

Building Back Fairer, Stronger, Together.

**Tameside Joint Health & Wellbeing
Strategy and Locality Plan
2023-2028**



1. Foreword

This Joint Health & Wellbeing Strategy and Locality Plan for Tameside sets out the ambitions for improving the health of Tameside residents and reducing the inequalities many communities in Tameside experience. It also explains how these ambitions will be achieved by making commitments across the life course, including a focus on mental health & wellbeing and then building back fairer, stronger and together to achieve these.

The Health & Wellbeing Board has the responsibility for building a strong and effective partnership for Tameside, including the local authority, NHS and the voluntary, community, faith and social enterprise (VCFSE) sector, to improve how services are delivered. The Health & Wellbeing Strategy is a summary of the priorities set by the Health & Wellbeing Board to improve the health & wellbeing of Tameside residents and address health inequalities.

The Locality Plan for Tameside provides the vision for health and care services across the borough, aligned to the priorities in the Greater Manchester Integrated Care Partnership Strategy and Joint Forward Plan.

As the priorities and visions are integrated within Tameside, the Joint Health & Wellbeing Strategy and Locality Plan have been produced as one combined document. This plan outlines the ambitions and actions that can be taken to improve services and Tameside as a place, to have a positive impact on mental and physical health outcomes.





These ambitions and actions particularly relate to the health and care system, but also rely on the range of system-wide strategies already in place in Tameside to improve the wider determinants of health, which is a core focus of the Health & Wellbeing Board.

This combined strategy does not duplicate existing work already contained in the strategies in place across several work areas in Tameside (e.g. Poverty / Housing / Inclusive Growth) but it seeks to make the case for a system-wide, preventative approach to meet our vision to improve the health of everyone in Tameside, especially given some of the health challenges across Tameside communities and the impact of the current challenging financial climate. There will be a particular focus on those who face the greatest inequalities and ensuring that mental health and wellbeing are supported as well as physical health. This includes actions which will strengthen our offer in Tameside, such as ongoing, sustained commitment to delivering a vibrant and successful VCFSE sector.

This plan reflects the voices of Tameside residents and what is important to them; however it also demonstrates how the local health and care system will deliver the commitments in the GM Integrated Care Partnership Strategy: Improving health and care in Greater Manchester 2023-2028 and the Greater Manchester Strategy 2021-2031.

The health of the population in Tameside has improved in recent years, however inequalities persist across the borough and more must be done to tackle these.

Cllr Eleanor Wills

Executive Member for Population Health & Wellbeing



2. Context: This is Tameside

There are a range of challenges in Tameside relating to mental and physical health outcomes, with some neighbourhoods among the most deprived in England.

The borough is ranked 5th lowest out of 10 in Greater Manchester for male life expectancy and healthy life expectancy, and 9th lowest out of 10 for female life expectancy and healthy life expectancy. There are also significant disparities in life expectancy within Tameside, with a difference of 9.6 years for men and 9.2 years for women in the most deprived wards compared to the least.

Figure 1 on the next page describes the features of the population in Tameside.



STATE OF THE BOROUGH – 2021 CENSUS

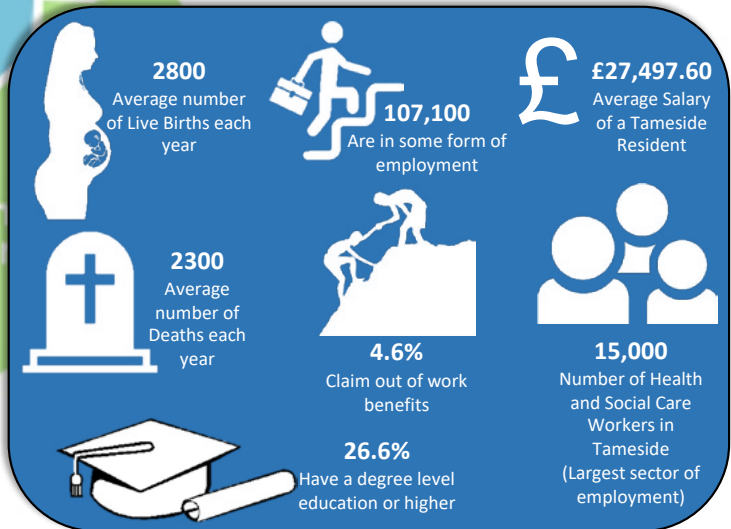
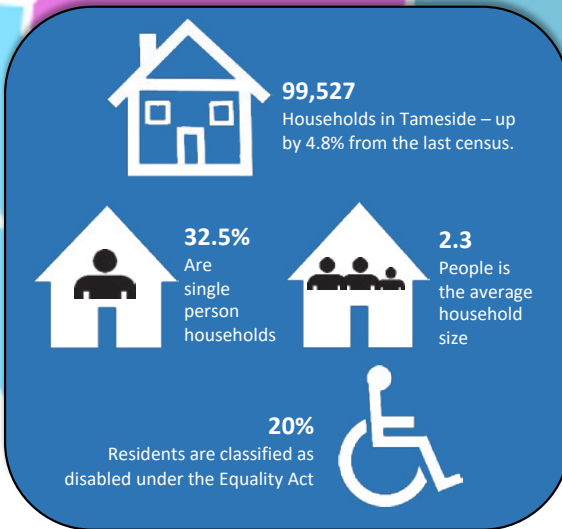
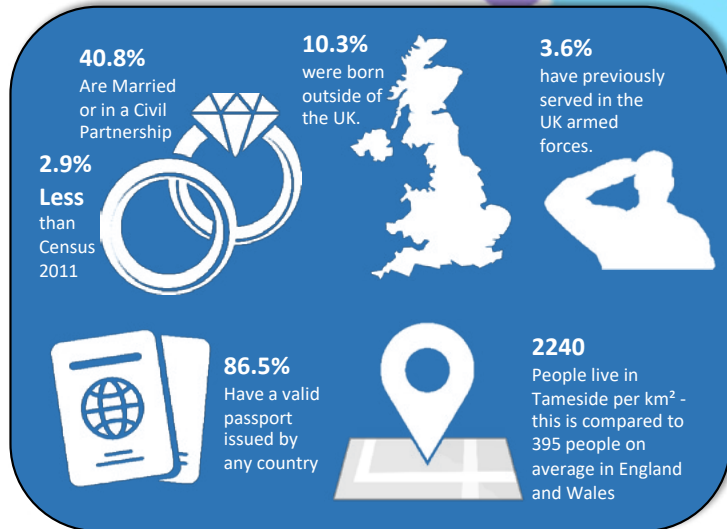
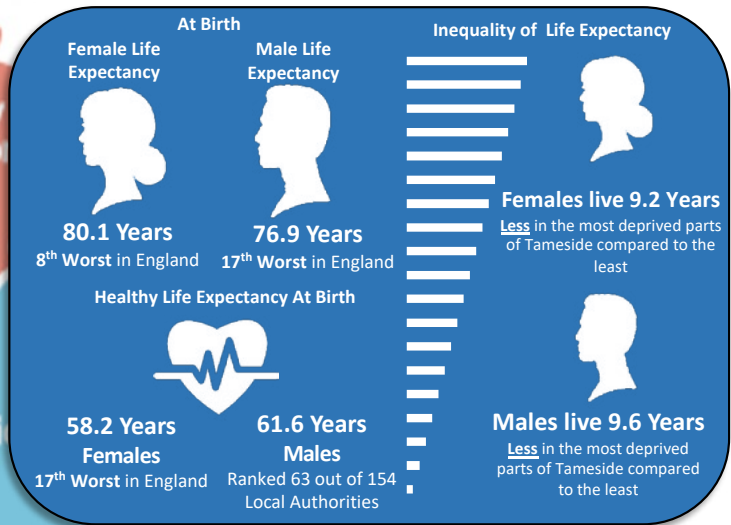
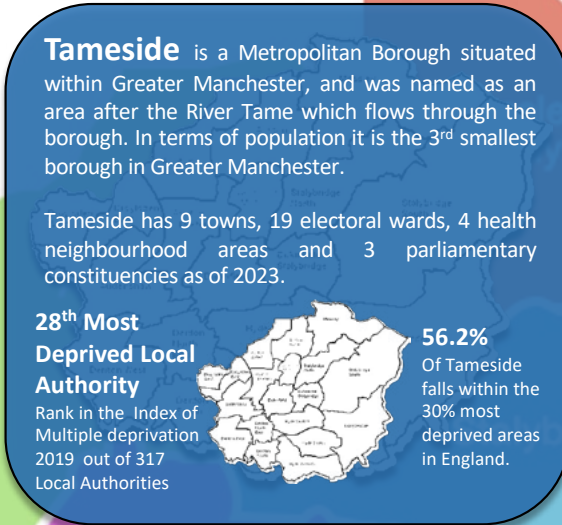
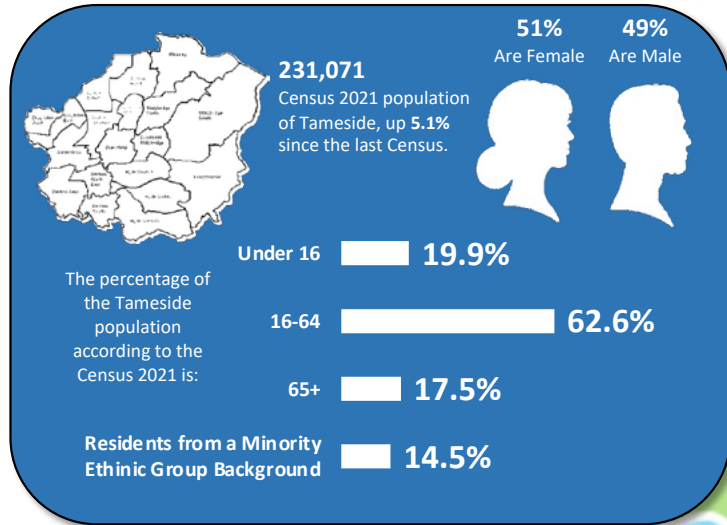
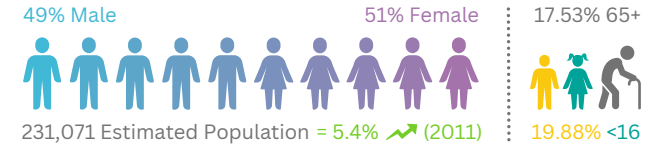


Figure 1: State of the Borough - Key Statistics for Tameside from the 2021 Census

Author: Michelle Foxcroft, Public Health Intelligence Manager, TMBC – June 2023

Tameside in Context 2023

Later in this strategy, six areas of focus are outlined with clear ambitions for the improvements and actions needed in Tameside to address the challenges residents face. Figure 2 below explains some of the challenges seen in each of these six areas which explain why further work is needed.



Help people stay well across the life course and detect illness earlier



Third highest rate of alcohol related cancers in country
Early preventable deaths are almost 50% higher in Tameside compared to the national average.



