

Initial Equality Implications Assessment for Commissioning Panel

NOTE: The purpose of this short assessment is to highlight to the Commissioning Panels any potential equality implications which your proposals may have on the community as well as the workforce based on the evidence (data and research) you have available at this stage. If your proposal is agreed, the usual equality impact process will need to be followed.

Directorate:	Community, Health & Well-being, Transformation and Business Support	Officer completing the template:	Carol Yarde, Head of Transformation and Business Support Services
What are the proposals being assessed? (Please also indicate the reference Number from the S1 form)		CHW 1 – Consolidate teams	

<p>1. What are the aims, objectives, and desired outcomes of your proposals? (Explain proposals e.g. reduction / removal of service, deletion of posts, change of criteria etc)</p>	<p>The Community, Health and Wellbeing Transformation Team works with other sections of the directorate, other areas of the council and partners to support transformation of services. The team carries out a range of programme, project and change management activity and is responsible for:</p> <ul style="list-style-type: none"> Directorate governance and managing corporate requirements Leading on Health and Safety, risk management, business continuity, information assets and equalities Developing, monitoring and reporting progress on the directorate plan and divisional service plans Overseeing the directorates progress in delivering the councils transformation programme Supporting the directorates' management team Overseeing the directorates information and data returns, cabinet and scrutiny reports and preparation of management and committee reports Co ordination for the CHW's Directorate Joint Committee Championing equalities across the directorate Monitoring CHW's programme of EqIA's Developing the Council as a Public Health Authority Management of the Health and Wellbeing Baord and formal meetings with the Clinical Commissioning Group Management of the Public Health Joint Governance Board with Barnet Council Continuing to assist PH team with post transitional issues Directorate Lead for internal and external communications Leading on major engagement and consultation programmes
-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

	<p>Council lead for Harrow Mutual Support Network Workforce Strategy Development and liP Social Work Professional Lead Management of Post Room for Children and Families and Adults</p> <p>This proposal is to delete all posts in the existing team except the post of Manager who is also responsible for the Business Support Service.</p> <p>To ensure that the majority of tasks listed above continued to be delivered except work in relation to Social Work the proposal is that all posts except the Transformation Support Mgr. post are moved into the business support service.</p>
<p>2. Who are the main people / groups who may be affected by your proposals? For example who are the external/internal customers, communities, partners, stakeholders, the workforce, the elderly, disabled etc.</p>	<p>All current holders of these posts will be affected in some way. All posts except the Transformation Support Mgr. will be moved into the Business Support Service as the majority of their tasks fit within the remit of this service. The work currently undertaken by the Transformation Support Mgr. will be absorbed within Adult Social Services.</p>
<p>3. What data, information, evidence, research, statistics, surveys, and consultation(s) have you considered to undertake this assessment?</p> <p><i>(include the actual data, statistics and evidence based on the different protected characteristics)</i></p>	<p>Further analysis on the affected staff group will be collated and the group will be consulted with further to identify any adverse impacts.</p>
<p>4. Could your proposals disproportionately affect more people of one group (disabled, minority ethnic groups etc) than another?</p>	<p>Yes as the majority of affected staff are women.</p>

5. A - Assessment Relevance

How relevant are your proposals to each protected characteristic?

Example: Reviewing the criteria of freedom passes will be of 'High' relevance for Age and Disability and of 'Low' relevance to the other protected characteristics.

B - Assessment of potential impact

When you consider the impact on people in relation to each protected characteristic, it should be defined as positive, neutral or negative:

- **Positive:** where the impact is expected to have a particular benefit for this protected characteristic or improve equality of opportunity and / or foster good relations.

- **Neutral:** where there will be a neutral impact, neither positive nor negative
- **Negative:** where there is a risk that impact could disadvantage one or more of the people described in relation to a protected characteristic. This disadvantage may be differential, where the negative impact on one particular group of individuals or protected characteristic is likely to be greater than on another.

C - Assessing Negative impact – what are the risks?

When you have considered the likelihood and impact on people in relation to the protected characteristics, use the tables and matrix below and enter a score against each protected characteristic in the end column C.

Unlawful discrimination	5
Disproportionate disadvantage	4
Moderate disadvantage	3
Minor adjustments required	2
Minimal considerations necessary	1
SEVERITY OF IMPACT	

Certain to occur	5
Very likely to occur	4
Likely to occur	3
Possible to occur	2
Very unlikely to occur	1
LIKELIHOOD	

LIKELIHOOD	5	5	10	15	20	25
	4	4	8	12	16	20
	3	3	6	9	12	15
	2	2	4	6	8	10
	1	1	2	3	4	5
	0	1	2	3	4	5
	IMPACT					

Calculating the score - Severity of Impact X Likelihood = Score

Protected Characteristic	A Relevance	B Impact	Describe the impact(s) (negative or positive) your proposals may have on this protected characteristic	Reason for the Assessment of Potential Impact (What evidence, data, and information did you use to assess this?)	C Assessing Negative Impact Score
	Low/ Medium/ High	Positive/ Negative/ Neutral			
Age (including carers of young/older people)	Low	Neutral			
Disability (including carers of disabled people)	Low	Neutral			

Gender Reassignment	Low	Neutral		
Marriage and Civil Partnership	Low	Neutral		
Pregnancy and Maternity	Low	Neutral		
Race	Low	Neutral		
Religion or Belief	Low	Neutral		
Sex	Low	Neutral		
Sexual orientation	Low	Neutral		

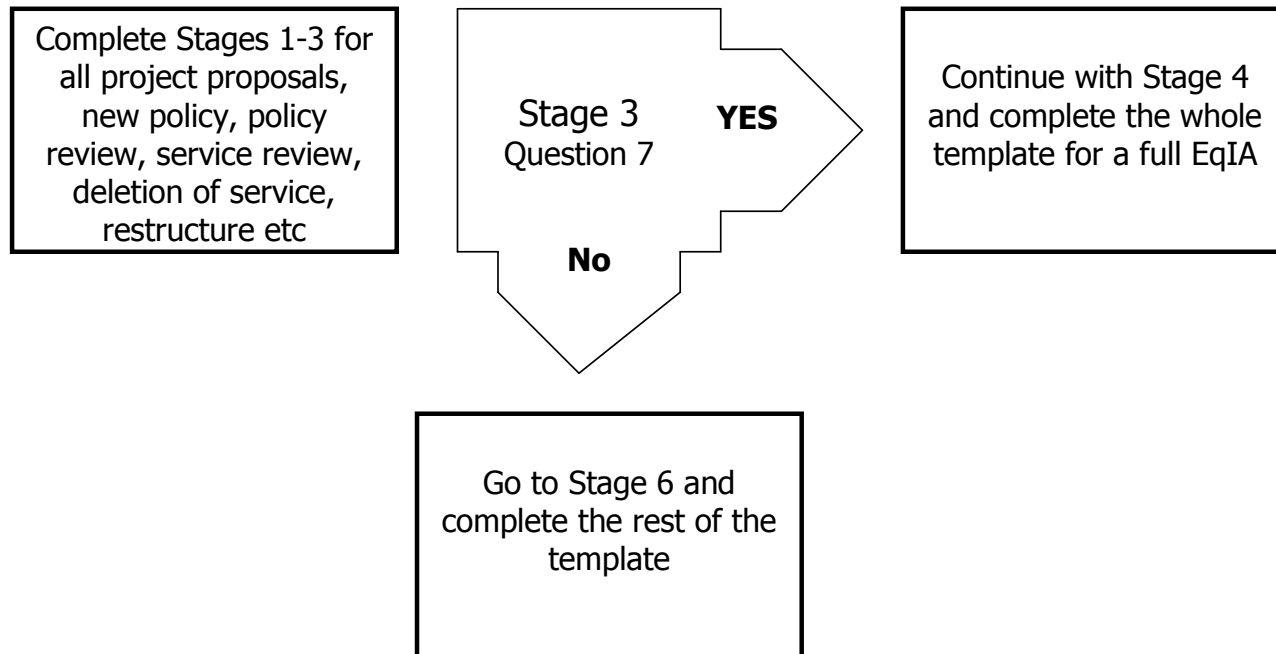
Summary and Recommendations (this section must be included in the project proposal reports for the Commissioning Panel)

Summary / Conclusion of assessment: (include the key findings and equality implications.	
Do you think that your proposals will have a cumulative effect upon a particular protected group in light of other council proposals that you are aware of? If yes, please explain the cumulative impact and on which groups.	

Signature - Lead Officer	C Yarde	Date	20 th August 2014
--------------------------	---------	------	------------------------------

Equality Impact Assessment Template

The Council has revised and simplified its Equality Impact Assessment process. There is now just one Template. Project Managers will need to complete **Stages 1-3** to determine whether a full EqIA is required and the need to complete the whole template.



Equality Impact Assessment (EqIA) Template

In order to carry out this assessment, it is important that you have completed the EqIA E-learning Module and read the Corporate Guidelines on EqIAs. Please refer to these to assist you in completing this assessment.

It will also help you to look at the EqIA Template with Guidance Notes to assist you in completing the EqIA.

Type of Project / Proposal:	Tick ✓	Type of Decision:	Tick ✓
Transformation	✓	Cabinet	
Capital		Portfolio Holder	
Service Plan		Corporate Strategic Board	✓
Other		Other	
Title of Project:	BSS01 Business Support Service Review CHW 03 Review of Business Support Services		
Directorate / Service responsible:	Community Health and Well-Being		
Name and job title of lead officer:	Carol Yarde, Head of Transformation, CHWB Directorate		
Name & contact details of the other persons involved in the assessment:	Finlay Flett. Ext 6230		
Date of assessment:	August 2014		

Stage 1: Overview

<p style="text-align: center;">1. What are you trying to do?</p> <p>(Explain proposals e.g. introduction of a new service or policy, policy review, changing criteria, reduction / removal of service, restructure, deletion of posts etc)</p>	<p>Business Support Services are being reviewed in order to provide a service which best meets the emerging business needs of the council. The review is expected to provide financial savings as outlined in the MTFS (£730K). The review will consider structures, staffing levels, service delivery methods and deliver an additional CHW specific saving of £90k in 15/16 (CHW03).</p> <p>The review is considering the scope and level of business support required by the council's directorates and the manner in which this is provided. Specific review projects are being undertaken in the following cross-council service areas: central scanning and indexing, post services, corporate print services.</p> <p>The precise impact of these projects upon staffing is not possible to gauge at this</p>
-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

	point as delivery arrangements have not been finalised. However, in the past year BSS has adopted a policy of filling vacancies by agency staff in order to minimise the impact of any post reductions upon permanent staff. This should be considered alongside the issues which are flagged in this assessment.					
2. Who are the main people / Protected Characteristics that may be affected by your proposals? (✓ all that apply)	Residents / Service Users		Partners		Stakeholders	✓
	Staff	✓	Age	✓	Disability	✓
	Gender Reassignment	✓	Marriage and Civil Partnership	✓	Pregnancy and Maternity	✓
	Race	✓	Religion or Belief	✓	Sex	✓
	Sexual Orientation	✓	Other			
3. Is the responsibility shared with another directorate, authority or organisation? If so: <ul style="list-style-type: none"> Who are the partners? Who has the overall responsibility? How have they been involved in the assessment? 	Responsibility is cross-council. Review is led by a cross-council steering group chaired by Carol Cutler and with representation from stakeholder directorates. The review reports to the Council Operations Board which will make the final decision on any changes proposed by the review.					

Stage 2: Evidence / Data Collation

4. What evidence / data have you reviewed to assess the potential impact of your proposals? Include the actual data, statistics reviewed in the section below. This can include census data, borough profile, profile of service users, workforce profiles, results from consultations and the involvement tracker, customer satisfaction surveys, focus groups, research interviews, staff surveys; complaints etc. Where possible include data on the nine Protected Characteristics.

(Where you have gaps (data is not available/being collated), you may need to include this as an action to address in your Improvement Action Plan at Stage 7)

Age (including carers of young/older people)	Under 20:- 1 20-30:- 6 30-40:- 13 40-50:- 37 50-60:- 38 Over 60:-15
----------------------------------------------	------------------------------------------------------------------------------------

Disability (including carers of disabled people)	No Disability:- 98 Disability affecting mobility:- 1 Other form of Disability:- 13
Gender Reassignment	0
Marriage / Civil Partnership	Single:- 28 Married:- 47 Divorced:- 10
Pregnancy and Maternity	Maternity since 2009:- 4

Race	Asian- Bangladeshi:- 1 Asian- Chinese:- 1 Asian- Indian:- 36 Asian- Other:- 5 Asian- Pakistani:- 1 Asian- Sri Lankan:- 3 Black- African:- 3 Black- Caribbean:- 9 Black- Other:- 8 White- English:- 40 White- Irish:- 4 White- Other:-3		
	Buddhism:- 1 Christianity:- 13 Hinduism:- 13 Islam:- 5 Jainism:- 1 No Religion:- 1 Other:- 1 Sikh:- 1		
Sex / Gender	Male:- 16 Female:- 96		
Sexual Orientation	Heterosexual:- 24 Prefer not to say:- 2		
Socio Economic	No data available		
5. What consultation have you undertaken on your proposals?			
Who was consulted?	What consultation methods were used?	What do the results show about the impact on different groups / Protected Characteristics?	What actions have you taken to address the findings of the consultation? (This may include further consultation

			with the affected groups, revising your proposals).
Stakeholder directorates	Direct meetings with management teams, inclusion of directorate representatives on steering group	See below	See below
Unions	Informal briefing meetings and routine agenda item on CHW DJC	See below	See below
Staff groups	Team meetings	The BSS teams are statistically over-represented in the following groups: female; older age groups; BAME. As such changes to services will be likely to have a significant impact upon individuals with one or more of these characteristics	It has been decided to provide support tailored to the needs of individuals in these groups who may be affected by the proposals of the BSS review

6. What other (local, regional, national research, reports, media) data sources that you have used to inform this assessment?

List the Title of reports / documents and websites here.

No external data used. Harrow's business support model is not widely used.

Stage 3: Assessing Potential Disproportionate Impact

7. Based on the evidence you have considered so far, is there a risk that your proposals could potentially have a disproportionate adverse impact on any of the Protected Characteristics?

	Age (including carers)	Disability (including carers)	Gender Reassignment	Marriage and Civil Partnership	Pregnancy and Maternity	Race	Religion and Belief	Sex	Sexual Orientation
Yes	✓					✓		✓	
No		✓	✓	✓	✓		✓		✓

YES - If there is a risk of disproportionate adverse Impact on any **ONE** of the Protected Characteristics, continue with the rest of the template.

- **Best Practice:** You may want to consider setting up a Working Group (including colleagues, partners, stakeholders, voluntary community sector organisations, service users and Unions) to develop the rest of the EqIA
- It will be useful to also collate further evidence (additional data, consultation with the relevant communities, stakeholder groups and service users directly affected by your proposals) to further assess the potential disproportionate impact identified and how this can be mitigated.

NO - If you have ticked 'No' to all of the above, then go to **Stage 6**

- Although the assessment may not have identified potential disproportionate impact, you may have identified actions which can be taken to advance equality of opportunity to make your proposals more inclusive. These actions should form your Improvement Action Plan at Stage 7

Stage 4: Collating Additional data / Evidence

8. What additional data / evidence have you considered in relation to your proposals as a result of the analysis at Stage 3?

(include this evidence, including any data, statistics, titles of documents and website links here)

An equalities monitoring form was sent to every member of staff, requesting that they provide details about themselves in order to assist in completing as comprehensive an EQIA as possible.

Results have been analysed and included in the attached document.

9. What further consultation have you undertaken on your proposals as a result of your analysis at Stage 3?

Who was consulted?	What consultation methods were used?	What do the results show about the impact on different groups / Protected Characteristics?	What actions have you taken to address the findings of the consultation? (This may include further consultation with the affected groups, revising your proposals).
Stakeholder directorates	Direct meetings with management teams, inclusion of directorate representatives on steering group	See below	
Unions	Informal briefing meetings and routine agenda item on CHW DJC	See below	
Staff groups	Team meetings	The BSS teams are statistically	It has been decided to provide

		<p>over-represented in the following groups: female; older age groups; BAME.</p> <p>As such changes to services will be likely to have a significant impact upon individuals with one or more of these characteristics</p>	<p>support tailored to the needs of individuals in these groups who may be affected by the proposals of the BSS review</p>
--	--	----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	----------------------------------------------------------------------------------------------------------------------------

Stage 5: Assessing Impact and Analysis

10. What does your evidence tell you about the impact on different groups? Consider whether the evidence shows potential for differential impact, if so state whether this is an adverse or positive impact? How likely is this to happen? How you will mitigate/remove any adverse impact?

Protected Characteristic	Adverse ✓	Positive ✓	Explain what this impact is, how likely it is to happen and the extent of impact if it was to occur. Note – Positive impact can also be used to demonstrate how your proposals meet the aims of the PSED Stage 9	What measures can you take to mitigate the impact or advance equality of opportunity? E.g. further consultation, research, implement equality monitoring etc (Also Include these in the Improvement Action Plan at Stage 7)
Age (including carers of young/older people)	✓		If proposals are taken forward which reduce the size of the Business Support service, this would be more likely to impact upon people in the older age bandings (approx. 48% of BSS staff are over 50)	Further information gathering (see action plan) will confirm the current staff breakdown- current data only available for approx. 75% of BSS. At point of implementation, tailored support can be made available to displaced staff which appropriately reflects their personal circumstances
Disability (including carers of disabled people)			Not significant impact due to low numbers	
Gender Reassignment			Not significant impact due to low numbers	

Marriage and Civil Partnership			Not significant impact due to low numbers			
Pregnancy and Maternity			Not significant impact due to low numbers			
Race	✓		If proposals are taken forward which reduce the size of the Business Support service, this would be more likely to impact upon people in the older age bandings (approx. 55% of BSS staff are from minority backgrounds)	Further information gathering (see action plan) will confirm the current staff breakdown- current data only available for approx. 75% of BSS. At point of implementation, tailored support can be made available to displaced staff which appropriately reflects their personal circumstances		
Religion or Belief			Not significant impact due to low numbers			
Sex	✓		If proposals are taken forward which reduce the size of the Business Support service, this would be more likely to impact upon people in the older age bandings (approx. 86% of BSS staff are female)	Further information gathering (see action plan) will confirm the current staff breakdown- current data only available for approx. 75% of BSS. At point of implementation, tailored support can be made available to displaced staff which appropriately reflects their personal circumstances		
Sexual orientation			Not significant impact due to low numbers			
11. Cumulative Impact – Considering what else is happening within the			Yes	✓	No	

Council and Harrow as a whole, could your proposals have a cumulative impact on a particular Protected Characteristic?		Due to the size of the BSS services it is possible that a cumulative impact issue could arise in the areas within BSS which are over-represented. This would predominantly be gender, age and race. The potential issue may be that displaced staff may face difficulty in securing alternative employment opportunities.							
If yes, which Protected Characteristics could be affected and what is the potential impact?		Yes		✓		No			
11a. Any Other Impact – Considering what else is happening within the Council and Harrow as a whole (for example national/local policy, austerity, welfare reform, unemployment levels, community tensions, levels of crime) could your proposals have an impact on individuals/service users socio economic, health or an impact on community cohesion?		Due to the size of the BSS services it is possible that a cumulative impact issue could arise in the areas within BSS which are over-represented. This would predominantly be gender, age and race. The potential issue may be that displaced staff may face difficulty in securing alternative employment opportunities.							
If yes, what is the potential impact and how likely is to happen?									
12. Is there any evidence or concern that the potential adverse impact identified may result in a Protected Characteristic being disadvantaged? (Please refer to the Corporate Guidelines for guidance on the definitions of discrimination, harassment and victimisation and other prohibited conduct under the Equality Act) available on Harrow HUB/Equalities and Diversity/Policies and Legislation									
	Age (including carers)	Disability (including carers)	Gender Reassignment	Marriage and Civil Partnership	Pregnancy and Maternity	Race	Religion and Belief	Sex	Sexual Orientation
Yes	✓					✓		✓	
No									
If you have answered "yes" to any of the above, set out what justification there may be for this in Q12a below - link this to the aims of the proposal and whether the disadvantage is proportionate to the need to meet these aims. (You are encouraged to seek legal advice, if you are concerned that the proposal may breach the equality legislation or you are unsure whether there is objective justification for the proposal)									
If the analysis shows the potential for serious adverse impact or disadvantage (or potential discrimination) but you have identified a potential justification for this, this information must be presented to the decision maker for a final decision to be made on whether the disadvantage is proportionate to achieve the aims of the proposal.									
<ul style="list-style-type: none"> ▪ If there are adverse effects that are not justified and cannot be mitigated, you should not proceed with the proposal. (select outcome 4) ▪ If the analysis shows unlawful conduct under the equalities legislation, you should not proceed with the proposal. (select outcome 4) 									
Stage 6: Decision									
13. Please indicate which of the following statements best describes the outcome of your EqIA (✓ tick one box only)									
Outcome 1 – No change required: the EqIA has not identified any potential for unlawful conduct or disproportionate impact and all opportunities to advance equality are being addressed.									

Outcome 2 – Minor adjustments to remove / mitigate adverse impact or advance equality have been identified by the EqIA. <i>List the actions you propose to take to address this in the Improvement Action Plan at Stage 7</i>	✓
Outcome 3 – Continue with proposals despite having identified potential for adverse impact or missed opportunities to advance equality. In this case, the justification needs to be included in the EqIA and should be in line with the PSED to have 'due regard'. In some cases, compelling reasons will be needed. You should also consider whether there are sufficient plans to reduce the adverse impact and/or plans to monitor the impact. (Explain this in 13a below)	
Outcome 4 – Stop and rethink: when there is potential for serious adverse impact or disadvantage to one or more protected groups. (You are encouraged to seek Legal Advice about the potential for unlawful conduct under equalities legislation)	
13a. If your EqIA is assessed as outcome 3 or you have ticked 'yes' in Q12 , explain your justification with full reasoning to continue with your proposals.	

Stage 7: Improvement Action Plan

14. List below any actions you plan to take as a result of this Impact Assessment. This should include any actions identified throughout the EqIA.

Area of potential adverse impact e.g. Race, Disability	<i>Action required to mitigate</i>	How will you know this is achieved? E.g. Performance Measure / Target	Target Date	Lead Officer	Date Action included in Service / Team Plan
Gender	It has been decided to provide support tailored to the needs of individuals in these groups who may be affected by the proposals of the BSS review	Monitoring of uptake of support Monitoring of consultation	September 2014 onwards	Finlay Flett	Included in BSS Board agendas/plans from September 2014
Race	It has been decided to provide support tailored to the needs of individuals in these groups who may be affected by the proposals of the BSS review	Monitoring of uptake of support Monitoring of consultation	September 2014 onwards	Finlay Flett	Included in BSS Board agendas/plans from September 2014
Age	It has been decided to provide support tailored to the needs of individuals in these groups who may be affected by	Monitoring of uptake of support Monitoring of	September 2014 onwards	Finlay Flett	Included in BSS Board agendas/plans

	the proposals of the BSS review	consultation			from September 2014
All Categories	Additional data gathering exercise to be undertaken in order to improve the quality of data	Custom report on Equalities profile in BSS	September 2014	Finlay Flett	Included in BSS Board agendas/plans from September 2014

Stage 8 - Monitoring

The full impact of the proposals may only be known after they have been implemented. It is therefore important to ensure effective monitoring measures are in place to assess the impact.

15. How will you monitor the impact of the proposals once they have been implemented? What monitoring measures need to be introduced to ensure effective monitoring of your proposals? How often will you do this? <i>(Also Include in Improvement Action Plan at Stage 7)</i>	Actions monitored by the BSS Review Steering Group and a monitoring report to the Operations Board
16. How will the results of any monitoring be analysed, reported and publicised? <i>(Also Include in Improvement Action Plan at Stage 7)</i>	BSS Review Board and Stakeholder Group
17. Have you received any complaints or compliments about the proposals being assessed? If so, provide details.	No

Stage 9: Public Sector Equality Duty

18. How do your proposals contribute towards the Public Sector Equality Duty (PSED) which requires the Council to have due regard to eliminate discrimination, harassment and victimisation, advance equality of opportunity and foster good relations between different groups.

(Include all the positive actions of your proposals, for example literature will be available in large print, Braille and community languages, flexible working hours for parents/carers, IT equipment will be DDA compliant etc)

Eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Equality Act 2010	Advance equality of opportunity between people from different groups	Foster good relations between people from different groups
Consultation and tailored support as outlined above	Consultation and tailored support as outlined above	Consultation and tailored support as outlined above

Stage 10 - Organisational sign Off (to be completed by Chair of Departmental Equalities Task Group)

The completed EqIA needs to be sent to the chair of your Departmental Equalities Task Group (DETG) to be signed off.			
19. Which group or committee considered, reviewed and agreed the EqIA and the Improvement Action Plan?	BSS Review Board Operations Board		
Signed: (Lead officer completing EqIA)	F Flett	Signed: (Chair of DETG)	C Yarde
Date:	August 2014	Date:	03/02/15
Date EqIA presented at the EqIA Quality Assurance Group		Signature of ETG Chair	Pp C Yarde

Initial Equality Implications Assessment for Commissioning Panel

NOTE: The purpose of this short assessment is to highlight to the Commissioning Panels any potential equality implications which your proposals may have on the community as well as the workforce based on the evidence (data and research) you have available at this stage. If your proposal is agreed, the usual equality impact process will need to be followed.

Directorate:	Community Health & Well-being	Officer completing the template:	Hugh Evans, Head of Commissioning & Partnerships (Interim)
What are the proposals being assessed? (Please also indicate the reference Number from the S1 form)		CHW- 05 Protection of Social Care Services through the Department of Health Better Care Fund allocation.	

