

Report of HIA Development Site

NSW Department of Health Transport for Health NSW Policy Framework

Summary

The development site relating to the Transport for Health Policy Framework was an attempt to apply the HIA process to the development of a statewide policy initiative. The difficulties experienced by the site in achieving this objective and, ultimately, in adequately completing the tasks at hand illustrate some of the potential pitfalls that may arise in attempting to apply a HIA to the policy development process.

Factors that had a significant bearing on the HIA development site's capacity to complete a range of anticipated tasks relevant to the developmental HIA site project include:

- Conceptual factors relating to the extent to which an HIA could be accommodated within an existing policy development process
- Pre-emptive screening in which key decision makers, who make certain determinations in the absence of formal Steering Group consideration
- Underestimating the additional work that can be required in effectively discharging the responsibilities of a formal HIA, and
- The nature of the policy development process itself, particularly the constraints imposed by the need to reallocate resources among competing policy priorities.

Preliminary planning relating to the development site foreshadowed the potential of applying an intermediate HIA to the policy process. Associated with this proposal was the anticipated role of a reference group established to oversee the policy's development in simultaneously discharging the role of HIA Steering Committee for the project. This proved impractical due to among other factors a divergence in the timeframes relating to the reference group's considerations and the HIA process. An assessment of the difficulties experienced by the developmental site in progressing the project resulted in a modified proposal involving a more manageable desktop audit process overseen by a smaller steering committee. This alternative approach was not completed at the conclusion of the developmental HIA site project.

Introduction

Transport for Health

The Transport for Health Policy Framework is the key strategy through which NSW Health is working to improve access to health facilities for transport-disadvantaged individuals and communities. The Framework has been developed to improve access to health services by:

- Addressing the Non-Emergency Health Related Transport needs of health consumers in a strategic, consistent and accountable manner
- Developing and maintaining effective working partnerships with non-NSW Health transport providers and stakeholders, and
- Facilitating recognition and consideration of the role and importance of NEHRT in service planning and delivery within the NSW health system.

Transport for Health is a product of a major participative process and was oversighted by a reference group involving representatives from relevant Australian and State government departments, non-government agencies and individuals involved in the funding and or provision of health-related transport or in advocating for the improvement in transport services on behalf of health consumers.

Transport for Health developmental HIA site

As the proponent of the Transport for Health NSW Policy Framework, the NSW Department of Health's Primary Health and Community Partnerships Branch identified a range of potential benefits to the implementation of the Transport for Health strategy. These included -

- Provision of a coherent, consistent and accountable structure for the conduct of the statewide consultations, and improved opportunity for stakeholder participation
- Enhanced integrity of consultation outcomes, and
- Documented evidence of the potential benefits of improved planning, coordination and provision of health related transport services generally, and in terms of specific population groups.

The timeframe for the HIA process coincided with the anticipated development and implementation of the Policy Framework during 2004. This apparent alignment of these two policy development processes suggested that the cost of conducting a HIA would be marginal and balanced by the potential benefits to be derived from this process.

An intermediate HIA was commenced based on these initial determinations but was discontinued following an assessment of the site's progress undertaken in consultation with CHETRE. A revised option was to instead complete a desktop audit but this process also proved beyond the reasonable limits of competing policy priorities and the timeframe for the broader policy development process. These two phases of the developmental HIA site's progress are referred to below.

The HIA process

Phase 1

Screening

Technically, a team with skills relevant to the project should conduct the HIA screening, which consists of a series of questions relevant to assessing the potential for an impact to occur and will assist to provide the reasons why a HIA should or should not be undertaken.

A form of “screening” may also be undertaken implicitly as a part of the general policy considerations and during separate initial determinations concerning a project’s suitability as a developmental HIA site. In relation to the Transport for Health Policy Framework an assessment of the potential to benefit from a HIA was fundamental to the rationale for it being put forward and accepted as a developmental site.

It is possible that due to the inexperience of participants in the HIA process, the developmental site proposal may have been inadvertently and unduly influenced by these early considerations. This was compounded by certain misconceptions about the discrete and separate analytical obligations that HIA brings to policy development and an underestimation of the resources that would be required to discharge these obligations.

