



## Equalities Impact Assessment (EqIA)

**EqIAs make services better for everyone and support value for money by getting services right first time.**

EqIAs enable us to consider all the information about a service, policy or strategy from an equalities perspective and then create an action plan to get the best outcomes for service users and staff<sup>1</sup>. They analyse how all our work as a council might impact differently on different groups protected from discrimination by the Equality Act 2010<sup>2</sup>. They help us make good decisions and evidence how we have reached them.<sup>3</sup>

An EqIA needs to be started as a project starts to identify and consider possible differential impacts on people and their lives, inform project planning and, where appropriate, identify mitigating actions. A full EqIA must be completed before any decisions are made or policy agreed so that the EqIA informs that decision or policy. It is also a live document; you should review and update it along with your project plan throughout.

You should first consider whether you need to complete this full EqIA<sup>4</sup>.

### **Other key points to note:**

- Full guidance notes to help you are embedded in this form – see the End Notes or hover the mouse over the numbered notes.
- Please share your EqIA with your Equalities Champion and the final/updated version at the end of the project.
- Major EqIAs should be reviewed by the relevant Head of Service.
- Examples of completed EqIAs can be found on the Equalities Hub

1. Responsibility for the EqlA	
Title of proposal <sup>5</sup>	Enhanced Prevention Offer
Name and job title of completing officer	Nadine Allen, Programme Coordinator / Claire DeSouza, Prevention and Wellbeing Manager
Head of service area responsible	Monica Przyzycka, Head of Assessment and Prevention
Equalities Champion supporting the EqlA	Will Hammond, Head of Transformation
Performance Management rep	Appy Reddy
HR rep (for employment related issues)	N/A
Representative (s) from external stakeholders	N/A

2. Description of proposal	
<p>Is this a: (Please tick all that apply)</p> <p>New policy / procedure <input checked="" type="checkbox"/></p>	<p>Review of Policy /strategy / function / procedure / service <input type="checkbox"/></p>
<p>Budget Saving <input checked="" type="checkbox"/></p> <p>If budget saving please specify value below: £100,000</p>	<p>Other <input type="checkbox"/></p> <p>If other please specify below:</p>
<p>This 21/22 saving is based on the expansion of the Prevention and Wellbeing Team by one additional co-ordinator and one fixed term project post which will provide more appropriate support at the social care front door. It is proposed that this additional capacity in the team will enable savings to be achieved by expanding the ability to identify community based help and reduce the need to carry out inappropriate care assessments or a reliance on formal care provision.</p> <p>This proposal supports the Adult and Safeguarding Committee priority 'Supporting those with disabilities, older, and vulnerable residents to remain independent and have a good quality of life'.</p>	

The key stakeholders who may be affected by the policy or proposal are:

- Service users
- Service user's families
- Voluntary and Community Sector (VCS) Providers
- Staff

This proposal is part of the MTFS Business Planning process for 2021/22 and savings plans will be approved by the Adults Leadership Group and the Adults and Safeguarding Committee on 23 November 2020.

### 3. Supporting evidence

What existing data informs your assessment of the impact of the proposal on protected groups of service users and/or staff?

*Identify the main sources of evidence, both quantitative and qualitative, that supports your analysis*