<p>1. What are the aims, objectives, and desired outcomes of your proposals? (Explain proposals e.g. reduction / removal of service, deletion of posts, change of criteria etc)</p>	<p>The Better Care Fund (BCF) is a national government directive that will transform the funding of NHS and social services in the future. A range of previous funding sources and existing core NHS funding presently administered by Clinical Commissioning Groups (CCGs) is being combined to comprise the national fund of £3.8 billion in 2015/16. The BCF is to be overseen by local Health and Wellbeing Boards (HWBB) and is to be issued to participant organisations through a Section 75 (Health and Social Care Act 2012) 'pooled budget' arrangement. The BCF fund for Harrow is at present £17,342,000.</p> <p>For the London Borough of Harrow Council, the amount considered sufficient to currently 'protect social care services' is estimated £6.529 million for 2015/16. This assumes that the reablement funding, which the majority of local authorities have received for a number of years, will be pass ported to the Council. Of the expected funding , £3.2m represents the 'additional income' that will be coming to the authority as a product of the fund, in addition to the existing funding that has been transferred to the local authority via the NHS in recent years. This will enable a management post to be funded by these resources and £63k in this respect is included in the S1 template CHW02.</p> <p>Whilst the BCF schemes for Harrow total £17,342,000, the funding identified for this activity totals £14,373,000 The shortfall of around £3 million is to be met through a range of savings and efficiency proposals to be identified by the</p>
-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

	<p>partner organisations.</p> <p>The success criteria of the BCF have changed in recent weeks. The emphasis for the BCF is now on the avoidance of non-elective admissions, and the primary risk inherent in this is between the CCG and the acute sector provider (North West London Hospitals NHS Trust). However, the ambitious programme that underpins the BCF process considers this challenge in the context of a broader intention to improve community services and support people with frailty, complex needs and long term conditions more effectively in their communities. This work relies directly upon the provision of collaborative social care as part of a broader multi-agency approach, and will deliver significant improvements in care that will reduce reliance on acute sector, non-elective services.</p> <p>As a result of this policy agenda the council have negotiated, with the CCG, a financial contribution (£1.851m) in this respect.</p>
<p>2. Who are the main people / groups who may be affected by your proposals? For example who are the external/internal customers, communities, partners, stakeholders, the workforce, the elderly, disabled etc.</p>	<p>Adult social care service users and carers, patients, providers of care and health services</p> <p>NHS Clinical Commissioning Groups, providers of adult social care and NHS services, people who use adult social care, patients and informal carers</p>
<p>3. What data, information, evidence, research, statistics, surveys, and consultation(s) have you considered to undertake this assessment? <i>(include the actual data, statistics and evidence based on the different protected characteristics)</i></p>	<p>Based on previous full financial year, shows 6,561 new customers referred into adult social care and requiring reablement assessment</p> <p>There is a national requirement to pool at least a specified minimum of NHS and social care funding, and the potential for local partners to pool more. Additional pooling will only be selected where this improves patients and service user outcomes. Any detailed redesign of services in an integrated setting would require specific EQUIAs, just as redesign of services in non-integrated settings also requires this</p>

<p>4. Could your proposals disproportionately affect more people of one group (disabled, minority ethnic groups etc) than another?</p>	<p>The purpose of pooling funds for health and adult social care, and the receipt in the Council of NHS funding for social care, is to improve outcomes for vulnerable people with social care needs. Older people, people with disabilities and women (because of their increased representation in levels of need for social care in old age) are likely to benefit positively compared to other groups.</p>
----------------------------------------------------------------------------------------------------------------------------------------	----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

5. A - Assessment Relevance

How relevant are your proposals to each protected characteristic?

Example: Reviewing the criteria of freedom passes will be of 'High' relevance for Age and Disability and of 'Low' relevance to the other protected characteristics.

B - Assessment of potential impact

When you consider the impact on people in relation to each protected characteristic, it should be defined as positive, neutral or negative:

- **Positive:** where the impact is expected to have a particular benefit for this protected characteristic or improve equality of opportunity and / or foster good relations.
- **Neutral:** where there will be a neutral impact, neither positive nor negative
- **Negative:** where there is a risk that impact could disadvantage one or more of the people described in relation to a protected characteristic. This disadvantage may be differential, where the negative impact on one particular group of individuals or protected characteristic is likely to be greater than on another.

C - Assessing Negative impact – what are the risks?

When you have considered the likelihood and impact on people in relation to the protected characteristics, use the tables and matrix below and enter a score against each protected characteristic in the end column C.

Unlawful discrimination	5
Disproportionate disadvantage	4
Moderate disadvantage	3
Minor adjustments required	2
Minimal considerations necessary	1
SEVERITY OF IMPACT	

Certain to occur	5
Very likely to occur	4
Likely to occur	3
Possible to occur	2
Very unlikely to occur	1
LIKELIHOOD	

LIKELIHOOD	5	5	10	15	20	25
	4	4	8	12	16	20
	3	3	6	9	12	15
	2	2	4	6	8	10
	1	1	2	3	4	5
	0	1	2	3	4	5
	IMPACT					

Calculating the score - Severity of Impact X Likelihood = Score

Protected Characteristic	A Relevance	B Impact	Describe the impact(s) (negative or positive) your proposals may have on this protected characteristic	Reason for the Assessment of Potential Impact (What evidence, data, and information did you use to assess this?)	C Assessing Negative Impact Score
	Low/ Medium/ High	Positive/ Negative/ Neutral			
Age (including carers of young/older people)	Low	Positive		BCF improves outcomes for vulnerable people with social care needs	1 x 1 = 1
Disability (including carers of disabled people)	Low	Positive		BCF improves outcomes for vulnerable people with social care needs	1 x 1 = 1
Gender Reassignment	Low	Neutral		This will not adversely impact this protected characteristic over another group.	1 x 1 = 1
Marriage and Civil Partnership	Low	Neutral		This will not adversely impact this protected characteristic over another group.	1 x 1 = 1
Pregnancy and Maternity	Low	Neutral		This will not adversely impact this protected characteristic over another group.	1 x 1 = 1
Race	Low	Neutral		Equality of Provision in Adults is between 0.9 – 1.1	1 x 1 = 1
Religion or Belief	Low	Neutral		This will not adversely impact this protected characteristic over another group.	1 x 1 = 1
Sex	Low	Neutral		This will not adversely impact this protected characteristic over another group.	1 x 1 = 1
Sexual orientation	Low	Neutral		This will not adversely impact this protected characteristic over another	1 x 1 = 1

				group.	
--	--	--	--	--------	--

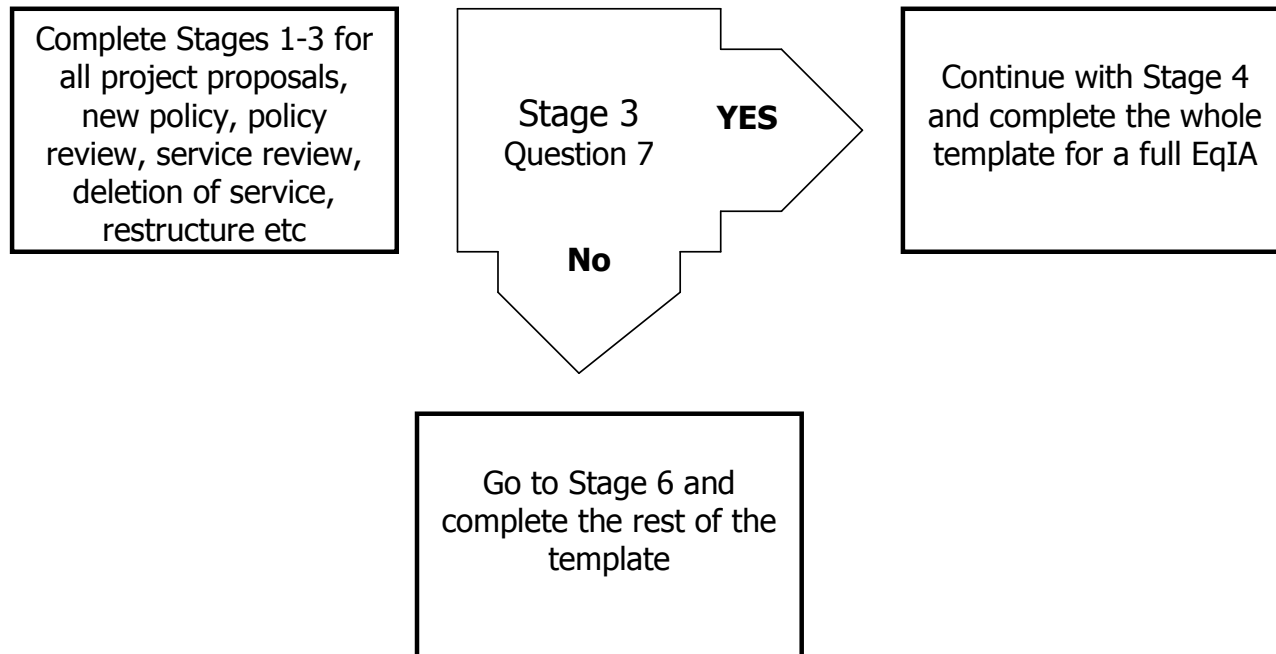
Summary and Recommendations (this section must be included in the project proposal reports for the Commissioning Panel)					
--------------------------------------------------------------------------------------------------------------------------------	--	--	--	--	--

Summary / Conclusion of assessment: (include the key findings and equality implications.	The purpose of pooling funds for health and adult social care, and the receipt in the Council of NHS funding for social care, is to improve outcomes for vulnerable people with social care needs. Older people, people with disabilities and women (because of their increased representation in levels of need for social care in old age) are likely to benefit positively compared to other groups.
------------------------------------------------------------------------------------------	---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

Do you think that your proposals will have a cumulative effect upon a particular protected group in light of other council proposals that you are aware of? If yes, please explain the cumulative impact and on which groups.	Older people, people with disabilities and women (because of their increased representation in levels of need for social care in old age) are likely to benefit positively compared to other groups.
----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

Equality Impact Assessment Template

The Council has revised and simplified its Equality Impact Assessment process. There is now just one Template. Project Managers will need to complete **Stages 1-3** to determine whether a full EqIA is required and the need to complete the whole template.



Equality Impact Assessment (EqIA) Template

In order to carry out this assessment, it is important that you have completed the EqIA E-learning Module and read the Corporate Guidelines on EqIAs. Please refer to these to assist you in completing this assessment.

It will also help you to look at the EqIA Template with Guidance Notes to assist you in completing the EqIA.

Type of Project / Proposal:	Tick ✓	Type of Decision:	Tick ✓
Transformation		Cabinet	
Capital		Portfolio Holder	
Service Plan		Corporate Strategic Board	
Other		Other	✓
Title of Project:		Supporting People Ref: CHW- 6	
Directorate / Service responsible:		Community, Health & Wellbeing – Supporting People Team	
Name and job title of lead officer:		Sandie Roberts – Supporting People Team Manager	
Name & contact details of the other persons involved in the assessment:		Chris Greenway – Head of Commissioning & Partnership	
Date of assessment:		22nd Jan 2015	

Stage 1: Overview

1. What are you trying to do?

(Explain proposals e.g. introduction of a new service or policy, policy review, changing criteria, reduction / removal of service, restructure, deletion of posts etc)

A saving of £300k will be achieved by contract efficiencies and moving to enhanced housing management

Enhanced Housing Management

A move to enhanced housing management where funding can be provided through Housing Benefit covering housing management duties is being implemented by providers and supported by the SP Team.

Sheltered services are currently funded on the basis that 90% of service provision is Housing Related Support service (eligible for SP Grant). The current weekly support hours provided within the schemes are available on a part time basis (see table below). Housing management duties (ineligible for SP Grants) are also provided within the schemes also funded by SP. In addition, some service users live in sheltered for the peer group support and security; they do not require any support due to continued independence.

In total an annual saving of £92,927 will be made by moving to enhanced management support within the following sheltered schemes:

Provider	Service	Annual Contract Price	Weekly support hours
Anchor Trust	Oakmead Court	£16,027.09	16.13hrs pwk
	Weall Court	£9,946.54	9.21hrs pwk
Asra Housing Group	Willow Court	£17,019.36	21.35hrs pwk
Genesis Housing Assoc.	Cyberline Court	£16,770.00	21.50hrs pwk
HomeGroup	Alexander Court	£15,444.00	21.50hrs pwk
Sanctuary Housing Assoc.	Duncan House	£15,800.00	28hrs pwk
Jewish Community HA	Community Alarm Service	£1,920.00	N/A

As six (6) months' notice is required to end these contracts the actual annual saving as from 13/07/15 will be £67,175.91 for yr 15/16.

There should be minimum impact to tenants related to support, as Scheme Managers/Wardens were operating a service on a part time basis (see hours provided above) and community alarm Service is available 24hrs/7days per week.

The support provided under enhanced housing management should include staff presence within the schemes providing maintenance support, security of communal areas, dealing with rent enquiries etc. All tasks that will provide good security and safety for tenants within the schemes.

For those tenants that require additional support, there are community services available to support them.

Contract Efficiencies

Immediate savings to be achieved in year 15/16 Qrt.1 currently amounts to £193k of which will come from the following services:

- Community Alarm Service at Gordon Crt Sheltered Scheme - £1,920
- Gildea Hse Homeless Hostel SPOT purchasing - £10k
- L B of Harrow Sheltered Accommodation Floating Support Service - £64k
- L B of Harrow Staying Put (HIA) Service £20,760
- Age UK Harrow - £41k (to be funded from ASC budget from Apr 15)
- Non specified funding - £56k

The saving to be made from Qrt.2 will amount to around £90k from the following

	services: <ul style="list-style-type: none"> • Support within six (6) sheltered accomm. - £65,255 • EMI Floating Support - £25k 					
2. Who are the main people / Protected Characteristics that may be affected by your proposals? (✓ all that apply)	Residents / Service Users	X	Partners		Stakeholders	
	Staff	X	Age	X	Disability	
	Gender Reassignment		Marriage and Civil Partnership		Pregnancy and Maternity	
	Race		Religion or Belief		Sex	
	Sexual Orientation		Other			
3. Is the responsibility shared with another directorate, authority or organisation? If so: <ul style="list-style-type: none"> • Who are the partners? • Who has the overall responsibility? • How have they been involved in the assessment? 	<p>Housing Associations providing support within the sheltered schemes will ultimately make the decision to move over to enhanced housing management funding from housing Benefit. Providers have consulted with residents and staff and report back to the Supporting People Team.</p> <p>As of date response received from providers:</p> <p>Asra Housing Group - The association has already conducted a sheltered housing strategic review with sheltered housing residents, stakeholders and staff on its approach to sheltered housing where supporting people funding ends. The conclusion was to provide intensive housing management officers and a community alarm service. Housing officers are already in place and Asra are to introduce their own internal community alarm service.</p> <p>Genesis Housing Assco. – Genesis are going down the enhanced housing management model route.</p> <p>Home Group - Home Group will accept the new arrangements for Alexander Court.</p>					

	<p>Sanctuary Housing - Sanctuary are going to be going down the enhanced housing management model route.</p> <p>Jewish Community Housing – funding provided for community alarm service only, which will cease on 31st March 2015. JWH will cover these costs.</p> <p>NB: Anchor Trust – will not be applying for enhanced housing management funding.</p>
--	--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

Stage 2: Evidence / Data Collation

4. What evidence / data have you reviewed to assess the potential impact of your proposals? Include the actual data, statistics reviewed in the section below. This can include census data, borough profile, profile of service users, workforce profiles, results from consultations and the involvement tracker, customer satisfaction surveys, focus groups, research interviews, staff surveys; complaints etc. Where possible include data on the nine Protected Characteristics.

(Where you have gaps (data is not available/being collated), you may need to include this as an action to address in your Improvement Action Plan at Stage 7)

Age (including carers of young/older people)	<p>Anchor Trust – 55yrs and above</p> <p>Asra Housing Group – 55yrs and above</p> <p>Genesis Housing Assoc – 60yrs and above</p> <p>HomeGroup – 60yrs and above</p> <p>Sanctuary Housing Assoc. – 60yrs and above</p> <p>The eligibility criteria for all services states that tenants must be capable of independent living with assistance if necessary from relatives, friends and support from service.</p>
----------------------------------------------	-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

Disability (including carers of disabled people)	Providers to send in data for this client group, however, there should be no adverse impact as there will be no change to accommodation and any support required can be provided through community services.
Gender Reassignment	x
Marriage / Civil Partnership	x
Pregnancy and Maternity	x
Race	x
Religion and Belief	x
Sex / Gender	x
Sexual Orientation	x
Socio Economic	Tenants in receipt of housing benefit should, not be financially disadvantaged with this decision, however, there may be an impact on tenants who contribute towards their rent/service charge as RSLs may recoup funding lost through rent increase.

5. What consultation have you undertaken on your proposals?

Who was consulted?	What consultation methods were used?	What do the results show about the impact on different groups / Protected Characteristics?	What actions have you taken to address the findings of the consultation? (This may include further consultation with the affected groups, revising your proposals).
Providers	Sheltered Provider Forum held December 2014	Feedback received from Providers as to whether they choose to go down enhanced housing management route or not. The following schemes are going	Providers have stated that consultation with tenants re: move to enhanced housing management will be carried out as part of this process. SP Team will attend consultation meetings at Providers request as and

		forward to apply for enhanced housing management funding: Genesis Housing Assoc. Home Group Sanctuary Housing	when required.
--	--	-------------------------------------------------------------------------------------------------------------------------------------	----------------

<p>6. What other (local, regional, national research, reports, media) data sources that you have used to inform this assessment?</p> <p>List the Title of reports / documents and websites here.</p>	<p>Supporting People Team carried out a review of all the housing related support services in 2013/14. This Included consultation with tenants/service users of people residing in sheltered schemes in July 2013. This identified the need for tenants to access community services as and when required.</p> <p>Summary of feedback can be read in the SP Engagement Workshop for Older People document (see attached).</p> <p>Consultation with providers included a verbal presentation from Willow Housing Assoc. A Provider who moved over to the enhanced housing management model in Oct 2014.</p> <p>On site staff presence within sheltered schemes could be available through housing management support, however, this will be at the discretion of RSLs/Landlords.</p>
------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

Stage 3: Assessing Potential Disproportionate Impact

7. Based on the evidence you have considered so far, is there a risk that your proposals could potentially have a disproportionate adverse impact on any of the Protected Characteristics?

	Age (including carers)	Disability (including carers)	Gender Reassignment	Marriage and Civil Partnership	Pregnancy and Maternity	Race	Religion and Belief	Sex	Sexual Orientation
Yes	x	x							

No			X	X	X	X	X	X	X
----	--	--	---	---	---	---	---	---	---

YES - If there is a risk of disproportionate adverse Impact on any **ONE** of the Protected Characteristics, continue with the rest of the template.

- **Best Practice:** You may want to consider setting up a Working Group (including colleagues, partners, stakeholders, voluntary community sector organisations, service users and Unions) to develop the rest of the EqIA
- It will be useful to also collate further evidence (additional data, consultation with the relevant communities, stakeholder groups and service users directly affected by your proposals) to further assess the potential disproportionate impact identified and how this can be mitigated.

NO - If you have ticked 'No' to all of the above, then go to **Stage 6**

- Although the assessment may not have identified potential disproportionate impact, you may have identified actions which can be taken to advance equality of opportunity to make your proposals more inclusive. These actions should form your Improvement Action Plan at Stage 7

Stage 4: Collating Additional data / Evidence

8. What additional data / evidence have you considered in relation to your proposals as a result of the analysis at Stage 3?

(include this evidence, including any data, statistics, titles of documents and website links here)

9. What further consultation have you undertaken on your proposals as a result of your analysis at Stage 3?

Who was consulted?	What consultation methods were used?	What do the results show about the impact on different groups / Protected Characteristics?	What actions have you taken to address the findings of the consultation? (This may include further consultation with the affected groups, revising your proposals).
Providers consulted with tenants within their own schemes	Tenants meetings	Results show that there should be no impact	Alternative funding from Housing Benefit or Contract Efficiencies delivered by provider Access to support will be available in the community through the following

			services: Floating Support Services Mutual Support Network Provision Age UK Harrow Home Improvement Agency Providers and stakeholder have been provided with information in order to make individual referrals to specific providers.
--	--	--	------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

Stage 5: Assessing Impact and Analysis

10. What does your evidence tell you about the impact on different groups? Consider whether the evidence shows potential for differential impact, if so state whether this is an adverse or positive impact? How likely is this to happen? How you will mitigate/remove any adverse impact?

Protected Characteristic	Adverse ✓	Positive ✓	Explain what this impact is, how likely it is to happen and the extent of impact if it was to occur. Note – Positive impact can also be used to demonstrate how your proposals meet the aims of the PSED Stage 9	What measures can you take to mitigate the impact or advance equality of opportunity? E.g. further consultation, research, implement equality monitoring etc (Also Include these in the Improvement Action Plan at Stage 7)
Age (including carers of young/older people)	x	✓	Neutral Impact. Housing related support will cease in July 2015 and Providers will seek alternative funding through housing benefit team	Access to support will be available in the community through the following services: Floating Support Services Mutual Support Network Provision Age UK Harrow Home Improvement Agency Providers and stakeholder have been provided with information in order to make individual referrals to specific providers.
Disability (including carers of)	x	✓	Neutral Impact. Housing related support will cease in July 2015	Access to support will be available in the community through the following services:

disabled people)			and Providers will seek alternative funding through housing benefit team	Floating Support Services Mutual Support Network Provision Harrow Association of the Disabled Home Improvement Agency Providers and stakeholder have been provided with information in order to make individual referrals to specific providers.
Gender Reassignment	x	✓	No impact	N/A
Marriage and Civil Partnership	x	✓	No impact	N/A
Pregnancy and Maternity	N/A		N/A	N/A
Race		✓	The ethnic demographics is reflected in the diversity of staff within service provisions. All Supporting People Services have mechanisms in place to monitor this.	Staff diversity and cultural specific service provision is part of the service reviews and contract monitoring.
Religion or Belief		✓	Supporting People Service specification and QAF addresses this and is robust in ensuring service provision is flexible and delivered in a manner that takes into consideration religion and Beliefs.	Monitoring and information gathering.
		✓		

Sex			There is no available data for the breakdown.	Gender specific issues are covered and captured in SP QAF and is monitored in service reviews and contract monitoring.					
Sexual orientation		✓	No data on this.	Training for LGBT issues will be specified for support provider/staff.					
11. Cumulative Impact – Considering what else is happening within the Council and Harrow as a whole, could your proposals have a cumulative impact on a particular Protected Characteristic?			Yes	✓	No				
If yes, which Protected Characteristics could be affected and what is the potential impact?			Voluntary Organisations efficiency savings may impact on this client group. A consultation on proposed reductions to funding for voluntary sector organisations is currently being undertaken. These proposals could impact on voluntary services available to this client group however funding to the Harrow Mutual Support Network is being protected.						
11a. Any Other Impact – Considering what else is happening within the Council and Harrow as a whole (for example national/local policy, austerity, welfare reform, unemployment levels, community tensions, levels of crime) could your proposals have an impact on individuals/service users socio economic, health or an impact on community cohesion?			Yes		No				
If yes, what is the potential impact and how likely is to happen?			No other impact identified. Support will be available to individual tenants through community support services as follows: Floating Support Services Mutual Support Network Provision Age UK Harrow Home Improvement Agency						
12. Is there any evidence or concern that the potential adverse impact identified may result in a Protected Characteristic being disadvantaged? (Please refer to the Corporate Guidelines for guidance on the definitions of discrimination, harassment and victimisation and other prohibited conduct under the Equality Act) available on Harrow HUB/Equalities and Diversity/Policies and Legislation									
	Age (including carers)	Disability (including carers)	Gender Reassignment	Marriage and Civil Partnership	Pregnancy and Maternity	Race	Religion and Belief	Sex	Sexual Orientation
Yes									
No	X	X	X	X	X	X	X	X	X

If you have answered "yes" to any of the above, set out what justification there may be for this in Q12a below - link this to the aims of the proposal and whether the disadvantage is proportionate to the need to meet these aims. (You are encouraged to seek legal advice, if you are concerned that the proposal may breach the equality legislation or you are unsure whether there is objective justification for the proposal)

If the analysis shows the potential for serious adverse impact or disadvantage (or potential discrimination) but you have identified a potential justification for this, this information must be presented to the decision maker for a final decision to be made on whether the disadvantage is proportionate to achieve the aims of the proposal.

- If there are adverse effects that are not justified and cannot be mitigated, you should not proceed with the proposal. **(select outcome 4)**
- If the analysis shows unlawful conduct under the equalities legislation, you should not proceed with the proposal. **(select outcome 4)**

Stage 6: Decision

13. Please indicate which of the following statements best describes the outcome of your EqIA (✓ tick one box only)

Outcome 1 – No change required: the EqIA has not identified any potential for unlawful conduct or disproportionate impact and all opportunities to advance equality are being addressed.	
Outcome 2 – Minor adjustments to remove / mitigate adverse impact or advance equality have been identified by the EqIA. <i>List the actions you propose to take to address this in the Improvement Action Plan at Stage 7</i>	✓
Outcome 3 – Continue with proposals despite having identified potential for adverse impact or missed opportunities to advance equality. In this case, the justification needs to be included in the EqIA and should be in line with the PSED to have 'due regard'. In some cases, compelling reasons will be needed. You should also consider whether there are sufficient plans to reduce the adverse impact and/or plans to monitor the impact. (Explain this in 13a below)	
Outcome 4 – Stop and rethink: when there is potential for serious adverse impact or disadvantage to one or more protected groups. (You are encouraged to seek Legal Advice about the potential for unlawful conduct under equalities legislation)	
13a. If your EqIA is assessed as outcome 3 or you have ticked 'yes' in Q12 , explain your justification with full reasoning to continue with your proposals.	

Stage 7: Improvement Action Plan

14. List below any actions you plan to take as a result of this Impact Assessment. This should include any actions identified throughout the EqIA.

Area of potential adverse impact e.g. Race, Disability	<i>Action required to mitigate</i>	How will you know this is achieved? E.g. Performance Measure / Target	Target Date	Lead Officer	Date Action included in Service / Team Plan
--------------------------------------------------------	------------------------------------	-----------------------------------------------------------------------	-------------	--------------	---------------------------------------------

<p>Service Providers need to identify tenants that are vulnerable due to age and disability and offer appropriate housing related support</p>	<p>A needs and risk assessment of all tenants in sheltered schemes will be reviewed prior to implementation of change.</p> <p>Floating Support service will reach out to Older People living in the community and wards with higher levels of deprivation will be targeted.</p> <p>The Mutual Support Network Provision and Handy Persons/HIA services will also reach out to Older People in the community with tangible needs and enable them to live in their homes for as long as possible.</p>	<p>Service Providers to implement the change. Support and advise will be offered to provider to implement this.</p> <p>Feedback meetings with Providers.</p>	<p>Providers have been formally informed by letter giving 6 months notice confirming the end of SP funding as from 13/07/15</p> <p>Feedback meetings to be scheduled with Providers in March/April 2015.</p>	<p>Sandie Robertrs</p>	
-----------------------------------------------------------------------------------------------------------------------------------------------	-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	--------------------------------------------------------------------------------------------------------------------------------------------------------------	--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	------------------------	--

Stage 8 - Monitoring

The full impact of the proposals may only be known after they have been implemented. It is therefore important to ensure effective monitoring measures are in place to assess the impact.