Give Tameside Children the best start in life

39.2% of children in year 6 classified as overweight / obese

8.4% of children aged 5-17 in Tameside have a diagnosed mental health disorder

Highest admission rate for under 19s for asthma in the country

Deliver Healthier places with accessible and inclusive services

43% of people live in areas in 20% most deprived nationally

Take-away Density - 143 take-aways per 100,000 population - highest in GM, 17th Nationally

Air Pollution - Tameside has the 2nd highest level of fine particulate matter in GM (indicator of poorer air quality)

Help people get into, and stay in good work



28.5% of jobs in Tameside paying below the living wage (2021) the highest rate in GM, equating to approx. 13,000 jobs

9% of the working population working in health and social care
2% had sickness absence from work in last week

Strengthen our Communities



In every 1000 people in TAMESIDE:

- 20 have being supported by social prescribing in the last 12 months
- 180 people are living in poverty
- 140 are experiencing fuel poverty
- 90 people have been a victim of crime
- 19 are living in temporary accommodation
- 37 have been a victim of domestic abuse
- 49 have been a victim of violent crime

Enable all Tameside residents to grow old with dignity and independence



13.1% aged 66 yrs or older lives alone
1,989 per 100,000 aged 66 yrs or over have been injured in a fall
83.3% of care homes in Tameside are rated as good or outstanding by CQC

Tameside population aged 65 yrs. plus has seen a 18.4% increase since 2011



Figure 2: Tameside in Context 2023

Tameside in Context 2023

The voice of residents

Combined with the data on the current state of health & wellbeing in Tameside, insight from conversations with the community also informs this strategy. Engagement activity carried out in 2022 and more recently in 2023 highlighted some of the cross-cutting themes below:

- Most residents are satisfied with Tameside as a place to live.
- Poverty is seen as an issue for residents and appears to be getting worse. Residents are concerned about the cost of living, their own debts, finding employment, and the impact of cost of living on their children. To address poverty, residents think that pathways to services should be expanded, financial support should be expanded, and more action should be taken on food poverty.
- Many residents find it difficult to find employment due to a lack of opportunities and available roles not matching their skillsets.
- A large majority of residents are concerned about climate change.
- People want to have more involvement in walking and cycling to make sure infrastructure works for everyone (particularly young people and people living with disabilities).
- Residents feel that an accessible leisure offer is an important asset within the borough.
- Residents want to see improved access to mental health support, particularly drop-in and walk-in provision for early intervention.
- Residents have the view that national and local funding for the services and improvements required is a challenge – including available funding for local charities.



3. The Existing Health and Care Landscape in Tameside

The health and care system in Tameside has been on an integration journey for several years. Figure 3 below shows the key milestones over the last seven years.

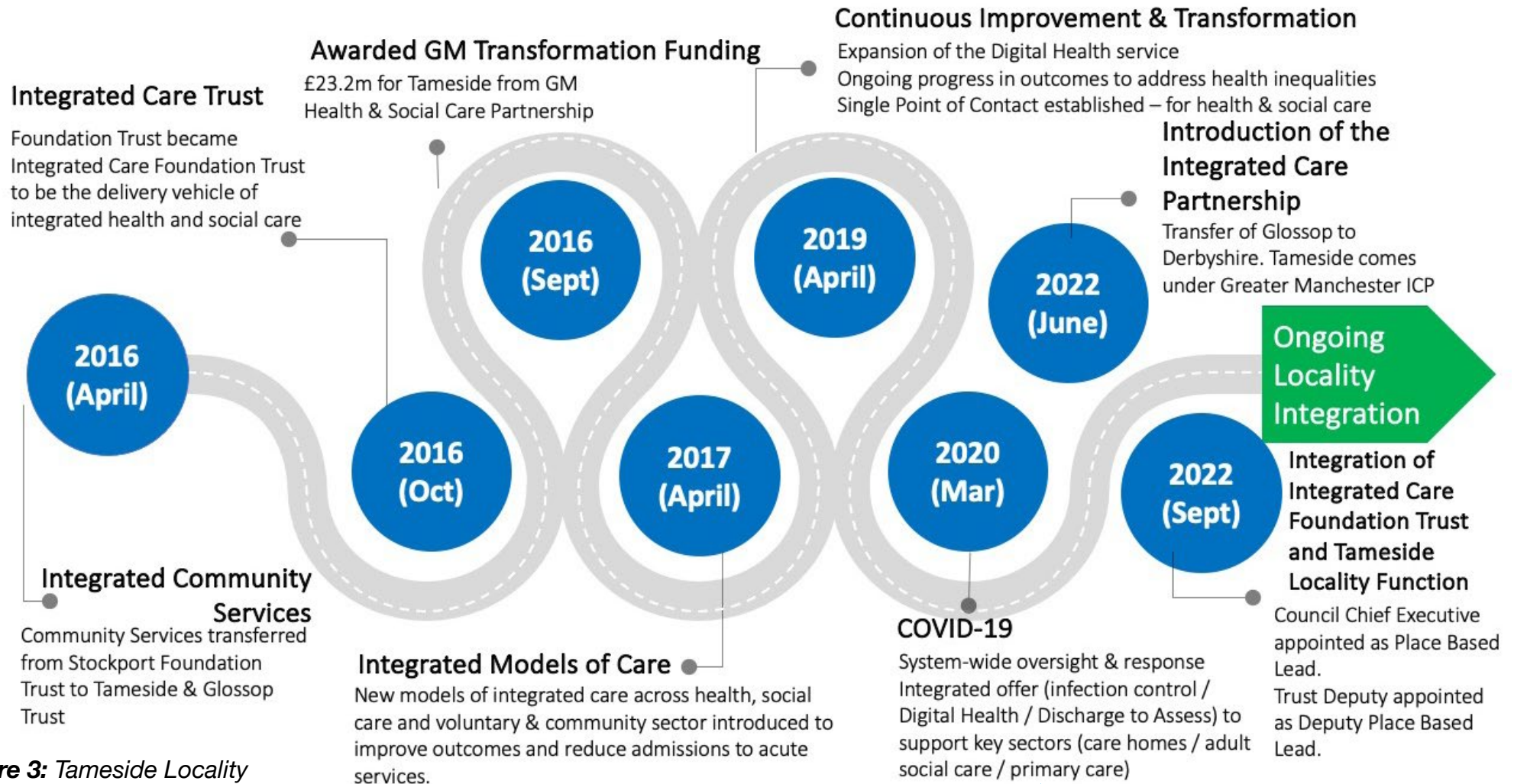


Figure 3: Tameside Locality Integration Journey





This integration journey has strengthened an effective system, working to make the best of local opportunities to address the challenges that face the people of Tameside. While Tameside has made progress on this integration journey, further work is required to embed these approaches and place more priority on prevention to benefit all Tameside residents and tackle inequalities.

A key contributor to this landscape is also the wider Voluntary, Community, Faith and Social Enterprise (VCFSE) sector. This sector is made up of over 37,000 volunteers and 1,200 organisations in Tameside, with over two thirds of them being micro-organisations with an annual income of less than £10k. The whole VCFSE sector makes a significant contribution across the wider system and local economy and is a key strategic partner.

Tameside State of the Sector 2021

#VCSEinGM2021



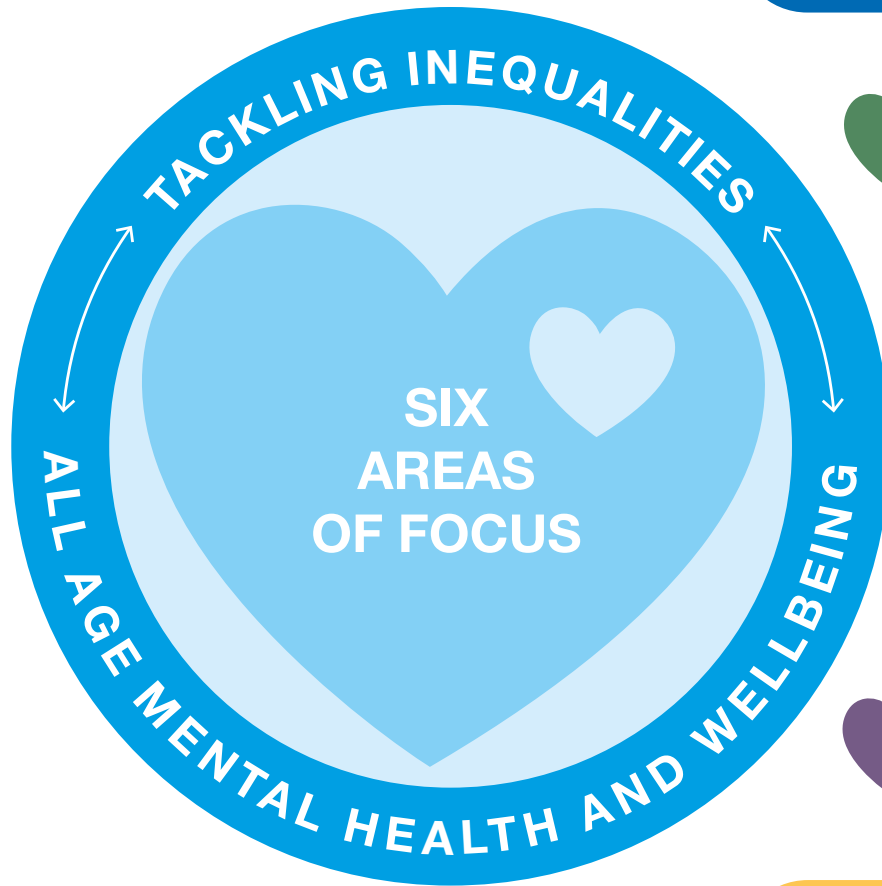
4. Vision


That people in Tameside all have the opportunity to have a healthier and happier life, no matter where they live or who they are. This should include people being able to get the help and support they need without facing barriers, to make Tameside a great place for everyone.


In response to the challenges residents face in Tameside, six areas of focus are set out on the next page, which will be achieved in Tameside by Building Back Stronger, Fairer and Together. These align to the six 'missions' which the GM Integrated Care Partnership Strategy has committed to, however there are some differences to capture the specific priorities for residents in Tameside and emphasise the preventative approaches needed for longer term change and improvements in health and wellbeing.





