

Health in All Policies:

A toolkit for mayoral regional authorities

Executive Summary



Supported by:



Lead delivery partner:



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Building blocks of health



Almost every aspect of our lives impacts our health and how long we will live. This includes our jobs, homes, access to education, and public transport, and whether we experience poverty or discrimination. These factors have been traditionally referred to as the wider determinants of health. Some regions now use the “building blocks of health” to increase understanding of the significant role these factors play in our health outcomes and to support action to address them.

Many of the greatest opportunities for improving population health lie in getting the right building blocks in place. Often sectors and organisations responsible for the everyday aspects of our lives operate outside of the health and care system. Therefore, they are in a unique position to build better health for their communities through their responsibilities across areas such as the economy, employment, skills, transport, housing, and planning, and through regional leadership and influence to develop partnerships and drive system action.

Addressing these building blocks of health requires a comprehensive and joined-up approach. By focusing on improving them, we can create environments that support healthy lifestyles and reduce health inequalities.

The infographic used on this page was created by The Health Foundation. You can access this and the rest of the series on what builds good health using this link: <https://www.health.org.uk/features-and-opinion/features/whatbuilds-good-health>

Health in All Policies

A practical framework that can drive action to improve health and reduce inequalities through the building blocks of health is a **'Health in All Policies'** (HiAP) approach. Derived from the World Health Organization, the term HiAP refers to a collaborative approach to public policies that can support the identification and prioritisation of opportunities for improving health and reducing inequalities across a range of powers and responsibilities.

Adopting a HiAP approach can enable organisations outside of the NHS, such as mayoral regional authorities, to recognise and maximise their impact on the population health through existing powers and delivery related to key building blocks of health such as transport, housing, employment, and skills, even in the absence of explicit health and care responsibilities.



The term **mayoral regional authority** refers to all devolution arrangements across England that are led by an elected mayor and operate at a regional scale. We have chosen to adopt this term throughout the toolkit to accurately reflect the range of MRP stakeholders. These primarily include combined authorities but also include the Greater London Authority. This term is also inclusive of any future devolution arrangements, such as "Mayoral Strategic Authorities" (as outlined in the English Devolution White Paper).

*The infographic used on this page was created by The Health Foundation.
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Purpose of toolkit and executive summary

Mayoral regional authorities are in a unique position to tackle health inequalities, as many of their responsibilities impact on the building blocks of health. Regional mayors can also use their political influence and convening powers to shape healthy places.

Given that there is a lack of specific resources to support mayoral regional authorities to use their powers and levers to improve health and reduce inequalities, the [Health in All Policies toolkit for mayoral regional authorities](#) has been developed with the following aims:

- **To highlight why and how mayoral regional authority powers and levers are important for population health and the links between health and key mayoral priorities (such as regional economic growth)**
- **To explore how regions can make the most of their powers and levers to improve health, reduce inequalities, and create related benefits for other policy areas linked to the building blocks of health**
- **To support the development of strategic HiAP approaches within mayoral regional authorities and related monitoring and evaluation activities**

The toolkit has been developed using a wide range of evidence from policy and research literature, as well as case study information from English mayoral regional authorities participating in the MRP.* A HiAP lens has been used throughout the toolkit to support the identification and prioritisation of health and inequality-related opportunities. Recognising that there are differences across mayoral regions, the toolkit has been designed as a set of resources that can support mayoral regional authority colleagues working on HiAP at different strategic levels and within different devolution contexts.

This executive summary has been developed to provide a succinct overview of each part of the HiAP toolkit and how it can be used. The infographic on the following page provides an overview of each part of the toolkit, as well as the two accompanying self-assessment tools.

**You can find all sources drawn upon in the toolkit in the bibliography section of the full HiAP toolkit, which can be accessed via this link: https://www.wmca.org.uk/media/fjngxggz/mrp-hiap-toolkit_final.pdf*

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Part 4: Capturing progress



Supports the development of organisation and programme/policy-level HiAP monitoring and evaluation activities, with Theory of Change examples.

Part 3: Developing strategy



Supports the development and articulation of explicit strategic HiAP goals, relevant to organisational context and capacity. This can enable organisational visibility, monitoring and evaluation of impact, and will be helpful where foundational HiAP work has already been progressed.

