

Equality impact assessment (EIA) form: evidencing paying due regard to protected characteristics
(form updated June 2023)

North Yorkshire joint all age Autism Strategy

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যদি আপনি এই ডকুমেন্ট অন্য ভাষায় বা ফরমেটে চান, তাহলে দয়া করে আমাদেরকে বলুন।
如欲索取以另一語文印製或另一格式製作的資料，請與我們聯絡。
اگر آپ کو معلومات کسی دیگر زبان یا دیگر شکل میں درکار ہوں تو برائے مہربانی ہم سے پوچھئے۔

Equality Impact Assessments (EIAs) are public documents. EIAs accompanying reports going to County Councillors for decisions are published with the committee papers on our website and are available in hard copy at the relevant meeting. To help people find completed EIAs, we also publish them in our website's Equality and Diversity section. This will help people to see for themselves how we have paid due regard in order to meet statutory requirements.

Name of Directorate and Service Area	Health and Adult Services (lead), Children & Young People's Services <i>[note this is a partnership strategy]</i> Impacts a range of service areas including Public Health, Adult Social Care, Prevention & Service Development, Inclusion, Wider Council services and departments
Lead Officer and contact details	Louise Wallace, Director for Public Health (louise.wallace@northyorks.gov.uk) and Abigail Barron, Assistant Director for Prevention and Service Development (abigail.barron@northyorks.gov.uk)
Names and roles of other people involved in carrying out the EIA	Stacey Annandale, Strategic Service Development Manager (NYC) Naomi Smith, Head of HAS Population Planning (NYC) Members of the Autism Steering Group which includes senior representatives from

	<ul style="list-style-type: none"> • Humber & North Yorkshire Integrated Care Board (North Yorkshire Place) • West Yorkshire Integrated Care Board (Bradford District and Craven Place) • Tees, Esk & Wear Valley (TEWV) NHS Foundation Trust • North Yorkshire Council • HMP Prisons & Probation service • Community First Yorkshire • Healthwatch North Yorkshire • Parent/carer representative
How will you pay due regard? for example, working group, individual officer	Through the Autism Steering Group
When did the due regard process start?	During the review of the current Autism Strategy which began in winter 2022.

Section 1: What are you proposing to do?

The co- development, publication, and implementation of a new all age strategy for meeting the needs of all people with autism in North Yorkshire 2024-2027.

The strategy is being developed and overseen by lead officers for autism across the following agencies

- Humber & North Yorkshire Integrated Care Board (North Yorkshire Place)
- West Yorkshire Integrated Care Board (Bradford District and Craven Place)
- Tees, Esk & Wear Valley (TEWV) NHS Foundation Trust
- North Yorkshire Council (Health & Adult Services and Children & Young People’s Services)
- HMP Prisons & Probation service
- Community First Yorkshire
- Healthwatch North Yorkshire
- Parent/carer representative

Co-production is being undertaken throughout the strategy with autistic people, carers, and families, as well as practitioners supporting them through a range of events from April through to September 2023 (further details below). This has created an autism ‘network’ of interested parties who are keen to continue to be involved with the development of the strategy. There will be a public consultation during end of November 2023 through to March 2024 which will provide the opportunity for people to comment and feedback about the strategy. Following the consultation period, the strategy will be

amended and strengthened as necessary to reflect the input of respondents. The final strategy will be adopted and published in Summer 2024.

The data and research referenced in this EIA can be found in more detail along with source information in the accompanying data pack. This is a draft EIA that will be shared for comment as part of the public consultation and updated before the strategy is finalised and adopted to reflect the views provided during consultation. It will also be reviewed during strategy implementation.

Section 2. Why is this being proposed? What are the aims? What does the authority hope to achieve by it? (For example, to save money, meet increased demand, do things in a better way.)

Producing a local autism strategy was a requirement from the national strategy “Fulfilling and Rewarding Lives” which stemmed from the Autism Act 2009, the first single-disability statute in the UK. The requirement was reiterated in the refresh of the national strategy ‘Think Autism’ which was published in April 2014 and its statutory guidance document ‘Statutory guidance for Local Authorities and NHS organisations to support implementation of the Adult Autism Strategy’, published March 2015. In 2021, the government launched a new national strategy, ‘the national strategy for autistic children, young people and adults 2021 -2026 and associated action plan 2021/2022. The new autism strategy for North Yorkshire has been developed as a local response to the national strategy as well as in order to build on the work of previous local strategies.