SIX AREAS OF FOCUS



Give Tameside children the best start in life | 

Help people stay well across the life course and detect illness earlier | 

Enable all Tameside residents to grow old with dignity and independence | 

Help people get into, and stay in good work | 

Strengthen our communities | 

Deliver healthy places with accessible and inclusive services | 



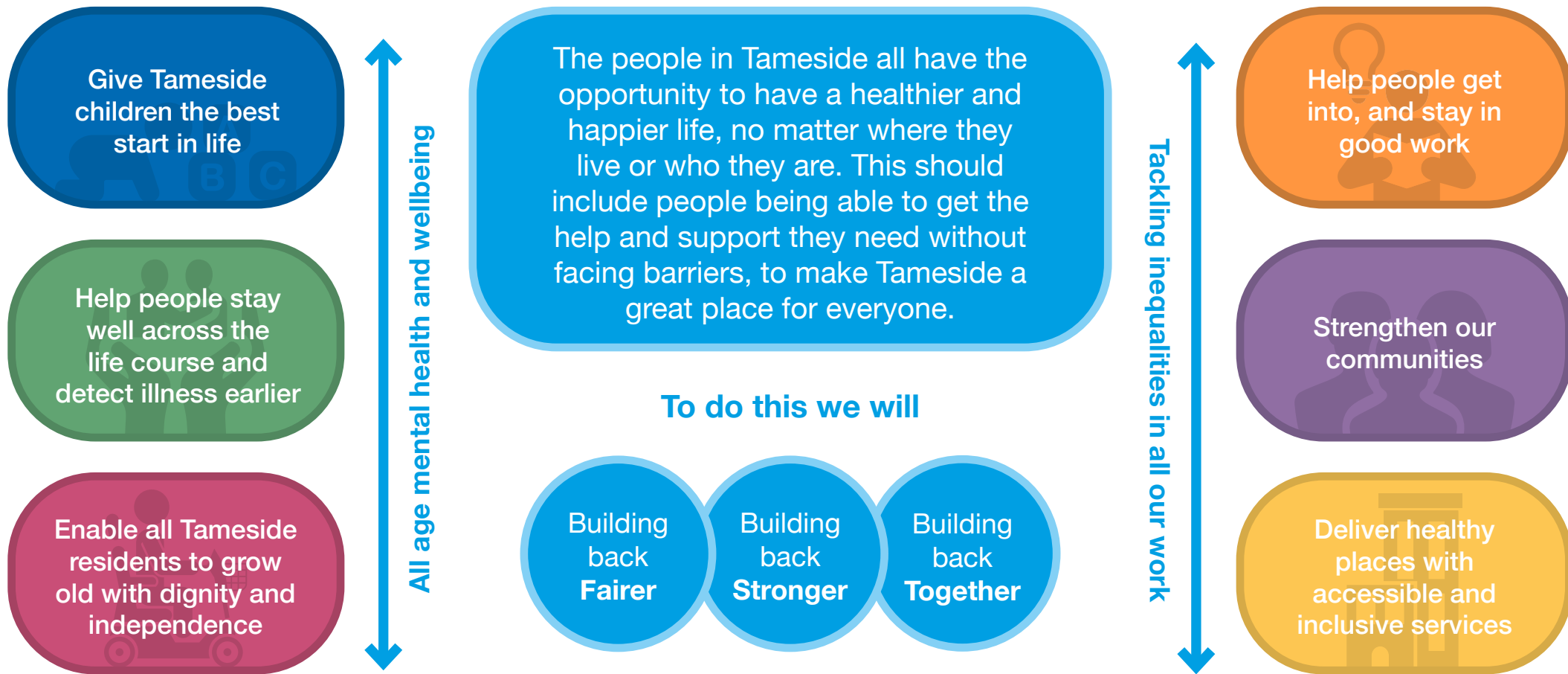
For the health and care system, it is important to integrate services around people and their needs. This will involve continuing to develop the system of co-located professionals from all public services working together as one integrated public service across the locality and within neighbourhoods. It is also crucial that support in these neighbourhoods in Tameside prioritises the cross-cutting themes of all-age mental health & wellbeing, and tackling inequalities.

While this vision has been agreed for Tameside, this also aligns to the shared vision from both the Greater Manchester GM Integrated Care Partnership Strategy and Greater Manchester Strategy: *We want Greater Manchester to be a place where everyone can live a good life, growing up, getting on and growing old in a greener, fairer more prosperous city region.*



5. Plan on a Page

Building back Fairer, Stronger, Together



6. Tameside's Health & Wellbeing Board

Improving Long-Term Health

The Tameside Health & Wellbeing Board is responsible for bringing together political, clinical, professional and community leaders in the borough to improve the health and wellbeing of people in Tameside and tackle inequalities. The Board already acts as a standing commission on tackling health inequalities and has a clear vision, priorities and actions which have been agreed to ensure that improvements are made over the longer term to improve the future for people in Tameside. These are summarised in the Health & Wellbeing Board Charter found in Appendix 1.

The Covid-19 Marmot Review carried out in Greater Manchester in 2021 'Build Back Fairer' sets out the role that inequalities play in health outcomes and presents a range of evidence of the damage caused to health & wellbeing as a result of social, environmental and economic inequality in communities, which was exacerbated by the Covid-19 pandemic.

Preventing disease and health problems before they occur is the most effective way to improve people's health. This approach, or **Primary Prevention**, involves taking action on the root causes of disease and poor health.

Using these principles, Tameside's Health & Wellbeing Board has carried out work to identify a small number of key priorities which focus on improving the wider determinants of health as a preventative route to improving the health of everyone in Tameside, particularly addressing inequalities for those who face more challenges and barriers in their day-to-day lives. These priorities are aligned to the six areas of focus in this strategy.





The Health & Wellbeing Board priorities link to programmes already taking place across Tameside and which sit in a range of system strategies, referenced throughout this plan but also listed below. These strategies include many of the detailed actions which are being put in place to drive improvements to the wider determinants of health including, but not limited to, enabling inclusive economic growth in the borough; delivering increased supply and high quality housing to meet demand; creating safe, positive environments for children and young people; and mitigating the environmental impact of our day to day activities. Some of the wider local, Greater Manchester and national strategies driving key areas of work are also listed below.

- Tameside Corporate Plan
- Tameside PACT
- Children & Young People's Plan
- Smarter Stronger Sooner Safer: Early Help Strategy
- Special Educational Needs and Disabilities (SEND) Strategy
- Grow With Me: Tameside Parenting Strategy
- Building Resilience: Tackling Poverty Strategy and Poverty Charter
- Inclusive Growth Strategy
- Housing Strategy
- Community Safety Strategy
- Domestic Abuse Strategy
- Suicide Prevention Strategy
- Climate Change & Environment Strategy
- NHS People Plan
- GM Our People Plan
- NHS Long Term Plan
- GM Integrated Care Partnership Strategy (and Joint Forward Plan)
- Fairer Health For All (Greater Manchester Integrated Care Partnership)
- People at the Heart of Care: adult social care reform white paper
- Women's Health Strategy for England
- GM Mental Health and Wellbeing Strategy
- Major Conditions Strategy

7. Making Tameside a Great Place

Areas of Focus

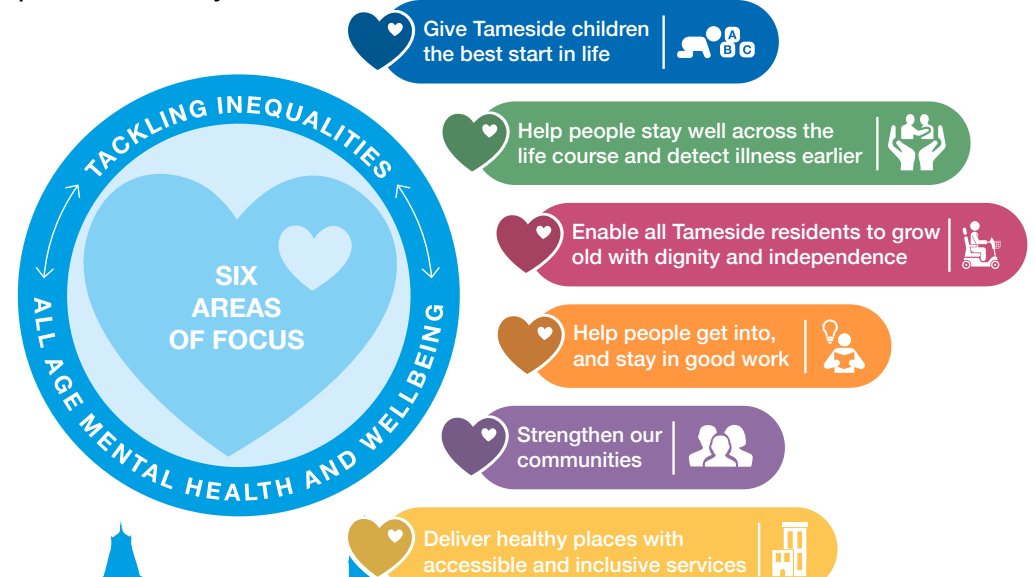
The greatest impacts on health and wellbeing come from upstream, preventative approaches. This includes the wider determinants of health such as the job someone has and the place they live, as well as their circumstances early in life.

Alongside this, it is important that everyone can access the help and support they need, at the time they need it, throughout their lives. The GM Integrated Care Partnership (ICP) Strategy includes six missions to achieve across the integrated care partnership to respond to the current challenges. These are:

- Strengthen our communities
- Help people get into – and stay in – good work
- Recover core NHS and care services
- Help people stay well and detect illness earlier
- Support our workforce and our carers
- Achieve financial sustainability

These missions apply to the health and care system in Tameside and the ICP Joint Forward Plan describes the actions that will be taken to meet each of these missions, however to reflect the wider priorities set by the Health & Wellbeing Board, as well as the local challenges and priorities in Tameside, these missions have been re-framed into the following areas of focus for Tameside. Across each of these areas of focus there are links to other programmes of work happening in wider strategies as they all contribute to improvements in health & wellbeing.

Each of the areas of focus in Tameside aim to achieve specific objectives to meet the vision of Tameside being a great place for everyone.





Give Tameside children
the best start in life



There is a clear vision for children and young people in Tameside as part of the Children & Young People's Plan, that every child and young person in Tameside has the best start in life, to grow, thrive and be prepared for a successful adult life. The key priorities for children and young people in Tameside are: Supported Families; Healthy Lives; Positive Lives; and Building Skills for Life.

The Starting Well Partnership is committed to delivering on the vision set out in the Children & Young People's Plan to enable Tameside to be a great place for all families and children & young people. This is also supported by the Tameside Parenting Strategy; Special Educational Needs and Disabilities (SEND) Strategy and the Early Help Strategy. There is a Starting Well Partnership for Tameside as well as a Children's Improvement Plan to ensure this is delivered on.

This plan commits to achieving the following objectives to support health & wellbeing and give Tameside children the best start in life:

Great place to be born

- Excellent integrated maternity, health visiting and children's services to support ante and postnatal care to ensure parents, babies and families are supported in the ways they need. This should include a more preventative community offer for 0-19 services for children & young people.
- A focus on reducing smoking in pregnancy and alcohol exposed pregnancies, ensuring babies are born at a healthy weight, as well as support with infant feeding.
- Providing excellent contraceptive advice and choice and for as many births as possible to be planned, with a lower under 18 conception rate.



Great place to learn

- Support the health and emotional wellbeing of all children to ensure they lead positive lives, which are free from abuse, including reducing exposure to and impact of health harms of tobacco & vaping, drugs & alcohol, risky sexual behaviour, unhealthy food and sedentary lives – including the role of education in teaching and learning on these topics. This should include particular targeted support for cared for children.
- Remove barriers for children and young people living with special educational needs and disabilities and those experiencing mental health issues to grow, thrive and be prepared for adult life.
- Promote good attendance in all schools for all pupils. Health & Wellbeing Board and Strategic Partnership Board members will identify and address the barriers and inequalities faced by many children and families in having good school attendance including service access issues, ensuring the development of trauma informed responses and wider challenges such as housing and transport barriers.
- Developing our School Nursing model with evidence based, effective universal reach, personalised response and specialist support with safeguarding children.

