and biodiversity are the two global ecosystem considerations.</p> <p>Overview – comments are noted.</p> <p>Development Planning and Development Management – An EIA may contain an HIA. The scope of a HIA is wider than that of an EIA. An HIA considers the determinants of health, and impacts on different groups. An EIA focusses on understanding the likely environmental effects of a development prior to consent.</p> <p>Assessment questions and significance (p. 14) - Impacts may last for a short time or continue for a longer period. Some impacts may be negative in the short term but neutral or positive at a later point. Timescales should therefore be mentioned if they are relevant to the proposal or potential impacts.</p> <p>Legislation requires an environmental impact assessment (EIA) to be carried out for certain developments and stipulates the areas that must be</p>	<p>integrated into an environmental report.</p> <p>Text modified in Appendix 1 to take account of comment.</p> <p>Text modified in Appendix 3 to take account of comment.</p>

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		<p>covered in an EIA. EIAs focus largely on key physical environmental factors such as plants and wildlife, air quality, noise, hydrology and archaeology. In contrast, HIA is currently commissioned voluntarily; the methodology is not prescribed but is informed by best practice and the focus is determined by the nature of the policy or development which is being assessed. HIA is concerned with the distribution of effects within a population, as different groups are likely to be affected in different ways. It therefore looks at how health and other social inequalities might be improved or exacerbated by the proposed project, service, programme, policy or development.</p> <p>The Environmental Impact Assessment and Health Impact Assessment are two distinct processes. The Aberdeen Planning Guidance has used resource and been benchmarked to documents produced by Public Health Scotland's Health Impact Assessment Unit and the Scottish Health and Inequalities Impact Assessment Network. HIA have a different lens to EIA. HIA focus on maximising health benefits, focus on populations.</p> <p>Policies in any sector can affect people's health through changes in health determinants and may have disproportionate impacts on some population groups.</p>	

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	<p>Presentation of findings (p. 16) – table under 2.6.18 provides an example, however, the “ Health Impact” column does not provide much information or detail on the impacts. It could be beneficial to include a column for commentary to ensure applicants fully consider and explain the potential impacts and their significance. We also suggest using a column each for mitigation measures and enhancement measures which should directly inform the development design, as with environmental assessments.</p> <p>Contents of HIA report (p. 17) - As noted above, we recommend ensuring mitigation and enhancement</p>	<p>HIA offers a way of systematically considering these potential impacts on health and health inequalities to help identify ways to prevent or mitigate adverse health impacts, enhance positive ones, and realise co-benefits.</p> <p>Presentation of findings – The text within para 2.6.18 notes, “The report should include a narrative description of each impact that shows the evidence that underpins the conclusions made. It should also include a summary matrix like the one shown below.” The table is an example – the text within any Health Impact Assessment will provide further detail. The document and process has been benchmarked against the guidance produced by Public Health Scotland and Scottish Health and Inequalities Impact Assessment Network. A HIA is to include recommendations and/or suggestions to inform changes to protect or improve health and to prevent or reduce health inequalities. These are to mitigate adverse impacts. This could take the form of reworking of site layout etc, the recommendation can be taken account of in the planning application.</p> <p>Contents of HIA report – paragraph 2.6.20 notes that recommendations and / or suggestions are aimed to</p>	

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	<p>measures. Perhaps these could be referenced under “Recommendations “to provide clarity.</p> <p>Appendix 1 “Health Impact Checklist” (p. 19) - Under “Impacts”, it could be useful to ask “To what extent will the proposed development impact the following?” This could help those being asked the question to understand and explore the significance of the impacts identified, whether positive or negative, direct or indirect, would occur during construction of the proposed development and those that would occur once it was completed and operational.</p> <p>Appendix 3 “Criteria to assess screening, scoping and HIA report (p. 22-23) - it would be useful to state in the checklist that the recommendations are for mitigation and enhancement measures. It could also be beneficial to consider the cumulative/synergistic impacts.</p>	<p>mitigate any adverse impacts arising from the proposed development and enhance the benefits.</p> <p>Appendix 1 “Health Impact Checklist” (p. 19) - Agree to the text changes noted.</p> <p>Appendix 3 “Criteria to assess screening, scoping and HIA report (p. 22-23) -Agree to the text changes noted.</p>	
Unhappy	<p>Ashgrove & Stockethill Community Council</p> <p>Para 1.2.1 – No mention of food and nutrition and obesity. There are many thousands of individuals whose health is seriously impacted by poor nutrition</p>	<p>The social determinants of health are outlined in paragraph 2.1.5 and Figure 1 of the document. This outlines there are social, economic, environmental and cultural factors that indirectly influence health and</p>	<p>Update data relating to Aberdeen within the document and relevant</p>

