I would be interested in participating in a similar project as the Gateway Gold Line health impact assessment in the future.

:

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□ Strongly Agree □ Agree □ Neutral □ Disagree □ Strongly Disagree

Additional feedback about the Gateway Gold Line health impact assessment?

Thank you for participating in the Gateway Gold Line health impact assessment and for completing this form!

Appendix B: Evaluation Form

Gateway Gold Line Bus Rapid Transit Health Impact Assessment Evaluation April 2016

Please complete this evaluation form if you participated in the Gateway Gold Line health impact assessment. The form should take 2 minutes to complete.

Please answer the following:

- 1. I am a participant in the following Gateway Gold Line health impact assessment committee:
 - Gateway Gold Line Policy Advisory Committee
 - Gateway Gold Line Technical Advisory Committee
 - Living Healthy in Washington County
 - St. Paul—Ramsey County Community Health Services Advisory Committee
- 2. Because of the Gateway Gold Line health impact assessment, I have increased knowledge of how health, transportation, and land use are related.

□ Strongly Agree □ Agree □ Neutral □ Disagree □ Strongly Disagree

3. Because of the Gateway Gold Line health impact assessment, I have a better understanding of how cities can use planning processes to support health.

□ Strongly Agree □ Agree □ Neutral □ Disagree □ Strongly Disagree

4. The Gateway Gold Line health impact assessment <u>process</u> was responsive to my interests and concerns.

□ Strongly Agree □ Agree □ Neutral □ Disagree □ Strongly Disagree

5. The information presented as part of the Gateway Gold Line health impact assessment has been useful for me, my organization, or both.

□ Strongly Agree □ Agree □ Neutral □ Disagree □ Strongly Disagree

(over)

Appendix A: Minimum Elements

Comprehensive Health Impact Assessments (HIA) should include the following minimum elements, which together distinguish HIA from other processes used to assess and inform decisions:

1. HIA is conducted to assess the potential health consequences of a proposed program, policy, project, or plan under consideration by decision-makers, and is conducted in advance of the decision in question.

2. HIA involves and engages stakeholders affected by the proposal, particularly vulnerable populations.

3. HIA systematically considers the full range of potential impacts of the proposal on health determinants, health status, and health equity.

4. HIA provides a profile of existing conditions for the populations affected by the proposal, including their health outcomes, health determinants, and vulnerable sub-groups within the population, relevant to the health issues examined in the HIA.

5. HIA characterizes the proposal's impacts on health, health determinants, and health equity, while documenting data sources and analytic methods, quality of evidence used, methodological assumptions, and limitations.

6. HIA provides recommendations, as needed, on feasible and effective actions to promote the positive health impacts and mitigate the negative health impacts of the decision, identifying, where appropriate, alternatives or modifications to the proposal.

7. HIA produces a publicly accessible report that includes, at minimum, documentation of the HIA's purpose, findings, and recommendations, and either documentation of the processes and methods involved, or reference to an external source of documentation for these processes and methods. The report should be shared with decision-makers and other stakeholders.

8. HIA proposes indicators, actions, and responsible parties, where indicated, for a plan to monitor the implementation of recommendations, as well as health effects and outcomes of the proposal.

Responses were generally positive with more respondents selecting "strongly agree" or "agree" for each question. The least positive response was to the statement "The Gateway Gold Line health impact assessment process was responsive to my interests and concerns." Unfortunately no one who marked "neutral" or "disagree" submitted a comment to provide additional insight. Project team members thought the responses could be attributed to a couple of themes that came up through the HIA process. First, the connection between health, transportation, and land use decisions was not easily understood by all participants. Some comments made during the project were outside of the project scope —such as the need for childcare access and police surveillance—were unlikely to be influenced by land use decisions. When these items were not included, it could have appeared the project team was unresponsive to stakeholder comments. Second, some participants were not in favor of the overall Gold Line BRT project itself. Many of these concerns were instead captured as part of the DEIS underway to identify the environmentally preferred alternative.

Opportunities for Improvement

- **Discuss project team expectations** related to time commitment from each staff person and to establish how to streamline comments at the beginning of a project.
- **Contribute more resources to stakeholder engagement** to ensure adequate time is available for participants to understand the project and to incorporate all perspectives.
- Understand data limitations as early as possible to guide scoping and assessment. This includes reviewing available data and understanding what geographic units data is available (e.g., county, city, census block, etc.).
- Hire a writing professional to translate technical information for general audiences.

- **Resource limitations:** Staff had limited resources available at different stages of the project. Managing stakeholder engagement and expectations required more time than anticipated. The project team required a six-month extension to ensure the continued participation on the part of community partners. Also, the final deliverables for the project—a project summary and a technical report—required substantial staff time to incorporate the diversity and volume of comments received.
- Training needs: The project team did not understand data limitations until the project was underway. This slowed the analysis process, as the project team had to reevaluate how to complete research with the data available. Understanding data limitations beforehand could have helped the team better frame the analysis and discuss project scope with stakeholders. In addition, the technical assistance provided by Oregon Public Health Institute (OPHI) was a valuable resource. OPHI staff helped facilitate the half-day workshop in March 2015. Both the workshop and ongoing support helped the project team understand best practices and how to implement each of the six steps in the HIA process. However, as the project neared completion, the project team was unsure how to consistently engage OPHI staff.