Part 2: Opportunities for action



Supports clear articulation and identification of the opportunities for HiAP action. It provides a list of powers and levers that can be used to improve health and reduce inequalities across eight commonly devolved functions and includes case study examples.

Part 1: Pillars for HiAP



Supports an understanding of the key organisational and structural factors for effective HiAP work and includes case study examples. Each pillar is presented with associated enablers and barriers and can help with identifying the 'open doors' to push on regarding opportunities and/or political priorities.

HiAP pillars audit tool

Supports self-assessment of organisational and structural assets for HiAP by scoring each pillar in Part 1.

Activity prioritisation tool

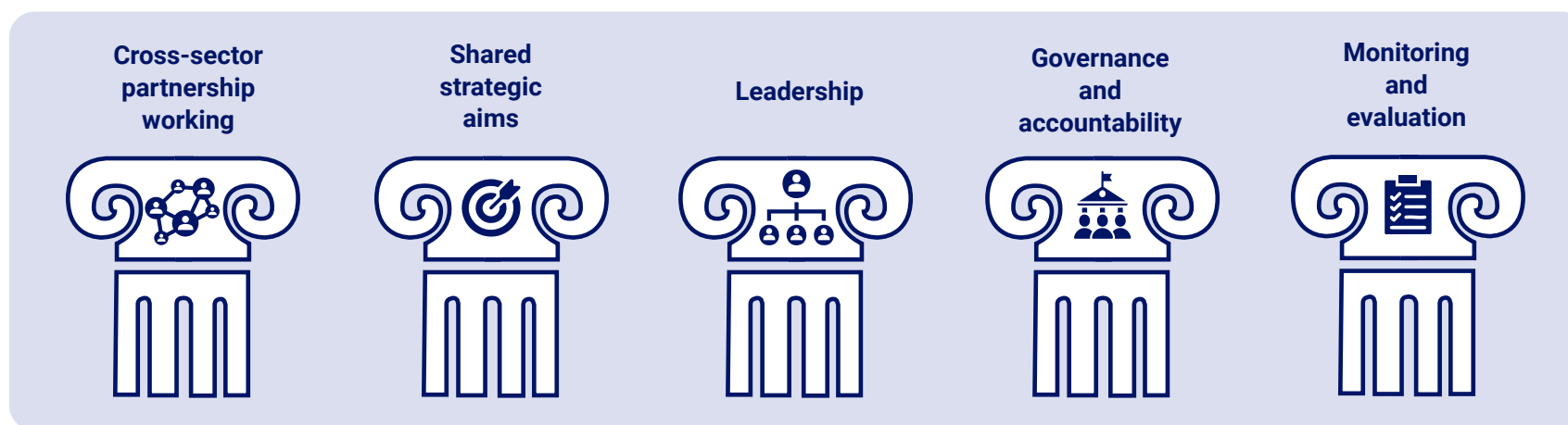
Supports prioritisation of opportunities for action across devolved functions in part 2.



Part 1: Pillars for HiAP

Overview

At the outset of developing HiAP strategies, it is helpful to consider the structural and organisational factors that are associated with HiAP success - i.e. the “pillars” for HiAP. Based on a review of regional, national, and international literature, this part of the toolkit identifies the following five pillars:



How to use this part of the Toolkit:

This part may be a helpful starting point for less mature mayoral regional authorities and/or those at the beginning their HiAP journey. However, regardless of maturity or length of HiAP journey, colleagues may find it helpful to use this part of the toolkit to think about their organisational setting in relation to each pillar and reflect on which of these might be ‘mission-critical’ within their context. This may also help with identifying the ‘open doors’ to push on regarding key opportunities or political priorities.

To support this process, an accompanying [self-assessment tool](#) has been designed to support mayoral regions to review their organisational and structural assets for HiAP success. This tool allows users to calculate a score for the strength of each pillar, based on self-assessment (which can be undertaken individually or across teams). Results from the tool can be used to understand organisational strengths and gaps in relation to HiAP, prioritise activities to strengthen pillars that are less developed, as well as monitor progress in developing a supportive environment for HiAP.