Protected group	<p><b>What does the data tell you<sup>6</sup>?</b>  <i>Provide a summary of any relevant demographic data about the borough's population from the <u>Joint Strategic Needs Assessment</u>, or data about the council's workforce</i></p>	<p><b>What do people tell you<sup>7</sup>?</b>  <i>Provide a summary of relevant consultation and engagement including surveys and other research with stakeholders, newspaper articles, correspondence etc.</i></p>												
Age <sup>8</sup>	<p>Demographic data taken from Contacts report 19/20.</p> <p><b>New LBB Service Users by Age-Band:</b></p> <table border="1" data-bbox="600 738 1431 1045"> <thead> <tr> <th>Age Group</th><th>Number</th><th>Proportion</th></tr> </thead> <tbody> <tr> <td>18-64</td><td>603</td><td>18%</td></tr> <tr> <td>65+</td><td>2660</td><td>82%</td></tr> <tr> <td>Grand Total</td><td>3263</td><td>100%</td></tr> </tbody> </table> <p>There is a high proportion of new service users in the older adult demographic which is in line with the age of people supported by the Prevention and Wellbeing Team. This suggests that this group will be more impacted by the outcome of the MTFS review and savings programme. More people in this category will be able to access community based provision that will more appropriately meet their needs.</p>	Age Group	Number	Proportion	18-64	603	18%	65+	2660	82%	Grand Total	3263	100%	None
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Grand Total	3263	100%												
		None												

## Disability<sup>9</sup>

### New LBB service users in receipt of services by primary support reason:

Primary Support Reason	Count of PSR	Proportion
Blank	77	2%
Learning Disability Support	55	2%
Mental Health Support	215	7%
Physical Support	2511	77%
Sensory Support	221	7%
Social Support	81	2%
Support with memory and cognition	103	3%
Grand Total	3263	100%

The majority of new service users require a degree of support, the highest proportion identified as having physical support needs. Although this is not an exact measure of the number of service users with a registered disability it indicates that people with physical support needs will be the group most impacted by the changes proposed. There are specialist support services available which are focused on mental health and learning disabilities through commissioned providers and other services. The services users supported by the Prevention and Wellbeing team should benefit from the proposal which should enable more opportunities to access more appropriate prevention and community based services at the social care front door.

<b>Gender reassignment<sup>10</sup></b>	Data not covered in the Contacts report	None																											
<b>Marriage and Civil Partnership<sup>11</sup></b>	Data not covered in the Contacts report	None																											
<b>Pregnancy and Maternity<sup>12</sup></b>	Data not covered in the Contacts report	None																											
<b>Race/ Ethnicity<sup>13</sup></b>	<p>New LBB service users by Race/Ethnic Group:</p> <table border="1"> <thead> <tr> <th>Ethnic Groups</th><th>Number</th><th>Proportion</th></tr> </thead> <tbody> <tr> <td>White British</td><td>2113</td><td>65%</td></tr> <tr> <td>Asian or Asian British</td><td>460</td><td>14%</td></tr> <tr> <td>Black or Black British</td><td>197</td><td>6%</td></tr> <tr> <td>Mixed/Multiple Ethnic groups</td><td>55</td><td>2%</td></tr> <tr> <td>Any other ethnic group/ Refused/ Not Recorded</td><td>156</td><td>5%</td></tr> <tr> <td>Chinese</td><td>12</td><td>0%</td></tr> <tr> <td>Not Stated</td><td>270</td><td>8%</td></tr> <tr> <td>Grand Total</td><td>3263</td><td>100%</td></tr> </tbody> </table> <p>The Prevention and Wellbeing Team accept referrals from social care professionals, this is an internal process and the people supported are those that come through the front door from a range of ethnicities. The new service users shown above are a reflection of those accessing wider social care services and the team supports all</p>	Ethnic Groups	Number	Proportion	White British	2113	65%	Asian or Asian British	460	14%	Black or Black British	197	6%	Mixed/Multiple Ethnic groups	55	2%	Any other ethnic group/ Refused/ Not Recorded	156	5%	Chinese	12	0%	Not Stated	270	8%	Grand Total	3263	100%	None
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	groups that have been referred to them. Service users across ethnicities should have positive outcomes from the proposal which will aim to embed strengths-based community support that is more appropriate to their needs																
Religion or belief <sup>14</sup>	Data not covered in latest MTFS report	None															
Sex <sup>15</sup>	<p>New LBB service users by Gender:</p> <table border="1"> <thead> <tr> <th>Gender</th><th>Number</th><th>Proportion</th></tr> </thead> <tbody> <tr> <td>Male</td><td>1997</td><td>61%</td></tr> <tr> <td>Female</td><td>1254</td><td>38%</td></tr> <tr> <td>Unknown</td><td>12</td><td>0%</td></tr> <tr> <td>Grand Total</td><td>3263</td><td>100%</td></tr> </tbody> </table> <p>Data shows that there are more male new service users than female, however data within the service suggests that the proportion of male and female service users supported by prevention and wellbeing services is more evenly proportioned and thus both will be impacted by the proposals.</p>	Gender	Number	Proportion	Male	1997	61%	Female	1254	38%	Unknown	12	0%	Grand Total	3263	100%	None
Gender	Number	Proportion															
Male	1997	61%															
Female	1254	38%															
Unknown	12	0%															
Grand Total	3263	100%															
Sexual Orientation <sup>16</sup>	Data not covered in latest Contact report.	None															
Other relevant groups <sup>17</sup>	None	None															