Great place to raise a family

- Establish neighbourhood presence for core universal services through the Family Hubs model as well as other services to support health (GP surgeries, community pharmacy) – ensuring these facilitate access to specialist services including drug & alcohol, domestic abuse, sexual health, Child and Adolescent Mental Health Services (CAMHS).
- Ensure families are able to access support and health services in the right place at the right time for them, to reduce inequalities and the numbers of children and young people requiring more acute support, particularly for issues including mental health issues, autism, learning disabilities, asthma and injuries.





Help people stay well across the life course and detect illness earlier



Everyone in Tameside should be given the opportunity to be healthy, prosper and access support at the earliest opportunity, without facing barriers. There will be an ongoing focus on the overarching outcomes of physical and mental health & wellbeing including life expectancy and healthy life expectancy, and tackling inequalities in these outcomes.

Many of the priority outcomes around people staying well across the life-course are part of the Tameside Corporate Plan and key priorities around mental health and wellbeing are addressed in the Greater Manchester Mental Health and Wellbeing Strategy 2023-2028 Doing Mental Health Differently.

This plan commits to achieving the following objectives to support health & wellbeing enabling people to stay well:

Great place to live healthily

- A relentless focus on the opportunities for **Secondary Prevention** - transform the approach to tackling the key risk factors for preventable deaths in Tameside including atrial fibrillation, hypertension and high cholesterol, adapting approaches to delivering diagnosis, treatment and management of these issues, to remove barriers for those who experience inequalities (with innovative approaches to manage conditions including medical management; as well as behaviour change around diet and physical activity).
- Take an all-age approach in key areas to support people at an earlier stage including trauma-informed approaches in front line practice when working with children and adults; prioritising investment in Early Help offers for children and adults.
- Develop and implement a multi-agency all-age mental health & wellbeing strategy for Tameside which aligns to the Greater Manchester 'Doing Mental Health Differently' Strategy.

Help people stay well across the life course and detect illness earlier



- Take an all-age approach to improving oral health, with a focus on the most deprived communities; and influencing the GM Integrated Care Partnership to seek improvements to dental healthcare access in Tameside.
- Continue work to make smoking history and tackle the harms caused by tobacco addiction. Particularly focussing on smoking cessation support for residents and targeting support for those most affected.
- Develop and implement a strategy for tackling drug & alcohol harms in Tameside.





Enable all Tameside residents to grow old with dignity and independence



In Tameside there is an ambition to enable everyone to thrive in later life. This aligns to the GM Age Friendly Strategy.

This plan commits to achieving the following objectives to support health & wellbeing enabling people to grow old with dignity and independence:

Great place to grow old with independence

- Deliver excellent primary, secondary and social care services to support people in Tameside living with complex, long-term health problems, reducing unwarranted variation both within the borough (primary care) and compared to similar areas. This approach, or **Tertiary Prevention**, ensures the best quality of life and life expectancy possible for everyone.
- Develop a refreshed Age Friendly Strategy for Tameside which captures a range of priorities including wellbeing; infrastructure & built environment; social participation & inclusion; employment & skills; and community support & health services.

- Improve understanding of and put actions in place to tackle inequalities facing older people, particularly considering women's health; older ethnic minority communities; and the adaptation of health & care delivery to improve access for carers, disabilities and different cultures.
- Ensure a holistic approach to palliative care and end of life care, including increasing the proportion of deaths that occur in the place someone chooses, with the appropriate support in place.





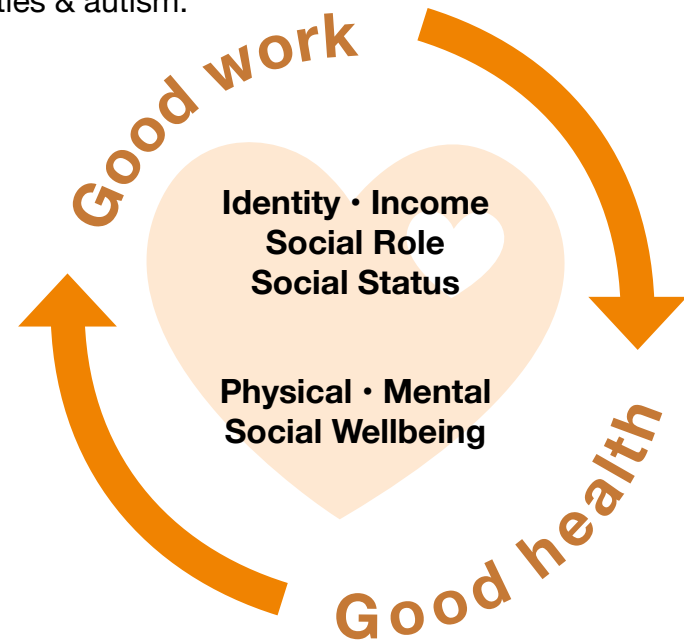
The importance of the mutual relationship between good work and good health is clearly recognised in Tameside. Having a healthy workforce as well as opportunities for good, inclusive jobs are a clear ambition which is set out in the Inclusive Growth Strategy.

This plan commits to achieving the following objectives to support health & wellbeing to help people get into, and stay in good work:

Great place to work

- Through the Health & Wellbeing Board and Inclusive Growth Board for Tameside, deliver improvements on the following:
 - Increase access to relevant and diverse skills development for residents, especially young people, including planning for future skills needs.
 - Increase the number of roles offered across the borough which have a focus on inclusive job design (with flexibility and support for certain groups such as carers and those living with a physical or learning disability).

- Increase the number of roles across the borough which pay above the real living wage.
- Deliver a Work & Skills needs assessment during 2024.
- Committing sustainable resources to support programmes to help people in Tameside stay in good work with a particular focus on young people not in education, employment or training (NEET); people living in poverty; and people living with physical or learning disabilities & autism.





Supporting all communities across Tameside to have opportunities for healthy happy lives is reflected in the priorities set out in the **Community Safety Strategy and the work programmes of the Inequalities Reference Group for Tameside and Tameside Equalities Strategy (2023/2027).**

There are many challenges in Tameside relating to the wider determinants of health, with clear approaches already in place to tackle some of these such as the Building Resilience: Tackling Poverty Strategy and the Domestic Abuse Strategy. The Action Together State of the Sector Report recommends how some of this can be delivered from the perspective of the voluntary & community sector. There are also strong enablers in place such as the housing offer in Tameside, with the Housing Strategy setting clear vision and direction for this.

This plan commits to achieving the following objectives to support health & wellbeing to strengthen our communities:

Great place to be supported

- The Health & Wellbeing Board for Tameside has committed to tackling poverty as one of the key priorities for residents and leading delivery of the Poverty Action Plan as part of the Building Resilience: Tackling Poverty Strategy.
- Produce useful insight and recommendations as part of Tameside's Joint Strategic Needs Assessment to create a suite of tools which inform decision making, future strategy and resource allocation.
- Support the Tameside Registered Provider Partnership to deliver the priorities of the Tameside Housing Strategy, with a focus on adequate supported housing and sheltered accommodation; considering the housing needs of an ageing population; and the prevention of homelessness.
- Ensure greater engagement and opportunity for residents to have a voice in informing priorities and services, especially for groups who face barriers such as women, cared for children, people with mental health issues and ethnic minority communities.
- Increase the level of engagement from all system partners with the VCFSE sector when co-designing local services; considering commissioning approaches; and considering workforce retention strategies. This should include continuing to work towards the Tameside PACT.





Deliver healthy places with accessible and inclusive services



The place where someone lives or spends their time within Tameside is crucial to their health and wellbeing. This includes the quality of the natural and built environment as well as the range of services and support in place, close to people, so that they can access the information and help they need in the right place and at the right time for them, without facing unfair barriers.

Creating healthy places across Tameside is central to existing strategies such as the Inclusive Growth Strategy, the Housing Strategy and the Homes, Spaces, Places Plan. However the way in which services are offered and accessed is also essential, which is described in the Equality Strategy and can be seen with approaches like the Helping Hands Campaign. It is also crucial to support the natural environment via the Climate Change and Environment Strategy for Tameside, which includes a focus on mitigating against potential harmful effects of climate change on our communities such as extreme heat and cold, and increased flooding.

This plan commits to achieving the following objectives to support health & wellbeing to deliver healthy places:

Great place to live

- The Health & Wellbeing Board for Tameside has committed to delivering Healthy Places as one of the key priorities for residents with a focus on addressing the inequalities and barriers that people face in accessing help and support and working with key partners such as housing providers, and key strategies such as the Homes, Spaces, Places Plan for Tameside to make improvements to the places that people live.
- Continue to develop opportunities and infrastructure to enable physical activity and particularly active travel, including leading on the next phase of the GM/Sport England Local Delivery Pilot with a focus on 'activation', to enable those who face additional barriers to be able to be more active.
- Develop a whole system approach to healthy weight including addressing issues around food poverty and food security.
- Work with partners across the city region (Greater Manchester Combined Authority and Transport for Greater Manchester) to deliver on the GM Clean Air Plan to improve air quality in Tameside.
- Adopt a systematic approach to ensuring that all services are accessible and inclusive of all residents across Tameside by prioritising outreach into communities and implementing frameworks including GM Fairer Health For All, Equality Impact Assessments and Health Equity Assessment Tools to all service delivery.

8. All-Age Mental Health & Wellbeing

The evidence that inequality has damaging psychological effects has now become much clearer. The poorest young people are much more likely to have a mental health difficulty compared to the wealthiest and those living with a learning disability or some ethnic minority communities are much more likely to experience mental health problems and generally poorer health.

All-age mental health & wellbeing is a cross cutting issue which acts as a thread throughout all aspects of this strategy. One of the objectives in the areas of focus is the development of a stand-alone all-age mental health & wellbeing strategy for Tameside to detail how improvements to mental health will be achieved. This will align to the Greater Manchester Mental Health and Wellbeing Strategy Doing Mental Health Differently. For Tameside, the overarching priorities, which will be further developed in collaboration with residents who use relevant services, are summarised below:

- Tackling the health inequalities experienced by those living with severe mental illness (SMI), a learning disability or autism (including addressing physical health gaps).

- Reducing the impact and number of suicides in Tameside by addressing evidence-based risk factors.
- Transformation of Community Mental Health Services – redesign and develop services in line with national policies and evidence-based approaches.
- Transformation of Mental Health Urgent & Emergency Care – redesign and develop services in line with national policies and evidence-based approaches.
- Whole workforce approach to early identification and intervention.
- Improving pathways and access to tackle inequalities, with a particular focus on children & young people utilising wider forums including schools and Family Hubs.
- Listening to our residents, particularly those living with learning disabilities and autism (this builds on the work of the Inequalities Reference Group which revealed how people in Tameside with learning disabilities experienced the Covid-19 pandemic, including recommendations that people are listened to, have choices and are included).

