APPENDIX 2

Subject / Title	Tameside Joint Health & Wellbeing Strategy and Locality Plan
	Plan

Team	Department	Directorate
Population Health	Population Health	Population Health

Start Date	Completion Date
September 2023	September 2028

Project Lead Officer	James Mallion
Contract / Commissioning Manager	
Assistant Director/ Director	James Mallion

EIA Group (lead contact first)	Job title	Service
James Mallion	Assistant Director of Population Health	Population Health
Debbie Watson	Director of Population Health	Population Health

PART 1 – INITIAL SCREENING

An Equality Impact Assessment (EIA) is required for all formal decisions that involve changes to service delivery and/or provision. Note: all other changes – whether a formal decision or not – require consideration for an EIA.

The Initial screening is a quick and easy process, which aims to identify:

- those projects, proposals and service or contract changes which require a full EIA by looking at the potential impact on, or relevance to, any of the equality groups
- prioritise if and when a full EIA should be completed
- explain and record the reasons why it is deemed a full EIA is not required

A full EIA should always be undertaken if the project, proposal and service / contract change is likely to have an impact upon, or relevance to, people with a protected characteristic. This should be undertaken irrespective of whether the impact or relevancy is major or minor, or on a large or small group of people. If the initial screening concludes a full EIA is not required, please fully explain the reasons for this at 1e and ensure this form is signed off by the relevant Contract / Commissioning Manager and the Assistant Director / Director.

1a.	What is the project, proposal or service / contract change?	This strategy sets out the overarching vision, priorities and areas of focus for improving health and wellbeing across Tameside from 2023 to 2028 with a particular focus on tackling inequalities in all work across the system and improving mental health and wellbeing. This also combines the Locality Plan for Tameside as a locality within the GM Integrated Care Partnership, which sets out how the health and care system will meet its key objectives as part of the GM ICB.
1b.	What are the main aims of the project, proposal or service / contract change?	The main aims are to create an overarching vision for improving health and wellbeing in Tameside which is: 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. The strategy sets out 6 areas of focus which will act as the priorities for Tameside to achieve the vision: 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 There are two cross cutting themes / objectives throughout this strategy which are tackling inequalities and supporting good all age mental health and wellbeing. The priorities set out in this strategy will inform further action plans to be developed to achieve these and overseen by the Tameside Health & Wellbeing Board and Tameside Strategic Partnership Board (locality board).

1c. Will the project, proposal or service / contract change have either a direct or indirect impact on, or relevance to, any groups of people with protected equality characteristics? Where there is a direct or indirect impact on, or relevance to, a group of people with protected equality characteristics as a result of the project, proposal or service / contract change please explain why and how that group of people will be affected.

Protected Characteristic	Direct Impact / Relevance	Indirect Impact / Relevance	Little / No Impact / Relevance	Explanation
Age		X		Two of the key priorities/areas of focus within the Strategy a focussed on the best start for children and supporting people as they grow older. While these are directly impacting groups of the

Disability	<u>x</u>		population based on age, these priorities are targeted at work and improvements for those who need support the most and will benefit all residents. There is a focus on all age responses and approaches as well such as improving all age mental health and wellbeing This strategy is inclusive of those living with a disability
			and sets out priorities to support residents, particularly children and young people and adults with learning disabilities, and helping those with disabilities get into employment
Ethnicity	<u>x</u>		People from ethnic minority communities in Tameside face additional barriers and inequalities in health outcomes – this strategy sets out priorities to tackle this such as supporting older ethnic minority communities based on insight from the 2022 Ageing Well Needs Assessment.
Sex	X		Evidence put forward in this strategy outlines the inequalities in health outcomes experienced by women in Tameside, with females aged 65 in Tameside having the worst life expectancy in the country. This strategy sets out objectives to tackle these inequalities, particularly for support available to older women and service access for women in general
Religion or Belief		X	The priorities outlined in this strategy apply to all residents in the borough and present equal opportunity to support regardless of religion or belief
Sexual Orientation		X	The priorities outlined in this strategy apply to all residents in the borough and present equal opportunity to

