

Tameside Metropolitan Borough Council Equality Impact Assessment (EIA) Form

Subject / Title	Tameside Healthy Places Strategic Framework	
Team	Department	Directorate
Public Health	Public Health	Public Health
Start Date	Completion Date	
December 2023	February 2024	
Project Lead Officer	Beth Wolfenden	
Contract / Commissioning Manager	N/A	
Assistant Director/ Director	James Mallion	
EIA Group (lead contact first)	Job title	Service
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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?	<p>The EIA is being undertaken to prevent the strategic framework from adversely affecting people with different protected characteristics or at known disadvantage. The template will identify potential discrimination or disadvantage, propose steps to strengthen against those and record and monitor the success of those strengthening actions.</p> <p>The Healthy Places strategic framework sets out the overarching ambition, mission and strategic objectives from the priority areas of food, healthy weight, physical activity and tobacco control across Tameside from 2023 to 2028. It also sets out the overarching framework for action at a population level as a tool for partners and stakeholders to review their existing approaches to improving residents' health and wellbeing in the borough.</p>
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1b.

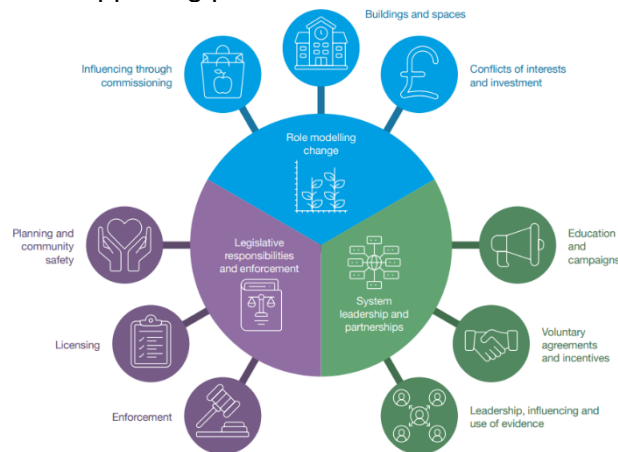
What are the main aims of the project, proposal or service / contract change?

The strategic framework will reflect the approach of the recently adopted Health and Wellbeing Strategy by taking a life course, place based, whole system approach to make health everybody's business. The framework is also designed to support delivery local action plans and frameworks relating to tobacco control, food, physical activity, and healthy weight.

The ambition of the strategic framework:

'We will work together to provide the encouragement, opportunity, and environment for everyone in Tameside to lead active, healthy and fulfilling lives. Through collaboration and innovation across the whole system, we will work to build back, fairer, stronger together, to deliver a healthy Tameside for everyone.'

The 'Tameside Healthy Places' strategic framework for action identifies nine discrete mechanisms across three domains which can be used to deliver a healthy place through population-level actions. This is a tool to help partners and stakeholder to review their existing approaches and identify additional opportunities to improve the health of Tameside residents. The framework is not prescriptive or all encompassing, and there may be wider mechanisms not captured in the framework that may also be included in the supporting plans.



There are two cross cutting themes / objectives throughout this strategy which are tackling inequalities and being evidence, data and insight led.

There are four key priority areas of food, physical activity, healthy weight and tobacco control, each with their own strategic objectives that will have supporting delivery plans covered by separate EIAs.

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		This strategic framework is inclusive of all ages and takes a life course approach. There is a

