

Shropshire Council
Equality, Social Inclusion and Health Impact Assessment (ESHIA)
Stage One Screening Record 2024

A. Summary Sheet on Accountability and Actions

Name of proposed service change
Shrewsbury Movement and Public Space Strategy

Name of the officer carrying out the screening
Tim Pritchard & Claire Evans

Decision, review, and monitoring

Decision	Yes	No
Initial (Stage One) ESHIA Only?	X	
Proceed to Stage Two Full ESHIA or HIA (part two) Report?		X

If completion of a Stage One screening assessment is an appropriate and proportionate action at this stage, please use the boxes above, and complete both part A and part B of this template. If a Full or Stage Two report is required, please move on to full report stage once you have completed this initial screening assessment as a record of the considerations which you have given to this matter.

Actions to mitigate negative impact or enhance positive impact of the service change in terms of equality and social inclusion considerations
<p>The Shrewsbury Movement and Public Space Strategy fits into the wider plans for Shrewsbury and the Shrewsbury Big Town Plan (BTP) Masterplan Vision 2020. The Masterplan Vision identifies the importance of movement and the need to ensure that all residents, visitors, and workers who need to travel in Shrewsbury can do so by affordable, inclusive modes whilst adopting sustainable behaviours.</p> <p>Following a nine-week period of public consultation between 26 January and 31 March 2024, on the draft Strategy, approved by Cabinet, there is now an even greater degree of confidence that the development and delivery of the Shrewsbury Movement and Public Space Strategy (MPSS) will bring potential positive impacts for communities in Shropshire. The strategy will ensure that the goals and objectives of the Shrewsbury Big Town Plan are realised by creating a vibrant, safe and inclusive town for residents, people working in the town, and visitors.</p> <p>The consultation responses have been extensively analysed. Respondents to the survey, via Commonplace, represent a diverse range of characteristics that align with the broader population of Shrewsbury. As a result, the survey results have been deemed representative and reflective of Shrewsbury’s overall characteristics in terms of gender, age, ethnicity, disability and employment status. Positive impacts would be intended for a variety of intersecting Protected Characteristic groupings as defined by the Equality Act 2010 (Age, Disability, Pregnancy and Maternity, Sex) through tackling</p>

issues associated with the transport network, ensuring that Shrewsbury is accessible for all. Furthermore, there is potential for an increase in the positive impact in equality terms from low to positive, for the groupings of Gender Reassignment, Race, Religion and Belief, and Sexual Orientation. This will be achieved through measures outlined within the Strategy anticipated to result in safety gains for; pedestrians, cyclists and other active modes of transport, such as mobility scooters, wheelchair user and people with pushchairs and prams. The reduction in vehicular traffic in the town centre will create more space for pedestrians and cyclists and allow for the introduction of pedestrian areas and dedicated cycle lanes.

Through the enhancement, and in some instances repurposing, of the public space within the town it is anticipated that personal safety could also be improved through the use of lighting, improved natural surveillance and initiatives such as 'designing out crime' through engagement with Designing Out Crime Officers at West Mercia Police in and designing with young people and girls in mind championed by Make Space for Girls charity [Home \(makespaceforgirls.co.uk\)](https://www.makespaceforgirls.co.uk).

It is recognised that in improving perceptions of personal safety through a range of such measures, this will help younger people, irrespective of the gender with which they identify, thereby leading to positive impacts for those in the Protected Characteristic groupings of Sex and Gender Reassignment as well as Age. The aim in so doing is to also achieve positive impacts for those in our additional groupings as a Council, which whilst not mandated in Equality Act legislation help us to give due regard to the needs of those who are vulnerable by virtue of their circumstances, and those who consider themselves to be vulnerable. This includes young people leaving care, and those at risk of social exclusion.

Given the recognised intersectionality across the nine Protected Characteristic groupings as set out in the Equality Act 2010, as well as our additional groupings, there will be a predicted positive impact for individuals and households across groupings, particularly in the groupings of Age and Disability. For example, young people who may have a learning disability will benefit from quieter streets within the town centre, empowering individuals to feel confident walking and cycling within the town centre, creating a much more pleasant environment for all to enjoy. Similarly, older people who may be frailer due to associated physical disability may also feel more confident about venturing out, therefore mitigating against loneliness as well as improving physical wellbeing.

The results of the consultation have provided reassurance that we have engaged with a diverse age range through the capturing of participants age ranges as part of the consultation responses. Strategic interventions outlined within the MPSS will also benefit neurodiverse individuals. This will be achieved through public space improvements which will make public spaces safe and accessible for everyone. As the strategic interventions progress into bespoke work packages, detailed design will be conducted, including engagement with a range of accessibility groups to ensure that Shrewsbury is inclusive. For example, it is important that any wayfinding implemented across the town is multi-sensory, enabling neurodiverse individuals to be able to experience the town in a safe and accessible manner.