<p>15. How will you monitor the impact of the proposals once they have been implemented? What monitoring measures need to be introduced to ensure effective monitoring of your proposals? How often will you do this? <i>(Also Include in Improvement Action Plan at Stage 7)</i></p>	<p>SP funding will cease as from 13th July 2015. Providers will monitor support needs of tenants and refer to appropriate community services for support.</p>
<p>16. How will the results of any monitoring be analysed, reported and publicised? <i>(Also Include in Improvement Action Plan at Stage 7)</i></p>	<p>No monitoring is required by SP once contracts end in July 2015, however, will be available for advise and support as wand when requested by both Service Providers and stakeholders.</p>
<p>17. Have you received any complaints or compliments about the proposals being assessed? If so, provide details.</p>	<p>Feedback from Providers affected by this change and feedback from</p>

provider who already moved over to enhance housing management model.

Stage 9: Public Sector Equality Duty

18. How do your proposals contribute towards the Public Sector Equality Duty (PSED) which requires the Council to have due regard to eliminate discrimination, harassment and victimisation, advance equality of opportunity and foster good relations between different groups.

(Include all the positive actions of your proposals, for example literature will be available in large print, Braille and community languages, flexible working hours for parents/carers, IT equipment will be DDA compliant etc)

Eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Equality Act 2010	Advance equality of opportunity between people from different groups	Foster good relations between people from different groups
Overt and or covert discrimination based on sexual orientation, race, gender reassignment, religious beliefs, are all reiterated in the SP Quality Assurance Framework and monitored during service reviews and contract monitoring.	Good quality, safe and secure accommodation and continued support towards independence will still be accessible to older people through community support services.	The community services available to older people focuses on service provision that promotes social inclusion. It also fosters community integration of a diverse people by its promotion of and enabling its service users to participate in community activities.

Stage 10 - Organisational sign Off (to be completed by Chair of Departmental Equalities Task Group)

The completed EqIA needs to be sent to the chair of your Departmental Equalities Task Group (DETG) to be signed off.

19. Which group or committee considered, reviewed and agreed the EqIA and the Improvement Action Plan?			
Signed: (Lead officer completing EqIA)		Signed: (Chair of DETG)	
Date:		Date:	
Date EqIA presented at the EqIA Quality Assurance Group		Signature of ETG Chair	

Initial Equality Implications Assessment for Commissioning Panel

NOTE: The purpose of this short assessment is to highlight to the Commissioning Panels any potential equality implications which your proposals may have on the community as well as the workforce based on the evidence (data and research) you have available at this stage. If your proposal is agreed, the usual equality impact process will need to be followed.

Directorate:	Community Health & Well-being	Officer completing the template:	Veronica Patel, Project & Change Manager
What are the proposals being assessed? (Please also indicate the reference Number from the S1 form)		Ref: CHW-07 Recommissioning of inhouse transport provision to support the most vulnerable service users.	
<p>1. What are the aims, objectives, and desired outcomes of your proposals? (Explain proposals e.g. reduction / removal of service, deletion of posts, change of criteria etc)</p>		<p>Adult services spend £1.4m on the Special Needs Transport (SNT) provided by Council service per year. The £1.4m pays for 17 routes (average route cost of 87k) and a small number of taxi routes. The provision is for FACS eligible users who access the community.</p> <p>Adult services achieved a £350k efficiency saving 2011/12 by bringing in a new personal approach to transport for adult social care users. This included helping people to make their own way to services using the existing public transport infrastructure and alternative transport provision in the local market. This approach allowed the Council to reduce the number of routes operated on behalf of Adult services from 22 to 17 (reduction 5 routes).</p> <p>This proposal extends this approach so that Council funded door-to-door transport targeted at the most vulnerable. This should enable a further reduction of 8 routes taking the total number of Adult routes to 9.</p> <p>The reduction in routes overall (22 to 9 – 60% reduction) should also allow Adult services to realise savings in the apportionment of management costs for the SNT service based on use.</p>	
<p>2. Who are the main people / groups who may be affected by your proposals? For example who are the external/internal customers, communities, partners, stakeholders, the workforce, the elderly, disabled etc.</p>		<p>Circa 90 service users would be impacted by the proposal. Usage on the service varies from one day to five days per week. Alternative provision will be signposted and supported through the Personalisation agenda therefore there will be no loss in service.</p>	

	<p>Approximately 12 FTEs employed by Children and Family Services are at risk of redundancy due to the reduction in routes from the total staff group of 173 staff in Special Needs Transport (SNT). This will be 6 drivers and 6 driver escorts.</p> <p>With a 6 month lead time and following SNT recently running a Voluntary Redundancy (VR) scheme, we would anticipate that the staffing efficiency could be achieved through natural wastage and VR therefore avoiding any compulsory redundancies.</p>																										
<p>3. What data, information, evidence, research, statistics, surveys, and consultation(s) have you considered to undertake this assessment?</p> <p><i>(include the actual data, statistics and evidence based on the different protected characteristics)</i></p>	<p>Staff data has been provided from the Council's SAP database and is as follows:</p> <p>Age: 34 of 173 staff are over 65 years old.</p> <p>Disability: 6 staff are disabled.</p> <p>Gender reassignment: 0</p> <p>Marital status:</p> <table data-bbox="949 783 1547 1070"> <tr><td>Separated</td><td>3</td></tr> <tr><td>Civil Partnership</td><td>1</td></tr> <tr><td>Divorced</td><td>4</td></tr> <tr><td>Married</td><td>84</td></tr> <tr><td>Single</td><td>38</td></tr> <tr><td>Unknown</td><td>3</td></tr> <tr><td>Widowed</td><td>4</td></tr> <tr><td>Blank</td><td>36</td></tr> <tr><td>Grand Total</td><td>173</td></tr> </table> <p>Maternity/Paternity/Adoption taken in the last two years</p> <table data-bbox="972 1219 1406 1348"> <tr><td>Maternity Leave</td><td>2</td></tr> <tr><td>Paternity Leave</td><td>1</td></tr> <tr><td>(blank)</td><td>170</td></tr> <tr><td>Grand Total</td><td>173</td></tr> </table>	Separated	3	Civil Partnership	1	Divorced	4	Married	84	Single	38	Unknown	3	Widowed	4	Blank	36	Grand Total	173	Maternity Leave	2	Paternity Leave	1	(blank)	170	Grand Total	173
Separated	3																										
Civil Partnership	1																										
Divorced	4																										
Married	84																										
Single	38																										
Unknown	3																										
Widowed	4																										
Blank	36																										
Grand Total	173																										
Maternity Leave	2																										
Paternity Leave	1																										
(blank)	170																										
Grand Total	173																										

Race:	
Asian - Chinese	1
Asian - Indian	40
Asian - Other	8
Asian - Pakistani	5
Asian - Sri Lankan	1
Black - African	5
Black - Caribbean	12
Black - Other	1
Mixed - Other	1
Other - Any Other ethnic group	2
Unclassified	1
Unknown	10
White - English	69
White - Irish	13
White - Other	3
White - Welsh	1
 Grand Total	 173

Religion or Belief:	
Christianity	31
Hinduism	14
Islam	2
Jainism	1
No Religion/Atheist	3
Other	5
Sikh	1
(blank)	116

	Grand Total	173
	Sex:	
	Female	99
	Male	74
	Grand Total	173
	Sexual Orientation:	
	Bi-sexual	3
	Heterosexual	29
	Prefer not to say (blank)	6
	Grand Total	173
Reviews are to be carried out on all of the Service Users using the service. Until this is completed we do not have information on the nine protected characteristics of this group. We are confident that no service users will be adversely impacted as there will be no loss of service.		
4. Could your proposals disproportionately affect more people of one group (disabled, minority ethnic groups etc) than another?	No. Based on the data above it would appear that the proposal will not disproportionately affect more people of one group than another.	

5. A - Assessment Relevance

How relevant are your proposals to each protected characteristic?

Example: Reviewing the criteria of freedom passes will be of 'High' relevance for Age and Disability and of 'Low' relevance to the other protected characteristics.

B - Assessment of potential impact

When you consider the impact on people in relation to each protected characteristic, it should be defined as positive, neutral or negative:

- **Positive:** where the impact is expected to have a particular benefit for this protected characteristic or improve equality of opportunity and / or foster good relations.

- **Neutral:** where there will be a neutral impact, neither positive nor negative
- **Negative:** where there is a risk that impact could disadvantage one or more of the people described in relation to a protected characteristic. This disadvantage may be differential, where the negative impact on one particular group of individuals or protected characteristic is likely to be greater than on another.

C - Assessing Negative impact – what are the risks?

When you have considered the likelihood and impact on people in relation to the protected characteristics, use the tables and matrix below and enter a score against each protected characteristic in the end column C.

Unlawful discrimination	5
Disproportionate disadvantage	4
Moderate disadvantage	3
Minor adjustments required	2
Minimal considerations necessary	1
SEVERITY OF IMPACT	

Certain to occur	5
Very likely to occur	4
Likely to occur	3
Possible to occur	2
Very unlikely to occur	1
LIKELIHOOD	

LIKELIHOOD	5	5	10	15	20	25
	4	4	8	12	16	20
	3	3	6	9	12	15
	2	2	4	6	8	10
	1	1	2	3	4	5
	0	1	2	3	4	5
	IMPACT					

Calculating the score - Severity of Impact X Likelihood = Score

Protected Characteristic	A Relevance	B Impact	Describe the impact(s) (negative or positive) your proposals may have on this protected characteristic	Reason for the Assessment of Potential Impact (What evidence, data, and information did you use to assess this?)	C Assessing Negative Impact Score
	Low/ Medium/ High	Positive/ Negative/ Neutral			
Age (including carers of young/older people)	Low	Neutral	The deletion of posts will not adversely impact this protected characteristic over another group.	Staff data obtained from managers and SAP structure	1 x 1 = 1
Disability (including carers of disabled people)	Low	Neutral	The deletion of posts will not adversely impact this protected characteristic over another group.	Staff data obtained from managers and SAP structure	1 x 1 = 1

Gender Reassignment	Low	Neutral	The deletion of posts will not adversely impact this protected characteristic over another group.	Staff data obtained from managers and SAP structure	1 x 1 = 1
Marriage and Civil Partnership	Low	Neutral	The deletion of posts will not adversely impact this protected characteristic over another group.	Staff data obtained from managers and SAP structure	1 x 1 = 1
Pregnancy and Maternity	Low	Neutral	The deletion of posts will not adversely impact this protected characteristic over another group.	Staff data obtained from managers and SAP structure	1 x 1 = 1
Race	Low	Neutral	The deletion of posts will not adversely impact this protected characteristic over another group.	Staff data obtained from managers and SAP structure	1 x 1 = 1
Religion or Belief	Low	Neutral	The deletion of posts will not adversely impact this protected characteristic over another group.	Staff data obtained from managers and SAP structure	1 x 1 = 1
Sex	Low	Neutral	The deletion of posts will not adversely impact this protected characteristic over another group.	Staff data obtained from managers and SAP structure	1 x 1 = 1
Sexual orientation	Low	Neutral	The deletion of posts will not adversely impact this protected characteristic over another group.	Staff data obtained from managers and SAP structure	1 x 1 = 1

Summary and Recommendations (this section must be included in the project proposal reports for the Commissioning Panel)	
Summary / Conclusion of assessment: (include the key findings and equality implications.	This proposal has no impact on equalities
Do you think that your proposals will have a cumulative effect upon a particular protected group in light of other council proposals that you are aware of? If yes, please explain the cumulative impact and on which groups.	No cumulative effect

Signature - Lead Officer		Date	
--------------------------	--	------	--

Initial Equality Implications Assessment for Commissioning Panel

NOTE: The purpose of this short assessment is to highlight to the Commissioning Panels any potential equality implications which your proposals may have on the community as well as the workforce based on the evidence (data and research) you have available at this stage. If your proposal is agreed, the usual equality impact process will need to be followed.

Directorate:	CHW	Officer completing the template:	Chris Greenway
What are the proposals being assessed? (Please also indicate the reference Number from the S1 form)		Ref. CHW-8 Additional income to be generated through MyCep Commercialisation	
<p>1. What are the aims, objectives, and desired outcomes of your proposals? (Explain proposals e.g. reduction / removal of service, deletion of posts, change of criteria etc)</p>		<p>My Community ePurse is a personal budget and support planning tool that enables service users to receive personal budgets and purchase services all in one place using a PayPal electronic e-purse.</p> <p>Service users therefore do not need to set up bank accounts or keep paper records related to their personal budgets. The system is linked to a regional Care Directory 'CarePlace' covering many parts of London and is also integrated with NHS Choices. As a web based solution my Community ePurse can be accessed by anyone with a secure login and it can be interfaced with other systems using web services.</p> <p>This proposal looks to release some of the income generation potential behind My Community ePurse based on Harrow's Intellectual Property Rights (IPR) it has secured for the Council by selling the product to other Local Authorities. The costs of support will be absorbed within the existing staffing Establishment and any costs associated with the set up for other Local Authorities included within the product charge.</p>	
<p>2. Who are the main people / groups who may be affected by your proposals? For example who are the external/internal customers, communities, partners, stakeholders, the workforce, the elderly, disabled etc.</p>		No Staff or Service Users will be impacted by the proposals.	
<p>3. What data, information, evidence, research, statistics, surveys, and consultation(s) have you considered to undertake this assessment?</p>		Expressions of interest received from a number of local authorities including Surrey County Council, LB Sutton, LB Hillingdon, LB Ealing, LB Brent, LB	

<i>(include the actual data, statistics and evidence based on the different protected characteristics)</i>	Barnet, LB Southwark, LB Kingston and LB Camden LB Sutton and LB Hillingdon have indicated they wish to proceed and contract for My CeP.
4. Could your proposals disproportionately affect more people of one group (disabled, minority ethnic groups etc) than another?	No

5. A - Assessment Relevance

How relevant are your proposals to each protected characteristic?

Example: Reviewing the criteria of freedom passes will be of 'High' relevance for Age and Disability and of 'Low' relevance to the other protected characteristics.

B - Assessment of potential impact

When you consider the impact on people in relation to each protected characteristic, it should be defined as positive, neutral or negative:

- **Positive:** where the impact is expected to have a particular benefit for this protected characteristic or improve equality of opportunity and / or foster good relations.
- **Neutral:** where there will be a neutral impact, neither positive nor negative
- **Negative:** where there is a risk that impact could disadvantage one or more of the people described in relation to a protected characteristic. This disadvantage may be differential, where the negative impact on one particular group of individuals or protected characteristic is likely to be greater than on another.

C - Assessing Negative impact – what are the risks?

When you have considered the likelihood and impact on people in relation to the protected characteristics, use the tables and matrix below and enter a score against each protected characteristic in the end column C.

Unlawful discrimination	5
Disproportionate disadvantage	4
Moderate disadvantage	3
Minor adjustments required	2
Minimal considerations necessary	1
SEVERITY OF IMPACT	

Certain to occur	5
Very likely to occur	4
Likely to occur	3
Possible to occur	2
Very unlikely to occur	1
LIKELIHOOD	

LIKELIHOOD	5	5	10	15	20	25
	4	4	8	12	16	20
	3	3	6	9	12	15
	2	2	4	6	8	10
	1	1	2	3	4	5
	0	1	2	3	4	5
	IMPACT					

Calculating the score - Severity of Impact X Likelihood = Score

Protected Characteristic	A Relevance	B Impact	Describe the impact(s) (negative or positive) your proposals may have on this protected characteristic	Reason for the Assessment of Potential Impact (What evidence, data, and information did you use to assess this?)	C Assessing Negative Impact Score
	Low/ Medium/ High	Positive/ Negative/ Neutral			
Age (including carers of young/older people)	Low	Neutral		My CeP covers all age and service user groups	1 x 1 = 1
Disability (including carers of disabled people)	Low	Neutral		My CeP covers all service user groups including those with a Disability (including carers)	1 x 1 = 1
Gender Reassignment	Low	Neutral		This will not adversely impact this protected characteristic over another group.	1 x 1 = 1
Marriage and Civil Partnership	Low	Neutral		This will not adversely impact this protected characteristic over another group.	1 x 1 = 1
Pregnancy and Maternity	Low	Neutral		This will not adversely impact this protected characteristic over another group.	1 x 1 = 1
Race	Low	Neutral		Equality of Provision in Adults is between 0.9 – 1.1	1 x 1 = 1
Religion or Belief	Low	Neutral		This will not adversely impact this protected characteristic over another group.	1 x 1 = 1
Sex	Low	Neutral		This will not adversely impact this protected characteristic over another group.	1 x 1 = 1

Sexual orientation	Low	Neutral		This will not adversely impact this protected characteristic over another group.	1 x 1 = 1
--------------------	-----	---------	--	----------------------------------------------------------------------------------	-----------

Summary and Recommendations (this section must be included in the project proposal reports for the Commissioning Panel)	
Summary / Conclusion of assessment: (include the key findings and equality implications.	This proposal has no impact on equalities
Do you think that your proposals will have a cumulative effect upon a particular protected group in light of other council proposals that you are aware of? If yes, please explain the cumulative impact and on which groups.	No cumulative effect

Signature - Lead Officer	Chris Greenway	Date	22/08/2014
--------------------------	----------------	------	------------

Initial Equality Implications Assessment for Commissioning Panel

NOTE: The purpose of this short assessment is to highlight to the Commissioning Panels any potential equality implications which your proposals may have on the community as well as the workforce based on the evidence (data and research) you have available at this stage. If your proposal is agreed, the usual equality impact process will need to be followed.

Directorate:	Community Health & Well-being	Officer completing the template:	Veronica Patel, Project & Change Manager
What are the proposals being assessed? (Please also indicate the reference Number from the S1 form)		Review of In-house Residential Provision Ref. CHW-10	

<p>1. What are the aims, objectives, and desired outcomes of your proposals?</p> <p>(Explain proposals e.g. reduction / removal of service, deletion of posts, change of criteria etc.)</p>	<p>In 2013/14, Adult services reconfigured the internal Learning Disability (LD) residential provision including a specialist transition unit to operate from the Council's Woodlands site. This year more transition clients have been helped to remain independent by utilising community based capacity without the need for residential care. The number of clients in Woodland's has greatly reduced and based on current trends can be closed before the end of the year. Future transition clients will be maintained in the community by making use of available capacity in the market. This delivers a £142k staff efficiency, which is delivered in part through the deletion of 2 vacant posts.</p> <p>The reconfiguration of day and residential services from Gordon Avenue (owned by Genesis Housing Association) will allow the discharge of this lease making a further saving of £20k in 2015/16. To facilitate this discharge the respite service at Bedford House (Council owned property) will be maintained.</p> <p>The balance £39k of the savings will come from the running expenses at Woodlands and wider in-house provision as required.</p> <p>In making the above changes we are also able to deliver a further management saving of £49k across Provider Services. This will deliver a total efficiency of £250k in 2015/16.</p>
<p>2. Who are the main people / groups who may be affected by your proposals? For example who are the external/internal customers,</p>	<p>Staff – 5 FTE posts are directly affected and are likely to be deleted from the Woodlands Residential Unit. 3 of which are Residential Support</p>

<p>communities, partners, stakeholders, the workforce, the elderly, disabled etc.</p>	<p>Workers (occupied posts) and 2 are vacant (Care Assistants). No Service Users will be impacted by the proposals.</p>
<p>3. What data, information, evidence, research, statistics, surveys, and consultation(s) have you considered to undertake this assessment? <i>(include the actual data, statistics and evidence based on the different protected characteristics)</i></p>	<p>Information on the staff affected has been provided by the Service Manager or has been obtained from the Council's staff database SAP.</p> <p>Of the three occupied posts:</p> <p>Age: None are over 65 or under 18. None are known carers. Race: 2 are White British. 1 is Black African. Disability: None of the staff are registered as disabled. Religion/belief: Not known Sexual orientation: Not known Sex: Two are female, one is male. Transgender: Not known Pregnancy/maternity: None of the staff are currently pregnant or on maternity leave. Marriage/civil partnership: 1 is married the other 2 are not known.</p>
<p>4. Could your proposals disproportionately affect more people of one group (disabled, minority ethnic groups etc.) than another?</p>	<p>The majority of the workforce in Adult Social Care is female therefore there is potential for adverse impact in relation to gender.</p>

5. A - Assessment Relevance

How relevant are your proposals to each protected characteristic?

Example: Reviewing the criteria of freedom passes will be of 'High' relevance for Age and Disability and of 'Low' relevance to the other protected characteristics.

B - Assessment of potential impact

When you consider the impact on people in relation to each protected characteristic, it should be defined as positive, neutral or negative:

➤ **Positive:** where the impact is expected to have a particular benefit for this protected characteristic or improve equality of opportunity and / or

foster good relations.

- **Neutral:** where there will be a neutral impact, neither positive nor negative
- **Negative:** where there is a risk that impact could disadvantage one or more of the people described in relation to a protected characteristic. This disadvantage may be differential, where the negative impact on one particular group of individuals or protected characteristic is likely to be greater than on another.

C - Assessing Negative impact – what are the risks?

When you have considered the likelihood and impact on people in relation to the protected characteristics, use the tables and matrix below and enter a score against each protected characteristic in the end column C.

Unlawful discrimination	5
Disproportionate disadvantage	4
Moderate disadvantage	3
Minor adjustments required	2
Minimal considerations necessary	1
SEVERITY OF IMPACT	

Certain to occur	5
Very likely to occur	4
Likely to occur	3
Possible to occur	2
Very unlikely to occur	1
LIKELIHOOD	

LIKELIHOOD	5	5	10	15	20	25
	4	4	8	12	16	20
	3	3	6	9	12	15
	2	2	4	6	8	10
	1	1	2	3	4	5
	0	1	2	3	4	5
		IMPACT				

Calculating the score - Severity of Impact X Likelihood = Score

Protected Characteristic	A Relevance	B Impact	Describe the impact(s) (negative or positive) your proposals may have on this protected characteristic	Reason for the Assessment of Potential Impact (What evidence, data, and information did you use to assess this?)	C Assessing Negative Impact Score
	Low/ Medium/ High	Positive/ Negative/ Neutral			
Age (including carers of young/older people)	Low	Negative	The deletion of posts may have a negative impact on those that are carers and currently work to shift patterns to help them meet their caring duties. New roles outside of the	This was raised during the reorganisation earlier this year. It is not known if any of the 3 staff are carers.	1 x 2 = 2

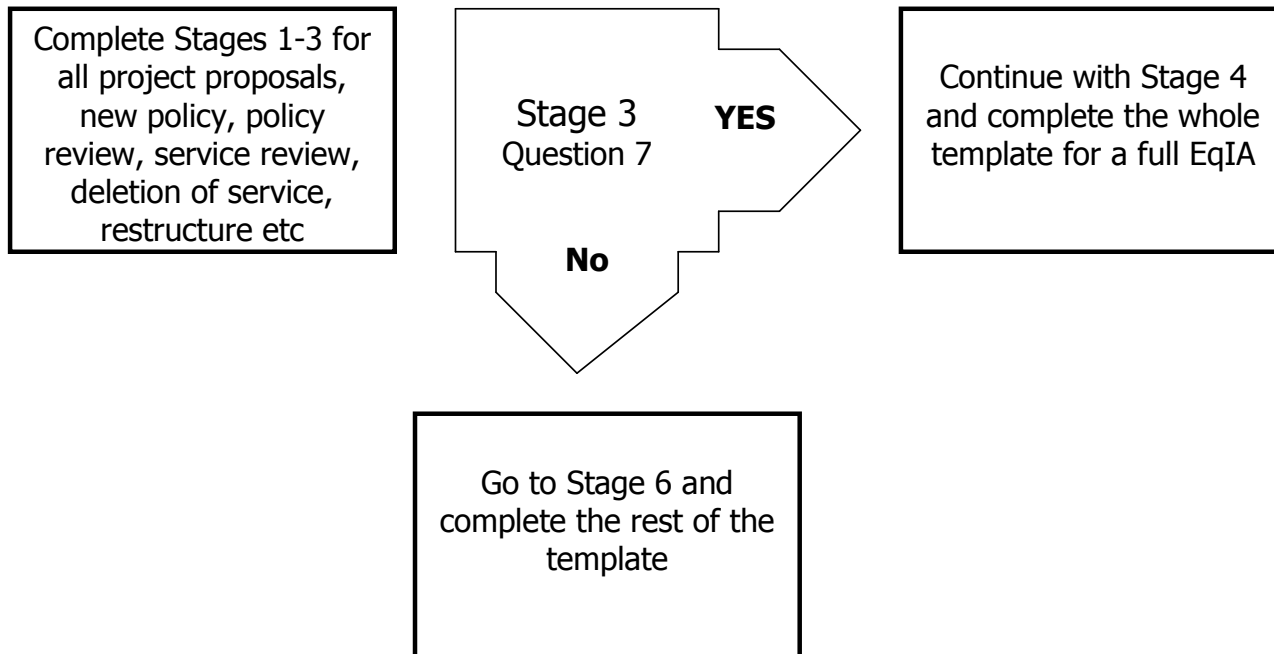
			authority may not offer the same flexibility.		
Disability (including carers of disabled people)	Low	Neutral		None of the staff at Woodlands are identified as having a registered disability	1 x 1 = 1
Gender Reassignment	Low	Neutral		None of the staff at Woodlands are identified as being gender reassigned	1 x 1 = 1
Marriage and Civil Partnership	Low	Neutral		The deletion of posts will not adversely impact this protected characteristic over another group.	1 x 1 = 1
Pregnancy and Maternity	Low	Neutral		Council policy exists for those pregnant/on maternity leave. No one in the staff group is currently pregnant on maternity leave.	1 x 1 = 1
Race	Low	Neutral		The deletion of posts will not adversely impact this protected characteristic over another group. 2 of the staff are White British. 1 is Black African.	1 x 1 = 1
Religion or Belief	Low	Neutral		The deletion of posts will not adversely impact this protected characteristic over another group.	1 x 1 = 1
Sex	Low	Negative	2 of the 3 of staff that will be will have their posts deleted are female	The majority of the staff group in LD residential are female so this is unavoidable.	3 x 3 = 9
Sexual orientation	Low	Neutral		The deletion of posts will not adversely impact this protected characteristic over another group.	1 x 1 = 1

Summary and Recommendations (this section must be included in the project proposal reports for the Commissioning Panel)	
Summary / Conclusion of assessment: (include the key findings and equality implications.	Further analysis of the staff group to collate and consultation to take place in accordance with the Council's Reorganisation procedure and the Council's Protocol for Managing Organisation Change (PMOC).
Do you think that your proposals will have a cumulative effect upon a particular protected group in light of other council proposals that you are aware of? If yes, please explain the cumulative impact and on which groups.	Highly likely due to other proposals across CHW and the Council.

Signature - Lead Officer		Date	20-08-14
--------------------------	--	------	----------

Equality Impact Assessment Template

The Council has revised and simplified its Equality Impact Assessment process. There is now just one Template. Project Managers will need to complete **Stages 1-3** to determine whether a full EqIA is required and the need to complete the whole template.