9. How this will be Delivered

To implement the vision and the areas of focus, and to ensure that inequalities and mental health and wellbeing remain key threads through all the work that takes place, with our communities, this **Joint Health & Wellbeing Strategy and Locality Plan** is taking an approach of **Building Back Fairer, Stronger and Together**.

Building
back
Fairer

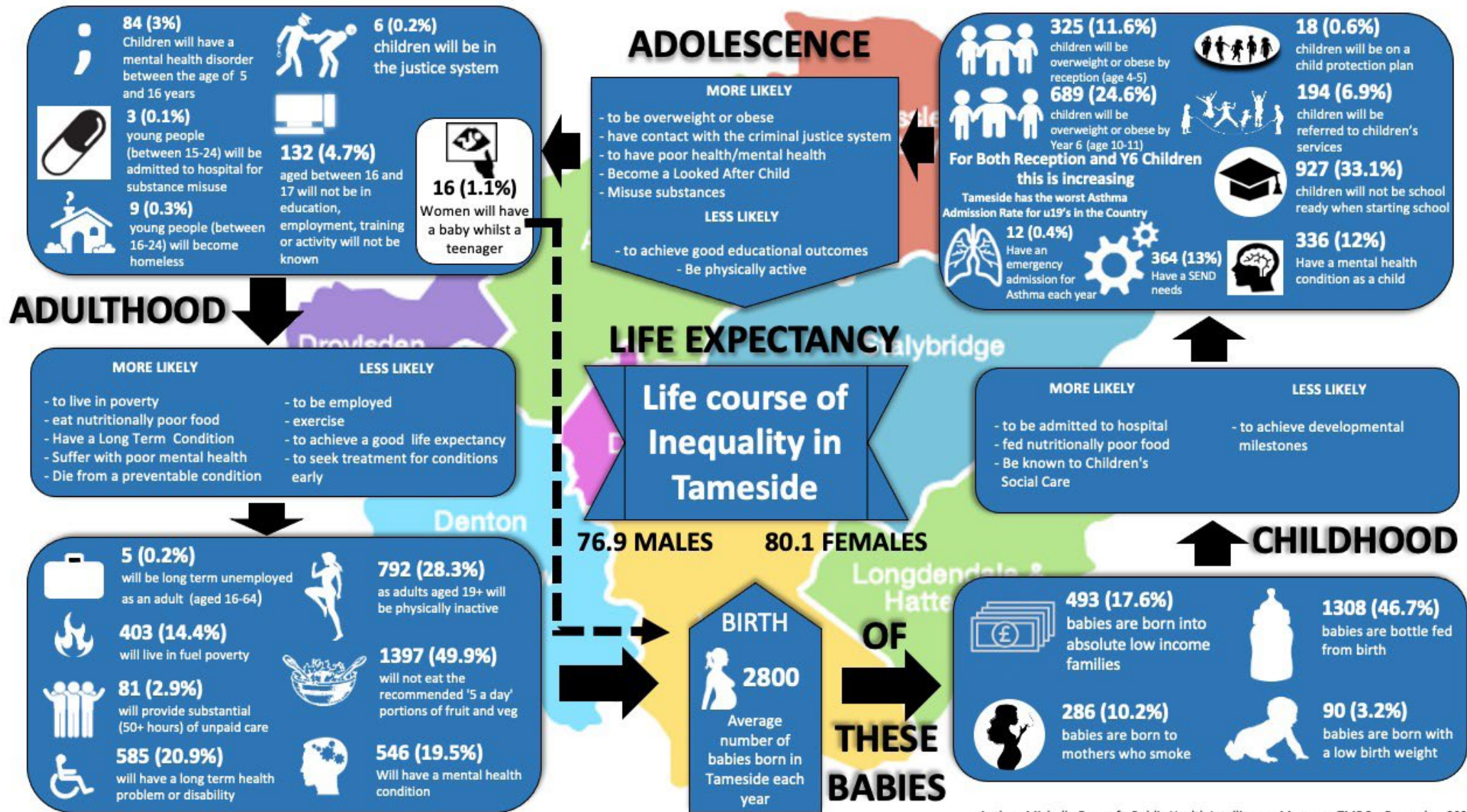
Building
back
Stronger

Building
back
Together

Building Back Fairer with a relentless focus on inequalities in all work across the system and via a clear commitment from the Health & Wellbeing Board to improve the wider determinants of health across Tameside.

Health inequalities are avoidable, unfair and systematic differences in health between different groups of people. They can look like extra barriers and challenges that people face in their day to day lives, which then go on to have an impact on their health. These inequalities and the negative impacts can follow someone throughout their life, continuing to have a negative impact on their long term health. Figure 4 on the next page shows how these inequalities affect people throughout their lives and the impact this can have.





Author: Michelle Foxcroft, Public Health Intelligence Manager, TMBC – December 2022

Figure 4: Life course of Inequality in Tameside



The impact of Covid-19 has put a spotlight on inequalities and also exacerbated them, with Tameside being hard hit and certain groups particularly affected, such as people from ethnic minority communities experiencing higher mortality rates from Covid-19 and children & young people experiencing disproportionate disruption to their education and day to day lives. Several issues were also highlighted by the pandemic, which have been the focus of work by the Tameside **Inequalities Reference Group** including community cohesion, digital inclusion, voice of people with learning disabilities, barriers to accessing information, and mental health.

In taking all of the areas of focus within this strategy forward, inequities in access, experiences and outcomes for residents will be considered and interventions and services will be appropriately targeted. There are tools and frameworks available to enable approaches to tackling inequalities.

The **Joint Strategic Needs Assessment** also highlights some of the key areas where inequalities must be tackled including the disparities in health outcomes experienced by older women in Tameside, particularly those from ethnic minority communities; and the disproportionate impact of cardiovascular and respiratory diseases in our more deprived communities. Delivery of services against these

priorities will be person-centred and take a proactive and preventative approach, intervening early and responding to the person in the context of their community.

The Greater Manchester Integrated Care Partnership has developed the **Fairer Health For All Delivery Framework** which is a system-wide commitment and tool for reducing health inequality and tackling inequalities across the wider, social determinants of health. It is also important to include the systematic use of the Health Equity Assessment Tool (HEAT) in the planning and delivery of projects and programmes, as well as Equality Impact Assessments to ensure a robust process for identifying and mitigating any potential inequity in planned projects and service delivery. Priority programmes should also consider how they align to the NHS CORE 20 PLUS 5 frameworks (adults and children) – see figures 5 and 6 on the next pages.



REDUCING HEALTHCARE INEQUALITIES

CORE20
The most deprived **20%** of the national population as identified by the Index of Multiple Deprivation



The Core20PLUS5 approach is designed to support Integrated Care Systems to drive targeted action in healthcare inequalities improvement

PLUS
ICS-chosen population groups experiencing poorer-than-average health access, experience and/or outcomes, who may not be captured within the Core20 alone and would benefit from a tailored healthcare approach e.g. inclusion health groups



Target population

CORE20 PLUS 5

Key clinical areas of health inequalities

1



MATERNITY
ensuring continuity of care for women from Black, Asian and minority ethnic communities and from the most deprived groups

2



SEVERE MENTAL ILLNESS (SMI)
ensure annual Physical Health Checks for people with SMI to at least, nationally set targets

3



CHRONIC RESPIRATORY DISEASE
a clear focus on Chronic Obstructive Pulmonary Disease (COPD), driving up uptake of Covid, Flu and Pneumonia vaccines to reduce infective exacerbations and emergency hospital admissions due to those exacerbations

4



EARLY CANCER DIAGNOSIS
75% of cases diagnosed at stage 1 or 2 by 2028

5



HYPERTENSION CASE-FINDING
and optimal management and lipid optimal management



Figure 5: NHS Core 20 Plus 5 Framework (Adults)

REDUCING HEALTHCARE INEQUALITIES FOR CHILDREN AND YOUNG PEOPLE

CORE20
The most deprived 20% of the national population as identified by the Index of Multiple Deprivation



The **Core20PLUS5** approach is designed to support Integrated Care Systems to drive targeted action in healthcare inequalities improvement

PLUS
ICS-chosen population groups experiencing poorer-than-average health access, experience and/or outcomes, who may not be captured within the Core20 alone and would benefit from a tailored healthcare approach e.g. inclusion health groups



Target population

CORE20 PLUS 5

Key clinical areas of health inequalities

1



ASTHMA
Address over reliance on reliever medications and decrease the number of asthma attacks

2



DIABETES
Increase access to Real-time Continuous Glucose Monitors and insulin pumps in the most deprived quintiles and from ethnic minority backgrounds & increase proportion of children and young people with Type 2 diabetes receiving annual health checks

3



EPILEPSY
Increase access to epilepsy specialist nurses and ensure access in the first year of care for those with a learning disability or autism

4



ORAL HEALTH
Address the backlog for tooth extractions in hospital for under 10s

5



MENTAL HEALTH
Improve access rates to children and young people's mental health services for 0-17 year olds, for certain ethnic groups, age, gender and deprivation

Figure 6: : NHS Core 20 Plus 5 Framework (Children & Young People)



Building Back Stronger with preventative approaches and post-Covid recovery plans underpinned by robust evidence, a sustainable and resilient workforce and financial models to drive longer-term improvement.

The main purpose of the health and care system has been to provide treatment for acute illness. Health services in Tameside and across Greater Manchester manage ill health to a high standard. However, to be successful in the longer term, further work is needed to develop a population health system, which reduces the demand on health services and improves the outcomes for people in the longer term, throughout their lives. Meeting these objectives to improve the long term health of people in Tameside will help to meet current financial challenges in the public and third sector. Better outcomes and reduced inequalities will cost less and will also improve people's lives

The **GM Population Health Characteristics Framework** sets out the conditions, characteristics and functions required at different spatial levels for a whole system approach to population health to be in place in Greater Manchester. This is being put in place in Tameside to ensure a whole-system approach to population health including the following key local functions:

- Everyone recognising the importance of improving health and reducing inequalities.

- Our local approaches should focus on learning and improvement (including formal research opportunities).
- There is effective partnership working between Greater Manchester organisations (e.g. the GM Integrated Care Board, and the Greater Manchester Combined Authority) and Tameside's Health and Wellbeing Board and VCFSE sector.
- A range of person and community centred approaches are taken to involve people living in Tameside in services and their delivery.
- There is a vibrant and sustainable VCFSE sector.
- Investing in improving health and reducing inequalities is a priority, including shifting the balance of spend towards prevention and early intervention for longer term improvements.