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	<p data-bbox="315 344 1055 416">& high exposure to Ultra Processed Food and other addictive substances.</p> <p data-bbox="315 632 1055 903">There are several sections, Tables, Appendices that would benefit from comparison with other practices used elsewhere in the UK and learnings on improving HIA and tools used. A thorough review of best practices from other councils in the UK. Better tools to conduct different types of HIA for different facilities, services, locations, etc.</p> <p data-bbox="315 991 1055 1142">Full integration with Health Service, Communities and other Stakeholders to consider prevention rather than cure to address deteriorating health. A whole systems approach is required to tackle health.</p>	<p data-bbox="1081 344 1845 576">wellbeing. They include what we eat and drink; where we live and work; and the social relationships and connections we have with other people and organisations. The HIA needs to keep a holistic overview of factors that may impact on health, rather than narrowing into specifics.</p> <p data-bbox="1081 600 1845 831">Resources that have been co-created by Public Health Scotland's Health Impact Assessment Unit and the Scottish Health and Inequalities Impact Assessment Network have been used as the template to create the Aberdeen Planning Guidance. These are the most appropriate for guidance for an Aberdeen context.</p> <p data-bbox="1081 983 1845 1262">The health impact assessment is a tool available to the planning authority to help influence the health, wellbeing and inequality impact of planning developments or planning documents. Aberdeen City Council is looking at health at a wider scale and in partnership with other organisations through the Healthy Weight Aberdeen whole systems approach.</p>	<p data-bbox="1879 344 2121 416">references within the appendix.</p> <p data-bbox="1879 440 2121 751">Aberdeen Population Needs Assessment 2025 is forthcoming. Update references.</p> <p data-bbox="1879 775 2132 1254">Note the Public Health Scotland's Health Impact Assessment Unit and the Scottish Health and Inequalities Impact Assessment Network documents are the benchmarks.</p>

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	<p>Relationship between health and planning is not discussed until para 2.1.6, with the Aberdeen data not present until 2.2.4.</p> <p>2.3.6 notes HIA is common in UK but guidance in Appendix 4&5 is of narrow scope and high level. It would be useful to benchmark this HIA against other HIA.</p> <p>Unsure if the HIA would be applied to fast food restaurants. There is a relationship between fast food restaurants and school, and unhealthy eating.</p>	<p>All of section 2.1 relates to planning and health, and all of section 2.2 relates to Aberdeen data and statistics.</p> <p>This document has been benchmarked against resources co-created by Public Health Scotland's Health Impact Assessment Unit and the Scottish Health and Inequalities Impact Assessment Network.</p> <p>The planning system is limited to assessing applications on use (restaurant, café or hot food takeaway) it cannot assess applications on the type of food sold. National Planning Policy notes cluster of uses may have an impact on health and wellbeing. A Health Impact Assessment may be used if there is a significant impacts on health and wellbeing - development type and location context are paramount for considering if a Health Impact Assessment is required.</p>	
Unhappy	<p>Torry Community Council</p> <p>Known and recorded historical data and information on health and wellbeing of a community should be taken into account. Reference to similar communities in the world.</p>	<p>Community profiling is required, as is outlined in paragraph 2.6.10. This includes data on demographics, health, and the social, cultural and economic features of the local area. The health impact</p>	<p>The summary section will help to highlight this is part of the process.</p>

