



City of Westminster

EQUALITY IMPACT ASSESSMENT TOOL

The council has a statutory duty to consider the impact of its decisions on age, disability, gender reassignment, pregnancy & maternity, race, religion or belief, sex (gender) and sexual orientation.

The Council also has a duty to foster good relations between different groups of people and to promote equality of opportunity.

Completing an EIA is the simplest way to demonstrate that the Council has considered the equality impacts of its decisions and it reduces the risk of legal challenge. EIAs should be carried out at the earliest stages of policy development or a service review, and then updated as the policy or review develops. EIAs must be undertaken when it is possible for the findings to inform the final decision. Keep all versions of your EIA. An EIA should be finalised once a final decision is taken.

When you should undertake an EIA:

- You are making changes that will affect front-line services
- You are reducing the budget of a service, which will affect front-line services
- You are changing the way services are funded and this may impact the quality of the service and who can access it
- You are making a decision that could have a different impact on different groups of people
- You are making staff redundant or changing their roles (particularly if it impacts on frontline services).
- EIAs also need to be undertaken on how a policy is implemented even if it has been developed by central government (for example cuts to grant funding).

Who should undertake the EIA:

- The person who is making the decision or advising the decision-maker

Guidance and tools for completing EIAs are available on the WIRE:

<https://officesharedservice.sharepoint.com/sites/intranet/wcc-comms/Pages/Equality-Impact-Assessments-.aspx>

An EIA e-learning module is available for all Westminster staff:

www.learningpool.com/westminster/course/view.php?id=159

When you have completed an EIA, please send the final copy to Equalities@westminster.gov.uk

It is the responsibility of the service to complete an EIA to the required standard and the quality and completeness of EIAs will be monitored by EMT.

Title
Draft Rough Sleeping Strategy for Public Consultation
<p data-bbox="159 353 494 392">What are you analysing?</p> <ul data-bbox="207 392 1053 600" style="list-style-type: none"> <li data-bbox="207 392 1053 430">• What is the purpose of the policy/project/activity/strategy? <li data-bbox="207 430 670 468">• In what context will it operate? <li data-bbox="207 468 654 506">• Who is it intended to benefit? <li data-bbox="207 506 622 544">• What results are intended? <li data-bbox="207 544 494 582">• Why is it needed?
<p data-bbox="159 600 1516 683">This EIA provides an assessment of the impacts of the proposals included in the Westminster Rough Sleeping Strategy 2017-2022.</p> <p data-bbox="159 716 1516 1064">Although it is not a legal requirement, the Council has a rough sleeping strategy in order to articulate its approach to tackling this difficult issue and improving people’s lives. This is a particularly important issue for the City Council. Rough sleeping is a growing problem nationally, but is particularly acute in Westminster, which has by far the highest number of rough sleepers in the country (the latest street count data showed Westminster with 260 rough sleepers – out of a London total of 960); Brighton and Hove had the second largest number with 144). A key reason for this is our unique location – in the heart of the capital city and the centre of its transport network, a place that brings together businesses, visitors and tourists, and people arriving here from all over the London, the UK and the rest of the world to an extent simply not seen anywhere else in the UK.</p> <p data-bbox="159 1108 1516 1332">The 2013 – 2016 Rough Sleeping Strategy has now expired. The city’s approach is being reviewed and reassessed in the current context (including historically high numbers of non-UK/Republic of Ireland nationals rough sleeping, continued constraints on public sector resources and changing national and local approaches to homelessness) and a new draft strategy has been developed for the next three years, which aims to bring key partners and stakeholders together to reduce rough sleeping across the city and support people to rebuild their lives.</p> <p data-bbox="159 1377 1516 1691">The key underpinning objective in the strategy is to support people away from the streets with a new emphasis on preventing people from starting to sleep rough in the first place. We are uncompromising in our view that there is no place for rough sleeping in Westminster; as the most visible and damaging form of homelessness, it is something that a leading, twenty-first century global city simply cannot ignore. It is harmful and dangerous for those sleeping rough and for communities more widely. A strategy has an important role in setting out the direct actions it will take and how we will measure its results. It will also form the basis for multi-agency partnership working and to draw attention to what the public can do to help.</p> <p data-bbox="159 1736 1516 1881">The initial proposals put forward by the council were subject to public consultation, including with individuals with protected characteristics and groups that represent them, between September and November 2016, and we have now considered the feedback and updated the strategy for final publication. This EIA reflects the proposals contained in the proposed strategy.</p> <p data-bbox="159 1926 861 1960">This EIA draws upon four key sources of information:</p> <ul data-bbox="207 1982 1516 2092" style="list-style-type: none"> <li data-bbox="207 1982 1516 2092">○ 2015/16 data from the Combined Homelessness and Information Network (CHAIN), a multi-agency database recording information about rough sleepers and the wider street population in London. CHAIN is commissioned and funded by the Greater London Authority (GLA) and