				support regardless of sexual
				orientation
Gender Reassignment			<u>x</u>	The priorities outlined in this strategy apply to all residents in the borough and present equal opportunity to support regardless of gender reassignment
Pregnancy & Maternity		X		Some of the priorities outlined in this strategy refer to improving support for pregnant women and maternity care. This includes a focus on supporting breastfeeding, tackling smoking in pregnancy and alcohol exposed pregnancies to improve outcomes for mothers and babies
Marriage & Civil Partnership		ined legally by To	X X	The priorities outlined in this strategy apply to all residents in the borough and present equal opportunity to support regardless of marriage or civil partnership
Group	groups determine Direct Impact	Ined locally by Tai	meside Metro	politan Borough Council? Explanation
(please state)	/ Relevance	/ Relevance	Impact / Relevance	Ехріанаціон
Mental Health		X		This strategy recognises the existing inequalities in mental health and wellbeing across the community and sets out specific objectives to improve this including the action to develop an all age borough wide mental health and wellbeing strategy.
				Mental health is a cross cutting theme in this strategy including tackling inequalities experienced by those living with severe mental illness, transforming community mental health services and reducing the impact of suicides.

			to the GM ICP ambitions to
Militar:			support carers.
Military		<u>x</u>	The priorities outlined in this
Veterans			strategy apply to all
			residents in the borough and
			present equal opportunity to
			support regardless of being
			military veterans
Breast	<u>X</u>		Some of the priorities
Feeding			outlined in this strategy refer
			to improving support for
			breastfeeding women as
			part of the best start for
			every child area of focus.
Cared-for	<u>x</u>		The support outlined in the
Children			strategy will apply to cared
			for children, particularly in
			relation to giving every child
			the best start with an
			objective around young
			people leading positive lives
			and reducing exposure to
			health harms such as
			tobacco and alcohol
Care Leavers	<u>x</u>		The support outlined in the
			strategy will apply to care
			leavers, particularly in
			relation to giving every child
			the best start with an
			objective around young
			people leading positive lives
			and reducing exposure to
			health harms such as
			tobacco and alcohol. Also
			objectives around
			contraception access for
			young people, and
			committing sustainable
			resources to in-work support
			programmes led by the
			council's work and skills
			team, some with a particular
			focus on supporting care
			leavers
Low or no	<u>X</u>		Evidence presented in the
income groups			strategy identifies that low
			income groups also
			experience inequalities in
			health outcomes. A
			recurring theme of providing
			more support to those in
			more deprived areas or in
			greater need to tackle
			inequalities is included
			throughout the strategy.
			There are also specific
			objectives under
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'Strengthening Our
Communities' around
tackling poverty and
supporting the delivery of
the Tameside Tackling
Poverty Strategy. This
strategy will go on to
produce action plans around
this including measures to
monitor the rate of poverty,
child poverty and fuel
poverty.

Are there any other groups who you feel may be impacted by the project, proposal or service/contract change or which it may have relevance to?

(e.g. vulnerable residents, isolated residents, those who are homeless)

Group	Direct Impact	Indirect Impact	Little / No	Explanation
(please state)	/ Relevance	/ Relevance	Impact / Relevance	
People living with long term chronic health conditions		<u>x</u>		Under the priority around helping people to live well and detect illness earlier in the strategy, there are objectives to focus on secondary prevention by finding more people with risk factors or long term conditions and tackle the barriers they face in accessing support
Children with Special Educational Needs and Disabilities Young People not in Education Employment or Training				One of the objectives under the best start for children priority is to remove barriers for children and young people living with SEND The priority around helping people get into and stay in good work includes focus on those young people who are NEET

Wherever a direct or indirect impact or relevance has been identified you should consider undertaking a full EIA or be able to adequately explain your reasoning for not doing so. Where little / no impact or relevance is anticipated, this can be explored in more detail when undertaking a full EIA.

1d.	Does the project, proposal or service / contract change require a full EIA?	Yes	No
		х	
1e.	What are your reasons for the decision made at 1d?	This is a wide ranging strategy which applies to all people and all geographies in the borough and does have indirect impacts on a range of protected characteristics as outlined above.	

If a full EIA is required please progress to Part 2.