Part 1: Pillars for HiAP

Enabling factors and challenges






Included in each pillar are several enabling factors and common barriers for progression that apply to the mayoral regional authority context, which are summarised below. The full toolkit also includes case study examples of approaches that mayoral regional authorities have taken to strengthen each pillar.

| | | | |
|---|---|--|--|
| <div>Cross-sector partnership working</div> <div></div> | <div>Enablers </div> <div>Embedding public health intelligence and skills</div> <div>Co-developing a cross-organisational framing of a HiAP model with an agreed definition</div> <div>Aligning the HiAP approach with different departments' portfolio priorities</div> | <div>Governance & Accountability</div> <div></div> | <div>Enablers </div> <div>Recognising the synergies between HiAP and other prevention-oriented approaches</div> |
| | <div>Challenges </div> <div>Constraints in funding, staff capacity and public health expertise</div> <div>Focusing only on health outcomes can hinder effective collaboration</div> <div>Attempting to engage various sectors simultaneously</div> <div>Other sectors may view HiAP as disconnected from their priorities</div> | | <div>Challenges </div> <div>Meaningful engagement and co-production can be challenging at a regional scale</div> |
| <div>Leadership</div> <div></div> | <div>Enablers </div> <div>Catalysing action via cross-system health leadership</div> <div>Building leadership for HiAP amongst leaders from different sectors in the first, second and third tiers of and organisation</div> <div>Political leadership through a mandate from the mayor or deputy mayor</div> | | |
| | <div>Challenges </div> <div>Competing priorities of political and senior mayoral regional authority leaders</div> | | |



Part 1: Pillars for HiAP

Enabling factors and challenges (continued)

| | |
|---|--|
| Shared strategic aims  | Enablers  |
| | Align health with mayoral and regional priorities through strategic framing, prioritisation, and “win-win” cases |
| | Collaborate with governance structures and wider system partners to embed health in shared goals and decision-making |
| | Build trust and strong relationships with senior leaders and stakeholders to influence and reshape priorities |
| Monitoring & Evaluation  | Demonstrate and celebrate impact through shared outcomes, short-term wins, and outcome-focused approaches |
| | Challenges  |
| | Non-health departments are likely to prioritise their sector-specific objectives |
| | Measurement frameworks are often used that do not capture progress made towards long-term health outcomes |
| | Fragmented departmental working within mayoral regional authorities |
| | Enablers  |
| | Utilising health lens analysis and health impact assessments |
| | Utilising HiAP outcomes evaluation |
| | Framing the HiAP approach within a long-term organisation-wide evaluative framework |
| | Using data to illustrate how the wider determinants impact health outcomes and their interconnectedness |
| | Challenges  |
| | The absence of a framework to promote and embed HiAP |
| | The lack of evidence, particularly around cost-effectiveness, regarding the impact of mayoral regional authority levers on population health |
| | Relevant data (where it exists) is sometimes held by other organisations |



Part 2 – Opportunities for action

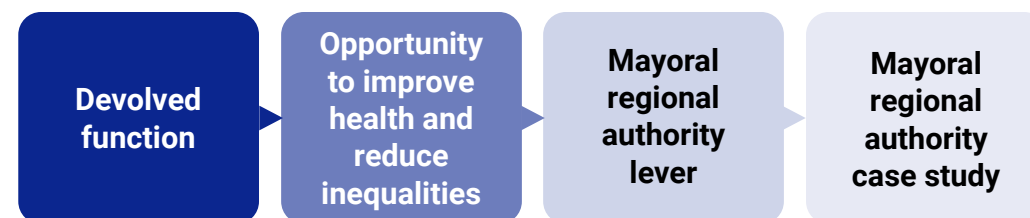
Overview

Mayoral regional authority functions vary across regions and as regional devolution arrangements progress, powers for each region will change. This part of the toolkit illustrates the breadth of possible activities mayoral regional authorities can take to improve health and reduce inequalities. The following eight commonly devolved mayoral regional authority functions are discussed:



How to use this part of the toolkit:

Within this part, each devolved function is broken down into opportunities to improve health and reduce inequalities, the levers available to mayoral regional authorities to capitalise on these opportunities, and related case studies that illustrate how different regions have deployed their levers to impact population health.