managed by St Mungo’s, a charity that operates rough sleeping, homelessness and other services across the country.

- Data from our street counts, which gives a snap shot of who is rough sleeping in Westminster on a given night.
- Evidence collected through the Westminster Homeless Action Together (WHAT) week, where over 250 rough sleepers were interviewed by volunteers over the course of a week in July 2016.
- Information gathered through consultation on the draft strategy.

Details of the lead person completing the screening/EIA

(i) Full Name: Richard Cressey

(ii) Position: Principal Policy Officer

(iii) Unit: Policy, Performance and Communications

(iii) Contact Details: rcressey@westminster.gov.uk

Date sent to Equalities@westminster.gov.uk

tbc

Version number and date of update

V3 – updated on 05/04/17

SECTION 1: Initial screening: Do you need to complete an Equality Impact Assessment (EIA)?

Not all proposals will require an EIA, this initial screening will help you decide if your project or policy requires a full EIA by looking at the potential impact on any equality groups.

1.1 Does the project, policy or proposal have the potential to disproportionately impact on any of the following groups? If so, is the impact positive or negative?				
	None	Positive	Negative	Not sure
Disabled people	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Particular ethnic groups	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Men or women (include impacts due to pregnancy/ maternity)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People or particular sexual orientation/s	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People who are proposing to undergo, are undergoing or have undergone a process or part of a process of gender reassignment	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People on low incomes	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People in particular age groups	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Groups with particular faiths and beliefs	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are there any other groups that you think may be affected negatively or positively by this project, policy or proposal? <i>Yes, people who have been in the armed forces or in institutional settings</i>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	
If the answer is “negative” or “unclear” consider doing a full EIA				
1.2 What do you think that the overall NEGATIVE impact on groups and communities will be?				
None/ Minimal		Significant		
<input checked="" type="checkbox"/>		<input type="checkbox"/>		
None or minimal impact would be where there is no negative impact identified, or where there will be no change to the services for any groups.		Significant impact would be where there is an impact is identified that has substantial impact on any groups.		

If the answer is “significant” consider doing a full EIA	
1.3	Using the screening information in questions 2.1 and 2.2, should a full EIA be carried out on the project, policy or proposal
	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
1.4	How have you come to this decision?
	Despite initial screening suggesting that the impacts will be positive on all groups (whether among rough sleepers or the wider community), due to the vulnerable nature of rough sleepers and the significance of the issue in Westminster, it has been decided to do a full EIA.

EQUALITY IMPACT ASSESSMENT

SECTION 2: BUILDING AN EVIDENCE BASE

2.1	Build up a picture of who uses/will use your service or facility and identify who are likely to be impacted by the proposal							
	<ul style="list-style-type: none"> <i>If you do not formally collect data about a particular group then use the results of local surveys or consultations, census data, national trends or anecdotal evidence (indicate where this is the case). Please attempt to complete all boxes.</i> <i>A baseline of data is available here</i> 							
	How many people use the service currently? What is this as a % of Westminster’s population?	<p>2,857 people were engaged with and offered support whilst sleeping on Westminster’s streets in 2015-16. Over 50% of these were supported away from the streets and did not spend a second night out.</p> <p>There are currently 414 clients in supported accommodation in Westminster through the rough sleeping pathway. This represents 0.2% of Westminster’s population.</p> <p>The below assesses equalities information across all rough sleepers in the borough, but it must also be taken into account that different cohorts within the overall rough sleeping population have differing (often multiple and cross-cutting) needs. For example, within the most entrenched population of rough sleepers there is a greater prevalence of complex support needs compared to the most people who are on the streets for a very short period of time and exit rough sleeping very quickly after an intervention.</p>						
	Age	<p>People aged 26– 55 are more likely to sleep rough than the wider Westminster population.</p> <table border="1" style="width: 100%; text-align: center;"> <thead> <tr> <th style="background-color: #4F81BD; color: white;">Age</th> <th style="background-color: #4F81BD; color: white;">Rough Sleepers</th> <th style="background-color: #4F81BD; color: white;">Westminster</th> </tr> </thead> <tbody> <tr> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>	Age	Rough Sleepers	Westminster			
Age	Rough Sleepers	Westminster						

