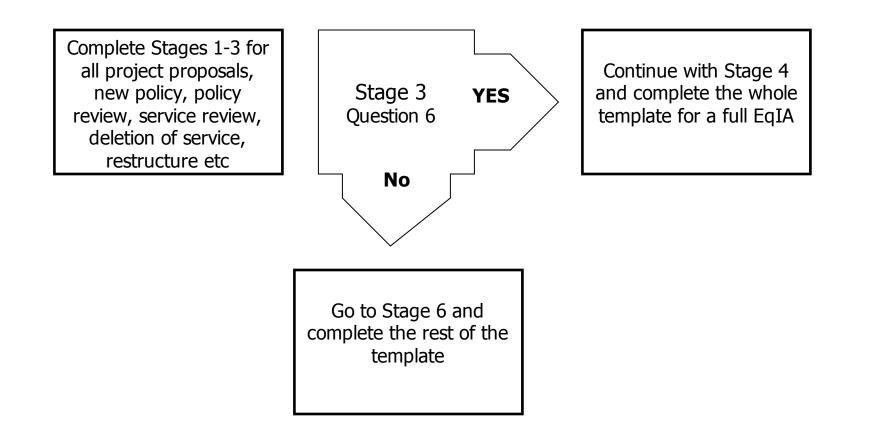
# Appendix 1 - Equality Impact Assessment



# 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.

	inplace with Guidance Notes to assist you in completing the Equation						
Type of Project / Proposal:	Tick ✓	Type of Decision:	Tick ✓				
Transformation		Cabinet	$\checkmark$				
Capital		Portfolio Holder					
Service Plan		Corporate Strategic Board	✓				
Other	✓	Other					
Title of Project:	Procureme	ent of Mobility Assessments Contractor					
Directorate / Service responsible:	Resources	/ Collections and Benefits					
Name and job title of lead officer:	Fern Silver	io – Project Manager					
Name & contact details of the other persons involved in the assessment:	Fern Silver	io – Head of Service					
Date of assessment:	8 <sup>th</sup> July 2015						
Stage 1: Overview							
<ol> <li>What are you trying to do?</li> <li>(Explain proposals e.g. introduction of a new service or policy, policy review, changing criteria, reduction / removal of service, restructure, deletion of posts etc)</li> </ol>	third party transport procureme	ary objective of the procurement is to secure the seamles y support from 15 <sup>th</sup> May 2016 when the existing contract assessments with Access Independent is scheduled to ent requires a Service Provider to carry out face to face assessments for Blue Badge, Freedom Pass and Taxi (	t for mobility o end. The and desktop				

	Residents / Service Users	~	Partners	~	Stakeholders	~
	Staff	✓	Age	✓	Disability	✓
<b>2.</b> Who are the main people / Protected Characteristics that may be affected by your proposals? ( $\checkmark$ all that apply)	Gender Reassignment	~	Marriage and Civil Partnership	~	Pregnancy and Maternity	~
	Race	✓	Religion or Belief	✓	Sex	✓
	Sexual Orientation	>	Other	✓		
<ul> <li>3. Is the responsibility shared with another directorate, authority or organisation? If so:</li> <li>Who are the partners?</li> <li>Who has the overall responsibility?</li> <li>How have they been involved in the assessment?</li> </ul>	The responsibility for a	conce	essessments is a not share essionary transport eligib h the Corporate Direc	ility	assessments rest	

### 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)

Gender Reassignment	There is no data included for this characteristic
Marriage / Civil Partnership	There is no data included for this characteristic
Pregnancy and Maternity	There is no data included for this characteristic

# Table 1: Ethnic group by sex, Harrow, 2011 Source: 2011 Census, Table DC2101EW, Office for National Statistics, Crown Copyright

