

Health in All Policies Framework



Ensuring that health and reducing inequalities is at the heart of all decision and policy making across the council

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1. Introduction

1.1 What is Health in All Policies?

Health in All Policies is defined as ‘a collaborative approach to improving the health of all people by incorporating health considerations into decision-making across sectors and policy areas’ (LGA, 2016)¹.

It is an approach that aims to ensure that there is robust consideration of the impact on human health that results from decision making processes across all Council departments and functions. In this way, the Local Authority can ensure that all its activity works towards protecting and improving health.

This means that Health in All Policies will maintain a clear focus on health, equity and sustainability across policy development and decision-making processes, using the best available evidence.

HiAP provides a response to a variety of complex and often inextricably linked problems, such as the increase in people living with chronic illness and long-term illness linked to our ageing society, growing inequality and health inequalities, climate change and the need for effective and efficient strategies for achieving society’s goals with shrinking resources. These ‘wicked problems’ are extremely challenging.

Addressing them requires innovative solutions, a new way of thinking about policy, and structures that break down the ‘siloes’ nature of local government. Collaboration across sectors - such as through a HiAP approach – can promote efficiency and effectiveness by fostering discussion of how agencies can share resources and reduce duplication, thus potentially decreasing costs and improving performance and outcomes.

1.2 Why is Health in All Policies a Council priority?

The Council recognises its statutory duty² to improve the health of local residents. This policy commitment is set out in the Council Plan ‘Investing in Reading’s Future’ 2025-2028³, under the priority **Promote more equal communities in Reading**.

Under this priority, the Council commits itself to:

‘Reduce inequalities in health and life expectancy through our Public Health Service’ by developing approaches to ensure that health and wellbeing is considered across all policy areas’

This statement of intent will drive the establishment of Health in All Policies across the council with the aim of:

- Improving health outcomes for everyone with fastest improvement amongst those at greatest risk of exposure to deprivation
- Making evidence-based policy decisions
- Training members and officers in a range of skills

¹ [Health in all policies: a manual for local government](#) (LGA, 2016)

² Under the Health and Social Care Act 2012, local councils in England are legally responsible for delivering public health services. They are required to take appropriate actions to improve the health and wellbeing of their local populations. Section 2B of the NHS Act 2006 is a duty for all upper-tier and unitary local authorities in England to take appropriate steps to improve the health of the people who live in their areas.

³ [‘Investing in Reading’s Future’ Council Plan 2025-2028](#)

- Improving health and economic benefits for everyone in Reading

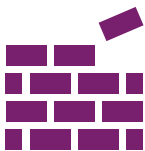



1.3 Local Strategies and Policies

Reading Borough Council already has several policies that have a strategic focus on health. Adopting a Health in All Policies approach will connect these existing policies in a systematic approach to prevention. This will require a deeper level of collaboration and cooperation between Council directorates, system partners, stakeholders and the communities. The table below summarises the existing strategies and policies:

Council Plan	Key objectives that align with health and wellbeing
<u>Council Plan 2025-2028</u>	<ul style="list-style-type: none"> • Promote more equal communities in Reading • Secure Reading's economics and cultural success • Deliver a sustainable and healthy environment and reduce Reading's carbon footprint • Safeguard and support the health and wellbeing of Reading's adults and children • Ensure Reading Borough Council is fit for the future
<u>Culture and Heritage Strategy 2015-2030</u>	<ul style="list-style-type: none"> • Amplify the role of cultural participation in promoting good health within the culture and heritage strategy.
<u>Additional Air Quality Monitoring</u>	<ul style="list-style-type: none"> • Implement additional air quality monitoring to gather detailed data on pollutants and their impact on public health.
<u>Tobacco and Vapes Bill 2024</u>	<ul style="list-style-type: none"> • Address the implications of the Tobacco and Vapes Bill to reduce nicotine addiction and its health impacts.
<u>The Reading Climate Emergency Strategy 2020-2025</u>	<ul style="list-style-type: none"> • Address the health impacts of climate change on the health and wellbeing of Reading population
<u>Local Transport Plan 2011-2026</u>	<ul style="list-style-type: none"> • Outlines how the Council plans to manage, maintain and improve Reading's transport network, with consideration being given to Health Impact Assessment to mitigate negative effects on health and wellbeing.
<u>Health and Wellbeing Strategy 2021-2030</u>	<ul style="list-style-type: none"> • Outlines the areas we will focus on from 2021 to 2030 to improve and protect Berkshire West's health and wellbeing
<u>Housing Strategy for Reading 2020-2025</u>	<ul style="list-style-type: none"> • Highlights how housing is a foundation block for the health and wellbeing of residents
<u>Tackling inequality strategy 2023-2026</u>	<ul style="list-style-type: none"> • Tackling inequality is central to how we want to improve the health and wellbeing of our residents
Reading Economic Development Framework	<ul style="list-style-type: none"> • In development

1.4 Practical implementation of Health in All Policies

Health in All Policies presents opportunities at a primary prevention level to protect and improve the health of residents. However, it is important to carefully consider the factors that are likely to ensure success. These can be grouped into **structural**, **political**, **cultural**, and **technical** factors:

Structural 	<ul style="list-style-type: none">• Avoid siloed thinking and promote closer collaboration and coordination between sectors, for example transport, housing, education, for effective connection and integration.• Recognise the scarcity of financial and human resources in the current context and identify innovative opportunities for cross-system collaboration.• Manage relevant political and budgetary timelines that have the potential to conflict with the achievement of long-term health outcomes.
Political 	<ul style="list-style-type: none">• Promote wide understanding amongst decision makers about Health in All Policies and how it can help the council perform its duties.• Develop a network of Health in All Policies champions amongst members and senior leaders that that will drive the Health in All Policies approach.• Develop wider understanding of the interdependency of economic growth and infrastructure development with public health outcomes.• Ensure that Health in All Policies methods and processes are efficient and easy to implement.
Cultural 	<ul style="list-style-type: none">• Maintain a public health approach that is jargon free and uses plain English to enable wider engagement.• Consider additional training to reconnect Council functions with their public health purpose• Consider additional resource and support for new ways of working across departments.
Technical 	<ul style="list-style-type: none">• Training to enable all officers to use health data that can inform evidence-based decisions and foster a public health mindset• Develop appropriate methods to evaluate the effectiveness of the approach at a local level.• Develop practical guidance on how to integrate Health in All Policies into the Local Strategies and Policies listed above.

2. Embedding Health in All Policies Locally

The Council has committed to improving the health and wellbeing of residents through several policies and strategies. The success of the Health in All Policies Framework will depend upon the Leadership Team within the Council acting as champions for the approach and advocating for substantial change and sustainable actions.

2.1 Becoming a ‘public health organisation’

There has been interest across Reading Borough Council in becoming ‘public health organisations’, but there is a lack of clarity on what this means in practice. No single

definition exists in the academic literature, but parallels can be drawn to adopting a 'public health' and 'health in all policies' approach.

A fundamental interpretation of this, is to maximise the skills of public health professionals to work with colleagues across the council and influence the social determinants or “building blocks of life”, such as worthwhile employment, transportation, land use, secure tenancies, public safety, lifelong education and community connectedness. In practice this means:

- A system-wide focus on early intervention and prevention (primary, secondary and tertiary)
- Understanding the root causes of the issue (building blocks of life)
- Data and intelligence is integral to decision making
- A science and evidence-led approach to policy and commissioning
- Working with and for communities ensuring respect and equal access for everybody
- Any level solution (working across organisations and focusing on populations)
- Putting health outcomes at the heart of policy decisions to address the wider determinants of health
- Making every contact count so that everyone in our organisation can advocate effectively for health and wellbeing
- A collective responsibility for health, health protection and disease prevention
- Fostering a public health mindset across the council and partner workforce

