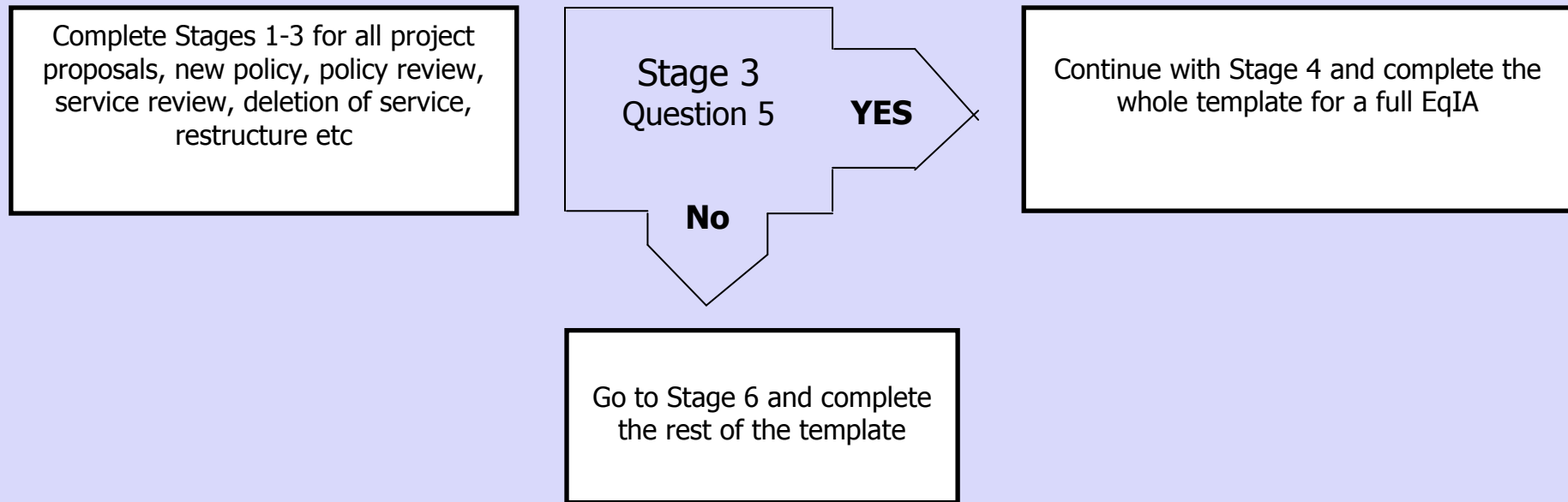


# Equality Impact Assessment Template

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



- In order to complete this assessment, it is important that you have read the Corporate Guidelines on EqIAs and preferably completed the EqIA E-learning Module.
- You are also encouraged to refer to the EqIA Template with Guidance Notes to assist you in completing this template.
- **SIGN OFF:** All EqIAs need to be signed off by your Directorate Equality Task Groups. EqIAs relating to Cabinet Reports need to be submitted to the EqIA Quality Assurance Group at least one month before your Cabinet Report date. This group meets on the first Monday of each month.
- Legal will NOT accept any reports without a fully completed, Quality Assured and signed off EqIA.

The EqIA Guidance, Template and sign off process is available on the Hub under Equality and Diversity

# Equality Impact Assessment (EqIA) Template

<b>Type of Decision: Tick ✓</b>	✓	Cabinet		Portfolio Holder		Other (explain)	
Date decision to be taken:							
Value of savings to be made (if applicable):	£8.096m						
Title of Project:	Infinity Project (MCeP, OCeP, TCeP)						
Reference:	PA_26, 27, 29						
Directorate / Service responsible:	Adult Social Care						
Name and job title of Lead Officer:	Chris Greenway ext: 2043						
Name & contact details of the other persons involved in the assessment:	Rachel Dickinson ext: 2359						
Date of assessment (including review dates):	August 2015						