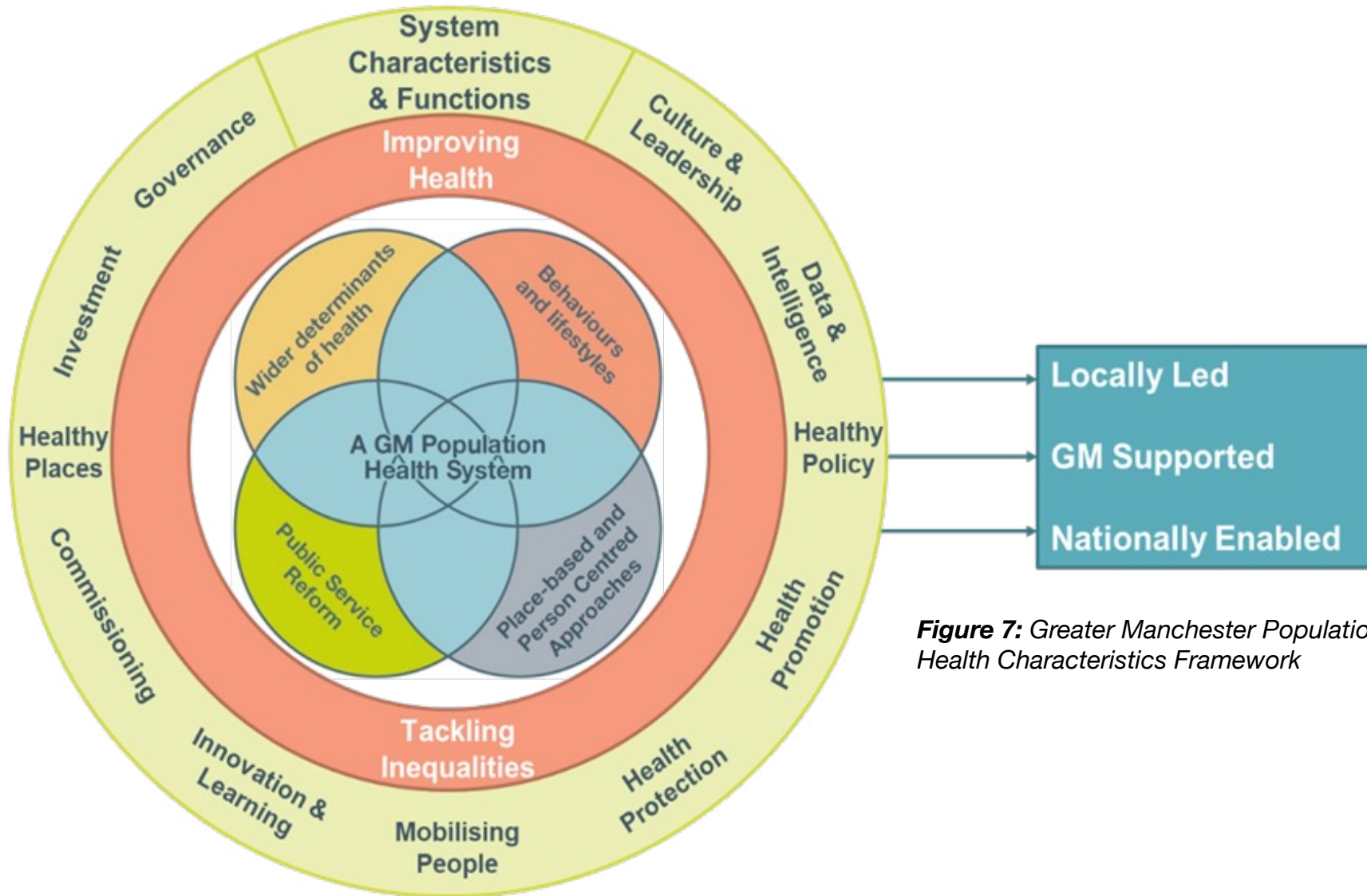


Figure 7: Greater Manchester Population Health Characteristics Framework



One of the key strengths across Tameside and Greater Manchester is the approach to system working and the place-based principles which have been agreed to enable this.

| Principles | We will |
|-------------------|---|
| Partnership | <ul style="list-style-type: none">• We will be accountable to the local population and to each other.• We will co-design and co-produce services with residents and community partners. |
| Powered by people | <ul style="list-style-type: none">• We will empower our population and support them to take responsibility for their own health and wellbeing.• We will recognise and develop resident, voluntary, clinical, political and managerial leadership.• We will empower our workforce to work in collaboration across organisational, professional and service boundaries. |
| Person-centred | <ul style="list-style-type: none">• We will take a proactive and preventative approach, intervene early and respond to the person in the context of their community.• We will develop place-based approaches to tackling the social determinants of health that build on the assets within our communities. |
| Productive | <ul style="list-style-type: none">• We will implement ways of working that support collaboration not competition.• We will work together to make best use of financial, workforce, estate and other resources.• We will maximise social value and jointly manage the system budget sharing risks, deficits and surpluses. |
| Progressive | <ul style="list-style-type: none">• We will create a 'can do' culture with a focus on innovation and continuous improvement.• We will develop a strong learning culture where new ways of working are reviewed and evaluated. |



Following the above principles, the delivery model in Tameside aligns to the three levels of the GM Integrated Care System:

1. System – Greater Manchester’s health and care partners work together to set strategic direction and to develop economies of scale.
2. Place / locality – working together across Tameside as one integrated place-based system.
3. Neighbourhood – integrated multi-agency delivery models within local communities of 30-50,000.

In order to deliver on the priorities outlined in this plan, effective progress will be required across a range of enabling work programmes including workforce, digital transformation, finances, estates, business intelligence and communication & engagement. Further detail of the objectives under each of these can be found in Appendix 2. These enablers should consider the challenging landscape for the wider VCFSE sector and the strategic partnerships with this sector and other statutory partners should be prioritised.

Further detail of the oversight and assurance of this delivery is outlined in section 11 of this strategy.

As part of the approach to Building Back Stronger, and to adopt the principles of the GM Population Health Characteristics Framework, the Tameside Joint Strategic Needs Assessment (JSNA) must be a robust resource which provides a wide range of tools and insight to inform system-wide decision making and resource allocation. The JSNA provides a suite of tools and documents that assess the health and wellbeing needs of the Tameside population. This is in place but with further work taking place to refresh and further develop the JSNA for Tameside in order to ensure it delivers on this ambition.



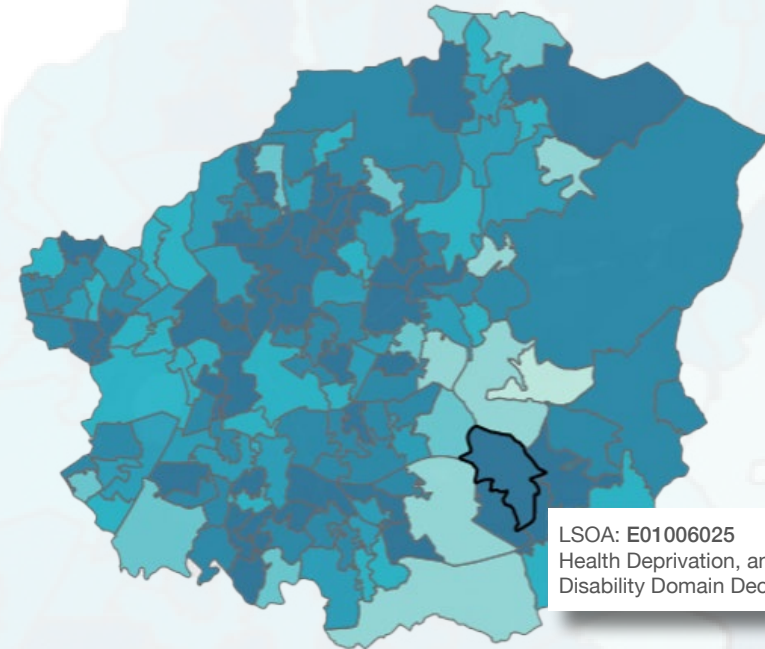
JSNA - Ambitions

- To have a wide range of accessible documentation that everyone can use to inform a variety of work
- Set quality standards for all needs assessment work to sit under the JSNA to ensure it is robust
- To have parity of insight from communities and community voice, alongside data intelligence
- The JSNA will be a comprehensive resource with practical recommendations to inform decision making

Tameside Joint Strategic Needs Assessment (tameside.gov.uk)

Prioritising ongoing learning through a systematic approach to research and evaluation will also be an important part of all work in Tameside. The JSNA can inform priority areas for research and evaluation but this is also important in terms of understanding more about what works to make improvements and what works best for our communities. There are also a lot of opportunities to work with academic partners such as local universities to ensure that any research carried out is robust and impactful.

English Indices of Deprivation 2019 Tameside and Glossop





Building Back Together by developing an integrated care system with system design and assurance built around the Tameside Health & Wellbeing Board and Strategic Partnership Board; and strong delivery across the Tameside Provider Partnership, Tameside General Practice Alliance & Primary Care Networks and Tameside VCFSE Sector. It is also important to work together across existing strategies and committees/boards, and within all the communities of Tameside.

Working together across the substantial VCFSE sector in Tameside is crucial to enabling the large number of micro-organisations to continue to deliver in communities; as well as other support such as sustainable investment and collaboration to strengthen the paid and volunteer workforce across the VCFSE sector.

Building Back Together... with Tameside Communities - good quality healthcare in an integrated system is essential but progress will only be made working across communities to address and tackle the barriers that some individuals and groups face. It is important that residents have a voice and this is listened to and incorporated into work across the system.

The priorities and actions set out in this plan are informed by a wide range of engagement and listening to residents with a few examples of the sources of this insight listed below:

- GM Insight Survey
- Tameside Insight Survey
- Big Conversation
- Partnership Engagement Network
- Inequalities Reference Group
- Community Champions
- Tameside Youth Council
- A range of service-based groups with lived experience (such as the Maternity Voices Partnership; Domestic Abuse Trust group and many others).



The JSNA also builds in resident voice as a priority to include in each piece of in-depth needs assessment work, to ensure the tools and intelligence put in place to inform the system is broad and not only based on data but also what it feels like to live in Tameside.

Building Back Together...with the Whole System - while the integrated health and care system delivery is central to this plan, the priorities of the Health & Wellbeing Board around improving the wider determinants of health can only be achieved across the whole system, embedded within a wide range of strategies. Sections 6 and 7 of this strategy have highlighted the range of system strategies which contribute to the areas of focus for Tameside.

Other challenges and pressures can only be addressed via joined up working in communities and services. Increasing demand for services due to growing numbers of older people and people living with multiple long-term conditions mean preventative approaches must be prioritised. Existing enablers to achieve this such as the Better Care Fund from NHS England will continue to be used to achieve integration of health and social care services in Tameside to support person-centred care, sustainability and better outcomes for people and carers. Also system challenges around workforce and finances require a shared commitment towards the same goals.

Building Back Together also involves working with the GM system and striving towards the same goals and objectives. The Greater Manchester Strategy (2021-2031) sets out the ambition for Greater Manchester to be a place where everyone can live a good life, growing up, getting on and growing old in a greener, fairer and more prosperous city region. The priorities around the wider determinants of health in the Tameside Health & Wellbeing Board align to this commitment.