				focus on all age responses and approaches as well such as improving neighbourhoods to promote health for all ages.
Disability		<u>x</u>		This strategic framework is inclusive of those living with a disability and the accompanying delivery plans for food, physical activity, healthy weight and tobacco control will set out priorities to support inclusivity e.g. making greenspace accessible to all.
Ethnicity		<u>x</u>		People from ethnic minority communities in Tameside face additional barriers and inequalities in health outcomes – this framework sets out priorities to tackle this such as ensuring the views of our ethnic minority communities are sought in the consultation, and that different food cultures are recognised and celebrated.
Sex		<u>x</u>		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 framework will be aware of gender differences e.g. caring responsibilities and how that impacts on the ability to earn income, afford healthy food or access services such as to stop smoking.
Religion or Belief			<u>x</u>	The priorities outlined in this framework apply to all residents in the borough and present equal opportunity to support regardless of religion or belief.
Sexual Orientation			<u>x</u>	The priorities outlined in this framework 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 framework apply to all residents in the borough and present equal opportunity to support regardless of gender reassignment.
Pregnancy & Maternity		<u>x</u>		Some of the priorities outlined in this framework refer to improving support for pregnant women and maternity care. This includes a focus on supporting breastfeeding, tackling smoking in pregnancy to improve outcomes for mothers and babies. It also includes increasing accessibility for walking, which includes those pushing prams being able to access traffic free routes.
Marriage & Civil Partnership			<u>x</u>	The priorities outlined in this framework apply to all residents in the borough and present equal opportunity to support regardless of marriage or civil partnership.
Other protected groups determined locally by Tameside Metropolitan Borough Council?				
Group (please state)	Direct Impact / Relevance	Indirect Impact / Relevance	Little / No Impact / Relevance	Explanation
Mental		<u>x</u>		This framework recognises the existing

Health				inequalities in mental health and wellbeing across the community and sets out specific objectives to improve this through increasing opportunities for physical activity. Regular physical activity is a both a preventative measure and a means of recovery for mental health conditions. Mental health is a cross cutting theme in this strategy including tackling inequalities experienced by those living in areas of high deprivation.
Carers		<u>x</u>		Carers have been identified and recognised in a range of evidence as requiring support to have equitable access to opportunities for movement and activity. In particular young carers have less opportunity to participate in traditional sports and clubs. Working with clubs to create inclusive policies is a feature of this strategy.
Military Veterans			<u>x</u>	The priorities outlined in this framework apply to all residents in the borough and present equal opportunity to support regardless of being military veterans.
Breast Feeding		<u>x</u>		Some of the priorities outlined in this framework refer to improving support for breastfeeding women. This will be driven through the food partnership action plan to support the best start in life ambition.
Cared-for Children		<u>x</u>		The best start for children will be threaded through numerous priorities outlined within this framework which could indirectly impact cared-for children. By working to develop an environment that supports children to grow up in a healthy place e.g., through de-normalising unhealthy environments and behaviours.
Care Leavers		<u>x</u>		Priorities outlined in the framework will indirectly impact care leavers in Tameside. Priorities will focus on developing an environment that supports young people to transition into adulthood in a borough where exposure to health harms are reduced and health is promoted e.g., smokefree spaces, healthy and sustainable cooking knowledge and skills.
Low or no income groups		<u>x</u>		Health outcomes are poorer for those on a lower income or no income. Priorities within this framework will be informed by data and local intelligence to target support to those in more deprived areas or in greater need to tackle health and social inequalities.

**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 (please state)	Direct Impact / Relevance	Indirect Impact / Relevance	Little / No Impact / Relevance	Explanation
People living with		<u>x</u>		This strategy takes a whole systems approach and a key theme throughout will be on

long term chronic health conditions				prevention, meaning the priorities and actions will support people to live well, target high risk groups to reduce health harms and health inequalities and detect illness earlier such as long-term conditions.
Children with Special Educational Needs and Disabilities				People with disabilities are more likely to experience health inequalities and health harms therefore priorities outlined in the strategy will work towards supporting children with special educational needs and disabilities, by working to create a borough that provides greater opportunities for children and young people with SEND to access healthy places and prevent exposure to health harms as they develop and grow.
Young People not in Education Employment or Training				The best start for children and young people is threaded through this strategy, through focusing on creating a borough where young people are supported by the environment around them, to be supported to access education or obtain good employment, that will set them up for adult life.