PART 2 - FULL EQUALITY IMPACT ASSESSMENT

2a. Summary

This EIA has been undertaken due to the broad nature of the Joint Health & Wellbeing Strategy and Locality Plan for Tameside (2023-2028). This is a strategic overview of the priorities and objectives of both the health and wellbeing board and the Tameside Locality functions of the GM Integrated Care Partnership. These objectives have relevance across all of the health and care sector and public system, as it is the plan of all partners and members of the health and wellbeing board. Therefore this plan impacts on all residents in Tameside and as outlined, the specific priorities and objectives have relevance for a number of protected characteristics and groups within Tameside. This is expected as the nature of the plan is to aim to identify and tackle health inequalities faced by people in Tameside, and therefore certain groups are targeted in terms of specific ambitions for improvements and better support. The intention is that the work which falls out from this strategy and the objectives set will reduce these inequalities and make many improvements of the lives of people across Tameside including and particularly those with some of the protected characteristics identified.

It is a statutory requirement that each borough has a functioning health and wellbeing board and which sets out it's objectives and plan to improve the health of the local population and tackle inequalities (https://www.gov.uk/government/publications/health-and-wellbeing-boards-guidance)

The proposals and key points for this strategy are to set out and achieve the following 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.

This will be achieved via a framework of Building Back Stronger, Fairer and Together – with sets of key principles. Also there are six areas of focus within the strategy, with a series of objectives under each, which will work towards achieving the vision. Cross cutting all of this are two priorities around supporting all age mental health and wellbeing; and tackling inequalities.

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
- Delivery healthy places with accessible and inclusive services

This EIA has identified indirect impacts from the Joint Health & Wellbeing Strategy and Locality Plan for a range of protected characteristics (age; disability; ethnicity; sex and pregnancy & maternity). It has also identified some of the protected groups determined locally in Tameside which are indirectly affected including people with mental health issues; carers; people who are breastfeeding; cared for children; care leavers; and people in low or no income groups. Finally some additional groups have been identified who will be affected by the priorities and objectives set out in this strategy including those living with long term chronic health conditions; Children with Special Educational Needs and Disabilities; and Young People not in Education Employment or Training.

For all of the groups identified above which are affected by this strategy, the intention is that there will be positive impacts for these protected groups due to the nature of the priorities and objectives set out in the strategy. For each of the 6 areas of focus, a set of key objectives has been outlined which commit the Tameside Health & Wellbeing Board and the GM Integrated Care Partnership to delivering on these ambitions and making improvements in order to improve health and wellbeing and the support on offer, particularly for some of the protected groups identified. Examples of this include the focus in the 'best start for every child' priority on breastfeeding and maternity services to support mothers and babies; support for children in care and care leavers; and support for more vulnerable children such as those living in poverty. Other examples include the priority around 'enabling Tameside residents to grow old with dignity and independence' which focus on evidence from the recent Ageing Well Needs Assessment (2022) which identifies older women, older carers, older people with disabilities and older people in ethnic minority communities as being at greater risk of poorer outcomes due to existing inequalities and therefore commitments are made to improve the support available and the focus on this.

In terms of ongoing monitoring, accountability and assurance that these priorities are being followed up and improvements are made, the intention is that two action plans will be developed to sit under this strategy, one for the Health & Wellbeing Board (continuing with a focus on the priorities of poverty, work & skills, and healthy places), and one for the Tameside Strategic Partnership Board (with a focus on health and social care delivery in Tameside). These action plans and progress will be regularly held to account via existing governance at these two forums which meet in public regularly. There will also be outcome and metric monitoring as part of this as outlined in section 10 of the strategy document, with a range of indicators to measure progress to ensure that improvements are made. These include direct measurement of protected groups including the rate of child poverty; rate of breastfeeding initiation; improve falls rates and life expectancy of older people; reduce social isolation of older people; increasing proportion of people with a long term disability in employment.

2b. Issues to Consider

When looking at the protected characteristic groups affected by this strategy, a number of issues have been taken into consideration when priority setting (it should be noted that the impact of this strategy on protected characteristic groups are overwhelmingly positive and aim to tackle the inequalities these groups face):

Age – Two of the key priorities/areas of focus within the Strategy a focussed on the best start for children and supporting people as they grow older. While these are directly impacting groups of the population based on age, these priorities are targeted at work and improvements for those who need support the most and will benefit all residents. There is a focus on all age responses and approaches as well such as improving all age mental health and wellbeing. Evidence suggests that a focus on giving children the best start in life protects them from further adverse outcomes and inequalities throughout life, hence the focus on this aspect of the strategy. There is also a focus on enabling people to grow old due to the nature of health issues and ageing (increasing

age is a risk factor for most illnesses). There are a number of areas linked to older people where we know further work is needed such as improving the experience and outcomes of older women, those who are disabled or carers, and ethnic minority communities – these issues are informed by the recently Ageing Well Needs Assessment for Tameside. There is also evidence of the disproportionate impact of some health issues on younger people in Tameside, for example Tameside has the highest rate of under 19 hospital admissions for asthma in the country, which is highlighted in the recent Inequalities Report produced by TMBC Population Health.