Equality Impact Assessment (EqIA) Template

In order to carry out this assessment, it is important that you have completed the EqIA E-learning Module and read the Corporate Guidelines on EqIAs. Please refer to these to assist you in completing this assessment.

It will also help you to look at the EqIA Template with Guidance Notes to assist you in completing the EqIA.

Formatted: Right: 1 cm, Top: 0.63 cm, Bottom: 0.95 cm, Section start: New page, Do not suppress endnotes, Header distance from edge: 1.25 cm, Footer distance from edge: 1.25 cm, Not Different first page header

Type of Project / Proposal:	Tick ✓	Type of Decision:	Tick ✓
Transformation		Cabinet	
Capital		Portfolio Holder	
Service Plan		Corporate Strategic Board	
Other	✓	Other	
Title of Project:	Strategic reorganisation of Sports Development team (Ref CHW 14)		
Directorate / Service responsible:	Community, Health and Well-Being/Community and Culture		
Name and job title of lead officer:	Tim Bryan – Service Manager, Libraries, Sport and Leisure		
Name & contact details of the other persons involved in the assessment:	Marianne Locke – Divisional Director, Community and Culture Marianne.locke@harrow.gov.uk		
Date of assessment:	29/01/15		
Stage 1: Overview			
<p style="text-align: center;">1. What are you trying to do?</p> <p>(Explain proposals e.g. introduction of a new service or policy, policy review, changing criteria, reduction / removal of service, restructure, deletion of posts etc)</p>	<p>Strategic reorganisation of Sports Development team to reduce overall budget for 215-16. This will entail a staffing restructure which will reduce current staffing levels from 2 to 1 FTE (remaining post funded from within Community & Culture budgets). A full EQIA will be completed in line with Harrow's Protocol for Managing Organisational Change (PMOC). In addition, to cease delivery of the London Youth Games and further review sports development delivery in 2016/17. This will be subject to a further EQIA process.</p> <p>Reference: CHW14</p>		
2. Who are the main people / Protected Characteristics that	Residents / Service	✓	Partners
		✓	Stakeholders

may be affected by your proposals? (✓ all that apply)	Users					
	Staff	✓	Age	✓	Disability	✓
	Gender Reassignment		Marriage and Civil Partnership		Pregnancy and Maternity	
	Race		Religion or Belief	✓	Sex	
	Sexual Orientation		Other			

<p>3. Is the responsibility shared with another directorate, authority or organisation? If so:</p> <ul style="list-style-type: none"> • Who are the partners? • Who has the overall responsibility? • How have they been involved in the assessment? 	<p>The delivery of the London Youth Games is supported by an inter-borough agreement through London Councils. All London authorities pay £7,500pa towards these costs. This agreement ceases in 2016-17. A number of authorities are considering pulling out or have announced they will not be participating in LYG for 2015-16 but may still be liable to pay the annual costs to London Councils. In addition, the Sports Development team works closely with the Public Health team on a number of local initiatives such as Outdoor Gyms etc. The Sports Development team also supports the work of the Community Sports and Activity Network on Harrow, a group of local sports and physical ACTIVITY providers such as sports clubs., London Sports etc. The CSPAN fund which was allocated through 2014-5 will be part delivered in 2015-16, monitored by the CSPAN and Sports Development.</p>
----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

Stage 2: Evidence / Data Collation

4. What evidence / data have you reviewed to assess the potential impact of your proposals? Include the actual data, statistics reviewed in the section below. This can include census data, borough profile, profile of service users, workforce profiles, results from consultations and the involvement tracker, customer satisfaction surveys, focus groups, research interviews, staff surveys; complaints etc. Where possible include data on the nine Protected Characteristics.

(Where you have gaps (data is not available/being collated), you may need to include this as an action to address in your Improvement Action Plan at Stage 7)

Age (including carers of young/older people)	Breakdown information of Harrow participants of London Youth Games 2014 identifies that the majority of participants are aged between 11 and 18 years old and of the staff in the Sports Development Team. In the London Youth Games 2014, 413 athletes competed for Harrow. This consisted of 220 males and 193 females. The age breakdown was: 8-10 year olds = 7, 11-15 year olds = 336, 16-18 year olds = 70.
----------------------------------------------	-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

	<p>The Sports Development Team currently consists of 2 FTEs. The breakdown of the current staff is as follows:</p> <p>Age – 1 member of staff is aged between 25 and 34, and one member of staff is aged between 45 and 54.</p> <p>Children with sporting talent will still be able to participate in regional competitions through local clubs and through the School Games. This is particularly the case for sports such as swimming and cricket. Sports Development will be able to work with families and clubs to advice on the appropriate progression route for other sports involving liaising with the National Governing Bodies (NGBs).</p>
Disability (including carers of disabled people)	<p>Harrow entered 5 sports events in London Youth Games 2014 that were specifically for children with disabilities.</p> <p>Neither of the 2 existing members of the Sports Development have been identified as having a disability.</p> <p>Children with sporting talent will still be able to participate in regional competitions through local clubs and through the School Games. This is particularly the case for sports such as swimming and cricket. Sports Development will be able to work with families and clubs to advice on the appropriate progression route for other sports involving liaising with the National Governing Bodies (NGBs).</p>
Gender Reassignment	<p>London Youth Games is a competition for school children and therefore there is no impact for this characteristic. There is no impact on the Sports Development Team.</p>
Marriage / Civil Partnership	<p>London Youth Games is a competition for school children and therefore there is no impact for this characteristic. There is no impact on the Sports Development Team.</p>
Pregnancy and Maternity	<p>London Youth Games is a competition for school children and therefore there is no impact for this characteristic. There is no impact on the Sports Development Team.</p>
Race	<p>Breakdown information of Harrow participants of London Youth Games 2014 above shows that there were 3 main racial groups who participated (Asian/Asian British, Any White Background, or Black/African/Caribbean/Black British)</p> <p>The 2 existing members of the Sports Development team are from different racial groups (Asian/Asian</p>

	British, Black/African/Caribbean/Black British).
Religion and Belief	Neither positive or negative impact for London Youth Games participants and for Sports Development team staff. Members of the Sports Development team have different religions or beliefs.
Sex / Gender	Breakdown information of Harrow participants of London Youth Games 2014 shows an even split of participants between males and females. Both Sports Development staff are male.
Sexual Orientation	Neither positive or negative impact for London Youth Games participants as this data is not collected for the schoolchildren participants. No impact for Sports Development team staff.
Socio Economic	Participants in LYG come from a number of different schools and socio-economic backgrounds. Neither positive or negative impact for London Youth Games participants and for Sports Development team staff.

Who was consulted?			
Harrow Youth Parliament	To be consulted for 2016-17 LYG		
CSPAN	To be consulted for 2016-17		
Harrow Schools	To be consulted for 2016-17 LYG		

<p>6. What other (local, regional, national research, reports, media) data sources that you have used to inform this assessment?</p> <p>List the Title of reports / documents and websites here.</p>	n/a
-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-----

Stage 3: Assessing Potential Disproportionate Impact

7. Based on the evidence you have considered so far, is there a risk that your proposals could potentially have a disproportionate adverse impact on any of the Protected Characteristics?

	Age	Disability	Gender	Marriage	Pregnancy and	Race	Religion and	Sex	Sexual
--	-----	------------	--------	----------	---------------	------	--------------	-----	--------

	(including carers)	(including carers)	Reassignment	and Civil Partnership	Maternity		Belief		Orientation
Yes	√								
No		√	√	√	√	√	√	√	√

YES - If there is a risk of disproportionate adverse Impact on any **ONE** of the Protected Characteristics, continue with the rest of the template.

- **Best Practice:** You may want to consider setting up a Working Group (including colleagues, partners, stakeholders, voluntary community sector organisations, service users and Unions) to develop the rest of the EqIA
- It will be useful to also collate further evidence (additional data, consultation with the relevant communities, stakeholder groups and service users directly affected by your proposals) to further assess the potential disproportionate impact identified and how this can be mitigated.

NO - If you have ticked 'No' to all of the above, then go to **Stage 6**

- Although the assessment may not have identified potential disproportionate impact, you may have identified actions which can be taken to advance equality of opportunity to make your proposals more inclusive. These actions should form your Improvement Action Plan at Stage 7

Stage 4: Collating Additional data / Evidence

8. What additional data / evidence have you considered in relation to your proposals as a result of the analysis at Stage 3?

(include this evidence, including any data, statistics, titles of documents and website links here)

9. What further consultation have you undertaken on your proposals as a result of your analysis at Stage 3?

Who was consulted?	What consultation methods were used?	What do the results show about the impact on different groups / Protected Characteristics?	What actions have you taken to address the findings of the consultation? (This may include further consultation with the affected groups, revising your proposals).
Further consultation with Council Officers, partners, stakeholders, voluntary sector organisations,			

and service users will need to be conducted for 2016-17.			

Stage 5: Assessing Impact and Analysis

10. What does your evidence tell you about the impact on different groups? Consider whether the evidence shows potential for differential impact, if so state whether this is an adverse or positive impact? How likely is this to happen? How you will mitigate/remove any adverse impact?

Protected Characteristic	Adverse ✓	Positive ✓	Explain what this impact is, how likely it is to happen and the extent of impact if it was to occur. Note – Positive impact can also be used to demonstrate how your proposals meet the aims of the PSED Stage 9	What measures can you take to mitigate the impact or advance equality of opportunity? E.g. further consultation, research, implement equality monitoring etc (Also Include these in the Improvement Action Plan at Stage 7)
Age (including carers of young/older people)	✓		The proposal to cease participation in London Youth Games (LYG) for 2016/17 has the potential to have a negative impact on the protected characteristics in particular age. LYG is a competition for talented athletes the majority of which are secondary school age, 11-18 year olds (98% of participants in 2014 were aged 11-18 years)	Children with sporting talent will still be able to participate in regional competitions through local clubs and through the School Games. This is particularly the case for sports such as swimming and cricket. Sports Development will be able to work with families and clubs to advice on the appropriate progression route for other sports involving liaising with the National Governing Bodies (NGBs).
Disability (including carers of disabled people)	✓		Some of the competitions are specifically for children with a disability,	Children with sporting talent will still be able to participate in regional competitions through local clubs and through the School Games. This is particularly the case for sports such as swimming and cricket. Sports Development will be able to work with families and clubs to advice on the appropriate progression route for other sports involving liaising with the National Governing Bodies (NGBs).
Gender Reassignment			n/a	

Marriage and Civil Partnership			n/a			
Pregnancy and Maternity						
Race			The breakdown of participants in 2014 identified that the majority were either Asian/Asian British, Any White Background, or Black/African/Caribbean/Black British.	Children with sporting talent will still be able to participate in regional competitions through local clubs and through the School Games. This is particularly the case for sports such as swimming and cricket. Sports Development will be able to work with families and clubs to advice on the appropriate progression route for other sports involving liaising with the National Governing Bodies (NGBs).		
Religion or Belief			n/a			
Sex			n/a			
Sexual orientation			n/a			
11. Cumulative Impact – Considering what else is happening within the Council and Harrow as a whole, could your proposals have a cumulative impact on a particular Protected Characteristic?			Yes		No	√
If yes, which Protected Characteristics could be affected and what is the potential impact?			No cumulative affect has been identified as schools deliver the School Games directly as part of a national scheme.			
11a. Any Other Impact – Considering what else is happening within the			Yes		No	√

Council and Harrow as a whole (for example national/local policy, austerity, welfare reform, unemployment levels, community tensions, levels of crime) could your proposals have an impact on individuals/service users socio economic, health or an impact on community cohesion?

If yes, what is the potential impact and how likely is to happen?

12. Is there any evidence or concern that the potential adverse impact identified may result in a Protected Characteristic being disadvantaged? (Please refer to the Corporate Guidelines for guidance on the definitions of discrimination, harassment and victimisation and other prohibited conduct under the Equality Act) available on Harrow HUB/Equalities and Diversity/Policies and Legislation

	Age (including carers)	Disability (including carers)	Gender Reassignment	Marriage and Civil Partnership	Pregnancy and Maternity	Race	Religion and Belief	Sex	Sexual Orientation
Yes									
No	✓	✓	✓	✓	✓	✓	✓	✓	✓

If you have answered "yes" to any of the above, set out what justification there may be for this in Q12a below - link this to the aims of the proposal and whether the disadvantage is proportionate to the need to meet these aims. (You are encouraged to seek legal advice, if you are concerned that the proposal may breach the equality legislation or you are unsure whether there is objective justification for the proposal)

If the analysis shows the potential for serious adverse impact or disadvantage (or potential discrimination) but you have identified a potential justification for this, this information must be presented to the decision maker for a final decision to be made on whether the disadvantage is proportionate to achieve the aims of the proposal.

- If there are adverse effects that are not justified and cannot be mitigated, you should not proceed with the proposal. **(select outcome 4)**
- If the analysis shows unlawful conduct under the equalities legislation, you should not proceed with the proposal. **(select outcome 4)**

Stage 6: Decision

13. Please indicate which of the following statements best describes the outcome of your EqIA (✓ tick one box only)

Outcome 1 – No change required: the EqIA has not identified any potential for unlawful conduct or disproportionate impact and all opportunities to advance equality are being addressed.	✓
Outcome 2 – Minor adjustments to remove / mitigate adverse impact or advance equality have been identified by the EqIA. <i>List the actions you propose to take to address this in the Improvement Action Plan at Stage 7</i>	
Outcome 3 – Continue with proposals despite having identified potential for adverse impact or missed opportunities to advance equality. In this case, the justification needs to be included in the EqIA and should be in line with the PSED to have 'due regard'. In some cases, compelling reasons will be needed. You should also consider whether there are sufficient plans to reduce the adverse impact and/or plans to monitor the impact. (Explain this in 13a below)	
Outcome 4 – Stop and rethink: when there is potential for serious adverse impact or disadvantage to one or more protected	

groups. (You are encouraged to seek Legal Advice about the potential for unlawful conduct under equalities legislation)

13a. If your EqIA is assessed as **outcome 3** or you have ticked 'yes' in Q12, explain your justification with full reasoning to continue with your proposals.

Stage 7: Improvement Action Plan

14. List below any actions you plan to take as a result of this Impact Assessment. This should include any actions identified throughout the EqIA.

Area of potential adverse impact e.g. Race, Disability	<i>Action required to mitigate</i>	How will you know this is achieved? E.g. Performance Measure / Target	Target Date	Lead Officer	Date Action included in Service / Team Plan
Age	Further consultation regarding the non-participation in LYG for 2016-17 with schools, CSPAN and local sports clubs.		Sept 2015	Tim Bryan	April 2015
Race	Further consultation regarding the non-participation in LYG for 2016-17 with schools, CSPAN and local sports clubs. Consultation with staff on restructure proposals	Staffing restructure completed	Sept 2015 April 2015	Tim Bryan	April 2015
Disability	Further consultation regarding the non-participation in LYG for 2016-17 with schools, CSPAN and local sports clubs.		Sept 2015	Tim Bryan	April 2015

Stage 8 - Monitoring

The full impact of the proposals may only be known after they have been implemented. It is therefore important to ensure effective monitoring measures are in place to assess the impact.

15. How will you monitor the impact of the proposals once they have been implemented? What monitoring measures need to be introduced to ensure effective monitoring of your proposals? How often will you do this? <i>(Also Include in Improvement Action Plan at Stage 7)</i>	Through the Service plan on a quarterly basis.
16. How will the results of any monitoring be analysed, reported and publicised? <i>(Also Include in Improvement Action Plan at Stage 7)</i>	Through Improvement Boards.
17. Have you received any complaints or compliments about the proposals being assessed? If so, provide details.	No

Stage 9: Public Sector Equality Duty

18. How do your proposals contribute towards the Public Sector Equality Duty (PSED) which requires the Council to have due regard to eliminate discrimination, harassment and victimisation, advance equality of opportunity and foster good relations between different groups.

(Include all the positive actions of your proposals, for example literature will be available in large print, Braille and community languages, flexible working hours for parents/carers, IT equipment will be DDA compliant etc)

Eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Equality Act 2010	Advance equality of opportunity between people from different groups	Foster good relations between people from different groups


Stage 10 - Organisational sign Off (to be completed by Chair of Departmental Equalities Task Group)

The completed EqIA needs to be sent to the chair of your Departmental Equalities Task Group (DETG) to be signed off.

19. Which group or committee considered, reviewed and agreed the EqIA and the Improvement Action Plan?	DETG		
Signed: (Lead officer completing EqIA)	T Bryan	Signed: (Chair of DETG)	Carol Yarde
Date:	29/01/15	Date:	Feb 2015
Date EqIA presented at the EqIA Quality Assurance Group		Signature of ETG Chair	

Initial Equality Implications Assessment for Commissioning Panel

NOTE: The purpose of this short assessment is to highlight to the Commissioning Panels any potential equality implications which your proposals may have on the community as well as the workforce based on the evidence (data and research) you have available at this stage. If your proposal is agreed, the usual equality impact process will need to be followed.

Directorate:	Community Health & Wellbeing	Officer completing the template:	Sandra Bruce-Gordon																																												
What are the proposals being assessed? (Please also indicate the reference Number from the S1 form)		CHW 15 Reduce council subsidy to the Harrow Arts Centre & Museum, whilst developing business plan to eliminate subsidy in the longer term. In 2015/16 saving achieved by additional income and staff re-structure in 2014/15 (resulting in 2 redundancies)																																													
1. What are the aims, objectives, and desired outcomes of your proposals? (Explain proposals e.g. reduction / removal of service, deletion of posts, change of criteria etc)		Increasing income and reducing costs achieved through staffing restructure in 2014/15 and other efficiency measures. Developing a business plan for 2016-17 onwards to be considered by Cabinet in Spring 2015.																																													
2. Who are the main people / groups who may be affected by your proposals? For example who are the external/internal customers, communities, partners, stakeholders, the workforce, the elderly, disabled etc.		Staff; internal and external customers, stakeholders, communities of Harrow, young people, older people.																																													
3. What data, information, evidence, research, statistics, surveys, and consultation(s) have you considered to undertake this assessment? (include the actual data, statistics and evidence based on the different protected characteristics)		<div style="text-align: center;">  Annual Report 1314.pdf </div> <p>Participation Report.</p> <p>Attendance and registration information including:</p> <table border="1" style="width: 100%; border-collapse: collapse; text-align: center;"> <thead> <tr> <th style="width: 25%;">Harrow</th> <th style="width: 25%;">Music</th> <th style="width: 25%;">Service</th> <th style="width: 25%;">statistics.</th> </tr> </thead> <tbody> <tr> <td colspan="4">FESTIVALS - APPROXIMATE NO OF CHILDREN PARTICIPATING</td> </tr> <tr> <td>FESTIVAL NAME</td> <td>MONDAY</td> <td>TUESDAY</td> <td>WEDNESDAY</td> </tr> <tr> <td>BAND</td> <td>171</td> <td>134</td> <td></td> </tr> <tr> <td>GUITAR</td> <td></td> <td>152</td> <td></td> </tr> <tr> <td>STRINGS</td> <td>144</td> <td>132</td> <td>125</td> </tr> <tr> <td>WORLD</td> <td></td> <td>140</td> <td></td> </tr> <tr> <td>CHOIR SHOWCASE</td> <td>184</td> <td></td> <td>255</td> </tr> <tr> <td>RECORDER</td> <td></td> <td>133</td> <td></td> </tr> <tr> <td>PERCUSSION DAY</td> <td></td> <td>60</td> <td></td> </tr> <tr> <td>TOTALS</td> <td>499</td> <td>751</td> <td>380 1630</td> </tr> </tbody> </table>		Harrow	Music	Service	statistics.	FESTIVALS - APPROXIMATE NO OF CHILDREN PARTICIPATING				FESTIVAL NAME	MONDAY	TUESDAY	WEDNESDAY	BAND	171	134		GUITAR		152		STRINGS	144	132	125	WORLD		140		CHOIR SHOWCASE	184		255	RECORDER		133		PERCUSSION DAY		60		TOTALS	499	751	380 1630
Harrow	Music	Service	statistics.																																												
FESTIVALS - APPROXIMATE NO OF CHILDREN PARTICIPATING																																															
FESTIVAL NAME	MONDAY	TUESDAY	WEDNESDAY																																												
BAND	171	134																																													
GUITAR		152																																													
STRINGS	144	132	125																																												
WORLD		140																																													
CHOIR SHOWCASE	184		255																																												
RECORDER		133																																													
PERCUSSION DAY		60																																													
TOTALS	499	751	380 1630																																												

Audience statistics.

Age	
0<6	0%
7<12	1%
13<19	2%
20<30	4%
31>45	11%
46>64	30%
65+	35%
Not obtained	17%

Disability	
Disabled	8%
Non disabled	71%
Not obtained	21%

Ethnicity	
Asian	0% Bangladeshi
Asian	2% British
Asian	2% Indian
Asian	1% Pakistani
Asian	0% other
Black	0% African
Black	1% British
Black	2% Caribbean
Black	1% Other
Chinese	
Latin American	
Middle Eastern	
Mixed heritage	1%
White	56% British
White	3% European
White	4% Irish
White	2% other
Other	2%
Not obtained	22%

Religion	
Muslim	1%

Christian 41%
 Buddhist 0%
 Sikh 0%
 Jewish 11%
 Hindu 3%
 Atheist 5%
 Agnostic 4%
 Other 7%
 Not obtained 27%

Gender
 Male 26%
 Female 53%
 Other 0%
 Not obtained 22%

Staff Profile

Age
 0<5 0%
 6<12 0%
 13<19 0%
 20<25 0%
 26<55 80%
 56<75 20%

Disability
 Disabled 5%
 Non disabled 95%

Ethnicity
 Asian 0%
 Bangladeshi 0%
 Asian British 0%
 Asian Indian 5%
 Asian Pakistani 0%
 Asian other 0%
 Black African 0%
 Black British 0%

	Black Caribbean 5% Black Other 5% Chinese 0% Latin American 0% Middle Eastern 0% Mixed heritage 5% White English 65% White European 0% White Irish 0% White other 5% Other 0% Not obtained 10%
	Religion Muslim Christian 10% Buddhist Sikh Jewish 2% Hindu Atheist 4% Agnostic Other Not obtained 84%
	Gender Male 50% Female 50% Other Not obtained
	Sexual Orientation Hetrosexual 19% Prefer not to say 5% Not obtained 76%
4. Could your proposals disproportionately affect more people of one group (disabled, minority ethnic groups etc) than another?	Young People aged between 1 and 25.

5. A - Assessment Relevance

How relevant are your proposals to each protected characteristic?

Example: Reviewing the criteria of freedom passes will be of 'High' relevance for Age and Disability and of 'Low' relevance to the other protected characteristics.

B - Assessment of potential impact

When you consider the impact on people in relation to each protected characteristic, it should be defined as positive, neutral or negative:

- **Positive:** where the impact is expected to have a particular benefit for this protected characteristic or improve equality of opportunity and / or foster good relations.
- **Neutral:** where there will be a neutral impact, neither positive nor negative
- **Negative:** where there is a risk that impact could disadvantage one or more of the people described in relation to a protected characteristic. This disadvantage may be differential, where the negative impact on one particular group of individuals or protected characteristic is likely to be greater than on another.

C - Assessing Negative impact – what are the risks?

When you have considered the likelihood and impact on people in relation to the protected characteristics, use the tables and matrix below and enter a score against each protected characteristic in the end column C.

Unlawful discrimination	5
Disproportionate disadvantage	4
Moderate disadvantage	3
Minor adjustments required	2
Minimal considerations necessary	1
SEVERITY OF IMPACT	

Certain to occur	5
Very likely to occur	4
Likely to occur	3
Possible to occur	2
Very unlikely to occur	1
LIKELIHOOD	

LIKELIHOOD	5	5	10	15	20	25
	4	4	8	12	16	20
	3	3	6	9	12	15
	2	2	4	6	8	10
	1	1	2	3	4	5
	0	1	2	3	4	5
	IMPACT					

Calculating the score - Severity of Impact X Likelihood = Score

Protected Characteristic	A Relevance	B Impact	Describe the impact(s) (negative or positive) your proposals may have on this protected characteristic	Reason for the Assessment of Potential Impact (What evidence, data, and information did	C Assessing Negative
--------------------------	-----------------------	--------------------	--------------------------------------------------------------------------------------------------------	--------------------------------------------------------------------------------------------	--------------------------------

	Low/ Medium/ High	Positive/ Negative/ Neutral		you use to assess this?)	Impact Score
Age (including carers of young/older people)	Low	Neutral	Full EQIA to be developed for Cabinet report Spring 2015 depending on options identified for 2016-17 onwards		1
Disability (including carers of disabled people)	LOW	NEUTRAL	Full EQIA to be developed for Cabinet report Spring 2015 depending on options identified for 2016-17 onwards		1
Gender Reassignment	LOW	NEUTRAL	N/A Full EQIA to be developed for Cabinet report Spring 2015 depending on options identified for 2016-17 onwards		1
Marriage and Civil Partnership	LOW	NEUTRAL	N/A Full EQIA to be developed for Cabinet report Spring 2015 depending on options identified for 2016-17 onwards		1
Pregnancy and Maternity	LOW	NEUTRAL	N/A Full EQIA to be developed for Cabinet report Spring 2015 depending on options identified for 2016-17 onwards		1
Race	LOW	NEUTRAL	N/A Full EQIA to be developed for Cabinet report Spring 2015 depending on options identified for 2016-17 onwards		1
Religion or Belief	LOW	NEUTRAL	N/A Full EQIA to be developed for Cabinet report Spring 2015 depending on options identified for 2016-17 onwards		1
Sex	LOW	NEUTRAL	N/A Full EQIA to be developed for Cabinet report Spring 2015 depending on options identified for 2016-17 onwards		1
Sexual orientation	LOW	NEUTRAL	N/A Full EQIA to be developed for Cabinet report Spring 2015 depending on options identified for 2016-17 onwards		1

Summary and Recommendations (this section must be included in the project proposal reports for the Commissioning Panel)

Summary / Conclusion of assessment: (include the key findings and equality implications.	No impacts identified for 2015-16. Impact assessment to be conducted for any proposals for the future delivery 2016-17 to be considered by Cabinet in Spring 2015.
------------------------------------------------------------------------------------------	--------------------------------------------------------------------------------------------------------------------------------------------------------------------

<p>Do you think that your proposals will have a cumulative effect upon a particular protected group in light of other council proposals that you are aware of? If yes, please explain the cumulative impact and on which groups.</p>	<p>N/A</p>

<p>Signature - Lead Officer</p>	<p><i>Archocke</i></p>	<p>Date</p>	<p>10/2/2015</p>
---------------------------------	------------------------	-------------	------------------

Equality Implications Assessment for Commissioning Panel

NOTE: The purpose of this short assessment is to highlight to the Commissioning Panels any potential equality implications which your proposals may have on the community as well as the workforce based on the evidence (data and research) you have available at this stage. If your proposal is agreed, the usual equality impact process will need to be followed.

