



Submission to the Department for  
Infrastructure on

The Planning (Environmental Impact  
Assessment) Regulations (Northern  
Ireland) 2017

EIA Amendment Directive Planning Public  
Consultation.

26 January 2017

The Institute of Public Health in Ireland  
[www.publichealth.ie](http://www.publichealth.ie)

Dublin Office:  
5th Floor Bishops Square  
Redmond's Hill  
Dublin 2, D02 TD99  
Ph: + 353 1 478 6300

Belfast Office:  
Forestview  
Purdy's Lane  
Belfast BT8 7AR  
Ph: + 44 28 9064 8494

## **The Institute of Public Health in Ireland**

The remit of the Institute of Public Health in Ireland (IPH) is to promote cooperation for public health between Northern Ireland and the Republic of Ireland in the areas of research and information, capacity building and policy advice. Our approach is to support Departments of Health and their agencies in both jurisdictions, and maximise the benefits of all-island cooperation to achieve practical benefits for people in Northern Ireland and the Republic of Ireland.

Our interest in this area comes from both the use of impact assessment as a regulatory tool and the potential impacts of planning and development on public health. With regard to the former we have developed a body of work on health impact assessment specifically and on health in other impact assessments including Environmental Impact Assessment (EIA) and Strategic Environmental Assessment (SEA). Our published work can be found at [www.publichealth.ie](http://www.publichealth.ie)

IPH welcomes the opportunity to respond to this consultation. We believe a more holistic approach to health in EIA as supported by the comments below may enhance partnership work with public health colleagues and prevent duplication by reducing the need for separate health impact assessments.

1. Do you agree with proposals to provide for a coordinated rather than joint procedure?

Yes. However it is unclear how such coordination would take place.

2. Do you have any comments in relation to the possible practical issues arising from the proposed approach to co-ordination?

It would be helpful to clarify in the Regulations the process for how coordination will occur. If it is intended that a designated authority will be responsible for coordinating individual assessments, that authority should be named. Alternatively it may be deemed sufficient to include in the Scoping stage, a requirement to state if and how coordination procedures will be addressed.

3. Do you consider that our approach to the transposition of Article 1 and 2 as set out in the draft Regulations appropriately implements the requirements of the Directive?

Yes.

4. Do you consider that our approach to transposition of information to be assessed appropriately implements the requirements of the Directive?

No. While Regulation 5(2) transposes Article 3(1), IPH would welcome greater recognition in the Regulations of the increased requirement to address population and human health and the interaction between the various factors. These changes provide an opportunity to broaden consideration of how population and human health is affected by a wide range of determinants included in the scope of the EIA Directive. A requirement to take into account lifestyles, access to and use of services and social factors in the assessment process would enable broader health consideration beyond environmental

hazards to be included. The solid research basis that exists for taking a broader view of issues such as transport<sup>i</sup>, employment and industry, housing<sup>ii</sup> and greenspace<sup>iii</sup> should be better utilized in the conduct of EIA. Taking this approach would also facilitate identifying various aspects of a project that may have conflicting effects on human health, for example improved air quality but reduced social cohesion or access to services.

We are concerned with the emphasis in the consultation document on *only assessing significant effects* particularly with regard to how significance will be interpreted when assessing social and psychological aspects of health. In addition there is no recognition within the Regulations that sub-groups within the affected population may be subject to different impacts. Enhanced competency requirements could include a duty to incorporate relevant methods used in health impact assessment to help address such limitations.

Closer engagement with public health professionals should be considered from an advisory and training perspective with regard to ensuring adequate attention is given to the broader determinants of health and health inequalities.

5. Are you content that the current timescale of 4 weeks for a screening determination is maintained subject to a maximum extension of 90 days?

No comment.

6. Do you consider that our approach to transposition of screening appropriately implements the requirements of the Directive?

No comment.

7. Do you consider that our approach to transposition of requirements

concerning the content of the Environmental Statement appropriately implements the Directive?

No comment.

8. Do you consider that our approach to transposition of scoping appropriately implements the requirements of the Directive?

No comment.

9. Do you consider that our approach to transposition of assessment quality and expertise appropriately implements the requirements of the Directive?

No comment.

10. Do you consider the new timeframes appropriately implement the requirements of Directive?

No comment.

11. Do you consider that our approach to transposition for decisions appropriately implements the requirements of the Directive?

No comment.

12. Do you consider that our approach to transposition of monitoring appropriately implements the requirements of the Directive?

No comment.

13. Do you consider that our approach to transposition of conflict of interest appropriately implements the requirements of the Directive?

No comment.

14. Do you consider that our approach to transposition of penalties appropriately implements the requirements of the Directive?

No comment.

## Contact details

For further information on this submission, please contact

Teresa Keating  
Public Health Development Officer  
Institute of Public Health in Ireland  
5<sup>th</sup> Floor, Bishop's Square  
Redmond's Hill  
Dublin  
D02 TD99

Tel: +353 1 478 6300

Email: [teresa.keating@publichealth.ie](mailto:teresa.keating@publichealth.ie)

Prof Roger O'Sullivan  
Interim Chief Executive  
Institute of Public Health in Ireland  
Forestview  
Purdy's Lane  
Belfast  
BT8 7AR

Tel: +44 28 9064 8494

Email: [roger.osullivan@publichealth.ie](mailto:roger.osullivan@publichealth.ie)

# References

---

<sup>i</sup> Healthy transport = Healthy lives. London: British Medical Association, 2012.

<sup>ii</sup> Environmental burden of disease associated with inadequate housing. Bonn: WHO Regional Office for Europe, 2011.

<sup>iii</sup> Urban green spaces and health. Copenhagen: WHO Regional Office for Europe, 2016.