Race

<b>F</b> # 1 <b>A</b>	All persons	Mal	es	Fema	ales
Ethnic Group	Number	Number	%	Number	%
All Residents	239.056	118,023	49.4	121.033	50.6
White: Total	100,991	50,104	49.6	50,887	50.4
White: English/Welsh/Scottish/Northern Irish/British	73,826	37,039	50.2	36,787	49.8
White: Irish	7,336	3,537	48.2	3,799	51.8
White: Gypsy or Irish Traveller	181	84	46.4	97	53.6
White: Other White	19,648	9,444	48.1	10,204	51.9
Mixed/multiple ethnic group: Total	9,499	4,749	50.0	4,750	50.0
Mixed/multiple ethnic group: White and Black Caribbean	2,344	1,130	48.2	1,214	51.8
Mixed/multiple ethnic group: White and Black African	1.053	533	50.6	520	49.4
Mixed/multiple ethnic group: White and Asian	3,417	1,739	50.9	1,678	49.1
Mixed/multiple ethnic group: Other Mixed	2,685	1,347	50.2	1.338	49.8
Asian/Asian British: Total	101,808	50,418	49.5	51,390	50.5
Asian/Asian British: Indian	63,051	30,852	48.9	32,199	51.1
Asian/Asian British: Pakistani	7,797	4,092	52.5	3,705	47.5
Asian/Asian British: Bangladeshi	1,378	684	49.6	694	50.4
Asian/Asian British: Chinese	2,629	1,226	46.6	1,403	53.4
Asian/Asian British: Other Asian	26,953	13,564	50.3	13,389	49.7
Black/African/Caribbean/Black British: Total	19,708	9,097	46.2	10,611	53.8
Black/African/Caribbean/Black British: African	8,526	3,840	45.0	4,686	55.0
Black/African/Caribbean/Black British: Caribbean	6,812	3,012	44.2	3,800	55.8
Black/African/Caribbean/Black British: Other Black	4,370	2,245	51.4	2,125	48.6
Other ethnic group: Total	7,050	3,655	51.8	3,395	48.2
Other ethnic group: Arab	3,708	1,989	53.6	1,719	46.4
Other ethnic group: Any other ethnic group	3,342	1,666	49.9	1,676	50.1

	<ul> <li>Christianity is Harrow's most common religion with 37.3 per cent (89,181) of followers</li> </ul>
	<ul> <li>71 per cent of Harrow's Christian population are of White ethnicity, comprised of the following groups: 67.6 per cent White British; 10.2 per cent White Irish; 0.2 per cent Gypsy/Irish Traveller; and 22 per cent White Other</li> </ul>
	<ul> <li>14.1 per cent (12,538 people) of Harrow's Christian group is comprised of residents of Black/Black British origin, the second highest broad ethnic group</li> </ul>
	<ul> <li>Hindus form Harrow's second largest religious group and is the country's largest Hindu community with 60,407 residents. 97 per cent of Hindus are of Asian/Asian British origin.</li> </ul>
	<ul> <li>Harrow's Muslim community is one of the borough's most ethnically diverse groups, originating from a number of different backgrounds. Nearly two-thirds (61.4%) are of Asian/Asian British origin; 14.1 per cent are Black/Black British; 13.4 per cent are from Other Groups (mainly Arab); 7 per cent are from White groups; and 4.1 per cent are from Mixed/Multiple ethnic groups.</li> </ul>
Religion and Belief	<ul> <li>95 per cent of Harrow's Jewish community come from the White ethnic groups</li> </ul>
	<ul> <li>86 per cent of Harrow's Sikh residents are Asian/Asian British, a similar level to the borough's Buddhist community, at 87 per cent</li> </ul>
	<ul> <li>Harrow is ranked first nationally for people with Other Religions, with 5,945 people. 99 per cent of people who follow other religions in Harrow are Asian/Asian British, which is borne out by the fact that Jainism is the most practised religion in Harrow of these Other Religions.</li> </ul>
	<ul> <li>22,871 people in Harrow (9.6%) stated that they have no religion. 71 per cent of those with no religion are of White ethnicity; and nearly nine per cent are of Mixed race.</li> </ul>
	<ul> <li>The 2011 Census question on religion was a voluntary question and 14,781 residents (6.2%) didn't answer this question. Over half (53.4%) who chose not to answer this question were of White ethnicity and 29 per cent were Asian/Asian British.</li> </ul>
	<ul> <li>50.6 per cent of Harrow's residents are females: 49.4 per cent are males.</li> </ul>
Sex / Gender	<ul> <li>There is some variation by ethnic group with a higher proportion of males of: Pakistani ethnicity (52.5%) Arab ethnicity (53.6%); and Other Black ethnicity (51.4%).</li> </ul>
	<ul> <li>There are higher proportions of females who are: Black-Caribbean origin (55.8%); Black- African ethnicity (55%); Chinese (53.4%); and Gypsy or Irish Travellers (53.6%). The latter is Harrow's smallest minority ethnic group with just 181 residents in total.</li> </ul>
Sexual Orientation	There is no data included for this characteristic