2.2 Progress to date

There is ongoing work within the Council which assist with the aim of embedding HiAP and are summarised below:

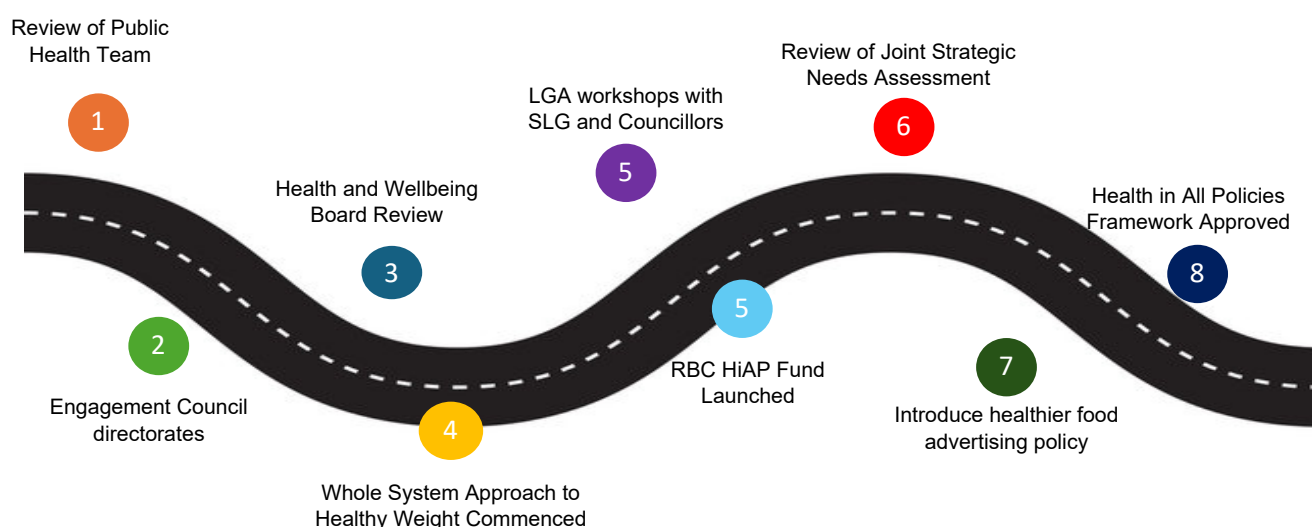


Figure 1. Roadmap highlighting key milestones on our journey towards a health in all policies

Activity	Outcome
Health in All Policies workshops with the Senior Leadership Team and Lead Members and facilitated by the LGA	<ul style="list-style-type: none"> • A range of suggestions and actions were identified through these workshops including • Greater focus on Best Start in Life • Understanding the links between housing and health e.g. damp and mould • Maximising the opportunities of licensing around gambling, alcohol and fast food where Reading benchmarks poorly • Importance of refining our current provision across sport and leisure to focus on the least active • Align public health goals with planning, transport, and economic development through new governance and collaborative structures through a Health Equity Audit • Develop health economic knowledge and skills to demonstrate return on investment • Refine the evidence-base data on health impacts of non-health policies, for example food advertising, air quality to build a compelling case • Maximise opportunities through customer service strategy • Better utilise data held by partners. Citizen Advice Reading • Strengthen links between health and work
Joint Strategic Needs Assessment (JSNA) Review	<ul style="list-style-type: none"> • The JSNA for Reading⁴ was produced to support the Health and Wellbeing Board in identifying priorities for action in the short and medium term. Best Start in Life, Mental Health and Neighbourhood Health were identified as key priorities.
Health in All Policies Fund	<ul style="list-style-type: none"> • The Public Health Team have invested £400k of the public health grant reserve for non-recurrent funding to promote Health in All Policies in 2025-26. Projects funded include: <ul style="list-style-type: none"> ○ Damp & Mould Intervention in housing ○ Adult Education Garden Project ○ Planning Officer Secondment ○ Library Health Equipment Lending Project ○ Family Safeguarding Outreach ○ Ranger Station Activities
Public Health Team Restructure	<ul style="list-style-type: none"> • A new operating model has been designed for the Public Health Teams in Reading and West Berkshire that align with the Health in All Policies agenda and ensure a more corporate approach • Within the new operating model, teams will work collaboratively with other Council departments and at strategic levels to bring Health in All Policies to the forefront of what everyone does.
Learning Opportunities and capacity building	<ul style="list-style-type: none"> • Learning and development opportunities are being explored to ensure staff have the knowledge and awareness of health in all policies. • An e-learning opportunity is being developed for all staff to learn how to embed Health in All Policies into their working practice.