Colleagues may find it helpful to use this part of the toolkit to generate ideas and identify opportunities for action.

In addition, an [activity prioritisation self-assessment tool](#) has been developed to support colleagues with prioritising opportunities for action, based on factors such as organizational capacity, population need, and political mandate. This tool has been designed for flexible use in a range of contexts. For example, it might be used within or across teams to support cross-team and cross-organisational collaboration and strengthen transparency and accountability for prioritisation decisions. Outputs from the tool could also be reviewed over time to support ongoing conversations as HiAP activity evolves.



Part 2 – Opportunities for action

Opportunities and mayoral regional authority levers

This section provides an overview of the opportunities for mayoral regional authorities to improve health and reduce inequalities in relation to each of the devolved functions. It also summarises mayoral regional authority levers related to each opportunity (listed as bullet points below each opportunity heading). The full toolkit includes case study examples of approaches that mayoral regional authorities have taken in relation to each lever.

Economy

Good work

- Standards and charters
- Real living wage
- Employer services

Income maximisation

- Prevent/tackle child poverty
- Targeted support for groups

Inclusive growth

- Taking a strategic approach to inclusive growth



Skills, employment, and the AEB

Adult education and skills

- Strategic allocation and evaluation of the AEB
- Enabling regional partnerships and key stakeholders

Individual Placement Support

- Delivering and integrating individual employment pathways



Transport

Local Transport Planning

- Ensuring LTPs include health and inequalities considerations
- Developing accessible and affordable public transport
- Convening regional partners to improve road safety
- Increasing safety on public transport
- Promoting active travel and health lifestyles



Housing

Improving housing conditions

- Regional standards charters/frameworks
- Fuel poverty alleviation initiatives
- Retrofit programmes
- Promoting age-friendly housing

Increasing access to affordable homes

- Utilising strategic approaches to housing and related partnership working
- Tackling and preventing homelessness



Environment and place

Tackling climate change and progressing net zero ambitions

- Climate adaptation
- Air quality initiatives
- Strategic approaches to net zero

Place-making and enhancing access to green space

- Healthy place-making
- Nature recovery and access



Health and social care

Complementing the work of health system partners and addressing the wider determinants of health

- Partnerships, networks, and anchor institutions
- Duties and strategies for health and health inequalities



Arts and culture

Access to arts and cultural opportunities

- Social prescribing
- Creative health movements



Policing, crime, and safety

Crime and safety

- Public health approach to crime and violence reduction





Part 3 – Developing strategy

Overview

This part of the toolkit seeks to support the placement of activities outlined in parts 1 and 2 of the toolkit within a strategic approach to HiAP. It also features three case study examples to show how mayoral regional authorities have used different strategic approaches to progress HiAP in relation to their organisational context and capacity.

How to use this part of the Toolkit:

Clearly stating strategic HiAP goals is a crucial step in developing a monitoring and evaluation framework for HiAP activity (see part 4 of the toolkit for further information on monitoring and evaluation). Recognising that strategic methods and objectives vary across organisations, this part may be used by colleagues to guide them through a range of possible considerations and approaches to developing an effective HiAP strategy. It includes a summary of the following approaches to strategic goal-setting and related case studies:



Approach A:

Building an organisational mandate for HiAP

Case study:

Building collaboration across the system to strengthen HiAP leadership – West Yorkshire



Approach B:

Embedding HiAP as part of organisational culture and ways of working

Case study:

Establishing an organisational model for HiAP – West Midlands



Approach C:

Prioritising opportunities for action

Case study:

Fostering joint working with system partners – West of England



Part 3 – Developing strategy

Approaches and possible activities

This section summarises action areas and possible activities that might accompany each of the approaches to strategic goal-setting listed below; please note that these approaches are not mutually exclusive. The full toolkit also includes case study examples to show how mayoral regional authorities have used each strategic approach.