Stakeholder Evaluation

Stakeholders were invited to complete a brief evaluation form for the Gold Line BRT HIA. A copy of the form is available in Appendix B. An online form was emailed to participants of the half day scoping workshop and the Technical Advisory Committee and was distributed in person to the Living Healthy in Washington County and Saint Paul—Ramsey County Community Health Services Advisory Committee. The project team received 16 responses total as summarized in Table 1. Responses for "strongly agree" were combined with "agree." No responses were marked as "strongly disagree."

Table 1: Summary of Evaluation Form Results			
	Agree	Neutral	Disagree
Because of the Gateway Gold Line health impact assessment, I have increased knowledge of how health, transportation, and land use are related.	14	2	0
Because of the Gateway Gold Line health impact assessment, I have a better understanding of how cities can use planning processes to support health.	15	1	0
The Gateway Gold Line health impact assessment <u>process</u> was responsive to my interests and concerns.	11	4	1
The information presented as part of the Gateway Gold Line health impact assessment has been useful for me, my organization, or both.	14	2	0
I would be interested in participating in a similar project as the Gateway Gold Line health impact assessment in the future.	13	2	1

Goal 1 will be assessed in early 2019 after cities have submitted their comprehensive plans to the Metropolitan Council. The project team will likely collaborate with Washington County Public Health and Environment staff to measure impact of Goal 1 through related work on incorporating health in comprehensive plans. With the exception of Goal 1, the project team succeeded in meeting each evaluation goal. The project team felt Goal 2 was met throughout the HIA process. Goal 3 is explored in more detail as part of the stakeholder evaluation section. Goals 4 and 5 will be met with the publication of the final report.

Project Team Self-Assessment

This self-assessment was completed by project team members. The challenges experienced by the project team were changes in the overall project, capacity, managing stakeholder expectations, resource limitations, and training needs.

- Changes in the overall Gateway Gold Line BRT project: Federal environmental law
 requires projects using federal dollars, like Gold Line BRT, to complete an environmental
 assessment. The Gold Line BRT Draft Environmental Impact Statement (DEIS) is currently
 underway, and will disclose the impacts and benefits of the various alternatives under
 consideration. As part of identifying the environmentally preferred alternative through
 the DEIS, the route at the eastern end of the line changed during the HIA process. This
 resulted in not only a shift in scope for the HIA but a change to the overall project. The
 HIA project team responded to the change in the overall project by setting
 recommendations with a corridor-wide focus. Information specific to each city was
 included to highlight gaps and opportunities when appropriate.
- Capacity: No one on the project team had previously completed an HIA with robust stakeholder engagement, though one member of the consultant team did have experience with desktop HIAs. With help from a technical assistance provider and a consultant, the project team was able to build relationships with community groups and other departments and an understanding of how to use HIA to inform land use decisions. The team is now better prepared to collaborate with stakeholders on future projects, not just HIAs.
- Managing staff expectations: Conducting a cross-department and cross-county project was new for many members of the project team. There were many stakeholders involved and each came with expectations on what would be accomplished. At times, some perspectives contradicted others and the project team had to determine the best course of action. By the end of the project, the team better managed expectations by having one person for each organization act as a spokesperson, which reduced the time required to incorporate comments into each work product.

Gateway Gold Line Bus Rapid Transit Process Evaluation

Introduction

Evaluation helps to highlight project successes, lessons learned, and opportunities for improvement. Evaluation improves quality of the HIA process and builds the field. This evaluation for the Gateway Gold Line Bus Rapid Transit (Gold Line BRT) health impact assessment (HIA) focuses on the project process. The project team determined if they met their evaluation goals and completed a selfassessment and stakeholder evaluation. Washington County will complete an impact evaluation in early 2019 after cities have submitted their comprehensive plans to the Metropolitan Council—the metropolitan planning organization for the Twin Cities.

Evaluation

Evaluation Goals

The Gold Line BRT project team drafted the following evaluation goals as part of a draft monitoring and evaluation plan.

- 1. Document how the HIA impacted the comprehensive plans and policies of the cities along the corridor;
- 2. Determine the extent to which we met our stakeholder engagement goals;
 - a. Educate stakeholders, community members, and decision makers about the connections between transportation, health, and health equity.
 - b. Incorporate stakeholder feedback to reflect the interests and priorities of the impacted communities and ensure accuracy and value of the HIA.
 - c. Make recommendations reflecting the stakeholder priorities to support greater equity and optimal community health outcomes.
 - d. Build and strengthen partnerships and support shared decision-making processes between organizations and government agencies.
 - e. Create buy-in from decision makers so HIA recommendations have a high likelihood of implementation.
- 3. Assess if we accomplished educating the community and cities on the connections between transportation, land use, and health;
- Determine if we met the minimum elements¹ that differentiate HIA from other processes to ensure the inclusion on health in public policy (see Appendix A);
- 5. Add to the literature on land use and transportation HIAs.

¹ Bhatia R, Farhang L, Heller J, Lee M, Orenstein M, Richardson M and Wernham A. Minimum Elements and Practice Standards for Health Impact Assessment, Version 3. September, 2014.