The six missions set out in the GM Integrated Care Partnership Strategy align closely to the areas of focus for Tameside, however there will continue to be specific focus on the Integrated Care Partnership Strategy and particularly the Joint Forward Plan, which sets out how the missions for the health and care system across Greater Manchester will be delivered over the next five years.

The **GM Primary Care Blueprint** also creates a platform for ensuring that preventative approaches which address inequalities are taken in primary care delivery, including in Tameside.

10. Measuring Progress - Outcome Metrics

It is important to understand the progress that is being made and have evidence of what is working in Tameside. Work has already taken place to review current health outcomes data to determine the key drivers of poor health outcomes across. Figure 8 below shows where accountability sits for monitoring different sets of outcomes and metrics.

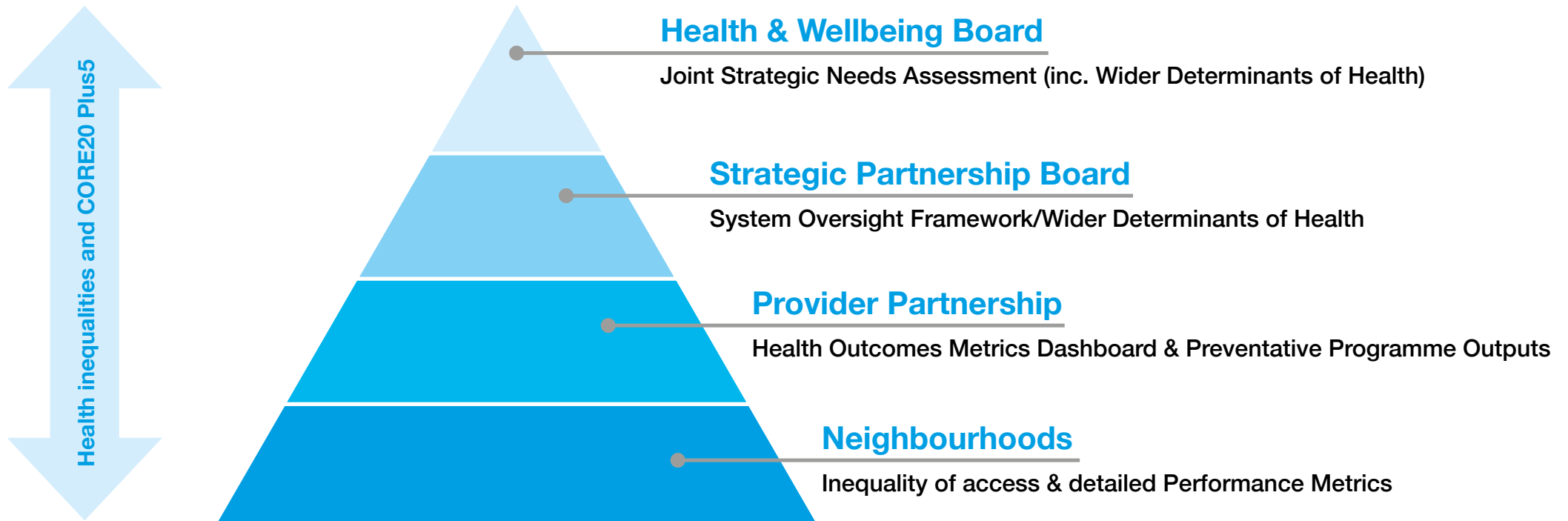


Figure 8: Outcome Metrics – Governance and Accountability in Tameside



The following ambitions and outcome metrics have been identified to bring focus to programme delivery and inform the system where progress is being made

Overarching Outcome Ambitions

- Lower Health deprivation
- Increase life expectancy (males)
- Increase life expectancy (females)
- Increase healthy life expectancy (males)
- Increase healthy life expectancy (females)

Outcome Metrics:

- Reduction in under 75 preventable mortality
- Reduction in percentage of smoking prevalence in adults
- Reduction in alcohol related admissions
- Increase in number of patients with atrial fibrillation (AF) on QOF registers
- Increase in number of people with diagnosed high blood pressure on QOF registers
- Reduction in number of year 6 overweight

- Increase in number of families accessing early help
- Reduced infant mortality
- Reduction in percentage of mothers smoking at time of delivery
- Improved mental health (Mental health QOF prevalence)
- Increased access to mental health and wellbeing services
- Improved access to earning disability (LD) services (indicator to be confirmed)

Table 1 on the next page demonstrates how some of the outcome metrics relate to the ambitions set for Tameside. These will continue to be monitored alongside the action plans at the Tameside Health & Wellbeing Board and Strategic Partnership Board, as programmes of work are delivered to ensure they have a positive impact and are accountable for making change. This will also sit alongside and complement oversight of key performance measures at other system forums including the Tameside Safeguarding Children Partnership, Tameside Adults Safeguarding Partnership Board, and Tameside Community Safety Partnership.

For example, the ten key themes for monitoring activity at the Tameside Safeguarding Children Partnership are outlined in Table 2 and will continue to be reported into the Health & Wellbeing Board for oversight and assurance.



| Outcome | Indicator of progress |
|--|---|
| <p data-bbox="174 196 517 264">Give Tameside children the best start in life</p>  | <ul data-bbox="638 153 2074 799" style="list-style-type: none"> • Reduction in the number of children living in poverty • Improvements in children achieving a good level of development at Early Years Foundation Stage (EYFS). • Improvements in attainment of children with Special Educational Needs and Disabilities (SEND). • Increase in breastfeeding initiation. • Increase in childhood vaccination rates • Reduction in overweight / obese children • Reduction of proportion of mothers who smoke at time of delivery • Reduction of under-18 hospital admissions for mental health conditions • Reduce wait times for young people to receive social, emotional and mental health support • Increase the number of children and families accessing Early Help support through Tameside MBC Children’s Services • Improvements in the range of metrics under the ten key themes measured by the Tameside Safeguarding Children Partnership • Increase in borough-wide school attendance rates |
| <p data-bbox="129 858 557 967">Help people stay well across the life course and detect illness earlier</p>  | <ul data-bbox="638 839 1845 1249" style="list-style-type: none"> • Increase in healthy life expectancy. • Reduction in avoidable emergency hospital admissions • Reduction in inequality in life expectancy • Reduce the rate of early preventable mortality • Reduction in the number of people experiencing long term mental health problems • Reduce the rate of hospital admissions for mental health issues • Increase cancer screening uptake • Reduce rate of alcohol-related cancer • Reduce smoking prevalence |

Table 1: Areas of Focus for Tameside and Indicators of Progress


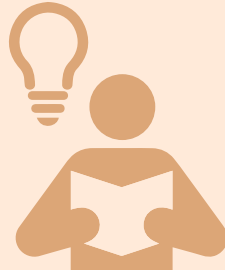
| Outcome | Indicator of progress |
|--|--|
| <p data-bbox="152 196 537 304">Enable all Tameside residents to grow old with dignity and independence</p>  | <ul data-bbox="638 167 2139 470" style="list-style-type: none"> • Increase in the number of people able to die in preferred place of death • Reduction in falls • Increase the proportion of Good/Outstanding social care settings • Improve life expectancy at age 65 • Reduce social isolation of those aged over 65 • Improve access to early support including Improving Access to Psychological Therapies (IAPT for those aged over 65) |
| <p data-bbox="156 539 533 611">Help people get into, and stay in, good work</p>  | <ul data-bbox="638 531 2139 1037" style="list-style-type: none"> • Increase in Attainment scores (NVQ level 4 and above) • Reduction in the number of young people not in education employment or training (NEET) • Increase the proportion of people with a long term illness or disability (including learning disabilities) in employment • Reduce the gap in employment rate between those with a mental health condition and general population • Increase the proportion of jobs paying above the real living wage in Tameside • Reduce the rate of sickness absence from work • Increase median earning in the borough • Reduction in unemployment levels • Delivering within the means of current public and third sector finances, while still making improvements in key health outcome indicators (eg. healthy life expectancy; early preventable mortality) |

Table 1: Areas of Focus for Tameside and Indicators of Progress





| Outcome | Indicator of progress |
|--|--|
| <p data-bbox="232 193 456 261">Strengthen our communities</p>  | <ul data-bbox="638 156 2063 772" style="list-style-type: none"> • Increase the number of volunteers within Tameside • Reduction in first time entrants to the youth justice system • Increase the number of people supported by social prescribing • Reduction in violent crime • Increase the number of access points for safe disclosures of domestic abuse • Increase the proportion of domestic abuse support service caseloads which access services at an earlier stage (more medium/standard risk and fewer high risk cases) • Reduction in the level of absolute and relative income poverty • Reduction in the number of insolvencies • Reduction in the number of people living in fuel poverty • Reduce the proportion of people living in temporary accommodation • Reduction in the proportion of households experiencing food insecurity • Increase the proportion of adults with a learning disability who live in stable and appropriate accommodation |
| <p data-bbox="181 839 508 948">Deliver healthy places with accessible and inclusive services</p>  | <ul data-bbox="638 820 2013 1086" style="list-style-type: none"> • Improve public transport links • Increase availability of accessible green spaces • Increase the proportion of residents who feel safe in their community • Reduce levels of air pollution (fine particulate matter) • Reduced variation in key health outcome measures across Tameside (focus on deprived areas) • Increase the utilisation of outdoor space for exercise |

Table 1: Areas of Focus for Tameside and Indicators of Progress

| Safeguarding Children Partnership Indicator Theme | Detail |
|---|---|
| 1. Contacts | Number and trend of contacts by agency |
| 2. Timeliness of meetings | Timeliness of initial and review child protection conference meetings |
| 3. Multi-agency attendance at meetings | Proportion of child protection conference meetings with required police, health and education attendance |
| 4. Child protection duration | Volume of child protection plans with the proportion of plans which have been in place for >18 months; and >2 years |
| 5. Education | Number and trend of children missing from education; children receiving elective home education; and rate of absence and exclusions |
| 6. Care Leavers | Proportion and trend of care leavers in suitable accommodation; and the proportion of care leavers in education, employment or training |
| 7. Health Assessments | Proportion and trend of initial health assessments completed within 20 working days |
| 8. Mental Health | Number of community mental health referrals; number of young people supported via education; number and wait times for CAMHS referrals; number of crisis care calls |
| 9. Hospital admissions for children | Details from hospital of a range of admissions activity data relating to children and young people |
| 10. GM Police Data | Number and trend of various young people related crimes; number and trend of recorded child sexual exploitation incidents |

Table 2: Tameside Safeguarding Children Partnership Key Performance Monitoring Themes





Research and evaluation is also a key component of understanding what works and how progress is being made, and can be replicated in Tameside. Linked to the agreed principles of working for Tameside and the components of the GM Population Health Characteristics Frameworks around Learning & Innovation, evaluation and research will be systematically built in to work programmes to make sure there is ongoing learning to understand issues and communities better, including what can be done to make improvements. This will include links across public organisations such as the local authority, NHS and VCFSE as well as with academic institutions such as local universities.