#### 4. Assessing impact

What does the evidence tell you about the impact your proposal may have on groups with protected characteristics <sup>18</sup>?

Protected characteristic	For <b>each</b> protected characteristic, explain in detail what the evidence is suggesting and the impact of your proposal (if any). Is there an impact on service delivery? Is there an impact on customer satisfaction? Click the appropriate box on the right to indicate the outcome of your analysis.	Positive impact	Negative impact		No impact
			Minor	Major	
Age	Adults of all ages may be impacted by this proposal, although based on the current demographic of new service users , it is likely that this will affect a disproportionate number of Adults aged 65+. While some service users may be less satisfied if they receive lower levels of support / more independence-focussed support, overall, this should have a positive impact on people's quality of life. Negative impacts are minimised by our person-centred approach to social work, with assessments considering of people's goals and wishes.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Disability	The majority of new services users have needs for care and support, the highest proportion having physical support needs. While some service users may be less satisfied if they receive lower levels of support / more independence-focussed support, overall, this should have a positive impact on people's quality of life. Negative impacts are minimised by our person-centred approach to social work, with assessments considering of people's goals and wishes.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Gender reassignment	We do not report on whether adults who have reassigned genders, and there is no reason to suspect that this group will have a disproportionate number of people with this characteristic.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Marriage and Civil Partnership	We do not report on people's marital status, and there is no reason to suspect that this group will have a disproportionate number of people with this characteristic.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Pregnancy and Maternity	We do not report on this characteristic, and there is no reason to suspect that this group will have a disproportionate number of people with this characteristic.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>



<b>Race/ Ethnicity</b>	Adults of all racial and ethnic background may be impacted by this proposal, and based on current demographics of people in receipt of services, no disproportionate impact is expected. While some people may be less satisfied if they receive lower levels of support / more independence-focussed support, overall, this should have a positive impact on people's quality of life. Negative impacts are minimised by our person-centred approach to social work, with assessments considering of people's goals and wishes.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>Religion or belief</b>	We do not report on people's religion or beliefs, and there is no reason to suspect that this group will have a disproportionate number of people with this characteristic. Religious beliefs and cultural requirements will continue to be taken into account in social care reviews and support planning.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>Sex</b>	Adults of both genders may be impacted by this proposal. While some service users may be less satisfied if they receive lower levels of support / more independence-focussed support, overall, this should have a positive impact on people's quality of life. Negative impacts are minimised by our person-centred approach to social work, with assessments considering of people's goals and wishes.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Sexual Orientation</b>	We do not report on people's sexual orientation, and there is no reason to suspect that this group will have a disproportionate number of people with this characteristic.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

<b>5. Other key groups</b> <b>Are there any other vulnerable groups that might be affected by the proposal?</b> <i>These could include carers, people in receipt of care, lone parents, people with low incomes or unemployed</i>	Positive impact	Negative impact		No impact
		Minor	Major	

Key groups	In accordance with the Care Act the Prevention and Wellbeing service accept referrals from carers who are treated equally and would not be negatively impacted by this proposal. As the proposal focuses on an increase of more independence-focussed support this should have a positive impact on all groups.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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## 6. Cumulative impact<sup>19</sup>

Considering what else is happening within the council and Barnet could your proposal contribute to a cumulative impact on groups with protected characteristics?