Disability - This strategy is inclusive of those living with a disability and sets out priorities to support residents, particularly children and young people and adults with learning disabilities, and helping those with disabilities get into employment

Ethnicity – People from ethnic minority communities in Tameside face additional barriers and inequalities in health outcomes – this strategy sets out priorities to tackle this such as supporting older ethnic minority communities based on insight from the 2022 Ageing Well Needs Assessment. Outcomes data for a range of health measures also show that people in ethnic minority communities have poorer outcomes including issues such as cardiovascular disease, diabetes and uptake of primary care (including immunisations). This strategy highlights these issues to drive improvements and to tackle them, reducing the inequalities faced by ethnic minority groups in Tameside.

Sex - Evidence put forward in this strategy outlines the inequalities in health outcomes experienced by women in Tameside, with females aged 65 in Tameside having the worst life expectancy in the country. This strategy sets out objectives to tackle these inequalities, particularly for support available to older women and service access for women in general. This will run alongside a focus on universal offers as well for men and women. There remain other issues where men have increased risk or worse outcomes in Tameside, however the outliers when comparing to other areas, are predominantly outcomes for women including overall life expectancy (particularly in older age), cardiovascular disease, cancer and alcohol related conditions. These areas are a focus of this strategy and work will continue to prioritise these issues to address and reduce this inequality that women face in Tameside.

Pregnancy & Maternity - Some of the priorities outlined in this strategy refer to improving support for pregnant women and maternity care. This includes a focus on supporting breastfeeding, tackling smoking in pregnancy and alcohol exposed pregnancies to improve outcomes for mothers and babies. These are all areas where people in Tameside experience inequalities, particularly for people living in more deprived areas. They are also issues which have a substantial impact across the life course both for the mothers and their babies, therefore a focus on this will result in improved outcomes in the long term (preventative).

This also applies to the protected groups as identified locally in Tameside:

People with mental health issues – This strategy recognizes the existing inequalities in mental health and wellbeing across the community and sets out specific objectives to improve this including the action to develop an all age borough wide mental health and wellbeing strategy. Mental health is a cross cutting theme in this strategy including tackling inequalities experienced by those living with severe mental illness, transforming community mental health services and reducing the impact of suicides. Mental health & wellbeing is a cross-cutting theme throughout this strategy due to the substantial impact mental health has on long term outcomes for all people. The framework and approach of 'Building Back Fairer, Stronger, Together' within the strategy also incorporates approaches which prioritise good mental health and wellbeing. There is also substantial evidence that some groups affected by mental health issues face inequalities such as those living with severe mental illness and learning disabilities & autism.

People who are breastfeeding - Some of the priorities outlined in this strategy refer to improving support for breastfeeding women as part of the 'best start for every child' area of focus. This is a priority due to the strong evidence of improved health outcomes for those who are breastfed

throughout their lives, hence this is an important, preventative aspect of 'best start for every child' – there are also existing inequalities in breastfeeding initiation with people from more deprived areas less likely to have been breastfed, therefore this strategy ensures a focus on this issue and tackling this inequality. There is also evidence of the benefits to mental health and wellbeing both for the mother and baby (in the long term) from breastfeeding.

Cared for children - The support outlined in the strategy will apply to cared for children, particularly in relation to giving every child the best start with an objective around young people leading positive lives and reducing exposure to health harms such as tobacco and alcohol. There is extensive evidence that people who have been cared for children can experience inequalities and poor health outcomes throughout their lives, therefore this strategy aligns with existing approaches in the borough to support cared for children (including the Children & Young People's Plan; Early Help Strategy; Parenting Strategy) and also places a focus on the inequalities that cared for children face to ensure that this is recognised and built into approaches to provide adequate support and access across the system. Some examples of this kind of work will include working on social value contribution of commissioned providers across public services to divert resources to ensuring cared for children/care leavers are given apprenticeship and employment opportunities with a range of services and organisations.