It was anticipated that an Implementation Reference Group established to oversight the policy’s development or a sub-group of its members, would perform the additional role of a HIA Steering Committee. This did not eventuate as revised timeframes and a revised strategy for implementation the policy meant that the Implementation Reference Group finalised its considerations before it could undertake the HIA role. The ongoing inability to convene an alternative reference group to formally complete the screening process was accompanied by a misunderstanding of the strategic importance of doing so.

The possibility for pre-emptive screening, in which key decision makers make certain determinations in the absence of formal Steering Committee consideration, has the potential to distort the screening process and ultimately diminish the integrity of HIA. It may also result in a commitment of resources to a process that does not take adequate account of certain practical considerations relating to the policy development process.

Scoping

The development site did not complete the scoping phase. Apart from certain conceptual errors in underestimating the strategic role and importance of scoping, action in this area was restrained by factors impacting on policy development process, the inability to convene the Steering Committee and a consequent reliance on informal ‘de facto’ assessment processes.

The policy development process is a subject to a range of factors and forces that lie beyond the influence of individuals in this process. In the case of the developmental HIA site for the Transport for Health Policy Framework, the capacity to achieve progress was significantly affected by factors such as the impact of competing policy priorities on the capacity to satisfactorily undertake an Intermediate HIA, a fundamental re-evaluation of role of the Implementation Reference Group and revised timeframes relating to the Policy Framework. In hindsight, these impacts were compounded by an oversight in not earlier reassessing the site’s proposed approach and commitment to an Intermediate HIA in liaison with management and CHETRE.

Phase 2

Screening

A revised approach to the HIA was proposed in discussions with CHETRE. This involved a more straightforward and less resource intensive Desktop Audit to be oversighted by a smaller Steering Committee with membership drawn from the Department of Health's Primary Health and Community Partnerships and Aboriginal Health branches and CHETRE.

The key component of this rapid means of assessment would comprise a literature review supplemented by interviews with certain key stakeholders in order to examine the impacts on the determinants of health of any similar initiatives that have been undertaken.

On reflection, a Desktop Audit might be considered to have been a more appropriate assessment tool for the purpose of the Transport for Health Policy Framework than the significantly more extensive Intermediate approach originally proposed. This is because

- The policy is principally aimed at addressing an important social determinant of health
- The impacts on the determinants of health are fairly clear
- It is reasonable to anticipate that these impacts will be largely positive
- Stakeholders generally supportive
- There are limited resources

In light of these factors a Desktop Audit focussed on similar policy initiatives in order to confirm key assumptions or to identify possible unintended consequences would seem to have provided the greatest potential for adding value to the policy process.

It is possible that a formal screening undertaken by a reference committee may have provided a more objective assessment of the relative merits of the Intermediate and Rapid HIA approaches in assisting the development of the Transport for Health Policy Framework.

Conclusion

The Transport for Health development site provides valuable insights into factors relevant to applying the HIA process to policy development generally and also specifically within a public health context where the principal focus and rationale of an initiative is to improve the health of the population.

The development site's experience indicates the need to critically examine whether a HIA should or should not be undertaken and if so the most practical approach in light of the potential for this process to add value to a policy or initiative and given the resource commitments that will be required to effectively deliver such benefits.

Screening and scoping undertaken by an appropriately convened screening committee will assist to ensure objectivity in these assessments. Preliminary assumptions and decisions concerning the suitability of a particular course of action should be questioned to ensure clarity of purpose and certainty of formal processes to be undertaken. Such assumptions may take into account factors outside the scope of HIA considerations and could inappropriately influence the HIA process. Convening a screening committee and formally completing the screening and scoping stages increases the opportunity to independently test preliminary assessments and maintain the integrity of determinations relating to the HIA.

It is important to recognise the fluid nature of the policy process and the potential for altered circumstances to impact on key assumptions underlying an original HIA evaluation. It is also important to be mindful of factors even those reasonably expected to be outside the control of the key participants that could interfere with the progress of an HIA and to ensure that the process to be undertaken is flexible enough to respond.