The vision set out within the draft North Yorkshire all-age autism strategy is that “Autistic children, young people and adults and their families in North Yorkshire enjoy full, happy, and healthy lives”. There are several draft priorities with actions which aim to improve the lives of autistic people across a various areas including education, employment, housing, criminal justice, health and supporting carers. This work will be enabled by a focus on working together, workforce, data & research and making best use of our resources.

Section 3. What will change? What will be different for customers and/or staff?

This strategy sets out plans to improve information, support, guidance, and services available for autistic people of all ages in North Yorkshire across a wide range of partners and organisations as well as communities. These actions have been developed to work towards the vision for each of our priority areas, as follows:

Priority Area	Vision
Education & Preparing for Adulthood	Autistic children and young people thriving at school and into adulthood
Employment	Autistic people thriving at work
Housing	To support autistic young people and adults with appropriate housing

Carers	Parents, carers, and families of autistic people are supported to thrive
Assessment, diagnosis, and support	Everyone can access the support they need when they need it. Access to assessment and diagnosis happens as early as possible in a person's life, with priority for those with the greatest need
Health and care	Autistic people of all ages live healthier and longer lives, supported by autism-friendly health and care services
Criminal and Youth Justice	Supporting autistic children, young people, and adults to be well supported when accessing the criminal and youth justice systems
Inclusive communities	North Yorkshire is an inclusive place to live, work and visit

Following the completion of a final strategy in response to feedback from the public consultation, more detailed annual delivery plans will be developed to take the commitments within the strategy forward.

Section 4. Involvement and consultation (What involvement and consultation has been done regarding the proposal and what are the results? What consultation will be needed and how will it be done?)

The strategy has been co-produced, designed and developed by autistic people and carers and practitioners supporting individuals. This has been achieved through the partnership of the Autism Steering group and the development of an 'Autism network' created through several engagement sessions.

The steering group journey commenced in 2022, with the establishment of the network from April 2023. Engagement sessions were undertaken in April 2023 with a mix of in person and virtual events taking place across each of North Yorkshire's main market towns. 104 people attended the events in April with 72 autistic people / carers. Supporting these sessions was also a robust questionnaire that was completed by 170 people with almost 6000 individual responses, with around 74% being an autistic person (126 people) or on behalf of an autistic person and 26% being a family/ parent carer. 82% of individuals were between the ages of 16 and 64 (with 22% of these between 16 years and 34 years and almost 60% between 34 and 64 years). The remaining 12% were over 65 and 6% preferred not to say. The respondents were located across all the 7 districts of North Yorkshire with approximately, 9% in Craven, 14% in Hambleton, 26% in Harrogate, 10% in Richmondshire, 5% Ryedale, 18% Scarborough, 15% in Selby and 3% other. Approximately, 77% of people responding identify as female, 17% identify as male, 5% prefer not to say and just under 1% describes myself in another way (92% answered that their gender was the same as assigned at birth, 7% preferred not to say and 1% answered no). 95% of people answered their ethnic group as white, almost 1% answered mixed / multiple ethnic groups, almost 3% preferred not to answer, almost 2% answered other. Almost 70% of people answered that they were heterosexual/ straight, almost 3% answered gay/lesbian, almost 10% answered bi-sexual, 3% other sexual orientation and

14% preferred not to say. Around 52% of people considered themselves not to be disabled and around 42% considering themselves to be disabled and 6% preferring not to answer. The survey captured several key themes but in particular we heard that there is a lack of understanding around autism, especially around presentation in women and girls with comments such as 'you don't look autistic' and 'autism in women is chronically underdiagnosed or ignored in women'.

A further 7 events were held in July for practitioners with around 104 people in attendance and additional attendance at community groups. A mix of in person and virtual events. Following this a further 7 events, specifically around action planning have been undertaken in September 2023 with around 77 people in attendance, with around 11 neurodiverse individuals or carers in attendance (noting that some people also attended multiple workshops). Feedback from this extensive engagement has been used to develop the first draft of the strategy ready for consultation.

Consultation planning is in progress for a 3-month consultation due to be undertaken from the end of November 2023 through to the end of March 2024. It is anticipated that this consultation will have a mixed methodology of virtual and in person events and surveys. A full consultation plan will be available.