⁴ <https://reading.berkshireobservatory.co.uk/>

2.3 Our vision and aims

Our vision is that:

“Health is considered in all policy decision making to optimise the health and wellbeing of Reading residents and minimise health inequalities”

Our aims are as follows:

- 1) Achieving improved health outcomes for everyone, with fastest improvement amongst those at greatest risk of exposure to deprivation
- 2) Strengthening evidence-based policy decisions
- 3) Providing training in relevant knowledge and skills for members and officers









Improving health outcomes and associated economic benefits for everyone in Reading.

Achieving our vision and aims

Whilst there is no ‘right way’ to incorporate HiAP, a number of thematic areas have been identified by the Local Government Association¹ as central to a HiAP approach and are adaptable to a wide range of organisations:

1. Local Government Association toolkit¹ Establish formal structures and governance
2. Build capacity across the Council
3. Integrate Health into Policy and Planning
4. Foster Cross-Directorate Collaboration
5. Pilot and Scale Initiatives
6. Secure Resources and Sustainability
7. Promote Accountability and Transparency
8. Encourage Cultural and Systemic Change

The table below provides high level actions that the Council will look to deliver against each category.

Steps	Actions
 1. Establish Formal Structures and Governance	<ul style="list-style-type: none"> • An introduction to Health in All Policies by the Local Government Association for the Senior Leadership Group and Lead Members • Invite the Corporate Management Team, the Senior Leadership Group and Members to refine the Council's Health in All Policies vision statement, approach and process • Agree and establish governance arrangements • Strengthen the role of collaboration with partners of the HWB Board
 2. Build Capacity across the Council	<ul style="list-style-type: none"> • Council wide staff training/awareness raising on Health Impact Assessment, Health Equity Audit, Theory of Change, Logic Model (Learning Pool Resource/Staff Induction) • Develop a strategic approach to Making Every Contact Count
 3. Integrate Health into Policy and Planning	<ul style="list-style-type: none"> • Incorporate Health Impact Assessments in Policy/Committee Reports (e.g. potentially within existing EQiA process) • Conduct a review of Policies • Conduct Health Impact Assessment and Health Equity Audits • Develop a 'Public Health Offer' to support the Council
 4. Foster Cross-Directorate Collaboration	<ul style="list-style-type: none"> • Engage existing collaborative partners and potential champions across all directorates • Support and foster leadership at all levels
 5. Pilot and Scale Initiatives	<ul style="list-style-type: none"> • Select a local public health priority to pilot the implementation of Health in All Policies e.g. planning • Evaluate the outcomes and scale up successful models
 6. Secure Resources and Sustainability	<ul style="list-style-type: none"> • Public Health funding to support implementation of Health in All Policies launched 2025/26) • Implement Public Health Restructure and ensure business partner model aligned to Council Directorates
 7. Promote Accountability and Transparency	<ul style="list-style-type: none"> • Public Health Board (Officer Board) to provide oversight of approach • Engage Councillors • Monitoring and reporting progress • Evaluate and adapt approach from learning • Ensure accountability agreements are in place across the council for activities funded by the public health grant
 8. Encourage Cultural and Systemic Change	<ul style="list-style-type: none"> • The Relevant Council staff to be cognisant and proficient in Health in All Policies approach