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
		x	
1e.	What are your reasons for the decision made at 1d?	This is a wide-ranging strategic framework 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

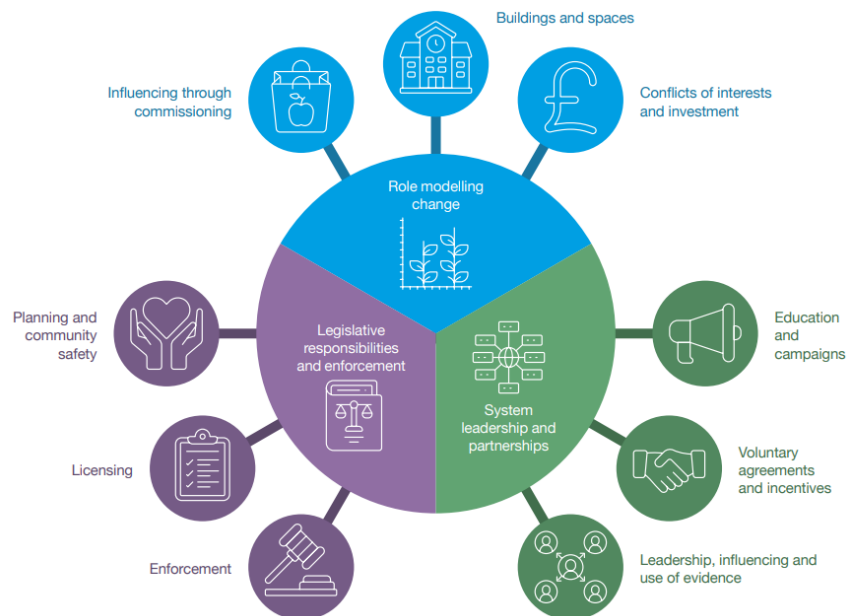
2a. Summary
<p>The EIA is being undertaken to prevent the strategic framework from adversely affecting people with different protected characteristics or at known disadvantage. The template will identify potential discrimination or disadvantage, propose steps to strengthen against those and record and monitor the success of those strengthening actions.</p> <p>This EIA has been undertaken due to the broad nature of the Tameside Healthy Places strategic framework (2024-2028). This is a strategic overview of the framework for action and the visions and objectives of the identified areas for focus. The strategic framework and supporting delivery plans 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</p>

of the plan is to aim to improve the health and wellbeing of residents in Tameside through a whole system approach, 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 the health inequalities that are faced by people in Tameside and make many improvements of their lives including and particularly those with some of the protected characteristics identified.

The proposals and key points for this strategic framework are set out to achieve the following ambition:

‘We will work together to provide the encouragement, opportunity, and environment for everyone in Tameside to lead active, healthy and fulfilling lives. Through collaboration and innovation across the whole system, we will work to build back, fairer, stronger together, to deliver a healthy Tameside for everyone.’

This will be achieved via a strategic framework for action through nine discrete mechanisms across three domains which can be used to deliver a healthy place through population-level actions. They are as follows:



There are 4 areas of initial focus for action:

Areas of focus:

- Whole system approach to healthy weight
- Food and nutrition
- Physical activity
- Tobacco control

This EIA has identified indirect impacts from the Tameside Healthy Places strategic framework 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 strategic framework, 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 framework. For each of the 4 areas of focus, a set of key objectives has been outlined which commit the Tameside Health & Wellbeing Board 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.

In terms of ongoing monitoring, accountability and assurance that these priorities are being followed up and improvements are made, the intention is that an action plan will be developed to sit under this strategic framework and delivery plans for each of the areas of focus. These action plans and progress will be regularly held to account via existing governance at the Health and Wellbeing Board which meets in public regularly. There will also be monitoring and evaluation framework developed, 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 obesity; rate of breastfeeding initiation; improving falls rates and reducing smoking amongst high-risk groups e.g. those in no- or low-income groups.

2b. Issues to Consider

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

Age – The Healthy Places Framework aims to create healthy environments and neighbourhoods for all ages, throughout the life course. While parts of the framework will focus on particular age groups, the priority will be to targeted changes for areas with the greatest health inequalities. There is a focus on all age responses and approaches as well such as improving all age mental health and wellbeing. We know that residents need different things from their environments depending on their age and abilities; for example, parents of young children need access to health services, community services and childcare, whereas older people may need support with travel to access services, or advice about support for care.