## Stage 1: Overview

<p><b>1. What are you trying to do?</b></p> <p>(Explain your proposals here e.g. introduction of a new service or policy, policy review, changing criteria, reduction / removal of service, restructure, deletion of posts etc)</p>	<p><b>Brief Description:</b></p> <p>This proposal outlines the recommendation of commercialising of My Community e-Purse (MCeP) and the development of two new products Our Community ePurse and Total Community ePurse.</p> <p>The inception of MCeP stemmed from collaboration between Harrow Council, the Voluntary Sector, Clients, and Carers. The system provides Harrow Council with a platform to assist clients deemed eligible to require support for their identified social care needs to develop their support plans by leveraging services recorded within the directory. Additionally, it facilitates the secure purchasing of services through our payment provider, PayPal, whilst obviating the requirement for clients to have to maintain financial records for up to 7 years.</p> <p>OCeP (Our Community ePurse) is a proposal, which aims to attract income from the large self-funder market existing both nationally and internationally by building on the development of MCeP. Through OCeP, we believe we can offer a solution to the self-funder market, which has an estimated market value of £10.2bn.</p> <p>TCeP (Total Community ePurse) represents our future vision where MCeP and OCeP ultimately evolve into an online tool providing a single point of contact to assess, deliver, and monitor the user's care needs in a holistic manner by encapsulating social care, health and welfare.</p> <p><small>1 The State of Health Care and Adult Social Care in England: Key Themes in Care in 2011/12, Care Quality Commission, London, Stationery Office</small></p>
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	2012 2 People who Pay for Care: Quantitative and Qualitative Analysis of Self-funders in the Social Care Market, Putting People First Social Care Consortium, January 2011 3 Commission on Funding of Care and Support, Fairer Care Funding – The Report of the Commission on Funding of Care and Support. (The Dilnot Report), London: The Stationery Office, 2011.					
<b>2. Who are the main people / Protected Characteristics that may be affected by your proposals? (✓ all that apply)</b>	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			
<b>3. Is the responsibility shared with another directorate, authority or organisation? If so:</b> <ul style="list-style-type: none"> <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 this proposal lies within Adults, with support from legal and procurement when appropriate					

## Stage 2: Evidence & Data Analysis

4. What evidence is available to assess the potential impact of your proposals? 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, press reports, letters from residents and complaints etc. Where possible include data on the nine Protected Characteristics.

(Where you have gaps (data is not available/being collated for any Protected Characteristic), you may need to include this as an action to address in your Improvement Action Plan at Stage 6)

Protected Characteristic	Evidence	Analysis & Impact		
		2014	2015	2020
Age (including carers of young/older people)	POPI & PANSI Data (predicted for 2015-2020)	18-24: 20'000	19'800	18'500
Disability (including carers of disabled people)		25-34: 40'900	41'100	41'300
		35-44: 35'400	36'100	39'700

	Harrow Business Intelligence data	<p>45-54: 32'400      32'500      33'100</p> <p>55-64: 26'300      26'900      29'700</p> <p>65+: 92'000      94'400      103'200</p> <p>Total: 247'900      250'800      265'500</p> <p>Total number of the population aged 65 and over with a limiting long term illness whose day-to-day activities are limited a little will rise from: 8,949 (2014) to 9,736 (2018)</p> <p>Total number of the population aged 65 and over with a limiting long term illness whose day-to-day activities are limited a lot will rise from 8,675 (2014) to 9,503 (2018)</p> <p>The figures above demonstrate the age profile for Harrow between 2014 and 2020. It is expected that all age groups coming into contact with social care will benefit from the proposal.</p> <p>Harrow Business Intelligence has documented the increase in service users over the period of 2014 to 2018, hence demonstrating an increase in demand of service provision. This demand is expected to increase year on year and as such the additional service users to the system will benefit in a positive way from the proposals.</p>
Gender Reassignment	Data not available	N/a
Marriage / Civil Partnership	Data not available	N/a
Pregnancy and Maternity	Data not available	N/a
Race	POPI and PANSI data, based on the 2011 census	Harrow is one of the most diverse Boroughs in London, with the following:

		<p>40.85% aged 18-64 and 66.94% aged 65 and over identifying as 'white' (total: 84108)</p> <p>2.65% aged 18-64 and 0.95% aged 65 and over identifying as 'Mixed/ multiple ethnic group' (total 4309)</p> <p>45.87% aged 18-64 and 27.34% aged 65 and over identifying as 'Asian/Asian British' (total 78350)</p> <p>7.83% aged 18-64 and 3.66% aged 65 and over identifying as Black African Caribbean/ Black British</p> <p>2.80% aged 16-24 and 1.11% aged 65 and over identifying as 'Other ethnic group'</p> <p>The proposal is expected to benefit equally all service users, across different races</p>
Religion and Belief	2011 Census, Borough Profile information	<p>Christianity is Harrow's most common religion with 27.3% (89181) identifying as Christian</p> <p>25.3% (60,407) residents identify as Hindu and is the Country's largest Hindu community.</p> <p>4.4% (10530) identify as Jewish</p> <p>2.5% (5945) stated themselves as 'other' in the 2011 census (Majority of which being Jains (5190))</p> <p>12.5% (29880) identify as Muslim</p> <p>Harrow has the second highest ranking of Zoroastrians.</p>
Sex / Gender	2011 Census, Borough Profile information – POPI PANSI projected figures	<p>Female</p> <p>In 2014: 77600 18-64 Females, and 16'400 65+</p>

		<p>In 2020: 80'400 18-24 Females, and 19'000 65+ Male</p> <p>In 2014: 77'500 18-64 Males, and 19'000 65+</p> <p>In 2020: 81'800 18-4 Males and 22'400 65+</p> <p>The figures demonstrate a general increase in both sexes between now and 2020.</p> <p>The proposal is expected to benefit equally all service users, across both genders.</p>
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Sexual Orientation	Data not available	N/a
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### Stage 3: Assessing Potential Disproportionate Impact

**5.** 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 6

## Stage 4: Further Consultation / Additional Evidence

6. 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? E.g. revising your proposals
This is a positive proposal, and as such consultation will not be required – however promotion will be.	This is a positive proposal, and as such consultation will not be required – however promotion will be.	This is a positive proposal, and as such consultation will not be required – however promotion will be.

## Stage 5: Assessing Impact

7. What does your evidence tell you about the impact on the different Protected Characteristics? Consider whether the evidence shows potential for differential impact, if so state whether this is a positive or an adverse impact? If adverse, is it a minor or major impact?

Protected Characteristic	Positive Impact ✓	Adverse Impact		Explain what this impact is, how likely it is to happen and the extent of impact if it was to occur.  <b>Note – Positive impact can also be used to demonstrate how your proposals meet the aims of the PSED Stage 7</b>	What measures can you take to mitigate the impact or advance equality of opportunity? E.g. further consultation, research, implement equality monitoring etc <b>(Also Include these in the Improvement Action Plan at Stage 6)</b>
		Minor ✓	Major ✓		
Age (including carers of young/older people)		✓		The proposal is designed to positively impact people of all ages who are in receipt of social care.	Some caution will need to be exercised for the older generation who are less likely to be able to access internet based information. However, mitigation will be planned and designed at the point of design.
Disability (including carers of disabled people)		✓		The proposal is designed to positively impact people of all ages who are in receipt of social care.	Some caution will need to be exercised for people with visual disabilities, who may not be able to access internet based information. However mitigation and sensory alternatives will be explored at point of design.