Directorate:	Community Health and Wellbeing	Officer completing the template:	Samia Malik
What are the proposals being assessed? (Please also indicate the reference Number from the S1 form)		Ref CHW18 CHW Management savings – 1 fte in Community & Culture 2015/16 and 1fte in Housing 2016/17.	
<p>1. What are the aims, objectives, and desired outcomes of your proposals? (Explain proposals e.g. reduction / removal of service, deletion of posts, change of criteria etc)</p>		<p>Deletion of Senior Professional Community Cohesion post as part of the CHW management savings proposal. Key duties to be covered elsewhere in the Council. For example, there is an overlap with the E&E Community Safety responsibilities and the Channel Panel is already chaired by C&F. Hate Crime delivery could be monitored by Community Safety. PREVENT is likely to become a statutory function in the Autumn of 2014 but there is no indication yet what this statutory guidance is likely to stipulate and whether the Council will require a specific officer.</p>	
<p>2. Who are the main people / groups who may be affected by your proposals? For example who are the external/internal customers, communities, partners, stakeholders, the workforce, the elderly, disabled etc.</p>		<p>This post has a coordinating role in the cohesion, PREVENT and community tension monitoring areas and is a direct link with the Police on these issues (locally and regionally/nationally) and with local faith groups. Deletion of this post could have a cross cutting impact on services and directorates within the Council, partner organisations, and the community as a whole - particularly vulnerable communities (eg communities effected by hate crime - BME, faith, disability and LGBT). Additionally, communities and institutions effected by the Prevent area of work (eg faith and community organisations, schools and colleges etc) and community tensions.</p> <p>Faith groups include Harrow Inter Faith Council, and the diverse local faith groups of Harrow, all local mosques (particularly at times of rising tensions and Islamophobia) etc.</p>	

	<p>Community Groups/organisations – eg Harrow Equalities Centre, Harrow Anti Racist Alliance, , Mind (including the Hayaan Project Olole Isbedel), Tell Mama Project/Faith Matters, Community Security Trust (CST), Harrow Association of Somali Voluntary Organisations, Afghan Association Paiwand, Afghan Association London (Harrow), Imam Hussain Foundation, ARDO, Association of Senior Muslim Citizens, Harrow Iranian Community, Harrow Muslim Council, Islamic and Cultural Society of Harrow, Pakistan Association, Pakistan Women’s Association of Harrow, West London LGBT group etc.</p> <p>Other Council departments – Children Services (particularly colleagues working on safeguarding, gangs, YOT, education, youth services, commissioning), Adult Services (particularly colleagues working on safeguarding, carers), Anti Social Behaviour Team, Licensing Team, Parking Team, Communications Team, Equalities, Policy and Partnership, Public Health, housing, Emergency Planning, etc.</p> <p>Partner agencies – Harrow Police, other Metropolitan police teams, Home Office, Stop Hate UK, schools, and other local authorities (particularly via the London Prevent Network), etc.</p> <p>Others – Community Champions</p>
<p>3. What data, information, evidence, research, statistics, surveys, and consultation(s) have you considered to undertake this assessment?</p> <p><i>(include the actual data, statistics and evidence based on the different protected characteristics)</i></p>	<p>The 2011 Census data shows that Harrow has a very diverse population both in terms of ethnic background and in respect of religion:</p> <p>Census 2011 - Ethnicity (% of Harrow) 2011 (2001 figures in brackets):</p> <p>Asian 42.6 (29.6) White – British 30.9 (54.3) White – other 11.4 (4.5) Black 8.2 (6.1) Mixed 4.0 (2.8) Other 2.9 (2.6)</p> <p>Census 2011 – Religion (% of Harrow) 2011 (2001 figures in brackets):</p> <p>Christian 37.3 (47.3) Hindu 25.2 (19.6) Muslim 12.5 (7.2)</p>

Jewish 4.4 (6.3)
Other 2.5 (2.1)
Sikh 1.2 (1.0)
Buddhist 1.1 (0.7)
No religion 9.6 (9.0)
Not stated 6.2 (6.8)

Under **Section 17 of the Crime and Disorder Act 1998** local authorities have a duty to consider crime and disorder implications.

(1) Without prejudice to any other obligation imposed on it, it shall be the duty of each authority to which this section applies to exercise its various functions with due regard to the likely effect of the exercise of those functions on, and the need to do all that it reasonably can to prevent, crime and disorder in its area.

(2) this section applies to a local authority, a joint authority, [F1the London Fire and Emergency Planning Authority,] a police authority, a National Park authority and the Broads Authority.

PREVENT

The **National threat level** in the UK was raised from substantial to severe on 29th August 2014. This means that a terrorist attack is highly likely.

The **Prevent Strategy** is part of the Government's counter-terrorism strategy, **CONTEST**. Its aim is to stop people becoming terrorists or supporting terrorism.

The Extremism Taskforce Report (December 2013) states the following:

'Preventing radicalisation

Local authorities are instrumental in delivering 'Prevent', the government's counter-radicalisation and counter-extremism strategy.

4.1 There are some towns and cities in the UK where extremism is of particular

concern. The people on the front line who we rely on to work with communities to tackle extremism must have the full support of their local authority. This is not always the case.

4.2 To show unequivocally the importance we attach to tackling extremism and the role of local authorities in delivering it, we will:

take steps to intervene where local authorities are not taking the problem seriously

make delivery of 'Prevent' a legal requirement in those areas of the country where extremism is of particular concern

make delivery of the 'Channel' programme a legal requirement in England and Wales, which supports individuals at risk of being radicalised'.

At the **London Prevent Network** meeting on 4th September 2014 Lindsay Bennett, the Home Office representative, stated that the Home Office are aiming for **Statutory Guidance** for Prevent to be published before the end of the year, and that the 'Channel' programme is likely to become a legal requirement during the term of this parliament.

Harrow is not identified as one of the Prevent 'priority areas' and so does not receive ring fenced Prevent funding. However, as a London authority, and neighbouring priority areas, Harrow needs to remain vigilant and to work with our communities on the Prevent agenda to prevent radicalisation and tackle extremism. There have been a number of incidents cited in the Community Tension Assessments and discussed in the Prevent Problem Solving Panel meetings where Harrow residents have been invited to, or have participated in, activities in Harrow or neighbouring priority boroughs - including demonstrations, events at which extremists speakers have spoken, fundraising activities etc.

Channel statistics

Full year statistics for Harrow, 2013:

Nine live cases for Harrow (compared to 5 in 2012).

Of these 6 were male and 3 female.

4 were under 18 years of age and 5 over 18 years of age.

Harrow's statistics are higher than some of the neighbouring 'priority' areas:

Non-funded priority boroughs Barnet: 2, Hillingdon: 4, Hounslow: 7.
Priority areas: Ealing: 6, Brent: 7.

This is in the light of the current situation where it is clear that the international environment could have an impact locally.

COMMUNITY COHESION

The Equality Act 2010: Public Sector Equality Duty

Requires local authorities to **foster good relations** between people who share a protected characteristic and people who do not share it. This involves tackling prejudice and promoting understanding between people who share a protected characteristic and others.

The community cohesion area of work supports the Corporate Equality Objective

Community Cohesion indicator

Since 2012 we have been measuring the community cohesion indicator via a question in the Reputation Tracker. The question was similar as the Place Survey question but the wording did not contain "people from different backgrounds". The Communications team have been asked to include this wording going forward.

In March 2014 78% agreed with the community cohesion question, and 19% disagreed. The aforementioned 'actual' figures were against the target (for May 2014) of 79%, so we are just below target. There was no survey in May 2014.

In terms of 'trends':

In May 2012 the baseline was set at 75%.

In May 2013 the target was 77%, and the actual was 79% (the mid-year figure in November 2013 showed a decline as the figure agreeing that that people in their local area get on well together was 71%).

Although we have seen an increase from November 2013 from 71% to 78% in

March 2014, we are still just below the May 2014 target figure of 79%.

Commission on Integration and Cohesion – ‘Our Shared Future’ report gives a definition of integration and cohesion.

HATE CRIME

Challenge it, Report it, Stop it: The Government’s Plan to Tackle Hate Crime (March 2012) states:

1.11 That tackling hate crime matters because of the damage it causes to victims and their families, but also because of the negative impact it has on communities in relation to cohesion and integration. There is clear evidence to show, that being targeted because of who you are has a greater impact on your wellbeing than being the victim of a ‘non-targeted’ crime...We also know that low level hate crimes can escalate quickly if not dealt with early, with victims often being targeted repeatedly. As a number of cases have shown, this escalation can have tragic consequences, if they are not challenged earlier. More widely, tackling hate crime effectively – and being seen to tackle it – can help foster strong and positive relations between different sections of the community and support community cohesion.

1.13 All the available research and testimonials from voluntary organisations suggest that hate crime is hugely under-reported. Some victims may be reluctant to come forward, for example, for fear of attracting further abuse, for cultural reasons, or because they don’t believe the authorities will take them seriously...more isolated sections of the community...are even more unlikely to report crimes...under-reporting is a significant issue among the following groups:

- New migrant communities, including Asylum and Refugee communities
- Gypsy, Irish Traveller and Roma communities
- Transgender victims
- Disabled victims

MOPAC – Developing a Hate Crime Reduction Strategy for London (2014) states that:

‘some people are targeted just because of who they are. Hate crime makes victims of whole communities with repercussions beyond those being targeted. Hate crime has a significant impact on the perception of crime, community cohesion and can lead to feelings of fear, stigmatisation and isolation among those who share characteristics with victims, even if they have not been victimised themselves.’

In his Policing and Crime Plan, the Mayor recognises that levels of hate crime are too high and that there is significant under reporting.

Analysis of the hate crime data undertaken by MOPAC indicates that in the rolling year to May 2014, the number of recorded offences in each category has increased:

- Disability hate crime by 13% (from 107 to 121)
- Faith hate crime by 25% (from 673 to 843)
- Homophobic hate crime by 7% (from 1106 to 1185)
- Racist and religious hate crime by 8% (from 9187 to 9918)
- Transgender hate crime up 65% (from 51 to 84)

Hate crime is hugely under-reported. The Crime Survey for England and Wales indicates that 43% of personal hate crimes are not reported to the police. The Stonewall ‘Gay British Crime Survey (2013) reported that more than three-quarters of gay, bisexual and lesbian victims of hate crime did not report it to the police.

The MOPAC report states that hate crime (race, faith, disability and LGBT) is significantly under reported and more work is required to (i) promote third party reporting arrangements (a recommendation of the McPherson Report), (ii) increase confidence in reporting and (iii) reduce repeat victimisation.

Metropolitan Police hate crime statistics for Harrow 12 months to July 2014 (12 months to July 2013 figures in brackets) :
Racist and Religious hate crime: 241 (195)

Homophobic crime: 12 (8)
Ant-Semitic Crime: 9 (5)
Islamophobic Crime: 21 (13)

Stop Hate UK statistics for Harrow 2013/2014:

There were 15 connections during the year. Seven of these were for race related hate crime/incidents.

In 2012/2013 there were 31 connections during the year. Seven of these were for race related hate crime/incidents, one for disability, one for sexual orientation, two with multiple motivations.

Between 1st April 2013 and 31st March 2014 **Harrow Equality Centre** supported 32 clients with hate crime case work. Of these 15 clients were supported for race related matters, 2 for race and gender, 1 for race and disability, 2 for disability, 1 for religion, 1 for sexual orientation and 6 for gender and age.

Clients presented to the HEC for casework support due to incidents involving physical assault/threats to kill, verbal abuse/threatening behaviour, racist language, sexual assault, discrimination and intimidation.

Community Security Trust reported that:

More than 130 incidents nationally were recorded by them in July 2014 – with about two thirds linked to the Israel/Gaza conflict.

Tell MAMA Project (Measuring Anti Muslim Attacks) reported that:

A comparison of Islamophobic hate crimes from February 2013 to February 2014 show a 60% increase nationally. This may well be due to the anti-Muslim backlash after the murder of Lee Rigby and the corresponding months where hate crime numbers slowly started to fall from the high peaks of June to September 2013.

Islamophobic Crime, (London Total) February 2014: 547 (February 2013: 342).

	<p><u>COMMUNITY TENSION MONITORING</u></p> <p>The Council is required under the Equalities Act to 'foster good relations' and this post has fed into and helped manage a number of the community tensions. Examples of some of the 'higher profile' incidents include:</p> <ul style="list-style-type: none"> • Mosque demonstration by the Stop the Islamification of Europe group (2009) • Indigenous Oppression League campaign in Harrow around halal meat provision in schools (2010/2011) • English Defence League and Britain First demonstrations against Abu Qatada's residence in Harrow (2013) • Woolwich incident (2013)
<p>4. Could your proposals disproportionately affect more people of one group (disabled, minority ethnic groups etc) than another?</p>	<p>No. Only if the current activity is not carried out elsewhere in the Council and the ability to monitor and deliver hate crime and PREVENT activity ceases. The STOP HATE UK contract has been renewed to Mar 15 but the hate crime coordinator contract is in place until Dec 15. The Channel (PREVENT) panel can continue to receive referrals.</p>

5. A - Assessment Relevance

How relevant are your proposals to each protected characteristic?

Example: Reviewing the criteria of freedom passes will be of 'High' relevance for Age and Disability and of 'Low' relevance to the other protected characteristics.

B - Assessment of potential impact

When you consider the impact on people in relation to each protected characteristic, it should be defined as positive, neutral or negative:

- **Positive:** where the impact is expected to have a particular benefit for this protected characteristic or improve equality of opportunity and / or foster good relations.
- **Neutral:** where there will be a neutral impact, neither positive nor negative
- **Negative:** where there is a risk that impact could disadvantage one or more of the people described in relation to a protected characteristic. This disadvantage may be differential, where the negative impact on one particular group of individuals or protected characteristic is likely to be greater than on

another.

C - Assessing Negative impact – what are the risks?

When you have considered the likelihood and impact on people in relation to the protected characteristics, use the tables and matrix below and enter a score against each protected characteristic in the end column C.

Unlawful discrimination	5
Disproportionate disadvantage	4
Moderate disadvantage	3
Minor adjustments required	2
Minimal considerations necessary	1
SEVERITY OF IMPACT	

Certain to occur	5
Very likely to occur	4
Likely to occur	3
Possible to occur	2
Very unlikely to occur	1
LIKELIHOOD	

LIKELIHOOD	5	5	10	15	20	25
	4	4	8	12	16	20
	3	3	6	9	12	15
	2	2	4	6	8	10
	1	1	2	3	4	5
	0	1	2	3	4	5
	IMPACT					

Calculating the score - Severity of Impact X Likelihood = Score

Protected Characteristic	A Relevance	B Impact	Describe the impact(s) (negative or positive) your proposals may have on this protected characteristic	Reason for the Assessment of Potential Impact (What evidence, data, and information did you use to assess this?)	C Assessing Negative Impact Score
	Low/ Medium/ High	Positive/ Negative/ Neutral			
Age (including carers of young/older people)	Low	Neutral			2
Disability (including carers of disabled people)	Medium	Negative	By removing the work of this post there may be further reduced confidence in reporting disability hate crime as the post holder has provided training for carers around hate crime, and has actively promoted hate crime reporting arrangements locally, including amongst the voluntary and community sector.	The data and evidence highlighted in question 3.	16
Gender	Medium	Negative	By removing the work of this post there	The data and evidence highlighted in	16

Reassignment			may be further reduced confidence in reporting hate crime in this area as the post holder has actively promoted hate crime reporting arrangements at LGBT awareness events locally, and more widely via the voluntary and community sector.	question 3.	
Marriage and Civil Partnership	Low	Neutral			1
Pregnancy and Maternity	Low	Neutral			1
Race	Medium	Negative	By removing the work of this post there may be further reduced confidence in reporting race hate crime as the post holder has provided training around hate crime, and has actively promoted hate crime reporting arrangements locally, including amongst the BME and wider voluntary and community sector. A number of community tensions have contained elements which may effect BME and other communities.	The data and evidence highlighted in question 3.	16
Religion or Belief	Medium	Negative	By removing the work of this post there may be further reduced confidence in reporting faith hate crime as the post holder has actively promoted hate crime reporting arrangements locally, including amongst the faith and wider voluntary and community sector. A number of community tensions have impacted on faith communities, and work around Prevent has supported faith communities and institutions.	The data and evidence highlighted in question 3.	16
Sex	Low	Neutral			1
Sexual orientation	Medium	Negative	By removing the work of this post there may be further reduced confidence in reporting hate crime in this area as the post holder has actively promoted hate crime reporting arrangements at LGBT	The data and evidence highlighted in question 3.	16

		awareness events locally, and more widely via the voluntary and community sector.	
--	--	-----------------------------------------------------------------------------------	--

Summary and Recommendations (this section must be included in the project proposal reports for the Commissioning Panel)	
Summary / Conclusion of assessment: (include the key findings and equality implications.	<p>This initial assessment demonstrates that the likelihood of the following protected characteristics could be disproportionately disadvantaged as a result of work not being continued within the Council. E&E have indicated that clearly there is a level of overlap here in terms of meetings attended which are also covered by the community safety team with in Environmental Service Delivery, although attendance is for separate reasons. The loss of this specialist Officer would remove the direct community link and also the link into areas of ASB / crime from a counter terrorist / Police London Wide perspective. Such links may be available via other agencies.</p> <p>Certain functions, such as tie ins to religious groups and establishments such as the mosques, play a part in community cohesion and this would be lost with the post. There is no spare capacity or expertise within the ASB team to pick up this particular area of work.</p> <p>It is recommended that if this saving is selected as a part of the Commissioning Panel process a full, Equality Impact Assessment is undertaken to facilitate Members making an informed decision.</p>
Do you think that your proposals will have a cumulative effect upon a particular protected group in light of other council proposals that you are aware of? If yes, please explain the cumulative impact and on which groups.	<p>Yes. The Council has to find £25 million of savings in 2015/16. It is known that some of our BAME residents are the most disadvantaged groups in the borough therefore other cuts to Council services, and wider welfare reforms etc, are likely to result in a cumulative impact on this group of residents.</p>

Signature - Lead Officer	Marianne Locke	Date	5.9.14
--------------------------	----------------	------	--------

Initial Equality Implications Assessment for Commissioning Panel

NOTE: The purpose of this short assessment is to highlight to the Commissioning Panels any potential equality implications which your proposals may have on the community as well as the workforce based on the evidence (data and research) you have available at this stage. If your proposal is agreed, the usual equality impact process will need to be followed.

Directorate:	CHW	Officer completing the template:	Audrey Salmon (Head of Public Health Commissioning)
What are the proposals being assessed? (Please also indicate the reference Number from the S1 form)		Public Health 19 – Health Checks The proposal is to reduce the budget for health checks by 55% to £147,000.	
<p>1. What are the aims, objectives, and desired outcomes of your proposals?</p> <p>(Explain proposals e.g. reduction / removal of service, deletion of posts, change of criteria etc)</p>		<p>This proposal will result in the reduction in the number of the eligible population receiving Health Checks from 6,450 (10%) to 5,160 (8%).</p> <p>To ensure that Health Checks are appropriately targeted, GPs (the main provider) will be incentivised through a tiered payment scheme to deliver Health Checks to under-represented groups or those likely to be most at risk.</p> <p>The healthwise programme is to be cancelled and eligible people will be referred through the current exercise on referral programme utilising the current spare capacity in the programme.</p>	
<p>2. Who are the main people / groups who may be affected by your proposals? For example who are the external/internal customers, communities, partners, stakeholders, the workforce, the elderly, disabled etc.</p>		<p>The NHS Health Checks programme is aimed at 40 -74 years olds who do not have a pre-existing cardiovascular (CV) condition. These proposals will affect all residents that are eligible for Health Checks. The number of local residents eligible for a Health Check is 64,504 and Public Health England expect local authorities to risk assess 50 – 70% of the eligible population over 5 years. Harrow annual target for 2014/15 was 10%; the proposal is to reduce the target to 8% in 2015-16. This proposal would reduce the reach of the programme and as a consequence would have a greater impact on groups that are currently under-represented in the service and have a higher incidence of cardiovascular disease.</p>	

<p>3. What data, information, evidence, research, statistics, surveys, and consultation(s) have you considered to undertake this assessment?</p> <p><i>(include the actual data, statistics and evidence based on the different protected characteristics)</i></p>	<p>A Health Check Evaluation Report (2012/13) and the NHS Health Checks Scrutiny Review Report (2014) has informed this assessment.</p> <p>An analysis of 2012/13 Health Check data showed that the age and gender distribution of patient who completed a Health Check showed discrepancy when compared with Census 2011. Whereas males and females make up 51% and 49% respectively; 60% of Health Check recipient were women. This indicates that fewer males were risk assessed as part of the Health Check Programme. It was also noted that the younger age group (40-55) were under-represented on the Health Check programme regardless of gender. According to the 2011 Census, 46% of the population is white Caucasians and those of Asian and Black African/Caribbean origin make up 40% and 9% of the local population, respectively.</p> <p>The evaluation also illustrated the number of Health Checks received in each ethnic group by gender; the majority of recipients were of Asian and White origin, which is in line with general population. However, it was noted that women were more likely to receive Health Checks than men across all ethnic groups.</p> <p>Together diabetes, heart, kidney disease and stroke make up a third of the difference in life expectancy between the most deprived areas and the rest of the country. Addressing these differences is a key aim of the programme.</p>
<p>4. Could your proposals disproportionately affect more people of one group (disabled, minority ethnic groups etc) than another?</p>	<p>Groups that have high prevalence of CV (i.e. older people, those who have a family history and are of South Asian origin) and those who are underrepresented on the programme (men) are likely to be disproportionately affected by these proposals.</p>

5. A - Assessment Relevance

How relevant are your proposals to each protected characteristic?

Example: Reviewing the criteria of freedom passes will be of 'High' relevance for Age and Disability and of 'Low' relevance to the other protected characteristics.

B - Assessment of potential impact

When you consider the impact on people in relation to each protected characteristic, it should be defined as positive, neutral or negative:

- **Positive:** where the impact is expected to have a particular benefit for this protected characteristic or improve equality of opportunity and / or foster good relations.
- **Neutral:** where there will be a neutral impact, neither positive nor negative
- **Negative:** where there is a risk that impact could disadvantage one or more of the people described in relation to a protected characteristic. This disadvantage may be differential, where the negative impact on one particular group of individuals or protected characteristic is likely to be greater than on another.

C - Assessing Negative impact – what are the risks?

When you have considered the likelihood and impact on people in relation to the protected characteristics, use the tables and matrix below and enter a score against each protected characteristic in the end column C.

Unlawful discrimination	5
Disproportionate disadvantage	4
Moderate disadvantage	3
Minor adjustments required	2
Minimal considerations necessary	1
SEVERITY OF IMPACT	

Certain to occur	5
Very likely to occur	4
Likely to occur	3
Possible to occur	2
Very unlikely to occur	1
LIKELIHOOD	

LIKELIHOOD	5	5	10	15	20	25
	4	4	8	12	16	20
	3	3	6	9	12	15
	2	2	4	6	8	10
	1	1	2	3	4	5
	0	1	2	3	4	5
	IMPACT					

Calculating the score - Severity of Impact X Likelihood = Score

Protected Characteristic	A Relevance	B Impact	Describe the impact(s) (negative or positive) your proposals may have on this protected characteristic	Reason for the Assessment of Potential Impact (What evidence, data, and information did you use to assess this?)	C Assessing Negative Impact Score
	Low/ Medium/ High	Positive/ Negative/ Neutral			

Age (including carers of young/older people)	High	Negative	As previously stated in response to question 2.	As previously stated in response to question 3.	9
Disability (including carers of disabled people)	High	Neutral	Data not available to assess the impact. This group will still have access to health checks outside of this programme.	As previously stated in response to question 3.	9
Gender Reassignment	Low	Neutral	Data not available to assess the impact. But individuals may possess other protective characteristics.		
Marriage and Civil Partnership	Low	Neutral	Data not available to assess the impact. But individuals may possess other protective characteristics.		
Pregnancy and Maternity	Low	Neutral	Data not available to assess the impact. But individuals may possess other protective characteristics.		
Race	Medium	Negative	As previously stated in response to question 3.	As previously stated in response to question 3.	8
Religion or Belief	Low	Neutral	Data not available to assess the impact. But individuals may possess other protective characteristics.		
Sex	Medium	Negative	As previously stated in response to question 3.	As previously stated in response to question 3.	8
Sexual orientation	Low	Neutral	Data not available to assess the impact. But individuals may possess other protective characteristics.		

Summary and Recommendations (this section must be included in the project proposal reports for the Commissioning Panel)	
Summary / Conclusion of assessment: (include the key findings and equality implications.	The proposal will affect residents between to the age of 40 – 74 with no pre-existing CV condition. Groups that have high prevalence of CV (i.e. older people, those who have a family history and are of South Asian origin) and those who are under-represented on the programme (men and those who are aged 40-55) are likely to be disproportionately affected by these proposals.
Do you think that your proposals will have a cumulative effect upon a particular protected group in light of other council proposals that you are aware of?	

If yes, please explain the cumulative impact and on which groups.	
-------------------------------------------------------------------	--

Signature - Lead Officer	Audrey Salmon	Date	5 September 2014
--------------------------	---------------	------	------------------

Initial Equality Implications Assessment for Commissioning Panel

NOTE: The purpose of this short assessment is to highlight to the Commissioning Panels any potential equality implications which your proposals may have on the community as well as the workforce based on the evidence (data and research) you have available at this stage. If your proposal is agreed, the usual equality impact process will need to be followed.

Directorate:	CHW	Officer completing the template:	Andrew Howe
What are the proposals being assessed? (Please also indicate the reference Number from the S1 form)		<p>CHW20 Sexual Health & Family Planning out of Borough Contingency Fund – for Harrow residents seeking services from non-Harrow providers.</p>	
<p>1. What are the aims, objectives, and desired outcomes of your proposals? (Explain proposals e.g. reduction / removal of service, deletion of posts, change of criteria etc.)</p>		<p>Savings proposal for Contingency Fund – The proposal is to remove £45k in 15/16. This is the removal of a contingency fund not a removal of service.</p>	
<p>2. Who are the main people / groups who may be affected by your proposals? For example who are the external/internal customers, communities, partners, stakeholders, the workforce, the elderly, disabled etc.</p>		<p>Harrow residents who receive a sexual health or family planning service from a provider not commissioned by Harrow Council.</p>	
<p>3. What data, information, evidence, research, statistics, surveys, and consultation(s) have you considered to undertake this assessment? <i>(include the actual data, statistics and evidence based on the different protected characteristics)</i></p>		<p>This contingency fund was created in the eventuality that the current (inherited NHS practice) of not charging the 'home provider' for those people who seek sexual health treatment from a provider not commissioned by the 'home' Council changes. .</p> <p>To date there has been no 'cross border' charging. Recent analysis indicates that Harrow would be a net financial winner if charging were to commence. As such there would be no impact on Harrow residents.</p>	

4. Could your proposals disproportionately affect more people of one group (disabled, minority ethnic groups etc) than another?	If current practice does not change there will no impact on Harrow residents.
---------------------------------------------------------------------------------------------------------------------------------	-------------------------------------------------------------------------------

5. A - Assessment Relevance

How relevant are your proposals to each protected characteristic?

