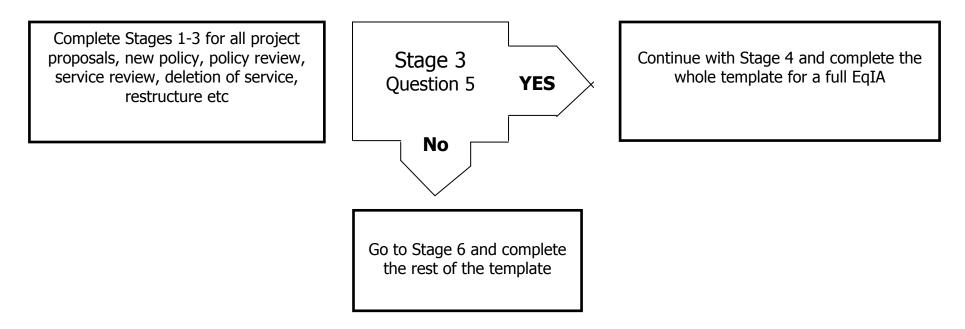
Equality Impact Assessment Template

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.
- Legal will NOT accept any report 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 Imp	oact Assessment (E	qIA	() Template			
Type of Decision: Tick ✓	 ✓ Cabinet 	ortfo	lio Holder Other (expla	ain)	
Date decision to be taken:	16 th November 2017					
Value of savings to be made (if applicable):	Not applicable					
Title of Project:	Public Arts Policy and Appli	catio	n Process			
Directorate / Service responsible:	Environment and Culture					
Name and job title of Lead Officer:	Scott Causer – Local Enviro	nme	nt & Special Projects Ma	nage	er	
Name & contact details of the other persons involved in the assessment:	Tim Bryan – Service Manag Scott Causer – Special Proj		Manager			
Date of assessment (including review dates):	11/07/2017					
Stage 1: Overview						
 What are you trying to do? (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) 	 Effective manageme Clear understanding 	Stra prin emer be s pach ent o and astru	tegic Objective to 'Build ciples with which Harr nt of new Public Art in summarised as follows: In to proposed public art in f Public Art installations. I clarity of roles and resp ucture in the Borough.	a Be ow stalla nstal	etter Harrow'. The Publ Council will approach ations in Harrow. The llations.	lic Art h the e key
	Residents / Service Users	Х	Partners	Х	Stakeholders	Х
	Staff		Age		Disability	
2. Who are the main groups / Protected Characteristics that may be affected by your proposals? (✓ all that apply)	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: Who are the partners? Who has the overall responsibility? 	Not applicable
• How have they been involved in the assessment?	

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 should include this as an action to address in your Improvement Action Plan at Stage 6)

Protected Characteristic	Evidence	Analysis & Impact
Age (including carers of young/older people)	Harrow has a higher proportion of families with three plus dependent children compared to the national rate of 16.2%, but the borough's rate is below the London average of 18.4%. There were 30,780 families with dependent children in Harrow in 2011 and 5,278 (17.1%) had three or more dependent children. Nationally Harrow is ranked 52nd for the proportion of families with three or more dependent children. The central, eastern and south-west areas of the borough have the highest concentrations. Wealdstone ward has the highest level at 23% (364 families), followed by Roxeth at 21% and Queensbury at 19.6%. Greenhill has the lowest level, at 11.8% (171). A larger proportion of those living in Harrow are young people. Harrow is ranked in the top quintile nationally for 5 to 15 year olds. 13.5% (32,142) of Harrow's residents are aged 5 to 15, above the	No identifiable negative impact or barriers relating to this characteristic.
	national and London rates. Roxbourne and Roxeth, in the east of the borough, have the highest numbers of children aged 5 to 15. Over the decade there has been population growth amongst the 5	