Gender Reassignment	✓			The proposal is designed to positively impact people of all ages who are in receipt of social care.	n/a	
Marriage and Civil Partnership	✓			The proposal is designed to positively impact people of all ages who are in receipt of social care.	n/a	
Pregnancy and Maternity	✓			The proposal is designed to positively impact people of all ages who are in receipt of social care.	n/a	
Race	✓			The proposal is designed to positively impact people of all ages who are in receipt of social care.	n/a	
Religion or Belief	✓			The proposal is designed to positively impact people of all ages who are in receipt of social care.	n/a	
Sex	✓			The proposal is designed to positively impact people of all ages who are in receipt of social care.	n/a	
Sexual orientation	✓			The proposal is designed to positively impact people of all ages who are in receipt of social care.	n/a	
<b>8. Cumulative Impact – Considering what else is happening within the</b>				Yes	✓	No



<p>Council and Harrow as a whole, could your proposals have a cumulative impact on a particular Protected Characteristic?</p> <p>If yes, which Protected Characteristics could be affected and what is the potential impact?</p>	<p><b>In line with other council proposals, the MyCEP design should ease some of the negative cumulative impacts of other proposals put forward.</b></p>			
<p><b>9. Any Other Impact</b> – 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?</p> <p>If yes, what is the potential impact and how likely is it to happen?</p>	Yes		No	✓
<p>n/a</p>				

### Stage 6 – Improvement Action Plan

List below any actions you plan to take as a result of this Impact Assessment. These should include:

- Proposals to mitigate any adverse impact identified
- Positive action to advance equality of opportunity
- Monitoring the impact of the proposals/changes once they have been implemented
- Any monitoring measures which need to be introduced to ensure effective monitoring of your proposals? How often will you do this?

Area of potential adverse impact e.g. Race, Disability	Proposal to mitigate adverse impact	How will you know this has been achieved? E.g. Performance Measure / Target	Lead Officer/Team	Target Date
Age	Co-operation with carers and voluntary sector to ensure older people are able to engage with the new service	Usage and Business intelligence monitoring information	Chris Greenway	Ongoing
Disability	Working with designers to ensure suitable disability friendly products	Usage and Business intelligence monitoring information	Chris Greenway	Ongoing

<b>Stage 7: Public Sector Equality Duty</b>				
<b>10.</b> How do your proposals meet the Public Sector Equality Duty (PSED) which requires the Council to: <ol style="list-style-type: none"> <li>1. Eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Equality Act 2010</li> <li>2. Advance equality of opportunity between people from different groups</li> <li>3. Foster good relations between people from different groups</li> </ol>		These proposals are positive, and with some limited mitigations will have a positive impact on all protected characteristics.		
<b>Stage 8: Recommendation</b>				
<b>11.</b> Please indicate which of the following statements best describes the outcome of your EqIA ( ✓ tick one box only)				
<b>Outcome 1</b> – No change required: the EqIA has not identified any potential for unlawful conduct or disproportionate impact and all opportunities to advance equality of opportunity are being addressed.				
<b>Outcome 2</b> – Minor Impact: Minor adjustments to remove / mitigate adverse impact or advance equality of opportunity have been identified by the EqIA and these are listed in the Action Plan above.				✓
<b>Outcome 3</b> – Major Impact: Continue with proposals despite having identified potential for adverse impact or missed opportunities to advance equality of opportunity. 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. <b>(Explain this in Q12 below)</b>				
<b>12.</b> If your EqIA is assessed as <b>outcome 3</b> explain your justification with full reasoning to continue with your proposals.				

<b>Stage 9 - Organisational sign Off</b>			
<b>13.</b> Which group or committee considered, reviewed and agreed the EqIA and the Improvement Action Plan?			
Signed: (Lead officer completing EqIA)	Chris Greenway	Signed: (Chair of DETG)	Johanna Morgan

Date:	18 <sup>th</sup> March 2016	Date:	11 <sup>th</sup> March 2016
Date EqIA presented at the EqIA Quality Assurance Group (if required)		Signature of DETG Chair	Johanna Morgan