Our EIA findings to date (see below) have highlighted that we need to ensure we hear feedback during consultation from people of different ages as well as different genders, given that diagnosis rates vary between these different groups. Similarly, as the prevalence of autism nationally varies between different ethnic groups, we will aim to reach people from a range of groups. We will aim to reach the armed forces community. The prevalence of autism is higher amongst transgender people and people identifying as LGBTQIA+. We will aim to reach as many people as possible as part of this consultation.

Section 5. What impact will this proposal have on council budgets? Will it be cost neutral, have increased cost or reduce costs?

Cost neutral? Yes.
Increased cost? No
Reduced cost? No

Within North Yorkshire Council there is no specific budget ring-fenced for autism, but rather, a range of services and budgets which are used to meet the needs of autistic people. There are no plans for the Council to derive savings specifically as a result of the autism strategy, and any incidental savings may be re-invested. There is no new funding for work on autism and any expenditure must be resourced from existing budgets. Through our work on the strategy, we will work towards improving value for money of Council services and making best use of resources by joining up across agencies. More widely, the strategy will have a positive economic impact through the priority focus on supporting autistic people to gain and/or maintain employment. A number of proposed

actions within the strategy are preventative in nature, which supports best value for money across public sector organisations.

Section 6. How will this proposal affect people with protected characteristics?	No impact	Make things better	Make things worse	Why will it have this effect? Provide evidence from engagement, consultation and/or service user data or demographic information etc.
Age		X		<p>Diagnosis rates are highest among children and younger people. School-based data, shows that the ratio of boys to girls with a diagnosis is around 3:1 while the Projecting Older People Population Information (POPPI) and Projecting Adult Needs and Service Information (PANSI) models use a ratio of 9:1 male to females. These models project population trends in adults (18 – 65 PANSI and 65+ POPPI). Therefore, showing that there are different age and gender ratios across diagnosis.</p> <p>Between April 2014 and April 2023, the number of PIP cases with entitlement who had autism increased year on year from 802 to 167,064 nationally. Cases for those aged 16-24 made up 62% of all cases with autism in April 2023 while those aged 45-64 made up a further 32%.</p> <p>Evidence suggests that autism may have a hereditary component. We have heard examples of children or young people being diagnosed with autism and then parent carers later also being diagnosed or self-identifying as autistic.</p> <p>Most of the local provision is focused on children and young people, as evidenced through a recent quote from engagement: “lots of people believe that autistic children become normal adults, so don’t need support after adulthood”.</p> <p>The strategy seeks to improve support and information available for adults. However, the strategy will also improve access and</p>

				<p>provision for children with autism. It should be noted that Covid has had a detrimental effect on access to services due to close downs and therefore the strategy aims to improve access around services.</p> <p>We recognise that some chapters maybe more relevant to particular age groups e.g., education, employment, housing, and age-appropriate services, but anticipate overall benefit throughout the changes being proposed.</p>
Disability		X		<p>Autism is a recognised disability. University of Newcastle research published in 2021 found that 18.1% of pupils with a diagnosis of autism also had learning difficulties.</p> <p>There are links between Autism and ADHD, dyslexia and dyspraxia, insomnia, anxiety, depression, obsessive compulsive disorder, learning disability, epilepsy, joint issues such as joint hypermobility syndrome / Ehlers – Danlos syndromes (NHS).</p> <p>The strategy aims to improve the experience of accessing information, guidance, and support for people with autism, and reduce barriers to access. The strategy also recognises that people may have autism and another condition which may increase the challenge for accessing services and increase the likelihood of poor health outcomes based on data/evidence. As we deliver our autism strategy, the challenges faced by autistic people with one or more additional conditions will also be considered.</p>
Sex		X		<p>We recognise that autism is often under-diagnosed in women and girls. School-based data, shows that the ratio of boys to girls with a diagnosis is around 3:1 while the POPPI and PANSI models (to project adult population trends) use a ratio of 9:1 male to females.</p> <p>Local engagement information highlights some of the challenges women and girls face around people’s understanding of the</p>