		(Chain 2015/16)	Population (2011 Census)										
		Under 18	2%	18%									
		18-25	12%	11%									
		26-35	28%	23%									
		36-45	30%	17%									
		46-55	20%	12%									
		Over 55	10%	20%									
Disability	<p>CHAIN does not systematically record whether people have a physical or learning disability¹. Although there is no specific data on disabilities (using the definition under the Equality Act), there is data about a much wider range of self-identified support needs of rough sleepers.</p> <table border="1"> <thead> <tr> <th colspan="2">Support Need (CHAIN 2015/16)</th> </tr> </thead> <tbody> <tr> <td>Drugs</td> <td>36%</td> </tr> <tr> <td>Alcohol</td> <td>27%</td> </tr> <tr> <td>Mental Health</td> <td>47% (compared to 17% of the national average of people aged 18-64 estimated to have a common mental disorder²)</td> </tr> <tr> <td>None</td> <td>28%</td> </tr> </tbody> </table> <p>In the Common Health Assessment Tool (CHAT), a form completed by 268 service users within the Westminster rough sleeping pathway, 88% of people said they had a mental health issue. Furthermore, in the WHAT week findings:</p> <ul style="list-style-type: none"> ○ 25% of respondents said they had a chronic health issue ○ 14% of respondents said they had a physical disability which could limit the type of housing they could access ○ 17% of respondents said they have had trouble with their housing because of a mental health issue or concern. 			Support Need (CHAIN 2015/16)		Drugs	36%	Alcohol	27%	Mental Health	47% (compared to 17% of the national average of people aged 18-64 estimated to have a common mental disorder ²)	None	28%
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Sex	<p>Across the country, men are much more likely to sleep rough than women and this is also true in Westminster. However, even though only 17% of rough sleepers in Westminster in 2015/16 were women, this is higher than the London average.</p> <table border="1"> <thead> <tr> <th></th> <th>Rough Sleepers (CHAIN 2015/16)</th> <th>Westminster Population (2014 Mid-year estimates)</th> </tr> </thead> <tbody> <tr> <td>Women</td> <td>17%</td> <td>48%</td> </tr> </tbody> </table>				Rough Sleepers (CHAIN 2015/16)	Westminster Population (2014 Mid-year estimates)	Women	17%	48%				
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¹ There is a field for outreach workers to tick yes/no for Learning Disability but this field is not mandatory. There is also a field for outreach workers to use to indicate whether a rough sleeper has a physical health problem. This does not equate to a physical disability as it draws in a much wider range of conditions.

² [PANSI and POPPI, Oxford Brookes University 2014](#)