☒ Yes      No ☐

This proposal will have a positive cumulative impact for groups identified as it seeks to support the independence and wellbeing of service users through a strengths-based approach and should result in a positive impact on people's quality of life.

## 7. Actions to mitigate or remove negative impact

Only complete this section if your proposals may have a negative impact on groups with protected characteristics. These need to be included in the relevant service plan for mainstreaming and performance management purposes.

Group affected	Potential negative impact	Mitigation measures <sup>20</sup> <i>If you are unable to identify measures to mitigate impact, please state so and provide a brief explanation.</i>	Monitoring <sup>21</sup> <i>How will you assess whether these measures are successfully mitigating the impact?</i>	Deadline date	Lead Officer

## 8. Outcome of the Equalities Impact Assessment (EqIA) <sup>22</sup>

Please select one of the following four outcomes

☒ **Proceed with no changes**

The EqIA has not identified any potential for a disproportionate impact and all opportunities to advance equality of opportunity are being addressed

☐ **Proceed with adjustments**

Adjustments are required to remove/mitigate negative impacts identified by the assessment

☐ **Negative impact but proceed anyway**

This EqIA has identified negative impacts that are not possible to mitigate. However, it is still reasonable to continue with the activity. Outline the reasons for this and the information used to reach this decision in the space below

☐ **Do not proceed**

This EqIA has identified negative impacts that cannot be mitigated, and it is not possible to continue. Outline the reasons for this and the information used to reach this decision in the space below

**Reasons for decision**

Overall, this EqIA suggests that while some people with protected characteristics will be disproportionately affected, on balance this will be a positive impact as social care needs will continue to be met while supporting the independence and recovery of these people.

### Sign-off

#### 9. Sign off and approval by Head of Service / Strategic lead <sup>23</sup>

Name

Monica Przyzycka

Job title

Head of Assessment and Prevention

<input checked="" type="checkbox"/> Tick this box to indicate that you have approved this EqIA	Date of approval: 12/11/2020
<input checked="" type="checkbox"/> Tick this box to indicate if EqIA has been published Date EqIA was published: 23/11/2020 Embed link to published EqIA: <a href="https://www.barnet.gov.uk/your-council/policies-plans-and-performance/equality-and-diversity/equality-impact-assessments-2020">https://www.barnet.gov.uk/your-council/policies-plans-and-performance/equality-and-diversity/equality-impact-assessments-2020</a>	Date of next review: 12/11/2021

## Footnotes: guidance for completing the EqIA template

<sup>1</sup> The following principles explain what we must do to fulfil our duties under the Equality Act when considering any new policy or change to services. They must all be met or the EqIA (and any decision based on it) may be open to challenge:

- **Knowledge:** everyone working for the council must be aware of our equality duties and apply them appropriately
- **Timeliness:** the duty applies at the time of considering proposals and before a final decision is taken
- **Real Consideration:** the duty must be an integral and rigorous part of your decision-making and must influence the process.
- **Sufficient Information:** you must assess what information you have and what is needed to give proper consideration.
- **No delegation:** the council is responsible for ensuring that anyone who provides services on our behalf complies with the equality duty.
- **Review:** the equality duty is a continuing duty – it continues after proposals are implemented/reviewed.
- **Proper Record Keeping:** we must keep records of the process and the impacts identified.

### <sup>2</sup> Our duties under the Equality Act 2010

The council has a legal duty under this Act to show that we have identified and considered the impact and potential impact of our activities on all people with ‘protected characteristics’ (see end notes 9-19 for details of the nine protected characteristics). This applies to policies, services (including commissioned services), and our employees.