Socio Economic	<ul> <li>(higher many above both to cent. Nearly this category)</li> <li>Harrow's large professional the national This is also to In percentage men and wo increased by recorded in to level of 2 pe</li> <li>For men the worked, with 2,720</li> <li>For women to</li> </ul>	gest NS-SeC category is 2 (lower managerial, administrative and occupations) with 21.3 per cent (37,270) of residents, similar to level of 20.8 per cent, but below London's level of 23.1 per cent. the largest category for England & Wales, as well as for London. ge terms the biggest change over the decade, for Harrow (for both men), was in the category long-term unemployed, which / 132 per cent, from 1,265 to 2,940. 1.7 per cent of residents were this category, the same as the national level, but below London's r cent. re was a significant increase in the number who have never an 88 per cent increase over the decade, rising from 1,445 to the increase in the number of small employers and own account 6-SeC 4) was notable, with numbers increasing from 2,700 to
<b>5.</b> What other (local, regional, nation media) data sources that you have assessment?		Harrow Equalities Centre website (harrowequalitiescentre.org.uk) indicates that Harrow is made up of people from at least 137 different countries and, based upon the seven religions listed in the standard tables from the census, has the highest level of religious diversity of any local authority in England and Wales.
List the Title of reports / documents an	d websites here.	Based upon the 2011 census, Harrow has a population of 239,100 residents. Additionally, the following are of note:
		Of the resident population, 49.4% are male and 50.6% are female, 14.1% of the population are over the age of 65 compared to 11.1% for London generally.

<ul> <li>53.7% of couples are married compared to a national average of 46.6% and accordingly ranks Harrow Council highest in London for married couples. In contrast, Harrow is ranked last in London for single people never married or registered in a same-sex civil partnership; 31st for people living in a registered same-sex civil partnership; 31st for separated; last for divorced or formerly in a same-sex civil partnership which is now legally dissolved and last for cohabiting couples.</li> <li>30.9% of Harrow's residents are White British, ranking Harrow fourth lowest nationally. The GLA's 2011 Census Ethnic Diversity Indices show that Harrow is ranked 7<sup>th</sup> nationally for ethnic diversity (based on the 18 ethnic group classification), with a score of 5.27. Diversity indices measure the number of different/distinct groups present in the population and the sizes of these distinct groups relative to each other.</li> </ul>
Harrow's Indian group is the borough's largest minority ethnic group, with a population of 63,050 (26.4%), ranking Harrow 2 <sup>nd</sup> nationally, after Leicester. The Harrow Equality in Employment Monitoring Report 2012/13 has been used to obtain data about the organisational composition. Current employee data records for the Collections and Benefits teams have also been used.

#### The 2011 Census

- In Harrow 14.1% of residents (33,600) were aged 65 and over in 2011, compared to 14.5% (29,929) in 2001. In 2011, within England 16.3% of people were aged 65 and over, compared to 11.1% in London and 12.7% in Outer London.
- The number of residents aged 80 and over in Harrow is estimated to be 9,500 in 2011, 4% of residents. This compares to 8,544 residents in 2001, 4.1% of residents. Corresponding rates in 2011 for England, London and Outer London are 4.6%, 3.1% and 3.7% respectively.

A growing older population is an important fact as mobility assessments generally are carried out to assess our older residents as well as those with physical mobilities.