Disability – This strategic framework 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 strategic framework is informed by 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 strategic framework highlights these issues to drive improvements and to tackle them, reducing the inequalities faced by ethnic minority groups in Tameside. Health outcomes for people from Black, Asian and Minority Ethnic backgrounds have historically tracked lower than white ethnicities, brought to light especially during the COVID pandemic. Language barriers also present barriers to communication

Sex – There are 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 aims to tackle these inequalities, such as by ensuring access to affordable healthy food to feed the family and ensuring public spaces are safe for women and children. This will run alongside creating healthy places for both 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. Creating healthy environments will contribute to reducing this inequality that women face in Tameside.

Pregnancy & Maternity – Some of the priorities outlined in this strategic framework refer to

improving support for pregnant women and maternity care. This includes a focus on supporting breastfeeding, tackling smoking in pregnancy and supporting opportunities for physical activity and nutrition advice to improve outcomes for mothers and babies. It includes ensuring equitable opportunities for pregnant women and those with infants to access physical activity in the built environment by aiming to create active travel and leisure routes that are suitably surfaced for prams, and free from excessive or unnecessary barriers and gates, or temporary obstructions such as pavement parking and bins. 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 – People with mental health issues – This strategic framework recognises the existing inequalities in mental health and wellbeing across the community and sets out specific objectives to improve this. 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 strategic framework 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. Healthy places must incorporate appropriate places for women to feel comfortable breastfeeding both indoors and outdoors. When ensuring breastfeeding mothers can access equitable opportunities to be active in greenspace, this includes appropriate places to pause and feed a baby out of the home.

Cared for children – Evidence indicates that cared for children have poorer health and social outcomes such as poor physical health which can disrupt their lives and worsen into adulthood if cared for children and young people are not provided with the right support for their needs. The support outlined in the strategy will apply to cared for children, particularly in relation to giving every child the best start with priorities focusing on creating an environment that reduces exposure to health harms and normalises healthier behaviours e.g., through smokefree spaces and active travel. Taking a whole systems approach means that partners who support children and young people can empower cared for children to become healthy decision-makers in relation to living a smokefree life, moving more and eating well.

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. There is evidence that demonstrates care leavers are more likely to experience poorer health outcomes such as being overweight and obese due to entering the care system with poor nutritional status and poor mental health that can influence poorer outcomes related to food. NICE evidence review (2021)¹ detailed that promoting healthy lifestyles in looked after children is likely to have a beneficial impact on mental and emotional health as well as reducing risk of obesity and diet-related ill-health. Research also indicates that looked after children are more likely to smoke than the general population of young people, therefore having a whole system approach to healthy places for nutrition, healthy weight, physical activity and smoking through supporting care leavers to transition into adulthood in an environment that supports them to make healthier choices is likely to have a positive impact.

Carers – objectives have been set to improve the system wide understanding of the support needs

¹ [Evidence reviews - October 2021 | Looked-after children and young people | Guidance | NICE](#)

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 – Health outcomes are poorer for those on a lower income or no income. Priorities within this strategic framework will be informed by data and local intelligence to target support to those in more deprived areas or in greater need to tackle health and social inequalities. National evidence demonstrates that those who live in more deprived areas, have a lower level of education and have a working status of unemployed or inactive are more likely to have an unhealthy weight². We also know that smoking disproportionately affects lower income groups. Prevalence is higher within more deprived communities, such as routine and manual workers have higher smoking prevalence (34%) than the general population of smokers in Tameside (20%)³, and that children who live with parents or siblings who smoke are up to three times more likely to become smokers than children of a non-smoking household, which demonstrates the cycle of smoking continuing within generations of deprived communities.

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 – This strategic framework takes a whole systems approach and a key theme throughout will be on prevention, meaning the priorities and actions will help people to live well, target high risk groups to reduce health harms and health inequalities and detect illness earlier such as long-term conditions. 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 obesity and smoking. These are highlighted in the recent report on inequalities produced by TMBC Population Health.