Example: Reviewing the criteria of freedom passes will be of 'High' relevance for Age and Disability and of 'Low' relevance to the other protected characteristics.

B - Assessment of potential impact

When you consider the impact on people in relation to each protected characteristic, it should be defined as positive, neutral or negative:

➤ **Positive:** where the impact is expected to have a particular benefit for this protected characteristic or improve equality of opportunity and / or foster good relations.

as
➤ **Neutral:** where there will be a neutral impact, neither positive nor negative

➤ **Negative:** where there is a risk that impact could disadvantage one or more of the people described in relation to a protected characteristic. This disadvantage may be differential, where the negative impact on one particular group of individuals or protected characteristic is likely to be greater than on another.

C - Assessing Negative impact – what are the risks?

When you have considered the likelihood and impact on people in relation to the protected characteristics, use the tables and matrix below and enter a score against each protected characteristic in the end column C.

Unlawful discrimination	5
Disproportionate disadvantage	4
Moderate disadvantage	3
Minor adjustments required	2
Minimal considerations necessary	1
SEVERITY OF IMPACT	

Certain to occur	5
Very likely to occur	4
Likely to occur	3
Possible to occur	2
Very unlikely to occur	1
LIKELIHOOD	

LIKELIHOOD	5	5	10	15	20	25
	4	4	8	12	16	20
	3	3	6	9	12	15
	2	2	4	6	8	10
	1	1	2	3	4	5
	0	1	2	3	4	5
	IMPACT					

Calculating the score - Severity of Impact X Likelihood = Score

Protected Characteristic	A Relevance	B Impact	Describe the impact(s) (negative or positive) your proposals may have on this protected characteristic	Reason for the Assessment of Potential Impact (What evidence, data, and information did you use to assess this?)	C Assessing Negative Impact Score
	Low/ Medium/ High	Positive/ Negative/ Neutral			
Age (including carers of young/older people)	n/a	n/a		-	
Disability (including carers of disabled people)	n/a	n/a	-	-	
Gender Reassignment	n/a	n/a	-	-	-
Marriage and Civil Partnership	n/a	n/a	-	-	-
Pregnancy and Maternity	n/a	n/a		-	-
Race	n/a	n/a	-	-	
Religion or Belief	n/a	n/a	-	-	-
Sex	n/a	n/a		-	2
Sexual orientation	n/a	n/a	-	-	

Summary and Recommendations (this section must be included in the project proposal reports for the Commissioning Panel)	
Summary / Conclusion of assessment: (include the key findings and equality implications.	The proposed option (Ceasing the service) is highly unlikely to have any impact on any protected group.
Do you think that your proposals will have a cumulative effect upon a particular protected group in light of other council proposals that you are aware of? If yes, please explain the cumulative impact and on which groups.	No. This is not envisaged.

Signature - Lead Officer	A Howe	Date	9/9/14
--------------------------	--------	------	--------

Initial Equality Implications Assessment for Commissioning Panel

NOTE: The purpose of this short assessment is to highlight to the Commissioning Panels any potential equality implications which your proposals may have on the community as well as the workforce based on the evidence (data and research) you have available at this stage. If your proposal is agreed, the usual equality impact process will need to be followed.

Directorate:	CHW	Officer completing the template:	Robert Maragh
What are the proposals being assessed? (Please also indicate the reference Number from the S1 form)		CHW21 Efficiencies within School Nursing Service	

<p>1. What are the aims, objectives, and desired outcomes of your proposals? (Explain proposals e.g. reduction / removal of service, deletion of posts, change of criteria etc)</p>	<p>The aim of the proposal is a reduction of revenue funding in the core school nursing contract. This can be achieved given the additional investment in 2014/15 and provider development programme currently being implemented to ensure the service is able to deliver a universal Healthy Child Programme(HCP).</p>
<p>2. Who are the main people / groups who may be affected by your proposals? For example who are the external/internal customers, communities, partners, stakeholders, the workforce, the elderly, disabled etc.</p>	<p>The school nursing service is delivered by an external partner, currently the Ealing Hospitals NHS Trust. School nurses are qualified practitioners delivery a mandatory universal Health Child Programme to children and young people (0-19) and their families.</p>
<p>3. What data, information, evidence, research, statistics, surveys, and consultation(s) have you considered to undertake this assessment? <i>(include the actual data, statistics and evidence based on the different protected characteristics)</i></p>	<p>An independent report was commissioned by the Public Health Team in November 2013. The final report recommended three options and the the option to invest in 2014/15 and find productivity savings was put forward and approved by Harrow Health & Well Being Board.</p>
<p>4. Could your proposals disproportionately affect more people of one group (disabled, minority ethnic groups etc) than another?</p>	<p>No</p>

5. A - Assessment Relevance

How relevant are your proposals to each protected characteristic?

Example: Reviewing the criteria of freedom passes will be of 'High' relevance for Age and Disability and of 'Low' relevance to the other protected characteristics.

B - Assessment of potential impact

When you consider the impact on people in relation to each protected characteristic, it should be defined as positive, neutral or negative:

- **Positive:** where the impact is expected to have a particular benefit for this protected characteristic or improve equality of opportunity and / or foster good relations.
- **Neutral:** where there will be a neutral impact, neither positive nor negative
- **Negative:** where there is a risk that impact could disadvantage one or more of the people described in relation to a protected characteristic. This disadvantage may be differential, where the negative impact on one particular group of individuals or protected characteristic is likely to be greater than on another.

C - Assessing Negative impact – what are the risks?

When you have considered the likelihood and impact on people in relation to the protected characteristics, use the tables and matrix below and enter a score against each protected characteristic in the end column C.

Unlawful discrimination	5
Disproportionate disadvantage	4
Moderate disadvantage	3
Minor adjustments required	2
Minimal considerations necessary	1
SEVERITY OF IMPACT	

Certain to occur	5
Very likely to occur	4
Likely to occur	3
Possible to occur	2
Very unlikely to occur	1
LIKELIHOOD	

LIKELIHOOD	5	5	10	15	20	25
	4	4	8	12	16	20
	3	3	6	9	12	15
	2	2	4	6	8	10
	1	1	2	3	4	5
	0	1	2	3	4	5
	IMPACT					

Calculating the score - Severity of Impact X Likelihood = Score

Protected Characteristic	A Relevance	B Impact	Describe the impact(s) (negative or positive) your proposals may have on this protected characteristic	Reason for the Assessment of Potential Impact (What evidence, data, and information did you use to assess this?)	C Assessing Negative Impact Score
	Low/ Medium/ High	Positive/ Negative/ Neutral			
Age (including carers of young/older)	2	2	Neutral – the HCP is a universal programme	The implementation plan following the independent report commissioned by Public Health for £200k additional	4

people)				investment and £60k workforce development	
Disability (including carers of disabled people)	2	2	As above	As above	4
Gender Reassignment	1	1	As above	As above	1
Marriage and Civil Partnership	1	1	As above	As above	1
Pregnancy and Maternity	1	1	As above	As above	1
Race	1	1	As above	As above	1
Religion or Belief	1	1	As above	As above	1
Sex	1	1	As above	As above	1
Sexual orientation	1	1	As above	As above	1

Summary and Recommendations (this section must be included in the project proposal reports for the Commissioning Panel)

<p>Summary / Conclusion of assessment: (include the key findings and equality implications.</p>	<p>Commissioners will ensure future providers(the service is currently being re-procured) will adhere to quality standards by ensuring:</p> <ul style="list-style-type: none"> • The provider delivers a school nursing service in accordance with the Council's policies and practices and other relevant Department of Health guidance such as 'You 're Welcome quality criteria • All children and young people with a Child Protection Plan or Children in Need concerns will have a Care Plan developed with the parent/family with the aim of safeguarding the child as paramount • All children and young people with a disability, whether in mainstream of special schools will have a single allocated school nurse to ensure continuity and impact. School nurses will also work collaboratively with special needs and community nurses. • The service will ensure compliance with high standards for recruitment, selection and staffing supervision and appraisal • The views of children and young people including those covered above are listened to, heard and
-------------------------------------------------------------------------------------------------	--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

	<p>used to shape service delivery development and delivery</p> <ul style="list-style-type: none"> The school nursing service will have in place robust records and information collection and retrieval systems to capture equalities data and records
<p>Do you think that your proposals will have a cumulative effect upon a particular protected group in light of other council proposals that you are aware of? If yes, please explain the cumulative impact and on which groups.</p>	No

Signature - Lead Officer	R Maragh	Date	9 th September 2014
--------------------------	----------	------	--------------------------------

Initial Equality Implications Assessment for Commissioning Panel

NOTE: The purpose of this short assessment is to highlight to the Commissioning Panels any potential equality implications which your proposals may have on the community as well as the workforce based on the evidence (data and research) you have available at this stage. If your proposal is agreed, the usual equality impact process will need to be followed.

Directorate:	Community Health and Wellbeing	Officer completing the template:	Bridget O'Dwyer
What are the proposals being assessed? (Please also indicate the reference Number from the S1 form)		CHW22 Harrow Drug & Alcohol Services (Young People and Adults) Savings Proposal	
<p>1. What are the aims, objectives, and desired outcomes of your proposals?</p> <p>(Explain proposals e.g. reduction / removal of service, deletion of posts, change of criteria etc)</p>		<p>Procure a new pathway (YP/Adults) for substance misuse to achieve £250,000 savings.</p> <p>Harrow's Substance Misuse Review (2014) recommends a service model that ensures better outcomes for drug and alcohol users. It is recommended that we procure a Prescribing organisation (or a consortia) and a Recovery organisation (or consortia).</p>	
<p>2. Who are the main people / groups who may be affected by your proposals? For example who are the external/internal customers, communities, partners, stakeholders, the workforce, the elderly, disabled etc.</p>		<p>All Protected Characteristics: Residents / Service Users, Partners, Stakeholders, Staff, Age, Disability, Marriage and Civil Partnership, Pregnancy and Maternity, Race, Religion or Belief, Sex, Sexual Orientation.</p> <p>Local Authority, Harrow Safer Community members, NHS, Safeguarding Adults and Children, Substance Misuse Service Providers, Floating Support.</p>	
<p>3. What data, information, evidence, research, statistics, surveys, and consultation(s) have you considered to undertake this assessment?</p> <p>(include the actual data, statistics and evidence based on the different protected characteristics)</p>		<ul style="list-style-type: none"> • Harrow Drug and Alcohol Needs Assessment & Treatment System Review 2014 • Alcohol Strategy (2012) • Drug Strategy (2010) 'Reducing Demand, Restricting Supply, Building Recovery: supporting people to live a drug-free life'. • National Drug Agency's (NTA) 'Why invest' • National Drug Treatment Monitoring System <p>In Harrow there are around 855 problematic opiate and crack users. By 12/13 the proportion of White drug service users decreased from around 70% to around 60%. Black/Black British shows an increasing trend. The new treatment pathway will ensure capacity for ethnic counselling specialists to provide relevant information and appropriate resources.</p> <p>Alcohol-related hospital admissions are growing every year and over 50,000 of the Harrow adult population are estimated to be drinking at increasing or higher risk levels - there are 364 Adult alcohol misusers in treatment. During 2013/14 the majority of clients in alcohol treatment in Harrow were White British. Tamil and Eastern European clients</p>	

are a significant sub-set of alcohol patients seen at hospital. The new treatment pathway will ensure capacity for ethnic counselling specialists to provide relevant information and appropriate resources to these and other BME groups.

Alcohol has a high association with Domestic Violence in Harrow and there is a perception that the number of Multi-Agency Risk Assessment Conference (MARAC) cases are increasing where drugs or alcohol are used problematically either by the perpetrator or the victim. Children of parents with alcohol problems have an increased risk of experiencing physical, psychological and behavioural problems. The new treatment pathway will ensure treatment services are safe and attractive to women, particularly more vulnerable women such as those experiencing domestic violence or sexual exploitation.

No data is systematically collected across the treatment system to identify levels of Lesbian, Gay and Bisexual (LGB) people accessing services or to evaluate outcomes for these groups. A study and project by the Lesbian & Gay Foundation (The LGF) into drug and alcohol use among LGB people in England found significant substance dependency problems in the community. 'Binge drinking' is high across all LGB groups. Available comparable data suggest that LGB people are approximately twice as likely to binge drink at least once a week, compared with the general population, and have a higher likelihood of being substance dependent. The new treatment pathway will ensure capacity for LGB and Transgender service users to provide relevant information and appropriate resources.

In Harrow a slightly lower proportion of service users starting treatment are unemployed or categorised as long term sick or disabled. Unemployment levels of people in drug treatment do not vary much according to length of time in treatment. For example opiate users in treatment between 12 to 48+ months, unemployment levels vary between 72% -89%, non-opiate users in treatment after 6 months have a rate of 69% unemployed (2013/13 figures). This further underlines the need to increase the focus on recovery, reintegration and building links to education, training and employment resources into the treatment process. The new treatment pathway will also ensure appropriate and effective disability access to services and relevant supportive resources.

By their very nature clients in the Criminal Justice System (CJS) are some of the most complex clients using services and may have multiple health, social and criminogenic needs. Given the prevalence and associated health and crime issues, it is in the interests of local strategic partners to ensure treatment commissioned by the partnership is effective and good value for money in the long term.

The National Drug Agency's (NTA) 'Why invest' document explains why investment in treatment represents important and valuable use of public funds. Drug and alcohol dependency goes hand in hand with poor health, homelessness, family breakdown and offending - all of which are associated with significant burden to public services and

	<p>ultimately the tax payer.</p> <p>Drug Strategy (2010) stated “The focus for all activity with young drug or alcohol misusers should be preventing the escalation of use and harm, including stopping young people from becoming drug or alcohol dependent adults. Drug and alcohol interventions need to respond incrementally to the risks in terms of drug use, vulnerability and, particularly, age. Young people with substance misuse problems have a range of vulnerabilities which must be addressed by collaborative work across local health, social care, family services, housing, youth justice, education and employment services”. The new treatment pathway will enhance it’s joint working with the Children and Families’ Service and Children in Need Team.</p>
<p>4. Could your proposals disproportionately affect more people of one group (disabled, minority ethnic groups etc) than another?</p>	<p>No</p>

5. A - Assessment Relevance

How relevant are your proposals to each protected characteristic?

Example: Reviewing the criteria of freedom passes will be of ‘High’ relevance for Age and Disability and of ‘Low’ relevance to the other protected characteristics.

B - Assessment of potential impact

When you consider the impact on people in relation to each protected characteristic, it should be defined as positive, neutral or negative:

- **Positive:** where the impact is expected to have a particular benefit for this protected characteristic or improve equality of opportunity and / or foster good relations.
- **Neutral:** where there will be a neutral impact, neither positive nor negative
- **Negative:** where there is a risk that impact could disadvantage one or more of the people described in relation to a protected characteristic. This disadvantage may be differential, where the negative impact on one particular group of individuals or protected characteristic is likely to be greater than on another.

C - Assessing Negative impact – what are the risks?

When you have considered the likelihood and impact on people in relation to the protected characteristics, use the tables and matrix below and enter a score against each protected characteristic in the end column C.

Unlawful discrimination	5
Disproportionate disadvantage	4
Moderate disadvantage	3
Minor adjustments required	2
Minimal considerations necessary	1
SEVERITY OF IMPACT	

Certain to occur	5
Very likely to occur	4
Likely to occur	3
Possible to occur	2
Very unlikely to occur	1
LIKELIHOOD	

LIKELIHOOD	5	5	10	15	20	25
	4	4	8	12	16	20
	3	3	6	9	12	15
	2	2	4	6	8	10
	1	1	2	3	4	5
	0	1	2	3	4	5
	IMPACT					

Calculating the score - Severity of Impact X Likelihood = Score

Protected Characteristic	A Relevance	B Impact	Describe the impact(s) (negative or positive) your proposals may have on this protected characteristic	Reason for the Assessment of Potential Impact (What evidence, data, and information did you use to assess this?)	C Assessing Negative Impact Score
	Low/ Medium/ High	Positive/ Negative/ Neutral			
Age (including carers of young/older people)	High	Positive	<p>The new treatment pathway will continue to include Hidden Harm service which works closely with Children & Families Service and supports parents with drug or alcohol problems to engage with treatment services and reduce risks to their children.</p> <p>In Harrow there is a distinct increase (drug treatment) in the number of individuals in older age groups 45 – 60+ and a decrease in the numbers in treatment between the ages of 18 and 29. The new Young Person’s treatment model will increase age range to 24, to avoid ‘cliff edge’ of support at 18.</p> <p>The current treatment pathway provides a carers’ group which will be expanded in the new pathway.</p>	<p>Harrow Drug and Alcohol Needs Assessment & Treatment System Review 2014</p> <p>Suggested Option: new substance misuse treatment pathway</p>	1
Disability (including carers of disabled)	High	Positive	<p>By better understanding specific issues regarding substance misuse, disability and identifying root causes – the treatment pathway will be able to offer more effective treatment.</p>	<p>Harrow Drug and Alcohol Needs Assessment & Treatment System Review 2014</p> <p>Suggested Option: new substance misuse</p>	1

people)			Diversity data to be collected from service to identify under-served groups.	treatment pathway	
Gender Reassignment	High	Positive	People who express their gender which differs or inconsistent with the sex they were born with have the right to equal services and equality of outcome. No data is currently systematically collected across the treatment system to identify levels of transgender people. The new treatment pathway should offer client-specific services, such as peer support groups and counselling. Diversity data to be collected from service to identify under-served groups.	Harrow Drug and Alcohol Needs Assessment & Treatment System Review 2014 Suggested Option: new substance misuse treatment pathway	1
Marriage and Civil Partnership	High	Positive	No data is systematically collected across the treatment system to identify people within a marriage/civil partnership however the new treatment pathway will deliver a service to meet the requirements of all service users.	Harrow Drug and Alcohol Needs Assessment & Treatment System Review 2014 Suggested Option: new substance misuse treatment pathway	1
Pregnancy and Maternity	High	Positive	The service will continue to liaise and joint work with forensic service, psychiatric service at hospital, A&E, mental health service, hospital midwives, Maternity department and adult social service team plus other relevant parties.	Harrow Drug and Alcohol Needs Assessment & Treatment System Review 2014 Suggested Option: new substance misuse treatment pathway	1
Race	High	Positive	Certain communities may experience additional difficulties and barriers in accessing relevant support due to cultural/religious practices where alcohol and drug use is forbidden. This lack of access can lead to escalation of issues and remain hidden. The new treatment pathway will ensure capacity for ethnic counselling specialists to provide relevant information and appropriate resources and access to BME groups.	Harrow Drug and Alcohol Needs Assessment & Treatment System Review 2014 Suggested Option: new substance misuse treatment pathway	1
Religion or Belief	High	Positive	Diversity data to be collected from service to identify under-served groups	Harrow Drug and Alcohol Needs Assessment & Treatment System Review 2014 Suggested Option: new substance misuse treatment pathway	1
Sex	High	Positive	Adult Psychiatric Morbidity Survey (APMS - 2007) showed 5.9% of all adults (except those in institutions) have some alcohol dependence. The rate is higher in men (8.7%) and lower in women (3.3%). White men and women are more likely to be dependent (9.6% and 3.7%	Harrow Drug and Alcohol Needs Assessment & Treatment System Review 2014 Suggested Option: new substance misuse treatment pathway	1

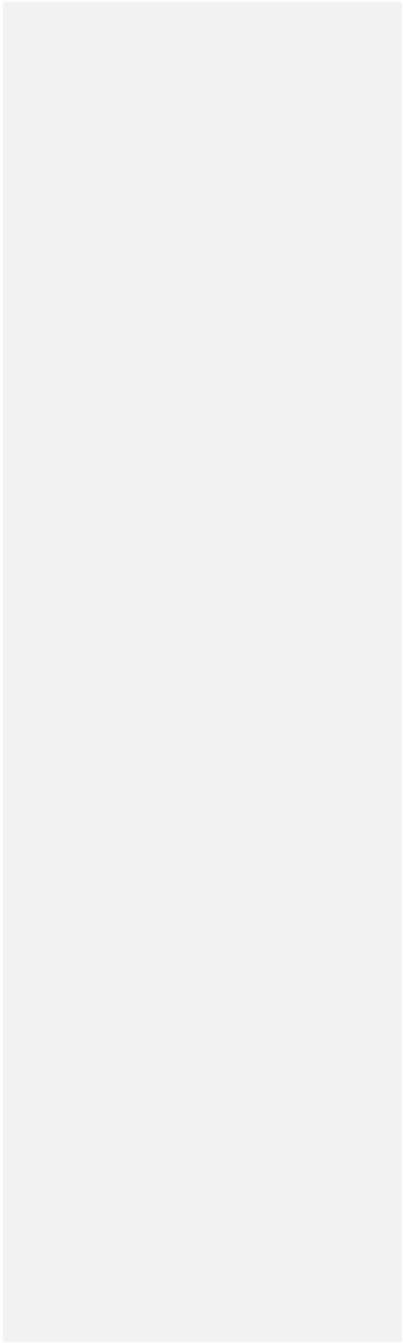
			respectively). There is no significant variation by income or region. Dependence can be categorised as mild, moderate or severe. Treatment services should be safe and attractive to women, particularly more vulnerable women such as those experiencing domestic violence or sexual exploitation.		
Sexual orientation	High	Positive	Sexual orientation monitoring of patients and clients in order to understand the experiences of Lesbian, Gay and Bisexual (LGB) people and offer LGB-specific services, such as peer support groups and counselling. Diversity data to be collected from service to identify under-served groups.	Harrow Drug and Alcohol Needs Assessment & Treatment System Review 2014 Suggested Option: new substance misuse treatment pathway	1

Summary and Recommendations (this section must be included in the project proposal reports for the Commissioning Panel)

Summary / Conclusion of assessment: (include the key findings and equality implications.	Harrow's Substance Misuse Review (2014) recommends a service model that ensures better outcomes for drug and alcohol users. It is recommended that we procure: <ul style="list-style-type: none"> 1. Prescribing organisation (or a consortia) which offers clinical review, detox./rehab. (both community and inpatient), harm reduction and <ul style="list-style-type: none"> 2. Recovery organisation (or a consortia) which delivers a recovery-focused programme to support drug and alcohol treatment leavers with life skills and personal development opportunities, supporting them to access employment, training and education activities - in order to sustain long-term recovery from substance misuse. This approach will prevent current double funding of treatment pathway/estate costs and deliver economies of scale.
Do you think that your proposals will have a cumulative effect upon a particular protected group in light of other council proposals that you are aware of? If yes, please explain the cumulative impact and on which groups.	No

Signature - Lead Officer		Date	
--------------------------	--	------	--

--	--	--	--



Initial Equality Implications Assessment for Commissioning Panel

NOTE: The purpose of this short assessment is to highlight to the Commissioning Panels any potential equality implications which your proposals may have on the community as well as the workforce based on the evidence (data and research) you have available at this stage. If your proposal is agreed, the usual equality impact process will need to be followed.

Directorate:	CHW	Officer completing the template:	Carole Furlong
What are the proposals being assessed? (Please also indicate the reference Number from the S1 form)		23 Public Health: Reduction in budget of Harrow Stop Smoking Service of £41,000	
<p>1. What are the aims, objectives, and desired outcomes of your proposals? (Explain proposals e.g. reduction / removal of service, deletion of posts, change of criteria etc)</p>		The reduction in budget of Harrow Stop Smoking Service of £41,000 has been identified through efficiency savings within the budget. This has been achieved through a combination of negotiated savings on consumables, a small reduction in promotional material costs, and through a reduction in the expected number of smoking quitters in line with a reduction in smoking prevalence in Harrow.	
<p>2. Who are the main people / groups who may be affected by your proposals? For example who are the external/internal customers, communities, partners, stakeholders, the workforce, the elderly, disabled etc.</p>		Proposals affect smokers and their families who come from local communities, partners, external customers, and the workforce.	
<p>3. What data, information, evidence, research, statistics, surveys, and consultation(s) have you considered to undertake this assessment? <i>(include the actual data, statistics and evidence based on the different protected characteristics)</i></p>		<p>The smoking prevalence in Harrow is one of the lowest in the country and has been decreasing year on year. The 2014-5 budget was based on a smoking prevalence of 14% and the 2015-6 budget on a smoking prevalence of 12.8%. However, there are different rates of smoking within Harrow and these impact on protected characteristics:</p> <ul style="list-style-type: none"> • Higher rates of smoking in the more deprived areas and in people in routine and manual occupations. • Higher rates of smoking in people with mental health problems and in those who use drugs or have alcohol abuse issues. • Higher rates in people with some disabilities (particularly those with a long term condition caused by smoking) • Higher smoking rates in LGBT communities 	

4. Could your proposals disproportionately affect more people of one group (disabled, minority ethnic groups etc) than another?

Access to the stop smoking services will not be affected by the budget reduction. There will be no reduction in the number of pharmacies that deliver the stop smoking services and will be an additional two pharmacies brought into the scheme to target areas where service coverage is low. A reduction in advertising may impact on some groups disproportionately. The reduction in the expected number of quitters may also affect some groups more than others if they are less likely to access the services.

5. A - Assessment Relevance

How relevant are your proposals to each protected characteristic?

Example: Reviewing the criteria of freedom passes will be of 'High' relevance for Age and Disability and of 'Low' relevance to the other protected characteristics.

B - Assessment of potential impact

When you consider the impact on people in relation to each protected characteristic, it should be defined as positive, neutral or negative:

- **Positive:** where the impact is expected to have a particular benefit for this protected characteristic or improve equality of opportunity and / or foster good relations.
- **Neutral:** where there will be a neutral impact, neither positive nor negative
- **Negative:** where there is a risk that impact could disadvantage one or more of the people described in relation to a protected characteristic. This disadvantage may be differential, where the negative impact on one particular group of individuals or protected characteristic is likely to be greater than on another.

C - Assessing Negative impact – what are the risks?

When you have considered the likelihood and impact on people in relation to the protected characteristics, use the tables and matrix below and enter a score against each protected characteristic in the end column C.