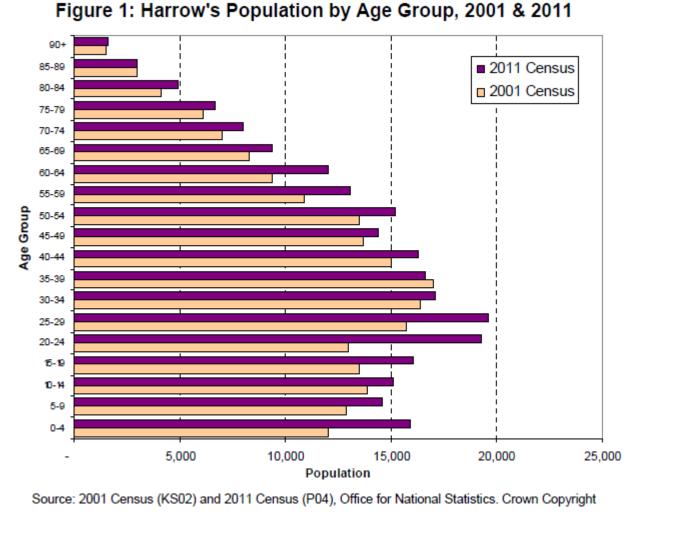


Figure 1: Harrow's Population by Age Group, 2001 & 2011

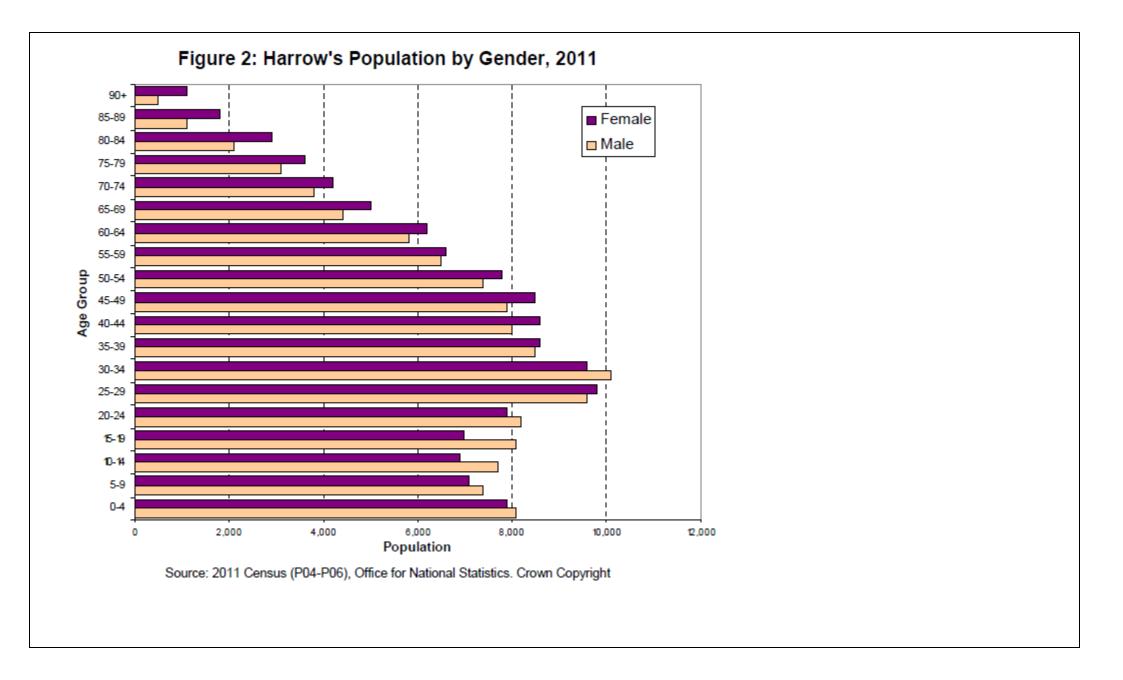


 Table 2: Ethnic group by age, Harrow, 2011

 Source: 2011 Census, Table DC2101EW, Office for National Statistics, Crown Copyright