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	<p>Communities with known health and wellbeing inequalities need to be considered. Monitoring of development during it operation is required to understand its impact on a community.</p>	<p>assessment is locational based, therefore the specific context is vital for the assessment process. Monitoring is discussed under section 2.6.20 of the document, which relates to the planning application. Monitoring of a development during it operation, which may span many decades would be unreasonable in planning terms. The impact to the community are to be identified as part of the health impact assessment.</p>	
Dissatisfied	<p>Homes for Scotland</p> <p>The document is well intended, however the planning system is currently well equipped to improve public health through existing policies and assessment processes.</p> <p>HIA's are associated with commercial or industrial development that are capable of generating adverse environmental impacts. Residential development proposals seldom generate adverse environmental impacts that would cause negative impacts to human health. HIA's are negligible for residential development proposals.</p>	<p>National Planning Framework 4 has reinforced the relationship planning has with health. Page 19 of NPF4 notes the different ways planning and lifelong health and wellbeing interact. Policy 23 of NPF4 further outlines the requirement for health impact assessments.</p> <p>Para's 2.4.1 – 2.4.6 outline what a health impact assessment is and how it differs from other assessments. Health Impacts are associated with more than development's that are capable of generating adverse environmental impacts. Health impact assessments look the social determinants of health, and have a lens on impacts to population groups. Again linking back to NPF4's aim of reducing</p>	<p>Add text on proportionate nature of the HIA. – "HIA is a flexible approach that should be adapted to local need. Therefore, each HIA should be proportionate to the time and resources available, any compliance requirements and the scale, scope and importance to health of the</p>

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	<p>The screening process is onerous, costly and complex and will undoubtedly result in delays. Requiring GPs and other healthcare professionals to attend a workshop is not a good use of their time. It may add delay. Will they be paid to attend?</p> <p>It is not proportioned to require a HIA where health considerations have been assessed through allocations / supporting planning documents.</p> <p>Planning officer should be the ones to assess whether proposed developments have significant adverse impact upon public health at a population level. There must be a compelling justification to request a HIA from developers as part of the</p>	<p>health inequalities. Adverse environmental impacts are assessed by other measure such as environmental impact assessments for applications and strategic environmental impact assessments for plans, policies or strategies.</p> <p>The screening process is intended to be proportionate, and can be part of existing engagement processes as part of pre-application process. Agree that noting stakeholders is not in keeping with best practice outlined from Public Health Scotland and Scottish Health and Inequalities Impact Assessment Network.</p> <p>Health and wellbeing may be consider in other document, but these have a different, and depending on the nature of the assessment, a more regulatory approach than a Health Impact Assessment which looks to the determinant of health and impact on populations.</p> <p>Amendment to the Planning Act note the health effects for national and major development are to be considered. Planning officers can request screening to be completed as part of the pre-screening process.</p>	<p>policy being assessed.”</p> <p>Remove identified stakeholder and updated with text from Public Health Scotland and Scottish Health and Inequalities Impact Assessment Network document.</p> <p>Add in PHS and SHIAN checklist to Appendix 4.</p>

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	<p>planning application process. Such circumstances are already subject to scrutiny where site contamination is considered to be a potential issue of concern. There can be no justification for any duplication of impact analysis.</p> <p>The screening process must focus on health impacts and not the capacity of the healthcare facility.</p> <p>The concerns raised during the screening process - the potential impacts should be defined by appropriate professional analysis and reported to the Planning Authority. The Planning Authority should determine who should respond to the conclusions.</p> <p>Appendix 1 - We disagree with the principle of charging the development industry for the provision of healthcare facilities. The development industry is not responsible for making good any perceived shortfall in funding healthcare facilities. Developer Obligations should not be used to meet the cost of additional facilities. GP Surgeries are businesses.</p>	<p>Site contamination is subject to separate processes. A health impact assessment looks at the determinants of health, and the impact on populations of proposals.</p> <p>Capacity of healthcare facilities is subject to other processes.</p> <p>Stakeholder involvement allows gathering of qualitative insight into the different ways the proposal may impact on health based on the lived experience of those who participate, this will be support by the community profiling which is also part of the health impact assessment process. The Planning Guidance Document notes that at scoping stage, if this stage is required, that training or experience of HIA is recommended.</p> <p>Appendix 1 does not outline any principles in relation to developer obligations. This is assessed via a different planning mechanism. The Health Impact Assessment looks to consider the impact of a proposal on a number of differing local living elements. Appendix 1 provide prompts for this. The Public Health Scotland and Scottish Health and Inequalities</p>	