Care leavers - The support outlined in the strategy will apply to care leavers, particularly in relation to giving every child the best start with an objective around young people leading positive lives and reducing exposure to health harms such as tobacco and alcohol. Also objectives around contraception access for young people, and committing sustainable resources to in-work support programmes led by the council's work and skills team, some with a particular focus on supporting care leavers. Similar to the above points relating to cared for children, there is evidence that care leavers experience poor health outcomes throughout their lives, therefore this strategy aligns with existing approaches in the borough to support care leavers (including the Children & Young People's Plan; Early Help Strategy; Parenting Strategy) and also places a focus on the inequalities that care leavers face to ensure that this is recognised and built into approaches to provide adequate support and access across the system. Some examples of this kind of work will include working on social value contribution of commissioned providers across public services to divert resources to ensuring care leavers are given apprenticeship and employment opportunities with a range of services and organisations.

Carers – objectives have been set to improve the system wide understanding of the support needs of carers (particularly older people) and how to give better support to these groups, including those who may be living with carers who can be indirectly affected. Evidence of this came out of the 2022 Ageing Well Needs Assessment, which included resident engagement, where these points came across and which further highlighted some of the inequalities that unpaid carers experience, including adverse impacts on their mental health & wellbeing.

People in low or no income groups - Evidence presented in the strategy identifies that low income groups also experience inequalities in health outcomes. A recurring theme of providing more support to those in more deprived areas or in greater need to tackle inequalities is included throughout the strategy. There are also specific objectives under 'Strengthening Our Communities' around tackling poverty and supporting the delivery of the Tameside Tackling Poverty Strategy. This Health & Wellbeing strategy will go on to produce action plans for meeting all the objectives outlined and will also align closely to the Tackling Poverty Strategy, including measures to monitor the rate of poverty, child poverty and fuel poverty. This work will continue to be reported into the Health & Wellbeing Board, which holds oversight over both the Health & Wellbeing Strategy and the Tackling Poverty Strategy.

Finally some additional groups have been identified who will be affected by the priorities and objectives set out in this strategy including:

People living with long term chronic health conditions – under the priority around helping people to live well and detect illness earlier in the strategy, there are objectives to focus on secondary

prevention by finding more people with risk factors or long term conditions and tackle the barriers they face in accessing support. There are elements of intersectionality for this group, with other inequalities also being barriers and additional risks such as people living in more deprived areas; women; and ethnic minority communities. The strategy drives approaches which take these inequalities into account and looks to innovative approaches to tackle the barriers that certain groups face. There is also a wide range of evidence of the disproportionate impact of many long term health issues such as the impact of alcohol consumption, obesity and smoking. These are highlighted in the recent report on inequalities produced by TMBC Population Health.

Children with Special Educational Needs and Disabilities - One of the objectives under the 'best start for every child' priority is to remove barriers for children and young people living with SEND. This is also embedded in approaches throughout all priorities and objectives in the strategy with improving mental health & wellbeing being a cross cutting theme throughout the whole strategy and the 'Building Back Fairer Stronger Together' approach. Some of the areas this is a particular issue for is service access and pathways with long wait lists for service support in some areas/providers. This priority in the strategy will ensure an ongoing focus on these issues to tackle barriers and improve access for children with SEND.

Young People not in Education Employment or Training - The priority around helping people get into and stay in good work includes focus on those young people who are NEET. There is evidence that people in this group face more adverse outcomes in the longer term and are at risk of other issues such as poverty and mental health issues. The priorities within this strategy will ensure an ongoing focus on this issue which will have oversight and continued work from the Health & Wellbeing Board which will include input from key services such as education partners, DWP (Jobcentre) and TMBC Work & Skills team who provide and commission services to support this group.

2c. Impact / Relevance

As outlined in the strategy, there is extensive evidence of the disproportionate impact of unequal conditions and circumstances that many people in our community face. The strategy presents a range of data on health inequalities and particularly how these impact people's long term health outcomes throughout the life course. This relates to the protected characteristics and local factors already identified in the screening and section 2b of this EIA. The aim of this strategy is to raise awareness of these inequalities and outcomes across the system and to drive work to tackle these, linking closely with other relevant system strategies.

This strategy provides the priorities and plans for the health & wellbeing board as well as the priorities and structures for the health and care system in Tameside – hence why this is a joint Health & Wellbeing Strategy and Locality Plan. This is accountable to both the Health & Wellbeing Board and the Strategic Partnership Board (Locality Board under the GM ICB) in Tameside.