Unlawful discrimination	5
Disproportionate disadvantage	4
Moderate disadvantage	3
Minor adjustments required	2
Minimal considerations necessary	1
SEVERITY OF IMPACT	

Certain to occur	5
Very likely to occur	4
Likely to occur	3
Possible to occur	2
Very unlikely to occur	1
LIKELIHOOD	

LIKELIHOOD	5	5	10	15	20	25
	4	4	8	12	16	20
	3	3	6	9	12	15
	2	2	4	6	8	10
	1	1	2	3	4	5
	0	1	2	3	4	5
	IMPACT					

Calculating the score - Severity of Impact X Likelihood = Score

Protected Characteristic	A Relevance	B Impact	Describe the impact(s) (negative or positive) your proposals may have on this protected characteristic	Reason for the Assessment of Potential Impact (What evidence, data, and information did you use to assess this?)	C Assessing Negative Impact Score
	Low/ Medium/ High	Positive/ Negative/ Neutral			
Age (including carers of young/older people)	Medium	Negative	Impact of smoking on children of smokers; low birth weight; infant mortality; respiratory illness and asthma; increased likelihood of children becoming smokers	Well documented evidence base	9
Disability (including carers of disabled people)	Medium	Negative	Low birth weight due to smoking is linked to learning disability People with mild to moderate learning disability and low risk perception who smoke are less likely to quit without support People with mental health problems especially those with drug and alcohol problems are more likely to smoke than general population and less likely to quit without support. Smoking rates in people with HIV reported higher than average. Smoking further depresses immune system of people with HIV.	Well documented evidence base	9
Gender Reassignment	Medium	Negative	Evidence that smoking rates are higher in LGBT than average rates.	Cancer research UK policy statement	9

Marriage and Civil Partnership	Low	Negative			
Pregnancy and Maternity	High	Negative	Low birthweight babies Increased risk of infant mortality	Well documented evidence base	16
Race	Medium	Negative	Some BME groups have higher smoking rates than average (e.g. Bangladeshi, Turkish and some Eastern Europeans)	Well documented evidence base	9
Religion or Belief	Low	Negative			
Sex	Low	Negative			
Sexual orientation	Medium	Negative	Evidence that smoking rates are higher in LGBT than average rates.	Cancer research UK policy statement	9

Summary and Recommendations (this section must be included in the project proposal reports for the Commissioning Panel)

Summary / Conclusion of assessment: (include the key findings and equality implications.	Smoking disproportionately affects certain groups. These include babies, children and young people, pregnant women, people with a disability, the LGBT community, some BAME groups and people in routine and manual social groups where smoking rates are higher. This would increase health inequalities within the borough.
Do you think that your proposals will have a cumulative effect upon a particular protected group in light of other council proposals that you are aware of? If yes, please explain the cumulative impact and on which groups.	Although smoking rates are decreasing, Changes in income due to welfare reform or increases in council tax are likely to increase stress within the population. It is likely that people in routine and manual groups will be affected by these changes more than others. Smoking rates are higher in these groups. Although it seems counterintuitive, times of financial hardship often show an increase in smoking rates. We will need to monitor the smoking prevalence data to see if this is happening locally.

Signature - Lead Officer	Carole Furlong	Date	12/2/15
--------------------------	----------------	------	---------

Initial Equality Implications Assessment for Commissioning Panel

NOTE: The purpose of this short assessment is to highlight to the Commissioning Panels any potential equality implications which your proposals may have on the community as well as the workforce based on the evidence (data and research) you have available at this stage. If your proposal is agreed, the usual equality impact process will need to be followed.

Directorate:	Community Health and Wellbeing	Officer completing the template:	Sally Hone
What are the proposals being assessed? (Please also indicate the reference Number from the S1 form)		CHW24 Reduce funding in Physical Activity Services (back – office change)	

1. What are the aims, objectives, and desired outcomes of your proposals? (Explain proposals e.g. reduction / removal of service, deletion of posts, change of criteria etc)	Removal of all physical activity services to reduce public health spend.
2. Who are the main people / groups who may be affected by your proposals? For example who are the external/internal customers, communities, partners, stakeholders, the workforce, the elderly, disabled etc.	People with long term controlled conditions within the community, freelance fitness instructors delivering the programme, Everyone Active, Aspire, Sherwood Physiotherapy Clinic, Referrers into the initiatives (GPs, Health Professionals, and Mental Health workers).
3. What data, information, evidence, research, statistics, surveys, and consultation(s) have you considered to undertake this assessment? <i>(include the actual data, statistics and evidence based on the different protected characteristics)</i>	Looked at the profile of the Harrow population, health profile 2014, data from the actual programmes to be stopped, national guidelines and strategies.
4. Could your proposals disproportionately affect more people of one group (disabled, minority ethnic groups etc) than another?	Mental Health Personal Trainers programme is dedicated to increasing physical activity levels in community based mental health clients.

5. A - Assessment Relevance

How relevant are your proposals to each protected characteristic?

Example: Reviewing the criteria of freedom passes will be of 'High' relevance for Age and Disability and of 'Low' relevance to the other protected characteristics.

B - Assessment of potential impact

When you consider the impact on people in relation to each protected characteristic, it should be defined as positive, neutral or negative:

- **Positive:** where the impact is expected to have a particular benefit for this protected characteristic or improve equality of opportunity and / or foster good relations.
- **Neutral:** where there will be a neutral impact, neither positive nor negative
- **Negative:** where there is a risk that impact could disadvantage one or more of the people described in relation to a protected characteristic. This disadvantage may be differential, where the negative impact on one particular group of individuals or protected characteristic is likely to be greater than on another.

C - Assessing Negative impact – what are the risks?

When you have considered the likelihood and impact on people in relation to the protected characteristics, use the tables and matrix below and enter a score against each protected characteristic in the end column C.

Unlawful discrimination	5
Disproportionate disadvantage	4
Moderate disadvantage	3
Minor adjustments required	2
Minimal considerations necessary	1
SEVERITY OF IMPACT	

Certain to occur	5
Very likely to occur	4
Likely to occur	3
Possible to occur	2
Very unlikely to occur	1
LIKELIHOOD	

LIKELIHOOD	5	5	10	15	20	25
	4	4	8	12	16	20
	3	3	6	9	12	15
	2	2	4	6	8	10
	1	1	2	3	4	5
	0	1	2	3	4	5
	IMPACT					

Calculating the score - Severity of Impact X Likelihood = Score

Protected Characteristic	A Relevance	B Impact	Describe the impact(s) (negative or positive) your proposals may have on this protected characteristic	Reason for the Assessment of Potential Impact (What evidence, data, and information did you use to assess this?)	C Assessing Negative Impact Score
	Low/ Medium/ High	Positive/ Negative/ Neutral			
Age (including carers of young/older people)	Medium	Negative	Harrow has an aging inactive population and the provision of services such as exercise on referral ensures people can access opportunities to improve their health without the fear factor of not fitting into a local facility. This fear of fitting in means many older people are not willing	Profile of Harrow population, data regarding those presently accessing the programmes, guidelines regarding physical activity in the elderly and literature regarding effects of inactivity on older people.	9

			to access main stream physical activity initiatives and need that initial supported environment in order to make a sustained lifestyle change. Inactivity in the older population leads to increased isolation due to lack of mobility and an increased burden on social services.		
Disability (including carers of disabled people)	Medium	Negative	People with disabilities whether physical or mental are less likely to participate in physical activity. Physical activity in any form is a great way to keep you physically healthy as well as improving your mental wellbeing. With programmes such as Exercise on Referral and Mental Health personal trainers programme we are able to offer these vulnerable people the required levels of support and guidance to undertake physical activity in a safe controlled environment thereby increasing the chances of a sustained lifestyle change. Removal of initiatives will lead to potential isolation for clients. People with mental health problems are less likely to receive the physical healthcare they're entitled to. Mental health service users are statistically less likely to receive the routine checks that might detect symptoms of these physical health conditions earlier. They are also less likely to be offered support to reduced increase activity levels. Removal of these initiatives will further reduce available support.	Physical Activity guidelines and strategies. Figures from the related programmes indicate the benefits on the population. Lack of population specific physical activity programmes	9
Gender Reassignment					
Marriage and Civil Partnership					
Pregnancy and					

Maternity					
Race					
Religion or Belief	Medium	Negative	Ability to provide services to people in line with religious / cultural requirements such as single sex facilities is key to engagement with certain population groups. Through the Exercise on Referral programme we have been able to develop facilities to incorporate such sessions. Removal of exercise on referral could potentially isolate certain population groups by adding barriers to their introduction to physical activity.		4
Sex					
Sexual orientation					

Summary and Recommendations (this section must be included in the project proposal reports for the Commissioning Panel)	
Summary / Conclusion of assessment: (include the key findings and equality implications.	The removal of physical activity initiatives across Harrow will have a negative impact on equality to increase physical activity levels. The physical activity initiatives across Harrow provide the whole community with the opportunity to engage in physical activity, which should result in, improved health, longer life, better mental health and support for weight management. Initiatives such as Exercise on Referral aim to address the inequalities in health by making physical activity opportunities in a controlled environment (key for people who have not undertaken any form of physical activity for a period of time or have a long term condition) for those most in need; low income groups, people living in areas of social deprivation, black and minority ethnic communities and disabled people, which includes people with learning difficulties, people with mental health problems, people with physical or sensory impairments and people with long-term limiting conditions.
Do you think that your proposals will have a cumulative effect upon a particular protected group in light of other council proposals that you are aware of? If yes, please explain the cumulative impact and on which groups.	No

Signature - Lead Officer	Sally Hone	Date	10/9/14
--------------------------	------------	------	---------

Initial Equality Implications Assessment for Commissioning Panel

NOTE: The purpose of this short assessment is to highlight to the Commissioning Panels any potential equality implications which your proposals may have on the community as well as the workforce based on the evidence (data and research) you have available at this stage. If your proposal is agreed, the usual equality impact process will need to be followed.

Directorate:	CHW	Officer completing the template:	Andrew Howe
What are the proposals being assessed? (Please also indicate the reference Number from the S1 form)		CHW25 Reduce Sexual Planning & Family Planning Out of Borough Contingency Fund	
1. What are the aims, objectives, and desired outcomes of your proposals? (Explain proposals e.g. reduction / removal of service, deletion of posts, change of criteria etc)		Savings proposal for Contingency Fund – The proposal is to reduce this fund by £25,000 in 2015/16.	
2. Who are the main people / groups who may be affected by your proposals? For example who are the external/internal customers, communities, partners, stakeholders, the workforce, the elderly, disabled etc.		Harrow residents who receive a sexual health service (not GUM) from a provider not commissioned by Harrow Council.	
3. What data, information, evidence, research, statistics, surveys, and consultation(s) have you considered to undertake this assessment? <i>(include the actual data, statistics and evidence based on the different protected characteristics)</i>		This contingency fund was created in the eventuality that the current (inherited NHS practice) of not charging the 'home provider' for those people who seek sexual health treatment from a provider not commissioned by the 'home' Council changes. . To date there has been no 'cross border' charging. Recent analysis indicates that Harrow would be a net financial winner if charging were to commence. As such there would be no impact on Harrow residents.	
4. Could your proposals disproportionately affect more people of one group (disabled, minority ethnic groups etc) than another?		If current practice does not change there will no impact on Harrow residents.	

5. A - Assessment Relevance

How relevant are your proposals to each protected characteristic?

Example: Reviewing the criteria of freedom passes will be of 'High' relevance for Age and Disability and of 'Low' relevance to the other protected characteristics.

B - Assessment of potential impact

When you consider the impact on people in relation to each protected characteristic, it should be defined as positive, neutral or negative:

➤ **Positive:** where the impact is expected to have a particular benefit for this protected characteristic or improve equality of opportunity and / or foster good relations.

as
➤ **Neutral:** where there will be a neutral impact, neither positive nor negative

➤ **Negative:** where there is a risk that impact could disadvantage one or more of the people described in relation to a protected characteristic. This disadvantage may be differential, where the negative impact on one particular group of individuals or protected characteristic is likely to be greater than on another.

C - Assessing Negative impact – what are the risks?

When you have considered the likelihood and impact on people in relation to the protected characteristics, use the tables and matrix below and enter a score against each protected characteristic in the end column C.

Unlawful discrimination	5
Disproportionate disadvantage	4
Moderate disadvantage	3
Minor adjustments required	2
Minimal considerations necessary	1
SEVERITY OF IMPACT	

Certain to occur	5
Very likely to occur	4
Likely to occur	3
Possible to occur	2
Very unlikely to occur	1
LIKELIHOOD	

LIKELIHOOD	5	5	10	15	20	25
	4	4	8	12	16	20
	3	3	6	9	12	15
	2	2	4	6	8	10
	1	1	2	3	4	5
	0	1	2	3	4	5
		IMPACT				

Calculating the score - Severity of Impact X Likelihood = Score

Protected Characteristic	A Relevance	B Impact	Describe the impact(s) (negative or positive) your proposals may have on this protected characteristic	Reason for the Assessment of Potential Impact (What evidence, data, and information did you use to assess this?)	C Assessing Negative Impact Score
	Low/ Medium/ High	Positive/ Negative/ Neutral			
Age (including carers of young/older people)	n/a	n/a		-	
Disability (including carers of disabled people)	n/a	n/a	-	-	
Gender Reassignment	n/a	n/a	-	-	-
Marriage and Civil Partnership	n/a	n/a	-	-	-
Pregnancy and Maternity	n/a	n/a		-	-
Race	n/a	n/a	-	-	
Religion or Belief	n/a	n/a	-	-	-
Sex	n/a	n/a		-	2
Sexual orientation	n/a	n/a	-	-	

Summary and Recommendations (this section must be included in the project proposal reports for the Commissioning Panel)

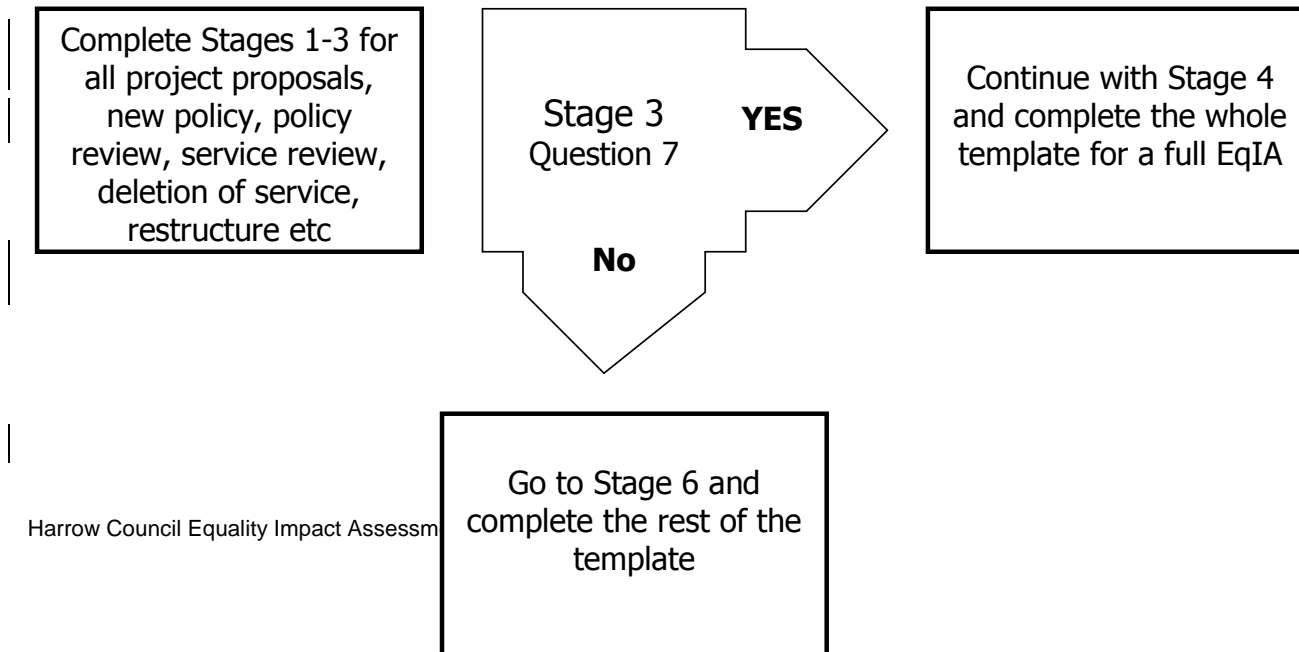
Summary / Conclusion of assessment: (include the | The proposed option (Ceasing the service) would have a significantly disproportionate impact on the

key findings and equality implications.	groups age, disability and race
Do you think that your proposals will have a cumulative effect upon a particular protected group in light of other council proposals that you are aware of? If yes, please explain the cumulative impact and on which groups.	No. This is not envisaged.

Signature - Lead Officer	A Howe	Date	9/9/14
--------------------------	--------	------	--------

Equality Impact Assessment Template

The Council has revised and simplified its Equality Impact Assessment process. There is now just one Template. Project Managers will need to complete **Stages 1-3** to determine whether a full EqIA is required and the need to complete the whole template.



Equality Impact Assessment (EqIA) Template

In order to carry out this assessment, it is important that you have completed the EqIA E-learning Module and read the Corporate Guidelines on EqIAs. Please refer to these to assist you in completing this assessment.

It will also help you to look at the EqIA Template with Guidance Notes to assist you in completing the EqIA.

Type of Project / Proposal:	Tick ✓	Type of Decision:	Tick ✓			
Transformation		Cabinet				
Capital		Portfolio Holder				
Service Plan		Corporate Strategic Board				
Other		Other	x			
Title of Project:	CHW28 - Increased Bed & Breakfast / Private Sector Leasing charges					
Directorate / Service responsible:	CHW/Housing					
Name and job title of lead officer:	J Dalton					
Name & contact details of the other persons involved in the assessment:	Jon Dalton Alison Pegg					
Date of assessment:	5 September 2014					
Stage 1: Overview						
1. What are you trying to do? (Explain proposals e.g. introduction of a new service or policy, policy review, changing criteria, reduction / removal of service, restructure, deletion of posts etc)	This proposal is to increase B&B and PSL charges to customers on the assumption that those affected would receive an increase in benefits, and that a significant proportion of the benefits (for those in work where benefits are not capped) would attract benefit subsidy. As it is assumed that customers would receive an increase in benefits to match the increased charge they would not suffer any impact from the proposed increased charges.					
2. Who are the main people / Protected Characteristics that may be affected by your proposals? (✓ all that apply)	Residents / Service Users	x	Partners		Stakeholders	
	Staff	-	Age	x	Disability	x
	Gender Reassignment		Marriage and Civil Partnership	x	Pregnancy and Maternity	x

	Race	x	Religion or Belief	x	Sex
	Sexual Orientation		Other		
3. Is the responsibility shared with another directorate, authority or organisation? If so:	No				
<ul style="list-style-type: none"> Who are the partners? Who has the overall responsibility? How have they been involved in the assessment? 					

Stage 2: Evidence / Data Collation

4. What evidence / data have you reviewed to assess the potential impact of your proposals? Include the actual data, statistics reviewed in the section below. This can include census data, borough profile, profile of service users, workforce profiles, results from consultations and the involvement tracker, customer satisfaction surveys, focus groups, research interviews, staff surveys; complaints etc. Where possible include data on the nine Protected Characteristics.

(Where you have gaps (data is not available/being collated), you may need to include this as an action to address in your Improvement Action Plan at Stage 7)

Age (including carers of young/older people)	<p>Census data: In the period 2001-2011, Harrow’s population has grown by more than 15% to 239,000. The 0-14 age group is estimated to have increased by 15.7% due to a significant number of births within the Borough within the last 10 years, and those aged 65+ are estimated to have increased by 12.3% within the same period. Household size within the borough is the second highest in the country at 2.8 people per household (Office for National Statistics, 2001 and 2011).</p> <p>Age is held for 521 council tenants via the Locata system. Of these, 261 (50.0%) are aged over 45, which compares to 37.8% across the borough (data as at April 2014). Age is held for all housing applicants via the Locata system. 1,642 (34.5%) are aged over 45, which reflects the age profile of residents in the borough (data as at April 2013). 29% of homeless acceptances are aged 16-24, 58% are aged 25-44, 9% aged 45-59 and whilst only 4% are aged 60 and over. This demonstrates that residents in the greatest housing need tend to be younger. (Data as at April 2013).</p>
----------------------------------------------	-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

Disability (including carers of disabled people)	<p>Census data and housing stock condition survey: 14.6% of residents in Harrow report a limiting long-term illness or disability which limits their day-to-day activities. This is below the national average of 17.9%, but represents an increase of 13.2% since 2001 (Office for National Statistics, 2001 and 2011). The 2001 housing stock condition survey (updated in 2008) highlighted that 78% of private sector housing stock within the borough was pre-1949, and with older housing comes particular issues of condition and its</p>
--------------------------------------------------	--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

	<p>impact on the health and safety of those living within it, especially vulnerable households.</p> <p>101 council tenants registered via Locata for transfer have provided disability-related data, with 48.5% declaring a disability. This reflects the vulnerabilities experienced by many in social housing, and indicates the need for a service that offers various forms of support to those using the scheme. (Data as at April 2013). Disability information is held from housing applicants via Locata. 229 applicants (4.8%) with a live status indicated that they claim a disability-related benefit. Only 2% of homeless acceptances are vulnerable due to physical disability. (Data as at April 2014).</p>
Gender Reassignment	<p>Analysis of demand from housing applicants (via Locata): 1 (0.02%) housing applicant has indicated that they are transgender. (Data as at April 2014).</p>
Marriage / Civil Partnership	<p>Census data: Harrow has a very high percentage of married couples, with 53.7% of residents aged 16 and older declaring they were in a marriage in 2011. This is above the national level of 46.6%. There was a 27% increase in the number of married people living in Harrow between 2001 and 2011 (Office for National Statistics, 2001 and 2011). Between their inception and January 2012, 107 civil partnership ceremonies took place in Harrow.</p>
Pregnancy and Maternity	<p>Census data: There has been a 32% (+3,900) increase in 0-4 year olds since 2001. There are pockets of high concentration in central and south-west Harrow. 15,916 (6.7%) residents were aged four and under in 2011. 78% of applicants of accepted homeless households applying through the Locata system have dependent children. (Data as at April 2013).</p>
Race	<p>Census data: 2011 Census data shows that 69.1% of Harrow's residents are minority ethnic, where minority ethnic is defined as all people who are non-White British. Nationally, Harrow now has the fourth lowest proportion of White British residents, compared to a ranking of 8th in 2001. The White British population group has fallen by 28.5% since 2001, suggesting that Harrow is becoming increasingly diverse (Office for National Statistics, 2011).</p> <p>Ethnicity data is held for 467 (89.5%) of tenants seeking to transfer accommodation via the Locata system. Of these, 304 (65.1%) are Black or of a minority ethnic background. This is broadly in line with the Census data and indicates the importance of effective communication with different ethnic groups. Of the two-thirds of Council tenants who provided their ethnicity at application, the largest single group housed within the Council's stock is White at 55% whilst 21% are Asian and 16% are black. (Data as at April 2013).</p> <p>Ethnicity data is held for 4,339 (91.6%) housing applicants. Of these, 2978 (68.6%) are Black or of a minority ethnic background. This is in line with Census figures. The table below presents a breakdown of</p>

these ethnicity groups.

Ethnicity	%	Total %
A White – British	18.5%	
B White – Irish	1.5%	
C White – other	11.4%	
TOTAL		31.4%
D Mixed - White and Black Caribbean	2.4%	
E Mixed - White and Black African	1.4%	
F Mixed - White and Asian	1.1%	
G Mixed – other	2.1%	
TOTAL		7.0%
H Asian or Asian British - Indian	7.4%	
J Asian or Asian British - Pakistani	4.1%	
K Asian or Asian British - Bangladeshi	1.3%	
L Asian or Asian British - Other	16.9%	
TOTAL		29.7%
M Black or Black British - Caribbean	8.6%	
N Black or Black British - African	14.2%	
P Black or Black British - other	2.6%	
TOTAL		25.4%

	Q Gypsy /Romany / Traveller	0.0%	
	R Chinese	0.3%	
	S Other	6.1%	
	TOTAL		6.4%

(Data as at April 2014).

Religion and Belief	<p>Census data: The 2011 Census revealed that religious affiliation is very high in Harrow; at 9.6%, the borough has the 2nd lowest number of residents who stated that they have no religion. This compares to 24.7% nationally (Office for National Statistics, 2011).</p> <p>Data on faith is held for 140 (26.8%) of council tenants on the Locata system. 115 (75.2%) have declared a religious belief, compared to 84.4% for the borough of Harrow. (Data as at 16/04/2013). (Data as at April 2013). Data on religion is known for 2,381 (50.3%) of housing applicants on Locata. Of these, 229 (9.6%) indicate that they have no religious affiliation, which reflects the 2011 Census findings. The table below provides a breakdown of religious groups for those who did declare a religion:</p> <p>Buddhist 1.1%</p> <p>Christian 45.0%</p> <p>Hindu 10.6%</p> <p>Jewish 0.5%</p> <p>Muslim 30.0%</p> <p>Sikh 0.5%</p> <p>Other religion 2.6%</p> <p>(Data as at April 2014).</p>		
---------------------	-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	--	--

Sex / Gender	<p>Census data: In 2011, 49.4% of Harrow residents were male and 50.6% are female. This is very similar to the national profile, but the number of males in Harrow has slightly increased since 2001 (Office for</p>		
--------------	----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	--	--

	National Statistics, 2001 and 2011).		
	Data on gender is held for 521 Council tenants via Locata. The majority (384, or 73.4%) are female. This is higher than would otherwise be expected, but does not represent the composition of the remainder of the tenant's household. (Data as at April 2013). Data on gender is held for 267 (100.0%) of homeless applicants. The majority (159 or 59.6%) are female, although once again this does not represent the composition of the remainder of the tenant's household. 53% of homeless acceptances are female lone parents with dependent children compared to 7% of male lone parents with dependent children. (Data as at April 2013).		
Sexual Orientation	The only current available data on sexual orientation on Harrow Council tenants is held via the Locata system on tenants seeking to move. 132 (25.3%) council tenants seeking to move have provided sexual orientation data. Of these, 125 (94.6%) respondents have said that they are heterosexual. Data on sexual orientation is held for 2,292 (48.4%) housing applicants. Of these, 2,231 (97.3%) stated that they are heterosexual and 36 (1.6%) have stated they are bisexual. 15 (0.6%) applicants are gay and 9 (0.4%) applicants are lesbian.		
Socio Economic	<p>Census data: Harrow is ranked 203rd out of 354 Districts in England where 1st is the most deprived. Most multiple deprivation is in the centre of the borough, with pockets of deprivation in the south and east. Harrow's least deprived areas are found in the west of the borough</p> <p>Harrow is worse than the national average for income deprivation, but less deprived. Most income deprivation is in the centre, with pockets of deprivation across the borough. There are small clusters of high economic deprivation across Harrow, largely coinciding with areas containing higher levels of social housing. 16,994 households received Housing Benefit in December 2012, a rate of 201.7 per 1,000 households.</p> <p>2.9% (4,386) of Harrow's working population were unemployed in February 2012. This is below the rates of London and England, 4.4% and 4.2% respectively. 17% (31,997) of Harrow's population aged 16 and over had no formal qualifications in 2011. The proportion of the resident population without any qualifications is lower than the averages for England and London. People without qualifications are more highly concentrated in the east and southeast of the borough.</p>		
5. What consultation have you undertaken on your proposals? None to date			
Who was consulted?	What consultation methods were used?	What do the results show about the impact on different groups /	What actions have you taken to address the findings of the

		Protected Characteristics?	consultation? (This may include further consultation with the affected groups, revising your proposals).