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	<p>The issues is a lack of practitioners. GP's may not understand the legal requirement of the planning system. The perceived correlation between new homebuilding and a need for increased capacity in existing GP surgeries simply does not exist to the extent necessary to justify developer obligations. There are sufficient GP practices within an urban area to meet need, especially as populations rise and fall.</p> <p>Stakeholder and community participation - There is sufficient data already available to NHS Scotland at ward level and to the local health and Social Care Partnerships. Further HIA undertaken by a developer will reveal no additional information of genuine benefit as a material consideration in the determination of a planning application. Seeking the views of those voices not likely to be heard otherwise is the responsibility of the NHS as the agency responsible for the delivery of healthcare. The pre-application public consultation provides sufficient opportunity to express any thoughts and concerns. It could be a requirement of the pre-application notice that the developer is to write to the local GP practices to make them aware of the consultation events.</p>	<p>Impact Assessment Network had produced a health impact checklist which provides further support.</p> <p>Stakeholder and community participation - There is quantitative data available on a number of webpage as it outlined within Appendix 5 of the draft document. Health Impact Assessments are a requirement under Policy 23 of National Planning Framework 4, and the Aberdeen Local Development Plan. Considering the experience and understanding the experience of people with protected characteristics and health determinants can ensure applications are complying with National Planning Framework 4 outcomes of improving the health and wellbeing of people living in Scotland, and improving equality and eliminating discrimination. Ensuring good health and wellbeing goes well beyond the provision of health care facilities, it involves considering the determinants of health.</p>	

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	<p>The provision of all tenure new homes has a positive impact on health and wellbeing.</p> <p>NPF4 has a clear public health focus as is outlined by a number of policies. Further to this the relationship between health and wellbeing, and climate change is also supported by a number of other policies in both NPF4 and the LDP.</p> <p>HIAs are valuable tools for promoting healthier living environments in certain specific circumstances. The guidance is ill thought and not relevant to the homebuilding sector where the impacts on health and well-being are accepted as being extremely positive in nature. In its current drafting it will only serve to add cost to and delay the delivery of much needed new homes to address the national and local housing emergency.</p>	<p>The provision of new homes can have a positive impact on health and wellbeing, but again the wider determinants of health need to be considered through applications.</p> <p>National Planning Framework 4 has realigned the relationship between planning and health and wellbeing, and also notes the requirement for health impacts assessments.</p> <p>The guidance is of relevance to the housebuilding sector, as the determinants of health are relevant to all aspects of life.</p>	
Dissatisfied	<p>Bancon</p> <p>The planning system is currently well equipped to improve public health through existing policies and assessment processes.</p>	<p>National Planning Framework 4 has reinforced the relationship planning has with health. Page 19 of NPF4 notes the different ways planning and lifelong health and wellbeing interact. Policy 23 of NPF4</p>	<p>Remove identified stakeholder and updated with text from Public</p>

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	<p>Major and national planning applications are unlikely to require HIA. The HIA process is onerous, costly, disproportionate and will cause delays. Planning officers should be responsible for screening proposals as they do for an EIA, and ask the following: Is the proposed development likely to have a significant adverse public health impacts at a population level? If no, then the process will end.</p> <p>NPF4 has a clear public health focus as is outlined by a number of policies. Further to this the relationship between health and wellbeing, and climate change is also supported by a number of other policies in both NPF4 and the LDP.</p> <p>A health impact assessment will in most cases duplicate existing material already submitted as part of a major application (design and access statement; transport statements/ assessments; planning statement; technical assessments;</p>	<p>further outlines the requirement for health impact assessments.</p> <p>Amendments to the Planning Act note the health effects for national and major development are to be considered. The HIA is intended to be proportionate. The document and process has been benchmarked against the guidance produced by Public Health Scotland and Scottish Health and Inequalities Impact Assessment Network. Screening requires stakeholder engagement, this can take place as part of the pre-application process to reduce time. The HAI process can be completed after the screening report has been submitted.</p> <p>NPF4 and the adopted Local Development Plan include policies which identify the need for HIA's alongside the other policies.</p> <p>Health impact assessments look the social determinants of health, and have a lens on impacts to population groups based on an understanding of lived experience. This is supported by community profiling. This is a separate and distinct process from the other material submitted as part of a planning application..</p>	<p>Health Scotland and Scottish Health and Inequalities Impact Assessment Network document.</p>