5.4.1.0		Age 0	to 4	Age 5	to 15	Age 16 to 64		Age 65 a	nd over
Ethnic Group	All Persons	Number	%	Number	%	Number	%	Number	%
All categories: Ethnic group	239,056	15,916	6.7	32,142	13.4	157,331	65.8	33,667	14.1
White: Total	100,991	4,628	4.6	9,931	9.8	63,894	63.3	22,538	22.3
White: English/Welsh/Scottish/Northern Irish/British	73,826	2,925	4.0	7,551	10.2	44,189	59.9	19,161	26.0
White: Irish	7,336	200	2.7	499	6.8	4,700	64.1	1,937	26.4
White: Gypsy or Irish Traveller	181	17	9.4	60	33.1	97	53.6	7	3.9
White: Other White	19,648	1,486	7.6	1,821	9.3	14,908	75.9	1,433	7.3
Mixed/multiple ethnic group: Total	9,499	1,759	18.5	2,933	30.9	4,488	47.2	319	3.4
Mixed/multiple ethnic group: White and Black Caribbean	2,344	348	14.8	784	33.4	1,142	48.7	70	3.0
Mixed/multiple ethnic group: White and Black African	1,053	148	14.1	291	27.6	593	56.3	21	2.0
Mixed/multiple ethnic group: White and Asian	3,417	723	21.2	1,122	32.8	1,452	42.5	120	3.5
Mixed/multiple ethnic group: Other Mixed	2,685	540	20.1	736	27.4	1,301	48.5	108	4.0
Asian/Asian British: Total	101,808	7,134	7.0	13,652	13.4	71,817	70.5	9,205	9.0
Asian/Asian British: Indian	63,051	3,691	5.9	6,918	11.0	45,670	72.4	6,772	10.7
Asian/Asian British: Pakistani	7,797	744	9.5	1,350	17.3	5,184	66.5	519	6.7
Asian/Asian British: Bangladeshi	1,378	100	7.3	242	17.6	931	67.6	105	7.6
Asian/Asian British: Chinese	2,629	97	3.7	256	9.7	1,984	75.5	292	11.1
Asian/Asian British: Other Asian	26,953	2,502	9.3	4,886	18.1	18,048	67.0	1,517	5.6
Black/African/Caribbean/Black British: Total	19,708	1,730	8.8	4,119	20.9	12,628	64.1	1,231	6.2
Black/African/Caribbean/Black British: African	8,526	821	9.6	1,904	22.3	5,498	64.5	303	3.6
Black/African/Caribbean/Black British: Caribbean	6,812	337	4.9	896	13.2	4,750	69.7	829	12.2
Black/African/Caribbean/Black British: Other Black	4,370	572	13.1	1,319	30.2	2,380	54.5	99	2.3
Other ethnic group: Total	7,050	665	9.4	1,507	21.4	4,504	63.9	374	5.3
Other ethnic group: Arab	3,708	460	12.4	947	25.5	2,198	59.3	103	2.8
Other ethnic group: Any other ethnic group	3,342	205	6.1	560	16.8	2,306	69.0	271	8.1

Table 5: Bad or Very Bad health by ethnic group by sex by age, Harrow, 2011 Source: 2011 Census, Table DC3201EW, Office for National Statistics, Crown Copyright

Ethnic Group	All people with bad or very bad	~	to 15	Age 16	to 49	Age 50	to 64	Age 65 and over	
Canno Group	health	Number	%	Number	%	Number	%	Number	%
All categories: Ethnic group	10,927	330	3.0	2,623	24.0	2,772	25.4	5,202	47.6
White	5,350	102	1.9	1,092	20.4	1,230	23.0	2,926	54.7
Mixed/multiple ethnic group	226	30	13.3	113	50.0	42	18.6	41	18.1
Aslan/Aslan British	4,259	123	2.9	954	22.4	1,234	29.0	1,948	45.7
Black/African/Caribbean/Black British	685	54	7.9	278	40.6	152	22.2	201	29.3
Other ethnic group	407	21	5.2	186	45.7	114	28.0	86	21.1

#### Table 6: Limiting long-term health where day to day activities are limited a lot, by ethnic group by sex by age, Harrow, 2011 Source: 2011 Census, Table DC3201EW, Office for National Statistics, Crown Copyright

Ethnic Group	All residents whose day-to-	Age 0	Age 0 to 15		to 49	Age 50	to 64	Age 65 and over	
Lunic Group	day activities limited a lot	Number	%	Number	%	Number	%	Number	%
All categories: Ethnic group	16,167	655	4.1	3,343	20.7	3,445	21.3	8,724	54.0
White	8,557	221	2.6	1,460	17.1	1,536	18.0	5,340	62.4
Mixed/multiple ethnic group	330	77	23.3	137	41.5	45	13.6	71	21.5
Aslan/Aslan British	5,819	229	3.9	1,191	20.5	1,539	26.4	2,860	49.1
Black/African/Carlbbean/Black British	974	81	8.3	372	38.2	193	19.8	328	33.7
Other ethnic group	487	47	9.7	183	37.6	132	27.1	125	25.7