				<p>way autism presents differently in girls; 'you don't look autistic, there is a lack of understanding as I'm female'.</p> <p>We will monitor the number of girls/women being diagnosed to identify whether numbers of girls and women diagnosed with autism are changing over time. The strategy aims to improve pre and post diagnosis support for all based on a needs led approach. The strategy will explore the use of resources to reduce waiting times for assessment focussed on those with greatest need. The strategy will also work to improve equity of access and consistency of assessment.</p>
Race		X		<p>There is limited evidence available about the prevalence within these groups locally. However national figures from the University of Newcastle published in March 2021 showed that black and Chinese pupils were 26% and 38% more likely to be autistic respectively. Prevalence was found to be highest amongst pupils of black ethnicity (2.1%) and lowest in Roma/Irish Travellers (0.85%). It is anticipated that with target communication and appropriate support, the strategy should have a positive effect in reducing stigma and improving awareness across these groups.</p> <p>We know that gender identity and sexuality are more varied amongst autistic people than in the general population. Autism is more common amongst people who do not identify as their assigned sex at birth, a 2022 study stated that it was three to six times as common.</p> <p>National research also shows that autistic girls and women are more likely to identify as LGBTQIA+ and the prevalence of autism is higher amongst transgender people, which can result in discrimination when accessing care, cultural stigmas, violence and poor mental health outcomes and higher rates of suicidality.</p>
Gender reassignment		X		
Sexual orientation		X		
Religion or belief		X		
Pregnancy or maternity		X		
Marriage or civil partnership		X		

				<p>During local engagement in North Yorkshire, people told us they “don’t feel like people understand how autism presents differently in everyone. Especially how autistic people can mask, which is very common in women, trans/ nonbinary and ethnic minorities.”</p> <p>There has been some research undertaken by Sarah Hampton, Carrie Allison, Ezra Aydin and Simon Baron-Cohen, and Rosemary Holt from University of Cambridge in Feb 2022 that suggest that autistic women and other pregnant autistic people might be at a higher risk of perinatal mental health conditions given that autism and mental health conditions commonly co-occur, and that autistic people face additional stressors such as barriers to appropriate maternity care. The study explored self-reported stress, depression, and anxiety during the third trimester of pregnancy and self-reported parenting confidence and parenting styles explored at 6 months after birth. Autistic participants scored significantly higher than non-autistic participants on stress, depression, and anxiety across the time points although there were no group differences for satisfaction with life. Anxiety scored significantly decreased over time for both groups. No group differences were found for parenting confidence nor parenting anxiety, nurturance involvement or routine, although the autistic group scored lower on parenting discipline.</p> <p>We know that more work needs to be done to understand each group and it will be included within the strategy delivery plans.</p>
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Section 7. How will this proposal	No impact	Make things better	Make things worse	Why will it have this effect? Provide evidence from engagement, consultation and/or service user data or demographic information etc.
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affect people who...				
.live in a rural area?		X		<p>North Yorkshire is the largest non-metropolitan counties in England, covering an area of 3,342 sq. miles with around 40% of the county covered by a national park (including Yorkshire Dales and North York Moors. North Yorkshire comprises of 7 district areas: Hambleton, Richmondshire, Harrogate, Craven, Scarborough, and Ryedale. Due to the size and geography of North Yorkshire, some provisions are concentrated around the populous towns and villages.</p> <p>One of the aims of the strategy is to provide improved services and support/advice to all parts of North Yorkshire, regardless of rurality.</p>
...have a low income?		X		<p>One of the strategy's priorities is to support more autistic people to gain and sustain paid employment. Autistic adults are significantly under-represented in the labour market, with only 21.7% of autistic people in employment, the lowest rate of any disabled group. This means that many are dependent on benefits, and the under representation also indicates that employers are not benefitting from the skills and talents which autistic people can offer in the workplace. The commitments contained in the all-age strategy aim to make things better for autistic people who wish to gain employment, need support to continue working and/or wish to progress in their careers.</p>
...are carers (unpaid family or friend)?		X		<p>Carers have been actively involved in the steering group and autism network to help develop the strategy. There is a key priority on support for carers with information, advice, and guidance, as well as practical support.</p>
..... are from the Armed Forces Community		X		<p>It is recognised that Looked After Children, children from military families and those from travelling communities may be less likely to be referred for a diagnosis of autism. There may be a reluctance to</p>

				<p>engage with services either because of a lack of trust or a lack of knowledge of services available. The transient nature of these people's lives may mean that they are not settled in one place long enough to complete necessary assessments to receive a diagnosis. A key issue for armed forces families is around moves resulting in children/family members moving down the waiting list.</p> <p>Robust data to evidence these statements is lacking, both nationally and locally. We will have a focus on improving data and research through our strategy which will include consideration of how we can learn more about autism within these groups.</p>
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Section 8. Geographic impact – Please detail where the impact will be (please tick all that apply)

North Yorkshire wide	X
Craven district	
Hambleton district	
Harrogate district	
Richmondshire district	
Ryedale district	
Scarborough district	
Selby district	

If you have ticked one or more districts, will specific town(s)/village(s) be particularly impacted? If so, please specify below.