HiAP Opportunities by Public Health Theme

Characteristic	Children	Adults	Place
Planning & Education	Embed health-promoting design Healthy school design, nutrition policies, mental health support	Advocate for accessible housing Active design	Embed Health Impact Assessments, Health Equity Audits
Transport, Safety, Infrastructure	Safe routes to school, air quality improvements	Support active travel infrastructure	Influence transport strategies, active travel, inclusive public spaces
Licensing & Regulation	Restrict unhealthy food/fast food and alcohol outlets near schools	Influence licensing to reduce harm	Align licensing decisions with health, Alcohol outlet density Alcohol outlet density
Housing & Environment	Ensure family-friendly housing/developments Reduce overcrowding	Influence planning for mixed-use	Influence environmental health policies Air quality, housing standards
Workplace & Economy		Promote healthy workplaces, employment support	
Community Safety & Social Inclusion	Address domestic abuse, substance misuse, social isolation and mental health	Address domestic abuse, substance misuse, social isolation and mental health	
Climate & Sustainability			Embed health in climate strategies Green infrastructure, climate resilience

Cross-cutting Enablers

PARTNERSHIP WORKING ACROSS DEPARTMENTS
 USE OF DATA AND EVIDENCE (E.G. JSNA, HEALTH EQUITY AUDIT)
 EMBEDDING HEALTH IN STRATEGY, POLICY, AND DECISION-MAKING PROCESSES
 COMMUNITY ENGAGEMENT AND CO-PRODUCTION

2.4 Change Management Approach and Engagement Plan

A change management approach provides a structured method to maximise the adoption of Health in All Policies across the organisation. It involves a systematic process of preparing for change, communicating the vision, implementing the change, embedding it into daily operations, and reviewing the outcomes.

There are various models of Change Management approaches, including the 'Know, Feel, Do' Model⁵ and the ADKAR Model⁶.

The 'Know, Feel, Do' Model is a communication framework that helps align the targeted stakeholders' understanding, emotions and actions with the intended transformation message. The model will a) clarify where to focus change and engagement efforts, and b) help design engagement and communications activity. The model is based on three core enquiries:

- What do the stakeholders need to know? (Cognitive)
- What will the stakeholders feel? (Emotional)
- What specific action do the stakeholders need to take? (Behavioural)

Know	Feel	Do
About the new health impact assessment	Confident in filling in the health impact assessment	Regularly consider health implications on projects by carrying out health impact assessments
Why the assessment is important and requires attention	That the assessment is a crucial part of decision making at RBC	Raise and mitigate any public health risks that might arise
How it feeds into decisions about projects		

The ADKAR Model provides a step-by-step guidance for managing change and help design an approach.

⁵ https://www.scotpho.org.uk/media/1199/scotpho101027_kfd_report.pdf

⁶ [The 5 Elements of the ADKAR Model](#)

Principle	Activity
Awareness & Desire	<ul style="list-style-type: none"> • Intranet articles covering why and when the assessment is coming in; • Team Talk; • Attending team meetings for highly impacted teams to talk through the change and how they will be supported; • Build “desire” messaging in: what impact could the assessments have? Any examples of where they have worked well elsewhere?
Knowledge	<ul style="list-style-type: none"> • Training • Resources and tools for health impact assessments
Ability	<ul style="list-style-type: none"> • Confidence building activities; • Surgeries reviewing assessments with stakeholders post launch; • Work through scenarios and get stakeholders to fill in mock assessments in the training; • Spot check some assessments and offer constructive feedback
Reinforcement	<ul style="list-style-type: none"> • Follow ups (intranet articles, team talk / all staff briefing items to remind stakeholders of the importance of applying Health in All Policies) • Audits to check the consistency and quality of assessments; • Follow ups with Senior Leadership Team on the importance of health in All Policies as part of the project sign off process