| Approach | Action Area | Possible Activities |
|--|--|---|
| A: Building an organisational mandate for HiAP | Using the pillars for HiAP to focus on developing an organisational mandate that facilitates understanding and adoption of a HiAP approach | Developing a clear, shared, organisation-wide definition of what HiAP is, how it relates to health inequalities, and what it is aiming to achieve |
| | | Articulating the potential health impact of existing organisational priorities and developing ‘win-win’ cases to clarify the reciprocal benefit between health and these priorities |
| | | Ensuring that the potential health and wider system benefits (e.g. reducing demand on health and social care services, breaking down organisational/sectoral silos, ensuring work is issue/citizen-led, etc.) of HiAP feature in the prioritisation processes |
| B: Embedding HiAP as part of organisational culture and ways of working | Strengthening processes, governance, and distributed leadership for HiAP | Using stakeholder analysis to identify key individuals |
| | | Developing, in collaboration with key stakeholders, reporting mechanisms and governance structures |
| | | Establishing evaluation criteria to capture health-related inputs and outcomes |
| | | Empowering teams across the organisation to deliver HiAP |
| C: Prioritising opportunities for action | Focus on the following considerations, and prioritise related opportunities for action accordingly | Understanding population need |
| | | Gauging political appetite and policy windows that could be capitalized on |
| | | Making the most of mayoral regional authority assets and regional value-add |



Part 4 – Capturing progress

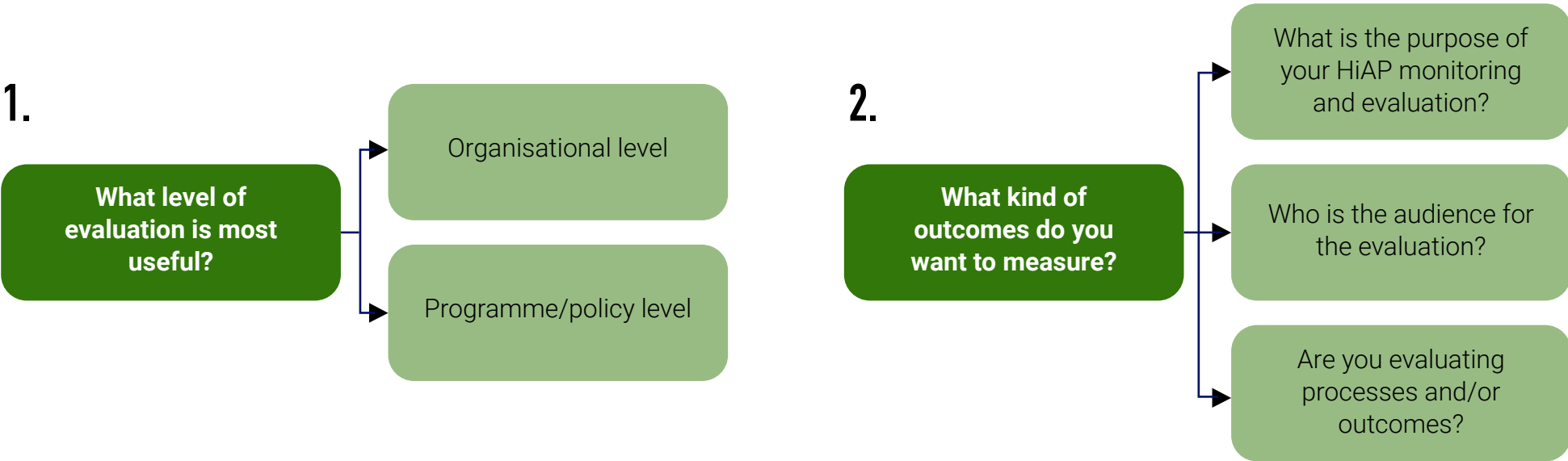
Overview

There are several ways in which the HiAP agenda may be advanced, which will influence the design of monitoring and evaluation processes for HiAP activities. Therefore, this part of the toolkit has been designed as a framework to support mayoral regional authorities to reflect on how the purpose, audience, and level of HiAP activity being progressed can influence the monitoring and evaluation design process.

It also provides examples of how these considerations might be used to develop a Theory of Change (ToC), which can help explain how planned activities will lead to desired outputs, as well as help think through other factors that may affect the success of HiAP initiatives.