	 to 15 year olds, in 15 out of Harrow's 21 wards. Marlborough and Wealdstone saw the biggest increases in numbers. 6.7% (15,916) of residents were aged four and under in 2011. There are pockets of high concentration in central and south-west Harrow. Harrow is ranked in the top quartile nationally for 0-4 year olds. Wealdstone ward has the highest percentage of residents aged four and under, followed by Roxbourne. Greenhill has seen the largest percentage increase in 0-4 year olds since 2001, by Canons and Wealdstone ward at 81.9%. However, what must be kept in mind is that these figures are 6 years old now and this particular group will now be aged 6-10. 65.7% of Harrow's residents are of working age (16 to 64), an increase since 2001 when 63.4% of residents were aged 16 to 64. Harrow is ranked 5th in London for the proportion of residents aged 65 and over. 14.1% (33,637) of Harrow's residents are aged 65 and over, 12.4% (3,700) higher than the 2001 Census. Higher proportions of older residents live in the wards to the north of the borough. 	
Disability (including carers of disabled people)	There are approximately 15,000 people aged 16 to 64 with moderate or serious physical disability living in Harrow and this number is predicted to increase to 16,000 by 2020 (a 15% overall). These trends are similar to those predicted for London with the largest proportion increases being in the 55 to 64 age group (Harrow Joint Strategic Needs Assessment 2015-20). The total population aged 18-64 in Harrow predicted to have a learning disability in 2017 is 3,466 (Information taken from: www.pansi.org.uk). The estimated prevalence of special educational needs in Harrow has remained consistent over time (2.6%) and is lower than the London (2.7%) and England average (2.8%). The number per 1,000 of children with moderate learning disabilities in Harrow is lower than the London average but higher for children with severe	No identifiable negative impact or barriers relating to this characteristic.

	learning disabilities.	
	Approximately 180 children are reported to be deaf in Harrow and known to services. The number of blind children and young people between 0 and 17 known to Harrow council (i.e. registered) is 20 and the number who are partially sighted is 30 (figures correct as of 2013/14).	
	The 2011 census showed there were 24,620 carers in Harrow, an increase of over 4,000 (almost 20%) from ten years earlier. The reasons for providing care vary and can include more than one reason. In the Harrow Carers' Survey, the 3 out of 5 carers were caring for someone with a physical disability. 45% of Harrow carers were caring for an older person which is significantly higher than the national average. Around 1 in 5 were caring for someone with a mental health problems and a similar proportion for someone with a learning disability. It is difficult to estimate the number of young carers aged $0 - 24$ years old in Harrow. The vast majority of these are hidden, i.e. not known to social care or receiving any support (Harrow Joint Strategic Needs Assessment 2015-20).	
Gender Reassignment	The only data Harrow currently has on Gender Reassignment is via the Analysis of demand from housing applicants (via Locata): 1 (0.02%) housing applicant has indicated that they are transgender. (Data as at April 2014).	No identifiable negative impact or barriers relating to this characteristic.
Marriage / Civil Partnership	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.	No identifiable negative impact or barriers relating to this characteristic.

Pregnancy and Maternity	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.	No identifiable negative impact or barriers relating to this characteristic.
Race	Harrow has one of the most ethnically diverse populations nationally. In 2011, 69 per cent of Harrow's residents were from minority ethnic groups in 2011, where ethnic minority is defined as all people who are non White-British. Nationally, Harrow has the fourth highest proportion of residents from minority ethnic groups (ONS 2011 Census).	No identifiable negative impact or barriers relating to this characteristic.
Religion and Belief	Harrow is Britain's most religiously diverse community and enjoys the Country's highest density of Gujarati Hindus and Sri Lankan Tamils, alongside significant Muslim, Jewish and Christian communities. The Greater London Authority (GLA) Diversity Indices rank Harrow seventh highest nationally for ethnic diversity and second for religious diversity.	No identifiable negative impact or barriers relating to this characteristic.
Sex / Gender	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 National Statistics, 2001 and 2011).	No identifiable negative impact or barriers relating to this characteristic.
Sexual Orientation	Although sexual orientation is a protected characteristic under equalities legislation, there is no robust data on the numbers of lesbians, gay men and bisexuals in the population as no national census has ever asked people to define their sexuality. The Government estimates that 5-7% of the population are lesbians, gay men or bisexual. Stonewall, a UK charity supporting LGB rights, agrees with this estimate. There is debate about whether same sex partnerships registrations can be used as a proxy measure for sexual orientation, as not all LGBT people will be in a relationship let alone have a civil partnership Between December 2005, when the Civil Partnership Act came into force, and the end of 2013, there have been 71 civil	No identifiable negative impact or barriers relating to this characteristic.