3. Health Impact Assessments

A Health Impact Assessment is important to the Health in All Policies approach because it provides a systematic process for evaluating the potential health effects of a policy, plan, or project on a population, particularly vulnerable groups, [according to the World Health Organization \(WHO\)](#). It identifies both positive and negative impacts, assesses their distribution across different groups, and suggests ways to maximise positive effects and mitigate negative ones. It is a crucial tool for evidence-based decision-making, aiming to improve health and reduce health inequalities.

A Health Impact Assessment aims to understand how a proposed development, policy, or plan, that sit outside the health sector, might affect the health and wellbeing of a population. This includes considering both direct and indirect impacts, as well as potential unintended consequences. It considers the full set of determinants of health, such as environmental, social and economic determinants of health.

3.1 When should a Health Impact Assessment be conducted?

To maximise the benefits of a Health Impact Assessment, it should be conducted before the implementation of a policy proposal, during the formulation stages of the policy⁷

A Health Impact Assessment is concerned with the involvement of all sectors affected by the policy proposal under review. As part of this framework we will explore the best way to incorporate HIA's within the Council's decision making process, which minimises the potential burden on staff, but maximise the ability to evaluate the impacts on health.

⁷ Howlett, M. & Ramesh, M. (2003). Studying public policy: Policy cycles and policy subsystems. Toronto, ON: Oxford University Press Canada.

4. Evaluating Health in All Policies

The evaluation of a health intervention or programme is very important because it helps achieve several essential outcomes:

- Assessing the effectiveness of the intervention
- Informing the programme design for further improvement
- Providing accountability and transparency
- Informing policy and decision making
- Allocating resources effectively
- Building knowledge and capacity
- Enhancing community trust

4.1 Key Evaluation indicators

To successfully measure the implementation of Health in All Policies, a range of key indicators can be used across different domains. These indicators help assess both the process and impact of Health in All Policies initiatives. Based on guidance from NACCHO⁸, WHO⁹, and other public health bodies, the following categories could be considered:

Key Evaluation Indicators	Details
Governance and Whole Systems Approach and Collaboration	<ul style="list-style-type: none">• Interdepartmental working groups established (Health in All Policies Champions)• Frequency of joint planning or decision-making meetings• Inclusion of health representatives in non-health policy processes• Formal agreements or Memorandum of Understanding between Council Departments
Policy Integration	<ul style="list-style-type: none">• Proportion of new policies that explicitly consider health and equity impacts• Evidence of health language or goals in non-health sector strategies (e.g. transport, housing)
Capacity Building	<ul style="list-style-type: none">• Number of staff trained in Health in All Policies principles and tools• Availability of Health in All Policies toolkits or guidance documents• Integration of Health in All Policies into staff orientation or professional development
Community and Stakeholder Engagement	<ul style="list-style-type: none">• Representation of vulnerable or priority populations in decision-making• Public and staff awareness of Health in All Policies initiatives (Comms Team, framing narratives)
Monitoring and Evaluation	<ul style="list-style-type: none">• Existence of a Health in All Policies monitoring framework

⁸ [NACCHO](#) Health in All Policies Evaluation Tool for State and Local Health Departments

⁹ [WHO](#) Health in All Policies Framework for Country Action, 2014

	<ul style="list-style-type: none"> • Number of Health Impact indicators tracked across Council departments and reported on at Corporate Management Team Council Monitoring Dashboard • Use of health equity metrics in policy evaluation
Health and Equity Outcomes (Long-Term)	<ul style="list-style-type: none"> • Improved social determinants of health (e.g. housing quality, air quality, access to healthy food) • Reduction in health disparities across population groups • Improvements in population health indicators (e.g. obesity rates, mental health)

5. Health in All Policies – Priority areas

5.1 Health in All Policies - Health

The health of the population in Reading can be assessed using the latest data from the Public Health Outcomes Framework (PHOF)¹⁰. The framework focuses on the two high level outcomes we want to achieve across the public health system and beyond:

- Increased healthy life expectancy.
- Reduced differences in life expectancy and healthy life expectancy between communities.