- 16,187 (6.8%) people in Harrow have a limiting long-term illness/health problem or disability that affects their day-to-day activities a lot.
- Limiting long-term illness (LLTI) generally affects older people to a greater extent and overall 54 per cent (8,724) of residents aged 65 and over have a LLTI that limits their activities a lot (Table 6). The next largest group greatly affected by LLTI is the working age group (age 16 to 64). 42 per cent (6,788) residents with a LLTI, that limits day-to-day activities a lot, are of working age. Just 4.1 per cent (655) of the 16,167 residents with a severely limiting LLTI are aged 15 and under.
- In the White group LLTI, which limits activities a lot, increases with age and 62.4 per cent
  of all White residents with a very limiting LLTI are aged 65 and over. In the Mixed race
  group the highest percentages of people with a very limiting LLTI are aged 16 to 49, at
  41.5 per cent. Similarly in the Black/Black British and Other ethnic groups there are more
  people aged 16 to 49 with a LLTI, at 38.2 per cent and 37.6 per cent respectively.
- Overall only 4.1 per cent (655) of people with a severely limiting LLTI are children aged 15 and under, but in the Mixed/multiple ethnic group category this proportion is much higher, at 23.3 per cent

#### Bad or Very Bad Health

 Bad or very bad health affects older people more (Table 5). Of those with bad or very bad health 47.6 per cent of sufferers (5,202) are residents aged 65 and over. 54.7 per cent (2,926) of residents from the White group (with bad or very bad health) are aged 65 and over, whilst the lowest rate, at only 18.1 per cent, is for residents from the Mixed/multiple ethnic group.

- Overall, 49 per cent (5,350) of all residents in bad/very bad health are from the White groups; 2 per cent (226) are of Mixed race; 39 per cent (4,259) are Asian/Asian British; 6.3 per cent (685) are Black/Black British; and 3.7 per cent (407) are from Other ethnic groups.
- 3 per cent of children (330) aged 15 and under were reported to be in poor health in the 2011 Census. The Mixed race group had the highest level, at 13.3 per cent (30), followed by the Black/Black British group at 7.9 per cent (54).

Table 6: Limiting long-term health where day to day activities are limited a lot, by ethnic group by sex by age, Harrow, 2011 Source: 2011 Census, Table DC3201EW, Office for National Statistics, Crown Copyright

Ethnic Group	All residents whose day-to-	Age 0	to 15	Age 16	to 49	Age 50	to 64	Age 65 and over	
Lunic Group	day activities limited a lot	Number	%	Number	%	Number	%	Number	%
All categories: Ethnic group	16,167	655	4.1	3,343	20.7	3,445	21.3	8,724	54.0
White	8,557	221	2.6	1,460	17.1	1,536	18.0	5,340	62.4
Mixed/multiple ethnic group	330	77	23.3	137	41.5	45	13.6	71	21.5
Asian/Asian British	5,819	229	3.9	1,191	20.5	1,539	26.4	2,860	49.1
Black/African/Caribbean/Black British	974	81	8.3	372	38.2	193	19.8	328	33.7
Other ethnic group	487	47	9.7	183	37.6	132	27.1	125	25.7

- 16,187 (6.8%) people in Harrow have a limiting long-term illness/health problem or disability that affects their day-to-day activities a lot.
- Limiting long-term illness (LLTI) generally affects older people to a greater extent and overall 54 per cent (8,724) of residents aged 65 and over have a LLTI that limits their activities a lot (Table 6). The next largest group greatly affected by LLTI is the working age group (age 16 to 64). 42 per cent (6,788) residents with a LLTI, that limits day-to-day activities a lot, are of working age. Just 4.1 per cent (655) of the 16,167 residents with a severely limiting LLTI are aged 15 and under.
- In the White group LLTI, which limits activities a lot, increases with age and 62.4 per cent of all White residents with a very limiting LLTI are aged 65 and over. In the Mixed race group the highest percentages of people with a very limiting LLTI are aged 16 to 49, at 41.5 per cent. Similarly in the Black/Black British and Other ethnic groups there are more people aged 16 to 49 with a LLTI, at 38.2 per cent and 37.6 per cent respectively.
- Overall only 4.1 per cent (655) of people with a severely limiting LLTI are children aged 15 and under, but in the Mixed/multiple ethnic group category this proportion is much higher, at 23.3 per cent