How to use this part of the Toolkit:

Colleagues can work through the following series of questions and considerations to help identify the most appropriate evaluation approach, which will help to identify the most appropriate outcomes for their strategic context and regional priorities:





Part 4 – Capturing progress

Theory of change

Once the level and type of HiAP evaluation approach have been agreed, a Theory of Change (ToC) can be developed to form the basis of a monitoring and evaluation framework. A ToC can be a useful tool, as it sets out the connection between inputs, activities, and outputs in relation to outcomes of interest. In this way, it helps to explain the reason for a chosen HiAP approach.

This section summarises the following examples of an organisation-level ToC and a programme/policy-level ToC for work and health:

| Strategic planning | | | The effects | | |
|--|---|---|---|---|---|
| Organisation - level ToC | Inputs Financial and non-financial inputs required, which might include: | Activities Activities might include: | Outputs Measurable indicators of activity implementation, which might include: | Outcomes Measurable effects related to: | Impact Impact might include: |
| | <ul style="list-style-type: none">• Funding• Staff• Resources | <ul style="list-style-type: none">• Establishing crosssectoral board or meetings• Running HiAP training sessions• Changing organisational processes (HEqIAs)• Cross-sectoral data monitoring processes | <ul style="list-style-type: none">• Training sessions run/participants completing training• Boards established• HEqIAs completed | <p>Organisational culture, commitment to HiAP, or ways of working, which might include:</p> <ul style="list-style-type: none">• Increased confidence and skills among staff in non-health directorates in addressing inequalities | <p>Capturing changes in policy design and health outcomes, such as:</p> <ul style="list-style-type: none">• Cross-sectoral strategy developed and adopted |
| Programme/policylevel ToC (work and health) | <ul style="list-style-type: none">• Funding• Staff• Resources | <ul style="list-style-type: none">• Attending meetings within skills/economic fairness directorates• Supporting the development of a regional employment charter• Ensuring the health and wellbeing impact of the AEB is captured | <ul style="list-style-type: none">• Meetings attended• Suggested changes implemented• Development of monitoring and evaluation framework and review process for health outcomes | <ul style="list-style-type: none">• Employment support staff increased confidence in HiAP• Improved health outcomes from AEB budget• Improved workplace wellbeing from employment charter | <p>Improved health related work outcomes, such as:</p> <ul style="list-style-type: none">• Reduced sickness absence• Higher skills programme participation• Fewer people dropping out of employment |

Summary and next steps

The HiAP toolkit for mayoral regional authorities has been designed by the Mayoral Regions Programme (MRP) to support regional, cross-organisational, and cross-sectoral conversations and activities regarding the development and prioritisation of HiAP approaches and activities. The MRP is supported by the Health Foundation, an independent charity committed to bringing about better health and health care for people in the UK.

The toolkit is a live resource that supports continuous improvement in a new and evolving strategic landscape. Taking a test, learn, and grow approach, the MRP is working with mayoral regional authorities to implement the toolkit, learn from its use in practice, and collate that learning to grow an increasingly robust evidence base of what works for mayoral regional authorities and national policy implementation alike. As new powers and duties are introduced in a deepening devolution agenda, HiAP implications will be explored and incorporated into the strategic and operational lenses of the toolkit.

Updates on this work will be provided via the MRP online learning network, which is a platform that has been launched via the **Health Equity Network** to share updates, insights, and publications from the programme, as well as to facilitate ongoing discussions, peer learning and collaboration amongst regional colleagues across key health and inequality-related policy areas. This is a public resource and you and your colleagues are welcome to join by signing up to the Health Equity Network via this link: **Request to join | The Health Equity Network** and then requesting to join the MRP group here: <https://healthequitynetwork.co.uk/topics/46794/feed>.

The full MRP HiAP Toolkit can be accessed via the West Midlands Combined Authority [website](#) or the MRP **Online Learning Network**. If you would like to discuss any of the material in this toolkit further or explore options for additional HiAP support tailored to your region's context, please contact **Dr Claire Humphries, MRP Delivery Manager, Claire.Humphries@wmca.org.uk**.