We use this template to do this and evidence our consideration. You must give ‘due regard’ (pay conscious attention) to the need to:

- **Avoid, reduce or minimise negative impact:** if you identify unlawful discrimination, including victimisation and harassment, you must stop the action and take advice immediately.
- **Promote equality of opportunity:** by
  - Removing or minimising disadvantages suffered by people with a protected characteristic
  - Taking steps to meet the needs of these groups
  - Encouraging people with protected characteristics to participate in public life or any other activity where participation is disproportionately low
  - Consider if there is a need to treat disabled people differently, including more favourable treatment where necessary
- **Foster good relations between people who share a protected characteristic and those who don’t:** e.g. by promoting understanding.

### <sup>3</sup> EqIAs should always be proportionate to:

- The size of the service or scope of the policy/strategy
- The resources involved
- The size of the likely impact – e.g. the numbers of people affected and their vulnerability

The greater the potential adverse impact of the proposal on a protected group (e.g. disabled people) and the more vulnerable the group is, the more thorough and demanding the process required by the Act will be. Unless they contain sensitive data – EqIAs are public documents. They are published with Cabinet papers, Panel papers and public consultations. They are available on request.

### <sup>4</sup> When to complete an EqIA:

- When developing a new policy, strategy, or service
- When reviewing an existing service, policy or strategy

- 
- When making changes that will affect front-line services
  - When amending budgets which may affect front-line services
  - When changing the way services are funded and this may impact the quality of the service and who can access it
  - When making a decision that could have a different impact on different groups of people
  - When making staff redundant or changing their roles

Wherever possible, build the EqlA into your usual planning and review processes.

**Also consider:**

- Is the policy, decision or service likely to be relevant to any people because of their protected characteristics?
- How many people is it likely to affect?
- How significant are its impacts?
- Does it relate to an area where there are known inequalities?
- How vulnerable are the people who will be affected?

If there are potential impacts on people but you decide not to complete an EqlA you should document your reasons why.

<sup>5</sup> **Title of EqlA:** This should clearly explain what service / policy / strategy / change you are assessing.

<sup>6</sup> **Data & Information:** Your EqlA needs to be informed by data. You should consider the following:

- What data is relevant to the impact on protected groups is available? (is there an existing EqlA?, local service data, national data, community data, similar proposal in another local authority).
- What further evidence is needed and how can you get it? (e.g. further research or engagement with the affected groups).
- What do you know from service/local data about needs, access and outcomes? Focus on each characteristic in turn.
- What might any local demographic changes or trends mean for the service or function? Also consider national data if appropriate.
- Does data/monitoring show that any policies or practices create particular problems or difficulties for any group(s)?
- Is the service having a positive or negative effect on particular people or groups in the community?

<sup>7</sup> **What have people told you about the service, function, area?**

- Use service user feedback, complaints, audits
- Conduct specific consultation or engagement and use the results
- Are there patterns or differences in what people from different groups tell you?
- Remember, you must consult appropriately and in an inclusive way with those likely to be affected to fulfil the equality duty.
- You can read LBB [Consultation and Engagement toolkit](#) for full advice or contact the Consultation and Research Manager, [rosie.evangelou@barnet.gov.uk](mailto:rosie.evangelou@barnet.gov.uk) for further advice

<sup>8</sup> **Age:** People of all ages, but consider in particular children and young people, older people and carers, looked after children and young people leaving care. Also consider working age people.

<sup>9</sup> **Disability:** When looking at disability, consideration should be given to people with different types of impairments: physical (including mobility), learning, aural or sensory (including hearing and vision impairment), visible and non-visible impairment. Consideration should also be given to: people with HIV, people with mental health needs and people with drug and alcohol problems. People with conditions such as diabetes and cancer and some other health conditions also have protection under the Equality Act 2010.

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<sup>10</sup> **Gender Reassignment:** In the Act, a transgender person is someone who proposes to, starts or has completed a process to change their gender. A person does not need to be under medical supervision to be protected. Consider transgender people, transsexual people and transvestites.