Children with Special Educational Needs and Disabilities – People with disabilities are more likely to experience health inequalities and health harms. National data demonstrates that disabled adults are more likely to be overweight or obese than adults who do not have a disability. This validates the importance that the priorities outlined in the strategy work towards supporting children with special educational needs and disabilities, by working to create a borough that provides greater opportunities for children and young people with SEND to access healthy places and prevent exposure to health harms such as overweight and obesity as they develop and grow.

Young People not in Education Employment or Training – The best start for children and young people is threaded through this strategic framework through focusing on creating a borough where young people are supported by the environment around them to be supported to access physical activity, nutritious food, maintain a healthy weight and be tobacco and vape free to set them up for adult life. This group are more likely to experience poverty which is closely linked to overweight and obesity and smoking therefore this emphasises the importance of key services and professionals who support young people are crucial to influencing positive lifestyle choices as well as supporting young people to access education and work.

Consultation and Engagement

Strategic consultation on the Healthy Places Framework against each of the strategic plans took

² [Obesity Profile - Data - OHID \(phe.org.uk\)](https://www.phe.org.uk/data/obesity-profile)

³ [Local Tobacco Control Profiles - Data - OHID \(phe.org.uk\)](https://www.phe.org.uk/data/local-tobacco-control-profiles)

place between November 2023 and January 2024.

The Health and Wellbeing Board Development Session provided the opportunity to engage with Board members on Tameside's proposed whole system approach to food, physical activity and tobacco within the Healthy Places agenda. Key messages from the session were:

- A whole system approach is key to tackle complex health and wellbeing issues
- To ensure there is a focus on poverty as a key driver that affects residents ability to make healthier choices
- Quick wins can be implemented that can have a big impact
- The importance of being guided by data and intelligence to allow for targeted activity
- The key role Board, Board members and their organisations hold in championing the Healthy Places Framework, delivery plans and policies within organisational practice.

The Whole Systems Approach to Healthy Weight Workshop was held with partners to encourage their contribution on the development of the Healthy Places Framework, consider the approach to healthy weight and explore the Healthy Weight Declaration to support Tameside's whole system approach to healthy weight. Key messages were:

- Appreciation is needed that prevention and benefits will not be realised for several years and prevention needs to remain a focus
- More than 'community engagement' is needed – co-production, enablement and ownership will bring about change
- Healthy Places/healthy weight needs to be considered across all strategic and development management for planning policy e.g., street safety to encourage activity
- Terminology around 'weight' needs to be compassionate to encourage engagement on this agenda
- Role modelling is important – council and ICB need to demonstrate what is achievable for other organisations
- Engagement with young people is key and recognise their power and influence
- Wider-partner engagement is needed to avoid declaration being seen as a 'council instruction'
- Senior leadership buy-in is needed to de-normalise unhealthy practices within the workplace
- Food offer within anchor institutions across Tameside should be reviewed to ensure consistency and ensure they are healthy and sustainable e.g., hospital, colleges, schools.

The Tobacco Control Workshop provided the opportunity for key partners from across the system in Tameside to contribute to the development of the tobacco plan within the Healthy Places Framework, by reviewing the current approach and identify opportunities to develop the stop smoking offer with additional government funding for the next five years. Key messages from the workshop were:

- Senior level buy-in is needed across the system to drive the tobacco-free agenda
- Causal roots of starting smoking and tobacco use needs to be understood, alongside how the wider determinants such as poverty and mental health can make it difficult for certain high risk groups to stop smoking
- Pathways into stop smoking support needs to be embedded across the system
- We need to meet smokers 'where they are' and not expect them to 'come to us'
- Ensure community assets are able to deliver brief interventions and signposting for stop smoking support
- Increased visibility of 'Smokefree Tameside' through communications to de-normalise smoking
- Build a network of 'Smokefree Champions' across Tameside to drive change and social movements within Tameside's communities.