## Stage 3: Assessing Potential Disproportionate Impact

**6.** 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	✓	✓	$\checkmark$	✓	✓	✓	✓	✓	✓

**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	
7. What additional data / evidence have you considered to	Census data for Harrow has been used to inform the service of who our clients
further assess the potential disproportionate impact of your proposals? (include this evidence, including any data, statistics, titles of documents and website links here)	

8. 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).
Staff dealing with concessionary travel were consulted regarding the proposals to procure a contractor for mobility assessments and also of the proposal to externalise the automatic assessments currently carried out in-house. This document was also shared with Trade Union representatives from GMB and Unison and revisions made with due regard to representations and comments received.	used. Responses were given to written, verbal and electronic questions received as part of the	The posts being used to fund the support are all currently vacant. Consequently, there is no anticipated impact on a protected characteristic or group.	The contract specification was revised to take account of comments and suggestions received.

Stage 5: Ass	Stage 5: Assessing Impact and Analysis							
9. What does	your evidence	e tell you abo	out the impact on different groups? Consider whether	the evidence shows potential for differential impact,				
if so state whet	ther this is ar	adverse or	positive impact? How likely is this to happen? How you	u 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)			There are currently 6 employees within Access Harrow who carry out concessionary Travel tasks. There is however no anticipated impact from this procurement on employees as there are other generic posts used to fund the service which are currently vacant and have been for some time. There is no anticipated impact on customers as the procurement for a mobility assessments contractor will stipulate that where face to face mobility assessments need to take place, those assessments will continue to be delivered at Civic 1 Offices , the process therefore continuing as is.					

Disability (including carers of disabled people)	There is no anticipated impact from the procurement on employees as the posts used fund the service are currently vacant and have been for some time. There is no anticipate impact on customers as the procurement is f "back office" support and mirrors the existing "back office" service.	o e d or
Gender Reassignment	There is no gender reassignment data held with the Council records although it is anticipated th there will not be any adverse impact arising fro the proposals concerning this protecte characteristic.	n
Marriage and Civil Partnership	There is insufficient information held from which determine any potential impact although it anticipated that there will not be any advers impact arising from the proposals concerning th protected characteristic.	s e
Pregnancy and Maternity	There is no anticipated impact from the procurement on employees as the posts used fund the service are currently vacant. There is no anticipated impact on customers.	0
Race	There is currently x% of the staff working concessionary travel team and x% of the team within a BAME grouping	n s

Religion or Belief	it is anticipated that there will not be any adverse impact arising from the proposals concerning this protected characteristic.	
Sex	within the there is currently x% of staff are female. There is however no anticipated impact from this procurement on employees as the posts used to fund the service are currently vacant service.	

Sexual orientation	There is insufficient information c from which to determine any although it is anticipated that there adverse impact arising from concerning this protected character	potential impact e will not be any						
<b>10. Cumulative Impact</b> – Considering	Yes		No	$\checkmark$				
impact on a particular Protected Charac	Council and Harrow as a whole, could your proposals have a cumulative impact on a particular Protected Characteristic?			Across the organisation, the impact of cost reductions is likely to				
	lead to further reductions in the number of posts. However, as this							
If yes, which Protected Characteristics of	procurement is not anticipated to have an impact on a protected							
potential impact?	characteristic for the reasons outlined within this assessment, it is							
	unlikely that there will be a cumulative impact arising from other proposals that may be considered.							
		proposais that h	ay be considered	u.				

