

Title of proposal:										Description of potential mitigation
Gateshead Health and Wellbeing Strategy To improve health and wellbeing outcomes for residents in Gateshead and address the existing health inequalities through interventions aligned with 6 priorities.	Age	Race	Sex	Gender reassignment	Disability	Religion or Belief	Pregnancy and Maternity	Sexual Orientation	Marriage and Civil Partnership	
Equality impact: (✓ all that apply. The assessment should also consider impact on council employees and carers where applicable)										
Description of impact:										
 The strategy identifies 6 priority areas to tackle health inequalities. The first and key priority is; Give every child the best start in life with a focus on conception to age 2. 	Υ		Υ				Υ			Focusing resources on the first 1000 days of life will have a positive impact on the health and wellbeing of children and mothers. Interventions will be targeted geographically where most in need so are likely to benefit children more in areas of high health inequalities.



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The strategy and actions arising from it will look to address existing health inequalities. This could include measures which impact on residents across the whole range of protected characteristics but will be designed to have a positive impact, by improving health outcomes.								
Health impact: (eg physical, mental heal	th, wellbei	ng, subst	ance misu	se)				
The overall aim of the strategy is to improve the health and wellbeing of people in Gateshead by tackling health inequalities and meeting needs as identified in the JSNA. These include physical, mental health, emotional wellbeing and addressing specific health needs and a positive impact on health related behaviours and the wider determinants of health.								Positive impact
Socio Economic impact: (eg neighbourho wealth)	od, ward,	area of d	eprivation	, house	hold gro	up, inc	come,	Positive impact in areas of need by targeting
Targeting of interventions to improve her requiring the most help to reduce health	resources towards those communities in greatest need. This is to make the biggest possible difference to existing health inequalities. This is a different approach to							
There is a correlation between areas of d result in a positive impact.	eprivation	and areas	of nealth	inequal	ities so t	nis sno	oula	how we previously allocate resources based on everyone getting the same access to
								services across the borough – core services would continue, but where required
								additional support will be directed to priority



	communities. Areas of Gateshead which are not identified as requiring as much support may see reduced investment in the future as a result.
Environmental impact: (does the proposal impact on climate change and the Council's commitment to be carbon neutral by 2030?) One of the 6 aims of the strategy is to "Create and develop sustainable place and communities". So the strategy will actively support the work on addressing Climate change in Gateshead and the council's commitment to be carbon neutral by 2030. To do this the strategy will support measures that deliver clean air and environmental improvements, including energy efficiency. It will also act to make Gateshead accessible to all, achieving a shift in sustainable forms of travel.	Positive impact
Cumulative impact: (consider impact based on successive budgetary decisions relating to the proposal or is the proposal part of wider budgetary considerations that may collectively have an impact on service users, and is potentially at odds with the Thrive agenda)	



Summary of consultation/data/research undertaken to inform the assessment:

(eg feedback and engagement with service users, trade unions, employees, partners, public, benchmarking, case studies)

A wide programme of engagement to inform development of the strategy has taken place. Starting with a conference on the Marmot 10-year review of "Fair Society, Healthy Lives" in January 2019 with over 80 attendees contributing to and helping to shape the strategy, and a follow up session for council officers, partners and councillors in July 2019 on initial thinking in developing a new strategy.

The Health and wellbeing board members have actively participated in developing the strategy as well as a wider range of VCS organisations, academics and stakeholder organisations.

Signed: (completing officer)

Date: Rachel Mason 20 Feb 2020

Service Director: (approved)

Date: Alice Wiseman 20 Feb 2020