The Tameside Active Alliance Workshop allowed for partners to contribute to the development of the physical activity plan within the Healthy Places Framework, by reviewing the strategic objectives and approach to promoting increased physical activity across Tameside. There was

also the opportunity to develop the physical activity offer as part of the Sport England funded Place Partner Work. Key messages from the workshop were:

- Ensure links to the anti-poverty agenda are recognised when considering accessibility to sport and leisure activity.
- Focus on inclusivity when designing physical activity spaces, programmes and interventions
- A sustained and consistent marketing and communications plan is needed on promoting physical activity
- Ensure approach to physical activity is place-based
- Quick wins need to be considered e.g., active travel for shorter journeys
- Recognise the importance of physical activity in ageing well
- Physical activity links to improving mental health benefits the individual, as well as the system
- The Active Alliance is a key driver for change in Tameside.

The Tameside Food Network were consulted on the food strategy as part of the Healthy Places Framework, to identify key priorities across the Tameside Food Partnerships six objectives that have been approved by the Health and Wellbeing Board. The Tameside Food Network also contributed to the consultation by providing input into key actions that would drive the Food Strategy and its action plans. Key messages from the workshop were:

- There is an opportunity to review the school food offer and explore procurement/contracts and ensure social value.
- There is appetite for cooking classes across the life-course to support people around making food but also where to shop more sustainably.
- Need to focus on prevention and maximising income of residents to reduce the risk of food insecurity.
- Community food growing should be in more accessible spaces e.g., parks, school fields, grass verges in residential spaces.
- Look to engage with businesses to encourage and support them to provide healthier food option.
- Need to flip the switch on advertisements in Tameside from unhealthy to healthy and future-proof Tameside against unhealthy food/drink promotion.
- Future goals: SFP Bronze Award, involvement with social housing and local businesses within Tameside Food Partnership.

A comprehensive programme of public consultation is currently in process, which looks at all strategic plans within the Healthy Places Framework. This consultation comprises of an online survey which asks respondents about each of the key themes (food, physical activity, healthy weight and tobacco) and recognises and respects individuals' choice, as well as the impact the environment can have on all of these agendas. Questions focus on desire and barriers to making healthier choices in relation to food and physical activity, as well as what system change can support residents' ability to make healthier choices within the environment they live and work in. Both the food and physical activity questions relate to how we can support residents to achieve and maintain a healthy weight.

A similar approach has been taken for the tobacco questions which focus on desire, barriers and system change to addressing tobacco in Tameside. Consultation is also being carried out with residents and groups through maximising on the opportunities to engage through various forums and sessions available to us to understand their views on the key agendas within the Healthy Places Framework.

The various consultation opportunities being explored and carried out by engaging with new and existing partners from across the system to engage with residents and groups across Tameside. All of this consultation and engagement will inform the strategic priorities within each strategy and the action plans for each. The strategies and action plans will be presented to the Health and Wellbeing Board in June 2024 as part of the Healthy Places Strategic Framework.

2c. Impact / Relevance

Use this section to outline what the impact or relevance of the changes being proposed is likely to be based on the evidence, and consultation & engagement? Will there be a disproportionate impact on, or relevance to, particular group/s? Does the evidence indicate that a particular group is not benefiting from the service as anticipated? What are the uptake / participation rates amongst groups? Where a greater impact on, or relevance to, a particular group is recorded, is this consistent with the policy's aims? Does the project, proposal and service / contract change include provision for addressing inequality of delivery / provision?

Try to distinguish clearly between any negative impacts or relevancies that are or could be unlawful (which can never be justified) and negative impacts or relevancies that may create disadvantage for some groups but can be justified overall (with explanation). Similarly, does the evidence point to areas of good practice that require safeguarding? How will this be done?

As outlined in the supporting Health and Wellbeing 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. The supporting Healthy places strategic framework aims to focus on promoting a healthy place for all residents of Tameside at a population level.

The strategic provides the priorities and plans for the Health & Wellbeing Board as well as the areas of focus for healthy places in Tameside which supports the overarching joint Health & Wellbeing Strategy and Locality Plan. This is accountable to the Health & Wellbeing Board in Tameside.