	Men	83%	52%																														
Race	<p>The below table shows ethnic groups which are more likely to sleep rough in Westminster, compared to the groups' share of the overall Westminster population.</p> <table border="1"> <thead> <tr> <th>Race</th> <th>Rough Sleepers (Chain 2015/16)</th> <th>Share of Westminster Population (2011 Census)</th> </tr> </thead> <tbody> <tr> <td>White – British</td> <td>27%</td> <td>35%</td> </tr> <tr> <td>White – Irish</td> <td>2%</td> <td>2%</td> </tr> <tr> <td>White – Other</td> <td>38%</td> <td>24%</td> </tr> <tr> <td>Gypsy/Romany/Irish Traveller NB These figures include people of Roma ethnicity, usually of Romanian origin. In 2014/15 Romanian nationals recorded in this ethnic category on CHAIN made up 13.6% of all rough sleepers in Westminster³.</td> <td>16%</td> <td> <ul style="list-style-type: none"> 0% - Gypsy or Irish Traveller Romany (part of Other Ethnic Group – Any other) - 3.9%⁴ </td> </tr> <tr> <td>Black</td> <td>8%</td> <td>7.5%</td> </tr> <tr> <td>Arab</td> <td>0%</td> <td>7%</td> </tr> <tr> <td>Asian</td> <td>2%</td> <td>14.5%</td> </tr> <tr> <td>Mixed</td> <td>1%</td> <td>5%</td> </tr> <tr> <td>Other</td> <td>2%</td> <td>15%</td> </tr> </tbody> </table> <p>Country of Origin According to CHAIN, 33% of rough sleepers in Westminster were from the UK in 2015/16. 47% of rough sleepers were from Central and Eastern European (CEE). Of those from the CEE, 69% were from Romania, and Romanians made up 32.8% of the total number of rough sleepers seen across the city. After the UK and Romania, Poland had the second highest number of rough sleepers in Westminster.</p>			Race	Rough Sleepers (Chain 2015/16)	Share of Westminster Population (2011 Census)	White – British	27%	35%	White – Irish	2%	2%	White – Other	38%	24%	Gypsy/Romany/Irish Traveller NB These figures include people of Roma ethnicity, usually of Romanian origin. In 2014/15 Romanian nationals recorded in this ethnic category on CHAIN made up 13.6% of all rough sleepers in Westminster ³ .	16%	<ul style="list-style-type: none"> 0% - Gypsy or Irish Traveller Romany (part of Other Ethnic Group – Any other) - 3.9%⁴ 	Black	8%	7.5%	Arab	0%	7%	Asian	2%	14.5%	Mixed	1%	5%	Other	2%	15%
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³ Roma Support Group/St. Mungos/City of Westminster, Rough Sleeping Roma in the City of Westminster (June 2016)

⁴ 3.9% of Westminster's population are part of Other Ethnic Group – Any other, which includes Romani people

		questionnaire, of the 265 respondents, 95% identified as heterosexual and 4% identified as gay, lesbian or bisexual. It is estimated that up to 10% of the Westminster population may be gay, lesbian, bisexual or transgender (LGBT).
	Gender Re-assignment	CHAIN does not gather information on the sexuality or transgendered status of rough sleepers. However, in the WHAT week questionnaire, 0.4% of respondents identified as transgender.
	Pregnancy and Maternity	CHAIN does not gather information on this. However, although the numbers are small, pregnant women are likely to be particularly vulnerable and it is important to engage with and support them at the earliest opportunity.
	Marriage and Civil Partnership	There has been evidence of an increase in the number of couples sleeping rough on the streets and the dimensions of these relationships can include substance misuse and domestic violence.
	People with institutional and armed forces history	People with institutional and armed forces history are more likely to sleep rough than the rest of the population. According to CHAIN, in 2015/16: <ul style="list-style-type: none"> • 10% of rough sleepers in Westminster had been in the armed forces at some point in their lives. 65% of those with armed forces experience were non-UK nationals • 12% had been in care at some point in their lives • 32% had been in prison at some point in their lives
	Low incomes	Although there is no data recorded about the incomes of rough sleepers, unemployment generally increases the likelihood of becoming homeless; one of the key reasons for rough sleeping is an inability to pay for or maintain a home. It is however, also the case that some individual rough sleepers could afford access to certain types of housing but choose not to do so in order to maximise remittances.
2.2	<p>Are there any equality groups that are overrepresented in the monitoring information relative to their size of the population? <i>If so, this could indicate that the proposal may have a disproportionate impact on this group even if it is a universal service. Information about Westminster’s population is on the Equalities page on the WIRE.</i></p>	
	<p><i>Yes, as outlined above, in Westminster, the below groups are overrepresented in the rough sleeping population relative to their size of the population in Westminster:</i></p> <ul style="list-style-type: none"> • <i>People aged between 26 – 55</i> • <i>Men are more likely to sleep rough than women- although the reasons for and experiences of rough sleeping for women are distinctive</i> • <i>People from White – Other and Gypsy, Romany and Irish Traveller groups (particularly those from Central and Eastern European countries)</i> • <i>People with complex support needs</i> • <i>People with institutional and armed forces history</i> 	