All districts within North Yorkshire should see a positive impact from the strategy as it aims to look at key improvement areas, whilst also considering consistency across geographical areas. We understand that there are differences in pathways and services across North Yorkshire in part due to the different systems and organisations which operate in different areas, however the partnership and strategy aims to help to improve consistency where possible.

Section 9. Will the proposal affect anyone more because of a combination of protected characteristics? (For example, older women or young gay men) State what you think the effect may be and why, providing evidence from engagement, consultation and/or service user data or demographic information etc.

Autism is classified as a disability and therefore some autistic people will have a combination of protected characteristics, e.g., that they are a female and autistic.

It is envisaged that the commitments in the strategy will affect autistic people in a positive way, so we do not anticipate a detrimental impact because of a combination of protected characteristics. We recognise that this will need to be monitored as the strategy is implemented.

We will develop nuanced approaches for people who have two or more protected characteristics where this may impact of their diagnosis and experience as autistic people, for example the lower diagnosis rate for girls and women.

Section 10. Next steps to address the anticipated impact. Select one of the following options and explain why this has been chosen. (Remember: we have an anticipatory duty to make reasonable adjustments so that disabled people can access services and work for us)	Tick option chosen
1. No adverse impact - no major change is needed to the proposal. There is no potential for discrimination or adverse impact identified.	X
2. Adverse impact - adjust the proposal - The EIA identifies potential problems or missed opportunities. We will change our proposal to reduce or remove these adverse impacts, or we will achieve our aim in another way which will not make things worse for people.	
3. Adverse impact - continue the proposal - The EIA identifies potential problems or missed opportunities. We cannot change our proposal to reduce or remove these adverse impacts, nor can we achieve our aim in another way which will not make things worse for people. (There must be compelling reasons for continuing with proposals which will have the most adverse impacts. Get advice from Legal Services)	
4. Actual or potential unlawful discrimination - stop and remove the proposal – The EIA identifies actual or potential unlawful discrimination. It must be stopped.	
Explanation of why the option has been chosen (include any advice given by Legal Services.)	
It is anticipated that the strategy will have a positive impact on all autistic people including those with the protected characteristics of age, disability, sex, race, gender reassignment, sexual orientation, religion/ belief, pregnancy, marriage/civil partnership, and those from the armed forces community. We also believe the strategy will have a positive impact across	

North Yorkshire, regardless of rurality, however we recognise that there are differences in pathways and services across North Yorkshire due to the different systems and organisations which operate in different areas. The partnership and strategy aim to help to improve consistency where possible. Given the specific focus on employment and carers within the strategy priorities, we anticipate that there will be a particularly positive impact for those people who have a low income or are carers.

Section 11. If the proposal is to be implemented, how will you find out how it is really affecting people? (How will you monitor and review the changes?)

The wider autism network comprises of autistic adults, carers/parents and practitioners supporting autistic people who have contributed to the development of the strategy. We will continue work together to deliver on our priorities. The feedback that people give us about their experiences and how involved they are in making the changes will be vital to the delivery of our strategy as well as an important measure of success and impact. The implementation of the strategy will be monitored via the Autism Strategy Steering group to ensure that people with protected characteristics are not adversely affected and opportunities to enhance quality of experience and outcome are identified. Other strategic partnership groups such as the North Yorkshire Place Board will be used to provide leadership and accountability on key issues where required.

Section 12. Action plan. List any actions you need to take which have been identified in this EIA, including post implementation review to find out how the outcomes have been achieved in practice and what impacts there have actually been on people with protected characteristics.