The intention of the specific objectives under the 6 areas of focus within the strategy are to make specific improvements in health and wellbeing across Tameside to close the gap of poorer health outcomes between those who are living in more deprived areas or those facing other inequalities and barriers including women, older people, and people in ethnic minority communities.

While the objectives under 'giving every child the best start in life' are specific and relate to services, these are preventative in terms of the life course and all services and access points will be increasingly targeted towards those who are in need of more support and face additional barriers.

Under the priority 'helping people to stay well across the life course', there is a focus on secondary prevention to support those at greater risk of long term health conditions, but also to adapt approaches to doing this to ensure that inequalities are addressed and methods to engage with

people are based on tackling barriers and finding people who have traditionally faced challenges in accessing support.

The priority 'enabling all Tameside residents to grow old with dignity and independence' will have a focus on the groups of older people who face additional barriers and require more support. This includes the groups identified in the recent Ageing Well Needs Assessment including older women, ethnic minority communities and those living with a disability.

While the majority of the priorities and ambitions within the strategy are relatively high level and apply to wider services across multiple partners and the borough as a whole, these will be distilled down further into robust action plans, which will continue to be under the scope of this EIA and any impacts on the groups listed in previous sections will be considered. While there is no direct service uptake or usage data included within this assessment, there is assurance that there are no negative impacts on any protected characteristic or other groups as a result of the work that is being driven by and proposed as part of this strategy. The action plans associated with this strategy will be developed by partners at both the Tameside Health & Wellbeing Board and the Strategic Partnership Board, with ongoing monitoring and assurance of these also taking place at these boards, with continued work on this EIA and monitoring of the potential positive and/or negative impact of the specific interventions on protected groups.

2d. Mitigations (Where you have identified an impact/relevance, what can be done to reduce or mitigate it?)

Impact / Relevance 1 (Describe)

n/a – no negative or adverse impacts have been identified as a result of implementing the Tameside Joint Health & Wellbeing Strategy and Locality Plan. Where there is a specific focus on a protected group in order to address particular inequalities or existing adverse outcomes for that group, a balance between targeted enhanced support for those who need it more, and ongoing universal service offers will be maintained.

2e. Evidence Sources

Tameside Joint Strategy Needs Assessment

(https://www.tameside.gov.uk/publichealth/healthandwellbeing) including: Ageing Well Needs Assessment (2022); Tameside JSNA Summary – Post-COVID-19 Pandemic Inequalities and Recovery in Tameside (2023); CYP Needs Assessment (2021); Health & Wellbeing – Tameside 100 Children; Tameside Cycle of Inequalities

Building Resilience: Tackling Poverty in Tameside (2023) - https://www.tameside.gov.uk/tacklingpovertystrategy

Greater Manchester Integrated Care Partnership Strategy (2023) - https://gmintegratedcare.org.uk/greatermanchester-icp/icp-strategy/

Gov.uk Health & Wellbeing Boards: Guidance (updated 2022) - https://www.gov.uk/government/publications/health-and-wellbeing-boards-guidance

2f. Monitoring progress				
Issue / Action	Lead officer	Timescale		
Publication of Joint Health & Wellbeing Strategy and Locality Plan (2023-2028) via Tameside Health & Wellbeing Board and Tameside Strategic Partnership Board	James Mallion	By 30/09/2023		
Agreed metrics for outcomes monitoring under the strategy including priorities highlighted around protected groups as part of the EIA	James Mallion / Tameside Provider Partnership	Autumn 2023		
Agreed action plans for the Health & Wellbeing Board workplan (agreed at Health & Wellbeing Board) and the delivery of the Locality Plan under the health and care system (agreed at Tameside Strategic Partnership Board)	James Mallion / Steph Sloan	By end December 2023		
Ongoing monitoring of outcomes and action plans including regular review of EIA priorities under this strategy at the point of significant milestones such as the publication of the action plans under the strategy, and as a minimum on an annual basis going forward.	James Mallion / Steph Sloan	Ongoing		

Signature of Contract / Commissioning Manager	Date
Judhan	21/08/23
Signature of Assistant Director / Director	Date
May	21/08/23

Guidance below to be removed from the completed EIA template submitted to Executive Board, Executive Cabinet or Strategic Commissioning Board (SCB)