Previous engagement undertaken as part of the Shrewsbury Big Town Plan identified that consultation responses are significantly underrepresented in people aged 25 and under. It is recognised that this is an inherent problem with consultations. To rectify this, a representative who works closely with young people

was selected to be a member of the 'Core Advisory Group' for MPSS and attended some sessions. This group consulted and collaborated on the development of the strategy throughout the project, ensuring that young people's views were considered.

Further opportunities were made available for young people to input into the strategy as part of the formal public consultation, such as specific workshops in secondary schools and Shrewsbury Colleges Group and inclusion in secondary school homework apps that saw an average of 32 minutes spent by pupils feeding back on the interventions and their relative importance to them. This activity has ensured that younger people's input has been considered as this age group will inherit the outcomes of the Movement and Public Space Strategy and often feel overlooked in the decision-making process. Overall, engagement with young people has provided fresh perspectives on the proposals and ensures their voices are heard. This is important as it ensures that the Movement and Public Space Strategy remains relevant for future generations.

Overall, there will therefore be positive equality impacts anticipated across local communities and groupings within the community, as the Strategy sets out to support creation of a vibrant, safe and inclusive town centre.

Actions to mitigate negative impact or enhance positive impact of the service change in terms of health and wellbeing considerations

The emphasis placed on active travel, and alternative modes of travel will enhance health and wellbeing within the town and in some instances directly contribute to improved health outcomes. Increasing physical activity and minimising the time spent sitting down helps to maintain a healthy weight and reduces the risk of cardiovascular disease, type 2 diabetes, cancer, and depression. The UK Chief Medical Officers recommend that adults should do at least 150 minutes of moderate activity, or 75 minutes of vigorous activity, each week.

The area near Shrewsbury's Railway Station has Shropshire's highest level of nitrogen dioxide and large areas of the town centre are within the designated Air Quality Management Area (AQMA). As per the Environmental Act (2021), local authorities are required to develop a clear action plan outlining measures aimed at achieving and maintaining air quality standards and objectives in the area. A reduction in vehicular emissions and a robust improvement to air quality in the town centre will contribute to a cleaner, safer environment. Interventions within the MPSS can contribute towards potentially revoking the AQMA. The current Levelling Up Funded Project around the Station Gyrotory is aiming to reduce the NO₂ omissions by 21%, bringing the level down NO₂ from 52.95µg/m³ to 41.8 µg/m³ within the area.

There are acknowledged public health and wellbeing benefits of increased walking and cycling rates, as this is both an incentive to improve an individual's health and will help reduce demand on health services via avoidable disease prevention.

[Health matters: getting every adult active every day - GOV.UK \(www.gov.uk\)](https://www.gov.uk/health-matters-getting-every-adult-active-every-day)

Access to blue and green spaces, as championed within the Movement and Public Space Strategy will have a further positive impact on wellbeing, by providing increased access to areas and the implementation of mini parks, with proposed new parkland at Smithfield Riverside to enhance physical and mental wellbeing for residents.

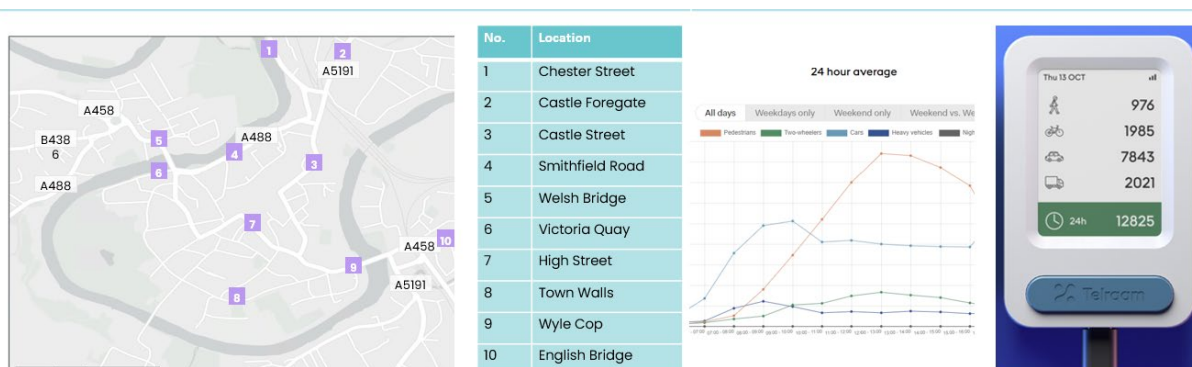
Actions to review and monitor the impact of the service change in terms of equality, social inclusion, and health considerations

As part of the delivery of the Movement and Public Space Strategy, it is necessary to develop a clear communications and relationship plan to underpin the priorities and objectives of the Strategy and to support behavioural change in residents and visitors to Shrewsbury to enable modal shift.