Action	Lead	By when	Progress	Monitoring arrangements
<p>As part of the strategy development, an initial data pack has been prepared. This data pack will be updated throughout the development of this strategy.</p> <p>We have made a commitment to improve our data access and to consider how</p>	<p>NY Public Health Intelligence Team</p>	<p>Winter 2023</p>	<p>Initial information has been collated, however, there are limited, accurate data sources around autism statistics.</p> <p>Actions for the strategy will be to consider how to expand access and development of data sources to</p>	<p>The initial data pack will be shared as part of public consultation, with further data to be added as it becomes available.</p>

this information will inform further JSNA's.			improve data quality.	
Consider the needs of different groups as part of consultation to ensure we reach and hear feedback from them on the strategy in response to our EIA findings e.g., women/girls, different ages, those who are gender diverse, those from the armed forces community and those from different ethnic groups	Steering Group	October 2023 – March 2024	Consultation planning underway to include review of previous engagement to analyse previous coverage of protect characteristic groups.	Steering group will monitor the consultation planning and whilst engagement is ongoing and evaluation of consultation.
Review feedback from consultation and refine EIA and strategy in response. We know that during engagement, we have received some feedback from harder to reach groups such as, women, girls, and people with co-occurring conditions, however, we recognise that as part of the	Steering Group	Easter 2024	Consultation planning underway Consultation to take place between 27/11/23 and 31/03/23 using mixed methodologies: virtual launch event, 7 in person events and 3 online sessions. Spread across morning, afternoon, early evening, and a weekend session.	Steering Group and approval routes

<p>consultation plan that there are groups we wish to specifically reach. We have started to pull together a wider stakeholder list, learning from previous experiences and are looking to how we can improve our approach to ensure we reach: Women, girls, LGBTQIA+ communities, older autistic people, carers and younger adults and children's voice (as far as possible) and autistic people with co-occurring conditions.</p>			<p>Surveys – plain English, easy read version and 2 YP versions (primary/secondary age)</p>	
<p>Continue to seek feedback and monitor impact on protected characteristics throughout annual action planning, delivery, and review</p>	<p>Steering Group</p>	<p>Summer 2024 onwards</p>		<p>Steering Group</p>

Section 13. Summary Summarise the findings of your EIA, including impacts, recommendation in relation to addressing impacts, including any legal advice, and next steps. This summary should be used as part of the report to the decision maker.

This EIA reflects the due regard considered as part of the development of the North Yorkshire all-age autism strategy which has been led by the partnership Autism Steering Group, with extensive engagement and support from the wider Autism network through a series of workshops, events, and surveys over a 6-month period.

The vision set out within the draft North Yorkshire all-age autism strategy is that “Autistic children, young people and adults and their families in North Yorkshire enjoy full, happy, and healthy lives”. There are several draft priorities with actions which aim to improve the lives of autistic people across various areas including education, employment, housing, criminal justice, health and supporting carers. This work will be enabled by a focus on working together, workforce, data & research and making best use of our resources.

It is anticipated that the strategy will have a positive impact on all autistic people including those with the protected characteristic of age, disability, sex, race, gender reassignment, sexual orientation, religion/ belief, pregnancy, marriage/civil partnership, and those from the armed forces community. We also believe the strategy will have a positive impact across North Yorkshire, regardless of rurality, however we recognise that there are differences in pathways and services across North Yorkshire due to the different systems and organisations which operate in different areas. The partnership and strategy aims to help to improve consistency where possible. Given the specific focus on employment and carers within the strategy priorities, we anticipate that there will be a particularly positive impact for those people who have a low income or are carers.

We recognise that local data about autistic people in terms of protected characteristics is limited and therefore further development of data is required to understand and monitor the impact as the strategy is refined and delivered more fully.

Our EIA findings to date have highlighted that we need to ensure we hear feedback during consultation from people of different ages as well as different genders, given that diagnosis rates vary between these different groups. Similarly, as the prevalence of autism nationally varies between different ethnic groups, we will aim to reach people from a range of groups. We will aim to reach the armed forces community. The prevalence of autism is higher amongst transgender people and people identifying as LGBTQIA+. We will aim to reach as many people as possible as part of this consultation.

Section 14. Sign off section

This full EIA was completed by:

Name: Stacey Annandale

Job title: Strategic Service Development Manager

Directorate: Health and Adult Services

Name: Naomi Smith

Job title: Head of Population Planning

Directorate: Health and Adult Services

Name: Leo Beacroft

Job Title: Senior PH Specialist

Directorate: Strategy and Performance

Name: Shanna Carrell (quality assurance / review)

Job title: Equalities Manager

Directorate: Health and Adult Services

Signature:

Completion date: 29/09/23, updated 11/10/23, 17/10/23

Authorised by relevant Assistant Director (signature): authorised via Health and Adult Services Leadership Team review and approval including Abi Barron: Assistant Director, Prevention & Service Development; and Louise Wallace: Director of Public Health

Date: 19/10/23