The overarching indicators domain (group of indicators) presents the high-level outcomes, with the supporting indicators grouped into 4 domains, with their own objectives:

- The **wider determinants of health** domain objective is to measure improvements against wider factors that affect health and wellbeing, and health inequalities
- The **health improvement** domain objective is that people are helped to live healthy lifestyles, make healthy choices and reduce health inequalities
- The **health protection** domain objective is that the population's health is protected from major incidents and other threats, while reducing health inequalities
- The **healthcare and premature mortality** domain objective is reduced numbers of people living with preventable ill health and people dying prematurely, while reducing the gap between communities

The latest Joint Strategic Needs Assessment (State of the Borough Report) is downloadable from the [Berkshire Observatory](#)

Local Context - Wider determinants of health outcomes

Wider determinants of health, also known as social determinants, are the social, economic, and environmental factors that influence people's health and well-being. These factors go beyond individual behaviours and healthcare and encompass the conditions in which people are born, grow, live, work, and age. They include things like income, education, housing, access to services, and the environment.

¹⁰ [Public Health Outcomes Framework \(PHOF\) for Reading, May 2025](#)

In Reading, there are many indicators that show improved health outcomes, however, some wider determinants of health indicators are significantly worse than the South East and England averages¹¹.

Table 1: Wider determinants of health indicators showing as significantly worse than the national average

Indicator	Reading	South East	England
B08b – Gap in the employment rate between those who are in receipt of long-term support for a learning disability and the overall employment rate (18-64 year olds) (2022/23)	77.6%	71.4%	70.9%
B15a – Homelessness: households owed a duty under the Homelessness Reduction Act (2023/24)	24.2 per 1,000	11.3 per 1,000	13.4 per 1,000
B18b – Percentage of adult carers who have as much social contact as they would like (18 and over) (2023/24)	20.0%	25.9%	30.0%
C19a – Successful completion of drug treatment: opiate users (18 and over) (2023/24)	3.0%	6.5%	5.1%
C19b – Successful completion of drug treatment: non opiate users (18 and over) (2023/24)	17.9%	30.9%	29.5%
C19c – Successful completion of alcohol treatment (18 and over) (2023/24)	24.7%	34.3%	34.2%
C20 – Adults with substance misuse treatment need who successfully engage in community based structured treatment following release from prison (18 and over) (2024/25)	42.0%	54.0%	57.1%
Gambling premises (2025)	23.0 per 100,000	10.7 per 100,000	12.9 per 100,000
Fast food outlets (all ages) (2024)	136.9 per 100,000	91.7 per 100,000	115.9 per 100,000
Premises licensed to sell alcohol per square kilometre (2023/24)	13.8 per km	1.4 per km	1.3 per km

5.2 Health in All Policies - Equity

Equity in Health in All Policies means ensuring that policies do not disproportionately harm disadvantaged groups and actively work to reduce health disparities caused by social, economic, and environmental factors.

According to the Local Government Association and Public Health England¹², Health in All Policies involves:

- Systematically considering health impacts in all policy decisions.
- Targeting the social determinants of health (e.g. housing, education, transport).
- Engaging communities and ensuring inclusive participation.
- Avoiding unintended harm to vulnerable populations.
- Promoting fairness in access to resources and opportunities for health.