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	<p>environmental impact assessments). This provides no clear benefit.</p> <p>Other impact assessments only require detailed work if positively screened e.g. environmental impact assessment; appropriate assessment; strategic environmental assessment – as having a significant effect at population level. The HIA process would require all applications to go through an onerous screening process, which requires a stakeholder workshop. Planning officer should be the ones to assess whether proposed developments have significant adverse impact upon public health at a population level. There is no requirement to hold a workshop. Requiring GPs and other healthcare professionals to attend a workshop is not a good use of their time. It may add delay. Will they be paid to attend? It is unlikely private developers would carry enough sway to encourage NHS to attend. GP and teachers will be inundated with workshop requests – leading to delay.</p> <p>Proportionality in the planning system is being reviewed by Scotland's National Planning Improvement Champion. A recent Homes for Scotland report highlights the negative impact a lack of proportionality has on home building.</p>	<p>The document and process has been benchmarked against the guidance produced by Public Health Scotland and Scottish Health and Inequalities Impact Assessment Network. A full HIA may not be required should the scoping report be deemed to clearly show the health implications. The workshop can be tied to existing events, such as the pre-application consultation, to ensure efficiency. Planning officers can request screening to be completed as part of the pre-screening process. Stakeholders will give insight into different ways the proposal could affect health. Agree that noting stakeholders is not in keeping with best practice outlined from Public Health Scotland and Scottish Health and Inequalities Impact Assessment Network.</p> <p>The HIA is to be proportionate. A full HIA may not be required.</p>	

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	<p>External consultees should only be engaged when necessary. With a plan led system external consultees should inform the local development plan. It should only be necessary to bring external stakeholders into the HIA process where significant adverse effects on public health at a population level have been identified as likely.</p> <p>Modify the draft document as per the following diagram and update the text with any consequential changes.</p>	<p>The Local Development Plan 2023 was produced in conjunction with Aberdeen Health and Social Care Partnership and NHS Grampian. A health in all policies approach was taken and each policy within the Local Development Plan 2023 has been assessed against the 6 public health priorities for Scotland, see Table 1 within the Local Development Plan 2023. The Health Impact Assessment process has been bench marked against guidance produced by Public Health Scotland and Scottish Health and Inequalities Impact Assessment Network which outlines the importance of stakeholder engagement to the process. A Health Impact Assessment is only required when there is an impact on population health / public human health and reducing or preventing health inequalities. This is established at the pre-screening process, and no further action is required.</p> <p>Modifying the document as per the image would look to scope more applications into the screening process. Only developments that are deemed to have significant health impacts are asked to be screened though the guidance documents.</p>	

Sentiment expressed	Representation received	Officer Response	Action as a result of Representation
	<pre> graph TD A[Check requirements in APG] --> B[Screen proposed development with Development Management] B --> C{Significant adverse health impacts ARE likely at a population level – proceed with further assessment} B --> D{Significant adverse health impacts ARE NOT likely at a population level.} C --> E[Identify assessment questions and complete full Health Impact Assessment] E --> F[Submit HIA report with planning application] D --> G[Public health implications to be considered as part of the assessment against the Development Plan and referred to in supporting documents where relevant.] </pre>		
Unknown if an individual or organisation			
Neutral	<p>Para 2.5.2 - guidance needs to be more specific about which kinds of planning application for which specific uses would require a HIA where applications fall within the local category.</p>	<p>The locational context and development type will be assessed to determine if there is a requirement for a health impact assessment. As each location is distinct and unique, consideration of context is paramount. Local applications may have differing impacts depending on where they are located and the make-up of uses within the area to which they are to be located. The same application in differing parts of the city may have differing outcome depending on the community profile.</p>	<p>No action required.</p>

Sentiment expressed	Representation received	Officer Response	Action as a result of Representation
	<p>There is no reference made to food environments - (food deserts, density/clustering/proliferation of hot food takeaway and fast food outlets.</p> <p>Set out which kinds of local development planning application that would require screening/scoping for HIA - outwith national and major. Define exact uses as per the planning use class order - such as hot food takeaways/ pubs etc.</p> <p>Set out specific reference to food environment as this should be a priority area for Aberdeen - to increase the provision of outlets selling affordable healthy food such as supermarkets- and restricting the over-proliferation of further fast food outlets.</p> <p>Para 2.6.18 - The table of presentation of assessment findings does attempt to present information in a systematic way but the increments such as severity (minor, moderate and major) lack specific defining parameters and risk being up to the applicant to estimate - and likely underestimate.</p>	<p>Cluster of uses and healthy food environments are both outlined in policy within National Planning Framework 4. Both of these policies are important in considering locational context and development type.</p> <p>Para 2.6.18 – The text within para 2.6.18 notes, “The report should include a narrative description of each impact that shows the evidence that underpins the conclusions made. It should also include a summary matrix like the one shown below.” The table is an example – the text within any Health Impact Assessment will provide further detail. The document and process has been benchmarked against the guidance produced by Public Health Scotland and Scottish Health and Inequalities Impact Assessment Network.</p>	