	<p><i>However, it should be noted that most rough sleepers do not have a local link to Westminster and come from elsewhere (either overseas or within the UK)</i></p>
<p>2.3</p>	<p>Are there any equality groups that are underrepresented in the monitoring information relative to their size of the population? <i>If so, this could indicate that the service may not be accessible to all groups or there may be some form of direct or indirect discrimination occurring.</i></p>
	<p><i>Yes, as outlined above, in Westminster, the below groups are underrepresented in the rough sleeping population relative to their size of the population in Westminster:</i></p> <ul style="list-style-type: none"> • <i>People aged under 18 or over 55</i> • <i>Women - although the reasons for and experiences of rough sleeping for women are distinctive</i> • <i>People from White – British, Arab, Asian, Mixed and Other groups</i> • <i>There is not enough data to assess whether LGBT people are over or under-represented in this group or whether people with a particular faith or religion are over or under represented.</i> <p><i>However, as set out above, it should be noted that most rough sleepers do not have a local link to Westminster and come from elsewhere (either overseas or within the UK)</i></p>

SECTION 3: ASSESSING THE IMPACT

In order to be able to identify ways to mitigate any potential impact it is essential that we know what those potential impacts might be.

3.1	<p>Consultation Information <i>This section should record the consultation activity undertaken in relation to this project, policy or proposal</i></p>
	<p>We undertook significant informal engagement with partner agencies in the early stages of development of the strategy. This included voluntary sector service providers with on the ground experience, the Metropolitan Police and the Central London Clinical Commissioning Group.</p> <p>We also benefited from extensive engagement with rough sleepers themselves through the Westminster Homeless Action Together (WHAT) week in September. This provided unprecedented insight from speaking to over 250 rough sleepers in Westminster throughout the WHAT week which was also used to inform the strategy.</p> <p>The strategy was subject to full public consultation between 26 September and 4 November 2017. The consultation involved a number of different forms of engagement with stakeholders ranging from residents, businesses and BIDs to voluntary sector organisations, public sector agencies and service users. In addition to a formal survey, during the consultation period, officers attended a number of events such as the Open Forum Public Meeting on 6 October, promoted the consultation through existing partnership meetings such as the West End Partnership and spent time talking to businesses in hotspot areas such as Victoria and the Strand.</p> <p>Overall we estimate that we engaged with 417 people or organisations via a number of channels, although there may be a small amount of duplication in these numbers where people were spoken to face-to-face as well as submitting a written response for example.</p>
3.2	<p>What might the potential impact on individuals or groups be? <i>Consider disability, race, gender, sexual orientation, transgender, age, faith or belief and those on low incomes and other excluded individuals or groups</i></p>
	<p>Overall, it is assessed that the impact of the strategy on the various equalities groups will be positive – both those among rough sleepers and those in the wider community who are affected by it. Rough sleeping in any form is harmful and dangerous and the key underpinning objective in the strategy is to prevent it as far as possible and then to support people away from the streets, regardless of the person’s age, gender, sexual orientation, transgender, race, faith or belief or disability. The strategy emphasises the importance of tailored approaches to help individuals off the streets. There is no evidence that any of the proposed services are inaccessible for any particular group (leaving aside the issue of those who cannot access housing benefit or do have no legal recourse to public funds, which is a matter of national policy and legislation and so falls outside the scope of this assessment).</p> <p>The draft strategy proposes to introduce a new person-centred assessment and referral process which will be used by all agencies working with a rough sleeper across the sector are likely to have a beneficial impact on all groups – which will focus on the individual needs of the rough sleeper, who is working with them and the support available. In particular, it will follow the service user through all of the agencies involved, to reduce the need for individuals to provide the same</p>

(frequently personal) information on numerous occasions. Furthermore, proposals to commission a new assessment centre which enables people's needs to be assessed more holistically over a longer period of time is likely to have a positive impact on all groups.

Some of the new commitments in the draft strategy are aimed specifically at some of the equalities groups, such as objectives around focussing support on people with mental health issues. Preventing people being discharged from hospital and prison without somewhere to stay will have positive impacts on people with health, or mental health problems, and those from an offending background. The commitment to taking a tailored approach to women who sleep rough is also likely to have a positive impact on this group by responding to the different experiences of female rough sleepers and providing specialist services to meet these needs.