<b>10a.</b> Any Other Impact – Considering what else is happening within the	Yes		No	$\checkmark$			
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?	It is anticipated under this propo		e no other impact	on individuals			
If yes, what is the potential impact and how likely is to happen?							
<b>11.</b> 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							
There is no current evidence or concern to suggest that a potential adverse impact will arise from this procurement. Third Party Support arrangements already exist for the service and the posts being used to fund it are already vacant and have been for some time. There is no							
anticipated impact on customers either as the support is for "back office" se	rvices that replica	te the current ser	vice processes.				
Age Disability Gender Marriage	Pregnancy and	Race Religi	on and Sex	Sexual			

	(including carers)	(including carers)	Reassignment	and Civil Partnership	Maternity		Belief		Orientation
Yes				-					
No	$\checkmark$	$\checkmark$	$\checkmark$	$\checkmark$	$\checkmark$	$\checkmark$	$\checkmark$	$\checkmark$	$\checkmark$
proposal and wh concerned that	nether the disa the proposal m	dvantage is p nay breach the	roportionate to the equality legislat	ne need to me ion or you are	there may be for et these aims. (Y unsure whether t	'ou are enco here is obje	ouraged to seel active justificati	< legal advic on for the p	e, if you are roposal)
	•		· · · · · · · · · · · · · · · · · · ·		age (or potential o				•
justification for t proportionate to				le decision ma	ker for a final dec	cision to be r	made on wheth	her the disad	ivantage is
				not be mitigate	ed, you should no	t proceed w	ith the propos	al. (select	outcome 4)
			·	-	you should not pr	•	· · ·	-	-
Stage 6: Deci									
12. Please indic	ate which of th	ne following st	tatements best d	escribes the ou	utcome of your Ec	JIA ( ✓ tick	one box only)		
Outcome 1 – N all opportunities				d any potentia	I for unlawful cond	duct or disp	roportionate im	pact and	✓
Outcome 2 – M	linor adjustmer	its to remove	/ mitigate advers		vance equality ha	ive been ide	entified by the E	qlA. <i>List</i>	
			this in the Improv						
					r adverse impact				
					should be in line er whether there			•	
			impact. (Explain						
					impact or disadva	•	•		
<b>U I N</b>	groups. (You are encouraged to seek Legal Advice about the potential for unlawful conduct under equalities legislation)								
	12a. If your EqIA is assessed as outcome 3 or you have								
	ticked 'yes' in Q11, explain your justification with full reasoning to continue with your proposals.								
reasoning to col		r proposals.							

# Stage 7: Improvement Action Plan

**13**. 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	Action required to mitigate	this is a Per	vill you know chieved? E.g. formance ure / Target	Target Date	Lead Officer	Date Action included in Service / Team Plan
There are no anticipated adverse impacts arising from this proposal.	Review impact of proposals within six months of the implementation date.		pletion of the undertaken.	1 <sup>st</sup> May 2016	Fern Silverio	To be confirmed
measures are in place to	oposals may only be known after they ha assess the impact. r the impact of the proposals once they ha		Monitoring wi	ll be undertaken by t	the Reve	nues and Benefits
been implemented? Wha ensure effective monitori	t monitoring measures need to be introduced in the proposals once they have a monitoring measures need to be introduced in the proposals? How often will you a provement Action Plan at Stage 7)	do	of Service – Co monitoring ar	eam with overall respon ollections and Benefits. rangements will be den nplementation.	The timing	gs and frequency of
<b>15.</b> How will the results of any monitoring be analysed, reported and publicised? (Also Include in Improvement Action Plan at Stage 7)			It is anticipated that the results of any monitoring will be analyse reported and publicised within the department in the many determined and agreed as appropriate.			
<b>16.</b> Have you received a	ny complaints or compliments about the			nts were received rega ed and responded to wit	-	· ·

# Stage 9: Public Sector Equality Duty

**17.** 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 2010Advance equality of opportunity between people from different groupsFoster good relations between people fro different groups								
The Service Provider will be required to comply with the Public Sector Equality Duty as set out within the contract documents and in accordance with the provisions of their method statement submission concerning "Social Value".								

Stage 10 - Organisational sign Off (to be completed by Chair of Departmental Equalities Task Group)					
The completed EqIA needs to be sent to	o the chair of your Departmenta	al Equalities Task Group (DETG)	to be signed off.		
<b>18</b> . Which group or committee considered, EqIA Quality and Assurance reviewed and agreed the EqIA and the Improvement Action Plan?					
Signed: (Lead officer completing EqIA)	Fern Silverio	Signed: (Chair of DETG)	Alex Dewsnap		
Date:	1 <sup>st</sup> September 2015	Date:			
Date EqIA presented at the EqIA Quality Assurance Group		Signature of ETG Chair			