¹¹ [Public Health Outcomes Framework \(PHOF\) for Reading, May 2025](#)

¹² Local Government Association (2016) Health in All Policies a manual for local government

Applying Health in All Policies Equity in Reading

Given Reading's diverse population and existing health inequalities, applying Health in All Policies with an equity lens could look like this:

Priority area	Actions
Policy Integration	<ul style="list-style-type: none">• Embed health equity assessments in all major council strategies (e.g. Local Plan, Climate Strategy, Transport Plan).• Ensure policies on housing, planning, and economic development consider their impact on health outcomes, especially for low-income and marginalised communities.
Cross-Sector Collaboration	<ul style="list-style-type: none">• Strengthen partnerships between public health, planning, education, transport, and social care.• Use the Health and Wellbeing Board to align goals and share data on inequalities.
Community Engagement	<ul style="list-style-type: none">• Involve residents from underserved areas (e.g. Whitley, Southcote) in shaping local policies.• Use participatory approaches to understand lived experiences and barriers to health (Community Participatory Action Research (CPAR) collaboration with University of Reading).
Targeted Interventions	<ul style="list-style-type: none">• Prioritise investment in areas with the poorest health outcomes.• For example, promote healthier advertising standards and support responsible food marketing near schools and in lower-income neighbourhoods.
Monitoring and Evaluation	<ul style="list-style-type: none">• Track indicators such as life expectancy gaps, access to green space, active travel rates, and food insecurity.• Use disaggregated data to identify which groups are benefiting and which are being left behind.

5.3 Health in All Policies - Sustainability

Sustainability in the context of **Health in All Policies** refers to the long-term integration of health and wellbeing considerations into all areas of policymaking, ensuring that decisions made today do not compromise the health of future generations. It involves:

- Institutionalising health thinking across all departments and levels of government.
- Aligning health goals with environmental, economic, and social sustainability.
- Building resilient systems that can adapt to future challenges (e.g. climate change, economic shifts).
- Ensuring continuity of Health in All Policies practices beyond political cycles or leadership changes.

According to the Local Government Association and Public Health England¹³, sustainable Health in All Policies implementation requires:

- Embedding health into **strategic planning frameworks**
- Creating **long-term partnerships** across sectors
- Using **shared data and evaluation tools**
- Ensuring **community ownership** and participation

Applying Health in All Policies Sustainability in Reading

To embed sustainability into Health in All Policies in Reading, the council could take the following approaches:

Sustainable Goal	Approach
Embed Health in Strategic Plans	<ul style="list-style-type: none"> • Integrate health and wellbeing goals into the Local Plan, Climate Emergency Strategy, and Transport Strategy. • Ensure that sustainability assessments include health equity impacts.
Promote Healthy and Sustainable Environments	<ul style="list-style-type: none"> • Support active travel infrastructure (e.g. cycling, walking) to reduce emissions and improve physical activity. • Encourage green space development in urban planning to support mental and physical health. • Regulate advertising of unhealthy products while promoting local, sustainable food businesses.
Strengthen Cross-Sector Collaboration	<ul style="list-style-type: none"> • Establish long-term partnerships between public health, planning, housing, and environmental services. • Use the Health and Wellbeing Board to align sustainability and health priorities.
Build Community Resilience	<ul style="list-style-type: none"> • Engage communities in co-designing policies that affect their health and environment. • Prioritise interventions in areas most vulnerable to climate and health risks (e.g. Whitley, South Reading).
Monitor and Evaluate	<ul style="list-style-type: none"> • Track indicators such as air quality, access to green space, active travel rates, and health inequalities. • Use this data to inform continuous improvement and long-term planning.

6. Governance

Within the Council, a Public Health Board has been established which will provide oversight and delivery of the Health in All Policies Framework.

¹³ [Local wellbeing, local growth: adopting Health in All Policies](#) (2016)

Through our health and wellbeing board (HWB), the Council has a well-established way of working with representatives of several of the organisations and sectors needed to implement a HiAP approach. The HWB will play a key governance role whereby HWB members will act as HiAP champions, advocating for a HiAP approach within their own organisations as well as across the HWB membership and beyond.