As already noted, national legislation and policy mandate a different approach in the case of some individuals from outside the UK. Some non-UK nationals are not entitled to access some services provided in the city. The draft Strategy refers to the council's support for enforcement work to reduce rough sleeping among those who do not have rights to be in the UK (e.g. overstayers, failed asylum seekers, CEE nationals not exercising their treaty rights). This is in keeping with the overall approach of seeking to move people from the street as quickly as possible, reducing the scope for harm. The strategy sets out a number of actions to support those involved - we will work with agencies such as Routes Home to help supported connections where possible, and will broker bed spaces for the most vulnerable non-UK nationals to help support people through the process. The key underlying premise of the strategy is that rough sleeping is harmful and dangerous and there is a strong argument that returning someone to their country of origin (where they would have a better chance of accessing social assistance, accommodation and public funds) is a better outcome for the individual than leaving them on the streets of London. On balance the proposals in the draft Strategy for these groups are considered to be likely to have a positive impact for these groups.

SECTION 4: REDUCING & MITIGATING IMPACT

As a result of what you have learned, what can you do to minimise the impact of the proposed changes on equality groups and other excluded / vulnerable groups, as outlined above?

4.1	Where you have identified an impact, what can be done to reduce or mitigate the impact? (Remember to think about the Council as a whole, another service area may already be providing services which can help to deal with any negative impact).	
	Consider what actions can be put in place to remove or reduce your identified impact(s). Record all potential actions to show you have considered all options. Please note if no mitigating actions have been identified.	
	Column A – Issues or barriers, things to take into account	Column B – what changes can be made to remove or reduce barriers or negative impacts (Remember to think about the Council as a whole, another service area may already be providing services which can help to deal with any negative impact).
	The profile of rough sleepers in the borough changes (such as people in couples, increases in people from different countries) and new issues arise as a result of these changes	Ensure the new board to oversee the implementation of the strategy considers and reports on the strategy's impacts on equality groups during its implementation. Particular attention will be paid to any changes as a result of the UK decision to leave the European Union
4.2	Now that you have considered the potential or actual effect on equality, what action are you taking?	
	<input checked="" type="checkbox"/>	1. No major change (no impacts identified)
	<input type="checkbox"/>	2. Adjust the policy
	<input type="checkbox"/>	3. Continue the policy (impacts identified)
	<input type="checkbox"/>	4. Stop and remove the policy
	Your analysis demonstrates that the policy is robust and the evidence shows no potential for discrimination and you have taken all appropriate steps to advance equality & foster good relations between groups.	You will take steps to remove barriers or to better advance equality.
	You will adopt your proposal, despite any adverse effect provided you are satisfied that it does not unlawfully discriminate and it is justified.	There are adverse effects that are not justified and cannot be mitigated. The policy is unlawfully discriminating.
4.3	Please document the reasons for your decision	
	The strategy is likely to have positive impacts on all groups. Robust measures will be put in place for monitoring the impacts of the strategy and its equalities impacts.	

SECTION 5: ACTION PLAN

This section is for actions related any of the 9 protected characteristic: Age, Disability, Gender, Gender reassignment; Pregnancy & maternity, Race, Sexual Orientation or Religion/Belief

5.1	<p>Complete the action plan if you need to reduce or remove the negative impacts you have identified, take steps to foster good relations or fill data gaps.</p> <p><i>Please include the action required by your team/unit, groups affected, the intended outcome of your action, resources needed, a lead person responsible for undertaking the action (inc. their department and contact details), the completion date for the action, and the relevant RAG rating: R(ed) – action not initiated, A(mber) – action initiated and in progress, G(reen) – action complete.</i></p> <p>NB. Add any additional rows, if required.</p>						
	Action Required	Equality Groups Targeted	Intended outcome	Resources Needed	Name of Lead, Unit & Contact Details	Completion Date (DD/MM/YY)	RAG
	<i>Enter additional rows if required</i>						

THIS SECTION TO BE COMPLETED BY THE RELEVANT SERVICE MANAGER

SIGNATURE:

FULL NAME:

UNIT:

EMAIL & TELEPHONE EXT:

DATE (DD/MM/YYYY):

WHAT NEXT?

It is the responsibility of the service to complete an EIA to the required standard and the quality and completeness of EIAs will be monitored by EMT.

All completed EIAs should be sent to: Equalities@westminster.gov.uk