<sup>11</sup> **Marriage and Civil Partnership:** consider married people and civil partners.

<sup>12</sup> **Pregnancy and Maternity:** When looking at pregnancy and maternity, give consideration to pregnant women, breastfeeding mothers, part-time workers, women with caring responsibilities, women who are lone parents and parents on low incomes, women on maternity leave and 'keeping in touch' days.

<sup>13</sup> **Race/Ethnicity:** Apart from the common ethnic groups, consideration should also be given to Traveller communities, people of other nationalities outside Britain who reside here, refugees and asylum seekers and speakers of other languages.

<sup>14</sup> **Religion and Belief:** Religion includes any religion with a clear structure and belief system. As a minimum you should consider the most common religious groups (Christian, Muslim, Hindu, Jews, Sikh, Buddhist) and people with no religion or philosophical beliefs.

<sup>15</sup> **Sex/Gender:** Consider girls and women, boys and men, married people, civil partners, part-time workers, carers (both of children with disabilities and older cares), parents (mothers and fathers), in particular lone parents and parents on low incomes.

<sup>16</sup> **Sexual Orientation:** The Act protects bisexual, heterosexual, gay and lesbian people.

<sup>17</sup> **Other relevant groups:** You should consider the impact on our service users in other related areas.

<sup>18</sup> **Impact:** Your EqlA must consider fully and properly actual and potential impacts against each protected characteristic:

- The equality duty does not stop changes, but means we must fully consider and address the anticipated impacts on people.
- Be accurate and transparent, but also realistic: don't exaggerate speculative risks and negative impacts.
- Be detailed and specific where you can so decision-makers have a concrete sense of potential effects.
- Questions to ask when assessing whether and how the proposals impact on service users, staff and the wider community:
  - Are one or more protected groups affected differently and/or disadvantaged? How, and to what extent?
  - Is there evidence of higher/lower uptake of a service among different groups? Which, and to what extent?
  - Does the project relate to an area with known inequalities (where national evidence or previous research is available)?
  - If there are likely to be different impacts on different groups, is that consistent with the overall objective?
  - If there is negative differential impact, how can you minimise that while taking into account your overall aims?
  - Do the effects amount to unlawful discrimination? If so the plan **must** be modified.
  - Does it relate to an area where equality objectives have been set by LBB in our [Barnet 2024 Plan](#) and our [Strategic Equality Objective](#)?

<sup>19</sup> **Cumulative Impact**

You will need to look at whether a single decision or series of decisions might have a greater negative impact on a specific group and at ways in which negative impacts across the council might be minimised or avoided.

<sup>20</sup> **Mitigating actions**

- 
- Consider mitigating actions that specifically address the impacts you've identified and show how they will remove, reduce or avoid any negative impacts
  - Explain clearly what any mitigating measures are, and the extent to which you think they will reduce or remove the adverse effect
  - Will you need to communicate or provide services in different ways for different groups in order to create a 'level playing field'?
  - State how you can maximise any positive impacts or advance equality of opportunity.
  - If you do not have sufficient equality information, state how you can fill the gaps.

<sup>21</sup> **Monitoring:** The Equality Duty is an ongoing duty: policies must be kept under review, continuing to give 'due regard' to the duty. If an assessment of a broad proposal leads to more specific proposals, then further monitoring, equality assessment, and consultation are needed.

<sup>22</sup> **Outcome:**

- Make a frank and realistic assessment of the overall extent to which the negative impacts can be reduced or avoided by the mitigating measures. Also explain what positive impacts will result from the actions and how you can make the most of these.
- Make it clear if a change is needed to the proposal itself. Is further engagement, research or monitoring needed?
- Make it clear if, as a result of the analysis, the policy/proposal should be stopped.

<sup>23</sup> **Sign off:** Your will need to ensure the EqIA is signed off by your Head of Service, agree whether the EqIA will be published, and agree when the next review date for the EqIA will be.