11. Governance & Assurance

A robust structure is already in place to hold responsibility for the ambitions and objectives set out in this strategy. Figure 9 below sets out this structure in Tameside with local assurance sitting with the Health & Wellbeing Board and the Tameside Strategic Partnership Board.

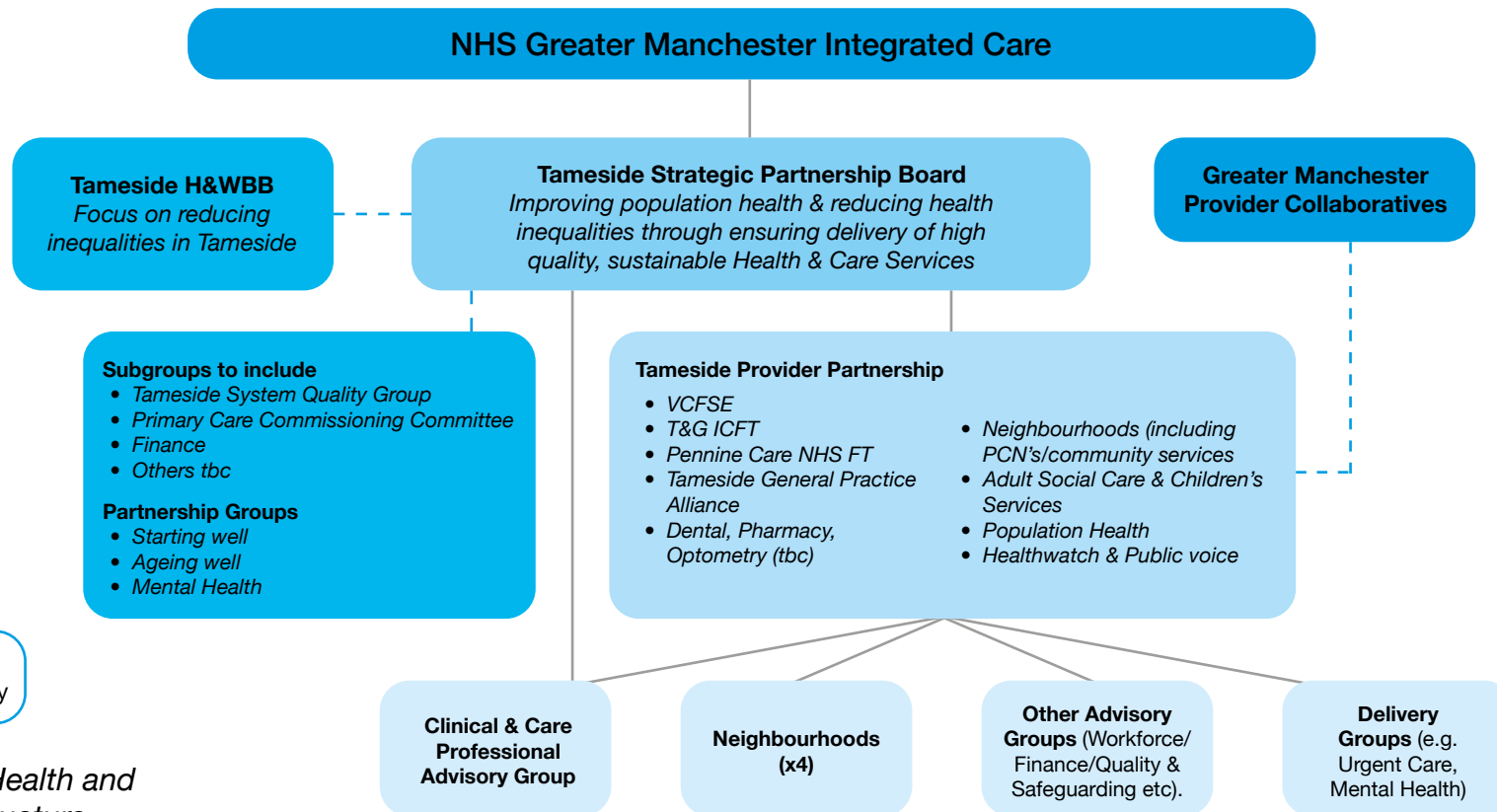


Figure 9: Tameside Health and Care Governance Structure



Noting the above, Tameside has the following components to the local delivery model:

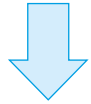
- Locality Strategic Design delivered via the Health & Wellbeing Board and Strategic Partnership Board, which also include local political leadership with Tameside Council elected members leading these boards. The Health & Wellbeing Board also holds the specific focus on the wider determinants of health and supporting communities to tackle these issues, through the system-wide partners represented on this group, and sub-groups.
- Place-based leadership model; including integrated appointments to the Place-Based Lead and Deputy Place-Based lead and an Integrated Senior Team.
- Locality place-based delivery via the Tameside Provider Partnership which drives delivery and transformation at scale, which will take forward relevant delivery plans for the locality, including working closely with partners in the GM Integrated Care Partnership to monitor progress in the Tameside system against the Joint Forward Plan.

- Integrated neighbourhoods, which remain the building block for the delivery model, including wider health and care services such as primary care, including Primary Care Networks (PCNs), social care community services and the VCFSE sector. This will include formal links into the local VCFSE sector alliance.
- Quality, safety and assurance sits throughout each level of the model.

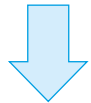
Figure 10 on the next page further details the role and functions of the Tameside Strategic Partnership Board and Provider Partnership.



Strategic plan and health and care priorities set by **TAMESIDE STRATEGIC PARTNERSHIP BOARD**



Providers come together through **TAMESIDE PROVIDER PARTNERSHIP** to deliver the objectives



Transformation in Services is delivered in **NEIGHBOURHOODS**

Tameside Strategic Partnership Board

- Locality strategic entity which provides a forum for decisions and investment in Tameside within delegated limits (from GM ICB).
- Provides strategic plan and direction for Tameside Health and care providers.
- Members include:
 - Chair: Executive Member – Population Health & Well-Being
 - Place-based lead: Chief Executive TMBC
 - TMBC officers and elected members
 - GMICB Tameside: nursing, strategy & finance
 - Provider Partnership Chair
 - NHS organisations
 - GP Alliance Chair
 - VCFSE Alliance & wider partners, including Healthwatch.
- Scheme of accountability and delegation in place with GMICB and 2-way accountability agreement.

Tameside Provider Partnership

- Initially voluntary alliance of Tameside Health & Care Providers which will seek to represent a single view of Providers.
- Delivery forum for the strategic plan prescribed by the Strategic Partnership Board.
- Members include:
 - Chair: Chief Executive T&G ICFT.
 - Deputy Chair: VCFSE representative.
 - To include as a minimum representatives of T&GICFT, PCFT, TMBC, Tameside GP Alliance, VCFSE alliance, Healthwatch.
- Constituent organisations to discharge agreed obligations.
- Provides leadership across providers on collaboration to deliver improved outcomes and reduce health inequalities.
- Interface with GM PFB and PCB to discharge place based obligations of these bodies.

Figure 10: Tameside Strategic Partnership Board and Tameside Provider Partnership

Appendix 1

Health & Wellbeing Board Charter

The Health and Social Care Act 2012 required local authorities to create a **Health and Wellbeing Board**. The development of the Integrated Care System across Greater Manchester in 2022 prompted a refresh of the Health & Wellbeing Board to complement the new arrangements.

This charter aims to galvanise partners in Tameside to deliver a range of strategies and programmes aimed at improving health and reducing inequalities. The Charter provides clarity on the role of the Board and seeks a commitment to a set of principles.

Through this Charter the Board and its members will:

- Provide strategic leadership based on evidence: focusing on those areas where the Board can make the biggest difference to health and well-being.
- Focus on the wider determinants of health, with particular priority around tackling poverty, alongside employment & skills and delivering healthy places.
- Promote transparency in decision making so that the public can understand the decisions being taken and the rationale behind them.

- Be 'Prevention Focused': Developing a system-wide shared understanding and commitment to prevention and early intervention.
- Involve the public in decision-making allowing people to have their say and an opportunity to influence decisions, with a 'bottom-up' approach.
- Acting with courage and conviction to ensure that decisions are taken in the long-term interests of the whole population.
- Have collaborative leadership across all members and partners on the Board and encourage critical self-assessment of our work across all partners on the Board.
- Pursue a strengths-based approach where we encourage discussion in a positive way which values health but recognises that it takes effort to retain and improve it.
- Work in tandem with the Voluntary, Community, Faith and Social Enterprise Sector using the principles of the Tameside PACT as our guide.
- Advocate for preventative approaches which tackle inequalities and address the key priorities of poverty, employment & skills and creating healthy places in members' individual organisations across the borough.



The Board will deliver the following Outcomes for the people of Tameside:

- Improved life-expectancy and healthy life-expectancy and self-reported wellbeing for everyone.
- Reduction in inequalities around life-expectancy, healthy life-expectancy and self-reported wellbeing and reduced inequalities across all measures.
- Everyone in Tameside is given the opportunity to thrive and lead meaningful, enriching lives.
- People live in healthy, safe and sustainable places.
- All people in Tameside can access good quality employment and lifelong learning.
- Reduce the impact of poverty including access to benefits, enough healthy food and a warm home.
- Reduce levels of air pollution.
- Identify a work programme on key cross-cutting issues that drive long term socio-economic and health inequalities.



Appendix 2

Enablers

Delivery of the plan will require effective progress across a range of enabling work programmes.

Workforce

- Develop an integrated workforce strategy that drives integrated delivery and strategy and aligns to the NHS People Plan and the GM Our People Plan.
- Attract, retain and develop a high-class workforce that across organisational boundaries, which includes the wider VCFSE sector paid and volunteer workforce.

Digital Transformation

- Develop a digital first model – making the best use of technological developments.
- Improve access, signposting and education.
- Recognise digital inequality via digital wellbeing programmes.

Financial Position

- Financial challenge is significant and means we must work differently together.

- Shared stewardship of the Tameside budget.
- Redesign place-based commissioning model.
- Prioritising investment in improving outcomes in the longer term across all services to support organisations to be financially sustainable

Estates

- Develop a one system, multi-organisational estates plan.
- Provide care in the most appropriate places for our residents.
- Co-locate integrated neighbourhood delivery teams.

Business Intelligence

- Develop an integrated Business Intelligence function to combine the knowledge, skills, experience and capability of Tameside & Glossop ICFT, GM ICB (Tameside), Tameside Council and wider partners.
- Improve data sharing across organisations and with residents.
- Develop a single integrated outcomes framework to maximise investment and impact, prioritise work programmes and produce social value.



Communication & Engagement

- Residents must feel part of the changes we need to make.
- Residents and communities need to be empowered to take action.

Sustainable VCFSE Sector

- VCFSE sector embedded as a strategic partner in local systems.
- VCFSE recognised as a critical part of the local economy.
- Review commissioning approaches to better enable VCFSE organisations.
- Mechanisms put in place to make co-design of local services the norm.
- Greater focus on community-led enterprise.