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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	Х	Х	Х	Х	Х	Х	Х	Х	Х

YES - If there is a risk of disproportionate adverse Impact on any ONE of the Protected Characteristics, complete a FULL EqIA.

- **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 do the results show about the impact on	What actions have you taken to address the
What consultation methods were used?	different groups / Protected Characteristics?	findings of the consultation? E.g. revising your

					proposals
Stage 5: Asses				enset on the different Drotested Characteristics?	
•		•		npact on the different Protected Characteristics? C a positive or an adverse impact? If adverse, is it a r	•
Protected	Positive Impact		e Impact	Explain what this impact is, how likely it is to happen and the extent of impact if it was to occur.	What measures can you take to mitigate the impact or advance equality of opportunity? E.g. further consultation, research, implement
Characteristic	V	Minor ✓	Major ✓	Note – Positive impact can also be used to demonstrate how your proposals meet the aims of the PSED Stage 7	equality monitoring etc (Also Include these in the Improvement Action Plan at Stage 6)
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						
			e is happening within the	Yes	No	
			osals have a cumulative			
impact on a part						
If yes, which Pro potential impact	aracteristics	s could be a	affected and what is the			
	Considering	what else	is happening within the	Yes	No	

austerity, welfare refo levels of crime) could users socio economic, If yes, what is the por Stage 6 – Improve List below any actions Proposals to m Positive action Monitoring the	s a whole (for example national/local policy, orm, unemployment levels, community tensions your proposals have an impact on individuals/s , health or an impact on community cohesion? tential impact and how likely is it to happen? ment Action Plan s you plan to take as a result of this Impact Ass itigate any adverse impact identified to advance equality of opportunity impact of the proposals/changes once they have a measures which need to be introduced to ens	service sessment. These should include: ve been implemented	osals? 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
All characteristics	If any adverse impact is identified on any protected characteristic, the policy will be reviewed immediately.	Sign off by senior management	Environment & Culture	Ongoing
(PSED) to:1. Eliminate unlawful and other conduct	ctor Equality Duty posals meet the Public Sector Equality Duty discrimination, harassment and victimisation prohibited by the Equality Act 2010 of opportunity between people from different	 The nature of the public ar community and make it an The public art policy will gi of people to have their void for everyone to shape the 	inclusive experience for a ve an opportunity for all d ce heard and will provide	all. ifferent groups an opportunity

groups

3. Foster good relations between people from different groups

3. The public art policy will give the chance for different groups to promote their interests and to educate each other in terms of what public art means to them.

Stage 8: Recommendation				
11. Which of the following statements best describes the outcome of your EqIA (\checkmark tick one box only)				
Outcome 1 – No change required: the EqIA has not identified any potential for unlawful conduct or disproportionate impact and	1			
all opportunities to advance equality of opportunity are being addressed.				
Outcome 2 – Minor Impact: Minor adjustments to remove / mitigate adverse impact or advance equality of opportunity have been				
identified by the EqIA and these are included in the Action Plan to be addressed.				
Outcome 3 – 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. (Explain this in Q12 below)				
12. If your EqIA is assessed as outcome 3 explain your				
justification with full reasoning to continue with your				
proposals.				

Stage 9 - Organisational sign Off 13. Which group or committee considered, reviewed and agreed the EqIA and the Improvement Action Plan?	Directorate Equality Task Group – Community and Regeneration and Planning		
Signed: (Lead officer completing EqIA)	T. Bryan	Signed: (Chair of DETG)	D. Corby
Date:	18/09/17	Date:	26/09/17
Date EqIA presented at Cabinet Briefing (if required)		Signature of DETG Chair (following Cabinet Briefing if relevant)	