The governance arrangements put in place to commission, manage and deliver the MPSS, are proposed to be retained to take forward the strategy into delivery. Overseen by the Shrewsbury Big Town Plan Movement Strategy Steering Group, comprising local councillors, representations of the Big Town Partnership, Council officers, specialist consultancy advisors, this stakeholder group will continue to sponsor the implementation of the Strategy.

There is an acknowledged need to interpret, animate, and activate the Strategy so that the proposals can be easily understood, through testing and demonstrating what change could look like in the future. This has resulted in development of 'Shrewsbury Moves' as a stand-alone brand that will continue to be used across all movement activity, and a new website www.shrewsburymoves.com was launched in early September 2024. It showcases the associated documentation and demonstrate project development that is being undertaken in support of delivery of the strategy and includes the imminent launch of associated projects such as the UKSPF Funded Shrewsbury Moves which will help deliver a number of the interventions within the strategy, particularly related to bike hire, last mile delivery and secure cycling storage.

In addition, that project has funded 10 Telraam cameras that are in situ within the town centre that show in real time the number of movements being undertaken in those areas and captures active travel movements such as walking and cycling. This will facilitate ongoing review and monitoring of the interventions and the modal shifts that have been enable as a result.



They

use open-source data and provide a live dashboard of activity via <https://telraam.net/en/network/shrewsbury-moves> and further cameras can be added to the network over time.

Ongoing communication, engagement and public consultation with residents and key stakeholders in Shrewsbury will assist in necessary consideration of any potential negative neutral and positive impacts of the strategic interventions outlined in terms of equality, social inclusion, and health. A key outcome of the public consultation was the acknowledgement that Respondents want to be kept informed on the proposals and want

to play an active role in decision making as interventions continue to progress.

Monitoring and evaluation are essential to ensuring that the Movement and Public Space Strategy achieves the goals and objectives outlined within the Big Town Plan.

Further monitoring and evaluation of each bespoke workstream will be developed in detail as schemes progress within the planning phase of individual interventions, ensuring that a baseline and future position can be established to track progress.

It is likely that a large number of interventions will be externally funded, and the likely funder will also require extensive monitoring and evaluation as part of the funding obligations put in place.

The additional engagement work as interventions are developed will include efforts to strengthen engagement with people in protected characteristic groupings and people at risk of social exclusion, to maximise positive health impact benefits for individuals and for the wider community, and to define and deliver actions accordingly to mitigate any negative impact and enhance positive impact of the proposals as they progress.

Associated ESHIAs

This current ESHIA for the Shrewsbury Movement and Public Space Strategy (September 2024) updates the ESHIA supporting the recommendation to consult with the public that was approved by Cabinet on 17 January 2024, and has been reviewed ahead of December 2024 Council. It serves to review the contents of the public consultation report and update the engagement that has been undertaken with the Protected Characteristic Groupings and demonstrates the Strategy's evidence of Council commitment to engage with people within and across these groupings as individual interventions within the strategy are developed.

An initial Equality, Social and Health Impact Assessment (ESHIA) completed for the Shrewsbury Big Town Plan was signed off on 17th October 2018 with a follow up ESHIA in January 2021.

ESHIA's were also previously carried out in relation to the development of the Council's Economic Growth Strategy 2022 - 2027, before and following public consultation. These provide useful additional context for the overall strategic policy of the Council towards economic growth as an integral element of place shaping approaches across the County.

The current ESHIA for the Smithfield Riverside Strategic Development Framework is also of pertinence which accompanied the associated report to Cabinet on 21 March 2024.

ESHIA's in relation to the Local Plan Partial Review provide further complementary detail not least regarding longer term approaches to infrastructure planning and provision. Given the policy implications associated with highways those undertaken in related service areas regarding transport and movement strategies are also relevant.

Actions to mitigate negative impact, enhance positive impact, and review and monitor overall impacts in terms of climate change considerations and any other impacts with regard to economic and societal implications

Whilst the Shrewsbury Movement and Public Space Strategy is primarily movement and place-making focused, there are many benefits in terms of equality, diversity and social inclusion associated with a resilient town such as increased employment opportunity, provision of housing, infrastructure benefits, facilities and utilities, climate change considerations and well-being improvements.

The Shrewsbury and Movement Public Space Strategy provides a bold and ambitious plan for the town of Shrewsbury, positively influencing the town centre as well as Shropshire as a whole.