The intention of the specific objectives under the 4 areas of focus within the framework 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. More specific EIAs will be undertaken for each of these areas as the delivery plans are being developed. While the strategic framework for action is relatively high level and apply multiple partners and stakeholders and the borough as a whole, these will be distilled down further into a robust action plan, 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 the Tameside Health & Wellbeing Board, with ongoing monitoring and assurance of these also taking place at this board, with continued work on this EIA and monitoring of the potential positive and/or negative impact of the specific interventions on protected groups. Considerable effort is being invested into the development of metrics to ensure we are measuring what we set out to measure in the most meaningful way. We would favour an approach to information collection is able to identify as broad a reach into protected characteristics and beyond as possible – at a ward and neighbourhood level.


Equality is therefore core to this framework as it is aimed at creating a healthy place for Tameside residents to live, work and go to school in which will improve their health and wellbeing.

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

<p><i>Impact / Relevance 1 (Describe)</i></p>	<p>n/a – no negative or adverse impacts have been identified as a result of implementing the Tameside Healthy Places Framework. 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.</p> <p>An inclusive local communications approach will be developed for example in multiple languages, using a social marketing approach sensitive to the needs of our communities, and alternative to digital means will be developed.</p> <p>Training will be developed alongside the communication plan to raise awareness of inequalities including attitudinal / societal and discrimination impacts.</p> <p>As highlighted in the Borough Tackling Poverty Strategy, there is more to be done to identify those who face socio-economic disadvantage and offer services/support closer to home. More focus should be given on the areas where there is already discrimination and disadvantage which impacts outcomes.</p>
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<p>2e. Evidence Sources</p>
<p>'Building Back, Fairer Stronger Together' Tameside's Health and Wellbeing Strategy and Locality Plan 2023-2028 Building-Back-Fairer-Stronger-Together-Tameside-Joint-Health-and-Wellbeing-Strategy-and-Locality-Plan-23-28.pdf</p> <p>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</p> <p>Building Resilience: Tackling Poverty in Tameside (2023) - https://www.tameside.gov.uk/tacklingpovertystrategy</p> <p>Greater Manchester Integrated Care Partnership Strategy (2023) - https://gmintegratedcare.org.uk/greatermanchester-icp/icp-strategy/</p> <p>Gov.uk Health & Wellbeing Boards: Guidance (updated 2022) - https://www.gov.uk/government/publications/health-and-wellbeing-boards-guidance</p> <p>National Institute for Health and Care Excellence (2021) https://www.nice.org.uk/guidance/ng205/evidence/evidence-reviews-october-2021-333471052696?tab=evidence</p> <p>Office for Health Improvement and Disparities Obesity Profile, England (2021/22) https://fingertips.phe.org.uk/profile/national-child-measurement-programme/data#page/7/gid/1938133368/pat/159/par/K02000001/ati/15/are/E92000001/iid/93088/age/168/sex/4/cat/-1/ctp/-1/yr/1/cid/4/tbm/1/page-options/ine-yo-1:2021:-1:-1_ine-pt-0_ine-ct-115</p> <p>Office for Health Improvement and Disparities – Local Tobacco Control Profiles, Tameside (2022) https://fingertips.phe.org.uk/profile/tobacco-control/data#page/1/gid/1938132885/ati/402/iid/92443/age/168/sex/4/cat/-1/ctp/</p>

2f. Monitoring progress		
Issue / Action	Lead officer	Timescale
<i>Publication of Tameside Healthy Places Strategic Framework (2024-2028) via Tameside Health & Wellbeing Board</i>	<i>Debbie Watson</i>	<i>By 29/03/2024</i>
<i>Agreed metrics for outcomes monitoring under the strategy including priorities highlighted around protected groups as part of the EIA – engagement with system stakeholders.</i>	<i>Beth Wolfenden/ Healthy Places Subgroup</i>	<i>Autumn 2024</i>
<i>Agreed action plans for the Tameside Healthy Places strategic framework (agreed at Health & Wellbeing Board)</i>	<i>Beth Wolfenden / Healthy Places Subgroup</i>	<i>Autumn 2024</i>
<i>Ongoing monitoring of outcomes and action plans including regular review of EIA priorities under this strategic framwwork 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.</i>	<i>Beth Wolfenden / James Mallion</i>	<i>Ongoing</i>

Signature of Contract / Commissioning Manager	Date
	08/02/2024
Signature of Assistant Director / Director	Date