<p>6. What other (local, regional, national research, reports, media) data sources that you have used to inform this assessment?</p> <p>List the Title of reports / documents and websites here.</p>	None
-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	------

Stage 3: Assessing Potential Disproportionate Impact

7. Based on the evidence you have considered so far, is there a risk that your proposals could potentially have a disproportionate adverse impact on any of the Protected Characteristics?

	Age (including carers)	Disability (including carers)	Gender Reassignment	Marriage and Civil Partnership	Pregnancy and Maternity	Race	Religion and Belief	Sex	Sexual Orientation
Yes									
No	x	x	x	x	x	x	x	x	x

YES - If there is a risk of disproportionate adverse Impact on any **ONE** of the Protected Characteristics, continue with the rest of the template.

- **Best Practice:** You may want to consider setting up a Working Group (including colleagues, partners, stakeholders, voluntary community sector organisations, service users and Unions) to develop the rest of the EqIA
- It will be useful to also collate further evidence (additional data, consultation with the relevant communities, stakeholder groups and service users directly affected by your proposals) to further assess the potential disproportionate impact identified and how this can be mitigated.

NO - If you have ticked 'No' to all of the above, then go to **Stage 6**

- Although the assessment may not have identified potential disproportionate impact, you may have identified actions which can be taken to advance equality of opportunity to make your proposals more inclusive. These actions should form your Improvement Action Plan at Stage 7

Stage 4: Collating Additional data / Evidence

8. What additional data / evidence have you considered in relation to your proposals as a result of the analysis at Stage 3?

(include this evidence, including any data, statistics, titles of documents and website links here)

9. What further consultation have you undertaken on your proposals as a result of your analysis at Stage 3?

Who was consulted?	What consultation methods were used?	What do the results show about the impact on different groups / Protected Characteristics?	What actions have you taken to address the findings of the consultation? (This may include further consultation with the affected groups, revising your proposals).

Stage 5: Assessing Impact and Analysis

10. What does your evidence tell you about the impact on different groups? Consider whether the evidence shows potential for differential impact, if so state whether this is an adverse or positive impact? How likely is this to happen? How you will mitigate/remove any adverse impact?

Protected Characteristic	Adverse ✓	Positive ✓	Explain what this impact is, how likely it is to happen and the extent of impact if it was to occur. Note – Positive impact can also be used to demonstrate how your proposals meet the aims of the PSED Stage 9	What measures can you take to mitigate the impact or advance equality of opportunity? E.g. further consultation, research, implement equality monitoring etc (Also Include these in the Improvement Action Plan at Stage 7)
Age (including carers of young/older people)				
Disability (including carers of disabled people)				
Gender Reassignment				
Marriage and Civil Partnership				
Pregnancy and Maternity				

Race									
Religion or Belief									
Sex									
Sexual orientation									
11. Cumulative Impact – Considering what else is happening within the Council and Harrow as a whole, could your proposals have a cumulative impact on a particular Protected Characteristic?					Yes		No	x	
If yes, which Protected Characteristics could be affected and what is the potential impact?									
11a. Any Other Impact – Considering what else is happening within the Council and Harrow as a whole (for example national/local policy, austerity, welfare reform, unemployment levels, community tensions, levels of crime) could your proposals have an impact on individuals/service users socio economic, health or an impact on community cohesion?					Yes		No	x	
If yes, what is the potential impact and how likely is to happen?									
12. Is there any evidence or concern that the potential adverse impact identified may result in a Protected Characteristic being disadvantaged? (Please refer to the Corporate Guidelines for guidance on the definitions of discrimination, harassment and victimisation and other prohibited conduct under the Equality Act) available on Harrow HUB/Equalities and Diversity/Policies and Legislation									
	Age (including	Disability (including	Gender Reassignment	Marriage and Civil	Pregnancy and Maternity	Race	Religion and Belief	Sex	Sexual Orientation

	carers)	carers)		Partnership					
Yes									
No									

If you have answered "yes" to any of the above, set out what justification there may be for this in Q12a below - link this to the aims of the proposal and whether the disadvantage is proportionate to the need to meet these aims. (You are encouraged to seek legal advice, if you are concerned that the proposal may breach the equality legislation or you are unsure whether there is objective justification for the proposal)

If the analysis shows the potential for serious adverse impact or disadvantage (or potential discrimination) but you have identified a potential justification for this, this information must be presented to the decision maker for a final decision to be made on whether the disadvantage is proportionate to achieve the aims of the proposal.

- If there are adverse effects that are not justified and cannot be mitigated, you should not proceed with the proposal. **(select outcome 4)**
- If the analysis shows unlawful conduct under the equalities legislation, you should not proceed with the proposal. **(select outcome 4)**

Stage 6: Decision

13. Please indicate which of the following statements best describes the outcome of your EqIA (✓ tick one box only)

Outcome 1 – No change required: the EqIA has not identified any potential for unlawful conduct or disproportionate impact and all opportunities to advance equality are being addressed.	✓
Outcome 2 – Minor adjustments to remove / mitigate adverse impact or advance equality have been identified by the EqIA. <i>List the actions you propose to take to address this in the Improvement Action Plan at Stage 7</i>	
Outcome 3 – Continue with proposals despite having identified potential for adverse impact or missed opportunities to advance equality. In this case, the justification needs to be included in the EqIA and should be in line with the PSED to have 'due regard'. In some cases, compelling reasons will be needed. You should also consider whether there are sufficient plans to reduce the adverse impact and/or plans to monitor the impact. (Explain this in 13a below)	
Outcome 4 – Stop and rethink: when there is potential for serious adverse impact or disadvantage to one or more protected groups. (You are encouraged to seek Legal Advice about the potential for unlawful conduct under equalities legislation)	
13a. If your EqIA is assessed as outcome 3 or you have ticked 'yes' in Q12 , explain your justification with full reasoning to continue with your proposals.	

Stage 7: Improvement Action Plan

14. List below any actions you plan to take as a result of this Impact Assessment. This should include any actions identified throughout the EqIA.

Area of potential adverse impact e.g.	How will you know this is achieved? E.g.	Target Date	Lead Officer	Date Action included in
---------------------------------------	------------------------------------------	-------------	--------------	-------------------------

Race, Disability	<i>Action required to mitigate</i>	Performance Measure / Target			Service / Team Plan
None identified.	In order to ensure that customers are not adversely impacted we will monitor the Housing Benefits payable to customers in B&B/PSL. If any customer faces a real increase in housing costs and is finding it unaffordable, we will work with them to find accommodation that is affordable.	Regular monitoring of individual cases in B&B/PSL.	As necessary	Jon Dalton	Incorporated within existing Housing Needs service plan

Stage 8 - Monitoring

The full impact of the proposals may only be known after they have been implemented. It is therefore important to ensure effective monitoring measures are in place to assess the impact.

15. How will you monitor the impact of the proposals once they have been implemented? What monitoring measures need to be introduced to ensure effective monitoring of your proposals? How often will you do this? <i>(Also Include in Improvement Action Plan at Stage 7)</i>	Once the charges are implemented, we will monitor the Housing Benefit assessments to assess the impact on each individual household in Bed and Breakfast/PSL.
16. How will the results of any monitoring be analysed, reported and publicised? <i>(Also Include in Improvement Action Plan at Stage 7)</i>	Not applicable
17. Have you received any complaints or compliments about the proposals being assessed? If so, provide details.	No


Stage 9: Public Sector Equality Duty

18. How do your proposals contribute towards the Public Sector Equality Duty (PSED) which requires the Council to have due regard to eliminate discrimination, harassment and victimisation, advance equality of opportunity and foster good relations between different groups.

(Include all the positive actions of your proposals, for example literature will be available in large print, Braille and community languages, flexible working hours for parents/carers, IT equipment will be DDA compliant etc)		
Eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Equality Act 2010	Advance equality of opportunity between people from different groups	Foster good relations between people from different groups
		The proposal generates savings without a reduction in service to homeless families

Stage 10 - Organisational sign Off (to be completed by Chair of Departmental Equalities Task Group)

The completed EqIA needs to be sent to the chair of your Departmental Equalities Task Group (DETG) to be signed off.

19. Which group or committee considered, reviewed and agreed the EqIA and the Improvement Action Plan?	Housing Management Team		
Signed: (Lead officer completing EqIA)		Signed: (Chair of DETG)	
Date:	10 September 2014	Date:	
Date EqIA presented at the EqIA Quality Assurance Group		Signature of ETG Chair	

Initial Equality Implications Assessment for Commissioning Panel

NOTE: The purpose of this short assessment is to highlight to the Commissioning Panels any potential equality implications which your proposals may have on the community as well as the workforce based on the evidence (data and research) you have available at this stage. If your proposal is agreed, the usual equality impact process will need to be followed.

Directorate:	Community, Health & Well-being, Adult Social Care	Officer completing the template:	Jonathan Price, Head of Provider Services
What are the proposals being assessed? (Please also indicate the reference Number from the S1 form)		Review of Voluntary Sector CHW 11	
<p>1. What are the aims, objectives, and desired outcomes of your proposals? (Explain proposals e.g. reduction / removal of service, deletion of posts, change of criteria etc)</p>		<p>Adult Social Care currently spends £1.079m per year on services delivered by voluntary sector organisations, these are largely prevention focussed. This spend excludes the commissioning of specific services delivered to named clients (the meeting of identified need required by statute).</p> <p>Existing arrangements include a set of outcome focussed Service Level Agreements (SLA). The majority of these contracts are with nine main Voluntary Sector organisations working in Harrow. These are Harrow MENCAP, in Harrow, CAB, Rethink, AgeUK, Harrow Association for the Disabled (HAD), Diwa Asian Women's Network (DAWN), Loud & Clear and Harrow Carers. There are also a number of smaller-scale contracts for various other activities including support for minority groups.</p> <p>Although we want to continue to support the great work of the sector as a statutory body our priority is to fund activities supporting our statutory responsibilities. The investment in the voluntary sector represents spend on non-statutory activities.</p> <p>This proposal is to cease funding for the Adults contracts within the Voluntary Sector retaining only the advocacy arrangements (£379k) required to meet our obligations under the Care Act. This would achieve a saving identified at a level of £700k for year 15/16.</p>	
<p>2. Who are the main people / groups who may be affected by your proposals? For example who are the external/internal customers, communities, partners,</p>		Residents, Service users, partners, communities,	

stakeholders, the workforce, the elderly, disabled etc.	
3. What data, information, evidence, research, statistics, surveys, and consultation(s) have you considered to undertake this assessment? <i>(include the actual data, statistics and evidence based on the different protected characteristics)</i>	Voluntary Sector SLAs
4. Could your proposals disproportionately affect more people of one group (disabled, minority ethnic groups etc) than another?	This proposal is likely to adversely affect older persons, carers, ethnic minorities/immigrants and disabled groups.

5. A - Assessment Relevance

How relevant are your proposals to each protected characteristic?

Example: Reviewing the criteria of freedom passes will be of 'High' relevance for Age and Disability and of 'Low' relevance to the other protected characteristics.

B - Assessment of potential impact

When you consider the impact on people in relation to each protected characteristic, it should be defined as positive, neutral or negative:

- **Positive:** where the impact is expected to have a particular benefit for this protected characteristic or improve equality of opportunity and / or foster good relations.
- **Neutral:** where there will be a neutral impact, neither positive nor negative
- **Negative:** where there is a risk that impact could disadvantage one or more of the people described in relation to a protected characteristic. This disadvantage may be differential, where the negative impact on one particular group of individuals or protected characteristic is likely to be greater than on another.

C - Assessing Negative impact – what are the risks?

When you have considered the likelihood and impact on people in relation to the protected characteristics, use the tables and matrix below and enter a score against each protected characteristic in the end column C.

Unlawful discrimination	5
Disproportionate disadvantage	4
Moderate disadvantage	3
Minor adjustments required	2
Minimal considerations necessary	1
SEVERITY OF IMPACT	

Certain to occur	5
Very likely to occur	4
Likely to occur	3
Possible to occur	2
Very unlikely to occur	1
LIKELIHOOD	

LIKELIHOOD	5	5	10	15	20	25
	4	4	8	12	16	20
	3	3	6	9	12	15
	2	2	4	6	8	10
	1	1	2	3	4	5
	0	1	2	3	4	5
		IMPACT				

Calculating the score - Severity of Impact X Likelihood = Score

Protected Characteristic	A Relevance	B Impact	Describe the impact(s) (negative or positive) your proposals may have on this protected characteristic	Reason for the Assessment of Potential Impact (What evidence, data, and information did you use to assess this?)	C Assessing Negative Impact Score
	Low/ Medium/ High	Positive/ Negative/ Neutral			
Age (including carers of young/older people)	H	Negative	This is likely to directly disadvantage older persons and carers.	The Voluntary sector supports organisations that all groups within the equality strands can access equally	5 x 3 = 15
Disability (including carers of disabled people)	H	Negative	This is likely to directly disadvantage persons who are disabled.	The Voluntary sector supports organisations that all groups within the equality strands can access equally	5 x 3 = 15
Gender Reassignment	H	Neutral	Reduction should not disproportionately disadvantage this protected group.	The Voluntary sector supports organisations that all groups within the equality strands can access equally	1 x 1 = 1
Marriage and Civil Partnership	H	Neutral	Reduction should not disproportionately disadvantage this protected group.	The Voluntary sector supports organisations that all groups within the equality strands can access equally	1 x 1 = 1
Pregnancy and Maternity	H	Neutral	Reduction should not disproportionately disadvantage this protected group.	The Voluntary sector supports organisations that all groups within the equality strands can access equally	1 x 1 = 1
Race	H	Negative	Most of the services will not have a racial bias but any reduction in immigration advice would be likely to disproportionately affect new immigrants or those related to potential immigrants. Cuts of this magnitude will affect non-English	The Voluntary sector supports organisations that all groups within the equality strands can access equally	5 x 3 = 15

			speakers and migrant families directly.		
Religion or Belief	H	Negative		The Voluntary sector supports organisations that all groups within the equality strands can access equally	5 x 3 = 15
Sex	H	Neutral	Reduction should not disproportionately disadvantage this protected group.	The Voluntary sector supports organisations that all groups within the equality strands can access equally	1 x 1 = 1
Sexual orientation	H	Neutral	Reduction should not disproportionately disadvantage this protected group.	The Voluntary sector supports organisations that all groups within the equality strands can access equally	1 x 1 = 1

Summary and Recommendations (this section must be included in the project proposal reports for the Commissioning Panel)	
Summary / Conclusion of assessment: (include the key findings and equality implications.	This assessment suggests some groups maybe adversely affected by the proposed reduction in funding.
Do you think that your proposals will have a cumulative effect upon a particular protected group in light of other council proposals that you are aware of? If yes, please explain the cumulative impact and on which groups.	

Signature - Lead Officer	Jonathan Price	Date	19 August 2014
--------------------------	----------------	------	----------------

Initial Equality Implications Assessment for Commissioning Panel

NOTE: The purpose of this short assessment is to highlight to the Commissioning Panels any potential equality implications which your proposals may have on the community as well as the workforce based on the evidence (data and research) you have available at this stage. If your proposal is agreed, the usual equality impact process will need to be followed.

Directorate:	Community, Health and Well-Being	Officer completing the template:	Tim Bryan
What are the proposals being assessed? (Please also indicate the reference Number from the S1 form)		<p>Ref CHW16</p> <p>Option 1: To retain one Central Library and close the remaining 9 libraries, the Home Visit Library Service and the Schools Library Service</p> <p>Option 2: Develop a West London Library Strategy to redefine the library offer (initially across Harrow, Ealing and Hounslow Carillion contracts).</p> <p>Reference: CHW14</p>	
<p>1. What are the aims, objectives, and desired outcomes of your proposals?</p> <p>(Explain proposals e.g. reduction / removal of service, deletion of posts, change of criteria etc)</p>		<p>Option 1: To close all libraries apart from one Central Library, and cease the Home Visit Library Service and the Schools Library Service. This would result in the loss of approximately 50 fte library staff posts.</p> <p>Option 2: Develop a West London Library Strategy to redefine the library offer across all of the library authorities currently managed by Carillion. This would include a rationalised number of library 'express' service points – These would be fully self service with staff intervention limited to stock management and events/activities. Library opening hours would be able to be extended beyond existing hours. This would require the installation of new technology costing c£20k per library. There would also be shared premises with e.g. coffee shops and post offices, and library touchdown spaces offering online services in supermarkets etc to deliver a full range of library digital services. There would be a rebranding and marketing of the new library offer, and the development of 'premium' (charged) library services.</p> <p>Some of the proposals will require capital investment and there would be some staff redundancies. Whilst these proposals are unlikely to deliver the same level of saving and certainly not in 2015/16 there would be less risk of opposition to the proposals and potential legal action. Carillion are also less likely to wish to exit the contracts.</p>	

<p>2. Who are the main people / groups who may be affected by your proposals? For example who are the external/internal customers, communities, partners, stakeholders, the workforce, the elderly, disabled etc.</p>	<p>All library customers, library staff, and partners would be potentially be impacted by these proposals. All protected characteristics would potentially be affected in particular age, disability, race, religion or belief, and sex</p>
<p>3. What data, information, evidence, research, statistics, surveys, and consultation(s) have you considered to undertake this assessment?</p> <p><i>(include the actual data, statistics and evidence based on the different protected characteristics)</i></p>	<p>Age:</p> <p>When adult users (those 16 and over and a sample of 400 persons at each branch) were surveyed for a Public Library Users Survey (PLUS) in the Autumn of 2012 the largest user groups of all Harrow libraries were those aged 65 and over at 22.3% and those aged 35-44 at 19.5%.</p> <p>The breakdown of active users of all libraries was as follows: 0-4 year old = 14%, 5-11 year old = 21%, 12-17 year old = 11%, 18-35 year old = 19%, 36-59 year old = 22%, 60+ = 13%</p> <p>The Home Library Service provides a library service to approximately 500 individuals and approximately 50 sheltered/nursing homes. Approximately 99% of these users are aged 60+</p> <p>The Schools Library Service is a service for primary and secondary schools that the schools decide whether or not to buy into. Currently 28 primary schools, 3 special schools, and 2 Children's Centres subscribe.</p> <p>Frontline staffing – 16-24 year old = 19%, 25-34 year old = 14%, 35-44 year old = 15%, 45-54 year old = 16%, 55-64 year old = 34%, 65-74 year old = 1%</p> <p>Disability:</p> <p>According to the PLUS survey 1.5% of library users who were over 16 were registered as disabled or long term sick.</p> <p>The breakdown of active users of the libraries was as follows: Mobility disability = 8%, Hearing disability = 5%, Mental Health Problem = 3%, Dexterity Disability = 2%, Eyesight Disability = 2, Learning Disability = 1%, Other Disability = 2%</p> <p>Frontline staffing – 3% have a disability.</p> <p>Race:</p> <p>According to the PLUS survey 33.4% of library users over 16 were</p>

English/Welsh/Scottish/Northern Irish/British, 25.9% of users were Indian, 8.1% Any other Asian Background, 2.8% African, and 1.8% Caribbean.

The breakdown of active users of the libraries was as follows: Asian or Asian British – Indian = 32%, White British = 17%, Asian or Asian British – Other Asian = 17%, White Other = 9%, Black or Black British – African = 6%

Frontline staffing – White British = 54%, Asian or Asian British – Indian = 34%, Asian or Asian British – Other Asian = 5%, Black or Black British – Caribbean = 3%, Mixed – Other Mixed Group = 3%

Religion and Belief:

According to the PLUS survey the largest group of library users over 16 were Christian 29%, Hindu 24%, Muslim 7%, and Jewish 5%

The breakdown of active users of library users was as follows: Hindu 24%, Christian 23%, Muslim 7%, and Jewish 2%

Frontline staffing – no data currently available.

Sex/Gender

According to the PLUS survey of library users aged over 16+ 57% were female, and 36% male.

The breakdown of active users of all library users was as follows: Female = 57%, Males = 40%

Frontline staffing – 78% are female, and 22% are male

Sexual Orientation

According to the PLUS survey of library users 64% of users aged 16+ were heterosexual/straight, 0.6% were bisexual, and 0.4% were gay/lesbian.

The breakdown of active users of all library users was as follows: Heterosexual = 94%, Bisexual = 4%, Gay/Lesbian = 1%

Frontline staffing – no data currently available.

	<p>Socio Economic</p> <p>According to the PLUS survey 35% of library users aged 16+ were in employment, 25% were retired, 10% were looking after the home or family, 6% were students, and 6% were unemployed.</p> <p>Data for the following protected characteristics is currently not available: Gender Reassignment, Marriage/Civic Partnership, and Pregnancy and Maternity.</p>
4. Could your proposals disproportionately affect more people of one group (disabled, minority ethnic groups etc) than another?	

5. A - Assessment Relevance

How relevant are your proposals to each protected characteristic?

Example: Reviewing the criteria of freedom passes will be of 'High' relevance for Age and Disability and of 'Low' relevance to the other protected characteristics.

B - Assessment of potential impact

When you consider the impact on people in relation to each protected characteristic, it should be defined as positive, neutral or negative:

- **Positive:** where the impact is expected to have a particular benefit for this protected characteristic or improve equality of opportunity and / or foster good relations.
- **Neutral:** where there will be a neutral impact, neither positive nor negative
- **Negative:** where there is a risk that impact could disadvantage one or more of the people described in relation to a protected characteristic. This disadvantage may be differential, where the negative impact on one particular group of individuals or protected characteristic is likely to be greater than on another.

C - Assessing Negative impact – what are the risks?

When you have considered the likelihood and impact on people in relation to the protected characteristics, use the tables and matrix below and enter a score against each protected characteristic in the end column C.

Unlawful discrimination	5	Certain to occur	5	LIKELIHOOD	5	5	10	15	20	25
Disproportionate disadvantage	4	Very likely to occur	4		4	4	8	12	16	20
Moderate disadvantage	3	Likely to occur	3		3	3	6	9	12	15
Minor adjustments required	2	Possible to occur	2		2	2	4	6	8	10
Minimal considerations necessary	1	Very unlikely to occur	1		1	1	2	3	4	5
SEVERITY OF IMPACT		LIKELIHOOD			0	1	2	3	4	5
					IMPACT					

Calculating the score - Severity of Impact X Likelihood = Score

Protected Characteristic	A Relevance	B Impact	Describe the impact(s) (negative or positive) your proposals may have on this protected characteristic	Reason for the Assessment of Potential Impact (What evidence, data, and information did you use to assess this?)	C Assessing Negative Impact Score
	Low/ Medium/ High	Positive/ Negative/ Neutral			
Age (including carers of young/older people)	High	Negative	<p>These proposals are likely to have a negative impact on customers of all ages but in particular older people and children, with the reduction in the number of libraries and library services (in particular the Home Library Service for older people), likely to reduce access to library services.</p> <p>The reduction in library staffing is also likely to impact older staff in particular,</p>	<p>The breakdown of library users detailed above shows that the largest category of library users are older people, and the vast majority of the users of the Home Library Service are aged 60+. The next highest age group is children aged 5-11 years old.</p> <p>The breakdown of library staffing shows that the highest age group is those aged 55-64.</p>	20
Disability (including carers of disabled people)	High	Negative	<p>The reduction in library services proposed, in particular the removal of the Home Library Service, is likely to have a negative impact on customers with a disability as it could reduce access to the service for people of this characteristic (e.g. increased distances to travel to remaining library facilities)..</p>	<p>In the breakdown of active users 23% of library users said that they had some form of disability. Approximately 5% of the Home Library Service users have a disability.</p>	16
Gender	Low	Neutral	<p>Neither positive or negative for customers or staff.</p>	<p>The remaining library provision will have a range of stock for people of all genders</p>	2

Reassignment					
Marriage and Civil Partnership	Low	Neutral	Neither positive or negative for customers or staff.	The remaining library provision will provide access to a wide range of stock	1
Pregnancy and Maternity	Medium	Negative	These proposals may have a negative impact on this protected characteristic as access to library facilities may be impacted – greater distance to travel to a library and no Home Library Service available. Neutral impact on current library staffing.	The remaining library provision will be DDA compliant. No library staff currently has this protected characteristic.	6
Race	Medium	Negative	These proposals could have a negative impact on particular races. The closure of libraries could have a particular impact on particular races that have a high representation in that particular area in terms of access to library services.. The reduction in library staffing is likely to impact staff who are classified as White British or Asian or Asian British – Indian in particular.	The breakdown of library users shows that White British and Indian are the largest racial groups. This is the same for the breakdown of library staff.	6
Religion or Belief	Low	Neutral	Neither positive or negative for customers	The remaining library provision will provide access to a wide range of stock.	4
Sex	High	Negative	The reduction in library services proposed has the potential to negatively impact on service access for female customers, and the reduction in staffing could also negatively impact on female staff in particular.	The breakdown of library users above shows that the highest proportion of library users are female, and there is a very high percentage of female staff.	16
Sexual orientation	Low	Neutral	Neither positive or negative for customers or staff.	The remaining library provision will provide access to a wide range of stock	2

Summary and Recommendations (this section must be included in the project proposal reports for the Commissioning Panel)

Summary / Conclusion of assessment: (include the key findings and equality implications.	The breakdown of library users and library staff shown that these proposals involving the reduction in library provision have the potential to have a negative impact on a number of protected characteristics in particular age, disability, and sex. The highest group of library users are older people and library staff aged 55-64 is the highest age group. The cessation of the Home Library Service will in particular impact older people. There are more female library users than male, and library staffing is predominately female.
------------------------------------------------------------------------------------------	--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

	23% of active library users said that they had some form of disability of which 8% had a mobility disability. The likelihood that users will need to travel further to use a library could impact negatively on this group in particular, especially with the removal of the Home Library Service.
Do you think that your proposals will have a cumulative effect upon a particular protected group in light of other council proposals that you are aware of? If yes, please explain the cumulative impact and on which groups.	The review of adult transport provision could impact on the ability of vulnerable people (older people and people with a disability) to access a library facility as library users are likely to have to travel a greater distance to visit a library.

Signature - Lead Officer		Date	08/09/14
--------------------------	--	------	----------