

**Form to be used for the Full Equalities Impact Assessment**

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| **Service Area:****Community Services** |  | **Section:****Active Communities** | **Date of Initial assessment:** | **Key Person responsible for assessment:** **Julia Castle, Mark Spriggs et al** | **Date assessment commenced:*** **Project Board established**
* **April – assessment undertaken**
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| **Name of Policy to be assessed:** | Barton Neighbourhood Centre development |
| **1. In what area are there concerns that the policy could have a differential impact** | ***Race******X*** | ***Disability******X*** | ***Age*** ***X*** |
| ***Gender reassignment******X*** | ***Religion or Belief******X*** | ***Sexual Orientation******X*** |
| ***Sex******X*** | ***Pregnancy and Maternity******X*** | ***Marriage & Civil Partnership******X*** |
| **Other strategic/ equalities considerations** | ***Safeguarding/ Welfare of Children and vulnerable adults******X*** | ***Mental Wellbeing/ Community Resilience******X*** |  |
| **2. Background:**Give the background information to the policy and the perceived problems with the policy which are the reason for the Impact Assessment. | The Council agreed £3.9m for regeneration projects within the existing Barton estate as part of its 2016/17 – 2019/20 MTFP. Following public engagement a package of projects was agreed including £150,000 for the redesign of the entrance and foyer of the Barton Neighbourhood Centre. It was agreed that these works should be aligned with the extension of the doctor’s surgery, which is being funded by s106 monies from the Barton Park development. The project will be run under the umbrella of the Investing in Barton Regeneration Programme and include co-ordinated works with the Communities team to improve usage and footfall.  |
| **3. Methodology and Sources of Data**:The methods used to collect data and what sources of data | Data collated from: Pre-existing satisfaction surveys, Reports from the Barton Community Association  Internal Council discussions  Consultation with stakeholders during Community Centre Strategy consultation period (Jan 2016) and engagement with the Barton community in 2015 (Big Barton Chat) last year at the Barton Play Day (June 2016) and the Barton Bash (October 2016).There was also consultation with young people in Barton in February 2016 ( girls youth club) and at boys youth club ( March 2017)  |
| **4. Consultation**This section should outline all the consultation that has taken place on the EIA. It should include the following. • Why you carried out the consultation.• Details about how you went about it. • A summary of the replies you received from people you consulted.• An assessment of your proposed policy (or policy options) in the light of the responses you received.• A statement of what you plan to do next | Consultation was carried out to understand the needs of stakeholders and the Barton community for an improved centre that was accessible to all. Consultation is also key to meeting local priorities ( agreed in 2016) for Barton including: * Deliver physical improvements to the current estate through regeneration, engagement and communication
* Engage all communities in shaping future community facilities and services in Barton

Big Barton Chat survey (279 Barton household responded) with the community in 2015 identified:  •47% of residents asked use Barton Neighbourhood Centre (BNC), of those, 25% use it just for the Health Centre •52% of respondents said they don’t use BNC; of those, 62% don’t use it because the offer available does not interest them. In 2016 after initial discussions with Bury Knowle Health Surgery around what improvements were due to take place in regards the GP extension, it was a suitable time to start engaging the community.During the CCS consultation (Jan 2016) a focus group made up of stakeholders, tenants and sub tenants of BNC took place, with the key items raised being: out of date signage and lack of perceived security due to low natural surveillance during quite times. In June 2016, at Barton Play Day – the Barton community was asked ‘what makes a great community centre’ the responses were grouped into:An open and welcoming centre • A variety of activities for all ages and communities• A colourful and bright centre• Better offer for groups• Affordable space• Good plumbing & clean toilets • Smiling, respectful staff, and• Knowing what’s on in the centre … makes a great community centre.These responses were used to develop options for improvements to the Centre, specifically the foyer area as this was a key are of the Community Centre strategy: At The Barton Bash community event in October 2016, the community were consulted on the intial designs with: 78% responding they liked or very much lived the proposals.When asked what areas of the proposals OCC should prioritise, with the foyer and health centre extension being voted top priorities for the community. When asked if there was anything further we should be looking at , 30% of respondents said the management of the building.  |
| **5. Assessment of Impact:**Provide details of the assessment of the policy on the six primary equality strands. There may have been other groups or individuals that you considered. Please also consider whether the policy, strategy or spending decisions could have an impact on safeguarding and / or the welfare of children and vulnerable adults |

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| **Race** | **Disability** | **Age** |
| Neutral | Neutral | Neutral |
| **Gender reassignment** | **Religion or Belief** | **Sexual Orientation** |
| Neutral | Neutral | Neutral |
| **Sex** | **Pregnancy and Maternity** | **Marriage & Civil Partnership** |
| Neutral | Neutral | Neutral |

The project as designed improves access to toilet and healthcare facilities for the elderly and disabled. Provides for improved baby feeding and changing facilities. All other elements are neutral as beyond the project all other issues will come down to clear management strategies whereby both the Council and Association have clear equalities policies. |
| **6. Consideration of Measures**:This section should explain in detail all the consideration of alternative approaches/mitigation of adverse impact of the policy | Improving access around the building was a clear priority, especially improving the toilet facilities. The proposal has met this, and it is the project that is the on-going mitigation in dealing with age and disability equality of access. |
| **6a. Monitoring Arrangements:**Outline systems which will be put in place to monitor for adverse impact in the future and this should include all relevant timetables. In addition it could include a summary and assessment of your monitoring, making clear whether you found any evidence of discrimination.  |  **Monitoring use****Complete up to date satisfaction survey of users****Feedback from tenant and user groups****On completion:****Numbers using the new Drs Surgery****Any increase in overall use – business case for magic eye system** |
| **7. Date reported and signed off by City Executive Board:**  |  |
| **8. Conclusions**:What are your conclusions drawn from the results in terms of the policy impact | **The refurbishment of the facility should improve the sense of arrival by all users, a clear sense of purpose and welcome. The internal changes will improve visibility of staff, access to services (including toilets) and an overall increase in use.**  |
| **9. Are there implications for the Service Plans?**  | YES/NO | **10. Date the Service Plans will be updated** |  | **11. Date copy sent to Equalities Lead Officer**  |  |
| .**13. Date reported to Scrutiny and Executive Board:** |  | **14. Date reported to City Executive Board:** |  | **12. The date the report on EqIA will be published** |  |