Climate Change

The Movement and Public Space Strategy establishes a coherent set of strategic interventions which will have positive outcomes in terms of climate change. The interventions seek to provide a more pleasant environment for pedestrians and cyclists and discouraging vehicular modes. This will lead to modal shift to active modes of transport and public transport, resulting in reduced energy and fuel consumption, contributing to a healthy environment.

Health and Wellbeing




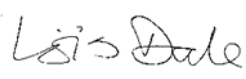

The proposals seek to enhance the pedestrian and cycle environment across the town. As documented within the Chief Medical Officers annual report, active travel can achieve significant health benefits for children and adults, boosting people's mood and reducing feelings of anxiety. Other potential health and well-being impacts are evident in terms of road safety, with proposals to reduce through traffic within the town and reduce vehicular speeds, benefiting pedestrians and cyclists across age demographics from a safer streets' perspective.

Explicit recognition may also be given to the positive impact that enabling greater active travel can have for future mental health and wellbeing challenges which are likely to arise as a direct result of climate change (by virtue of both physical exercise and engagement with the natural environment). The proposals also facilitate travel resilience within the town where both travel by both private and public transport vehicles are restricted by the impact of extreme weather events such as flooding.

Economic and societal/wider community

The Movement and Public Space Strategy establishes interventions which will provide enhanced walking and cycling facilities within the town centre and neighbourhoods across Shrewsbury. This will establish a sense of civic pride within residential areas, with much less traffic across the town enabling people to make streets their own. It is also well evidenced that visitors who walk to town centres spend more than those who visit by alternative modes. Therefore, the strategy will ensure that the town centre's economic vitality and viability is boosted.



Scrutiny at Stage One screening stage

People involved	Signatures	Date
<i>Lead officer for the proposed service change</i>	Tim Pritchard 	20 August 2024
<i>Officer carrying out the screening</i>	Claire Evans 	19.8.2024
<i>Any other internal service area support*</i>	Ffion Horton 	27/08/2024
<i>Any external support**</i>	Lois Dale  Simon Stallard S.Stallard  Phillip Northfield Public Health Development Officer	27.08.2024 20.08.2024 27.08.2024

****This refers to other officers within the service area***

****This refers to support external to the service but within the Council, e.g., the Performance and Research Specialist for Rurality and Equalities, Public Health colleagues, the Feedback and Insight Team, performance data specialists, Climate Change specialists, etc.**

Sign off at Stage One screening stage

Name	Signatures	Date
<i>Lead officer's name</i>	Tim Pritchard 	20 August 2024
<i>Service manager's name</i>	Tracy Darke 	29 August 2024

***This may either be the Head of Service or the lead officer**

B. Detailed Screening Assessment

Aims of the service change and description
<p>The Shrewsbury Movement and Public Space Strategy fits into the wider plans for Shrewsbury and the Shrewsbury Big Town Plan (BTP) Masterplan Vision 2020. The Masterplan Vision identifies the importance of movement and the need to ensure that all residents, visitors, and workers who need to travel in Shrewsbury can do so by affordable, inclusive modes whilst adopting sustainable behaviours. It has been developed with the engagement of key stakeholders, businesses, and partners.</p> <p>Shrewsbury Movement and Public Space Strategy puts place-shaping at its core to create a vibrant, safe, and inclusive town centre for residents and visitors of all ages to live, work, learn and enjoy, throughout the day and night. It also establishes a resilient place-based approach to adapting to climate change, air quality and promotes health and wellbeing imperatives through improvements to the public space that are sympathetic and appropriate to its historic environment, whilst sustaining and enhancing the town's distinctiveness. Whilst plans are included in the Shrewsbury Movement and Public Space Strategy to demonstrate the principles developed, the plans are purely illustrative and not definitive design solutions at this stage. These plans will evolve with time and through further public consultation over and above the entire Movement and Public Space Strategy consultation that took place for 9 weeks, completing on 31 March 2024.</p> <p>The Shrewsbury Movement and Public Space Strategy is an ambitious plan for the town of Shrewsbury and the surrounding area. The strategy has the potential to not only transform Shrewsbury, but to act as a catalyst for regeneration and growth of the whole of Shropshire. The Strategy will truly capitalise on the movement vision set out in the Shrewsbury Masterplan Vision and establish affordable, inclusive modes of transport whilst adopting sustainable behaviours, making Shrewsbury one of the most inclusive and accessible towns in the UK (United Kingdom) and become a centrepiece of Shropshire's economic growth.</p>

Moreover, the strategy will also improve conditions for people accessing amenities and destinations across Shrewsbury. This will be achieved by improving active travel and public transport connections, fostering the ability for people to shop locally in a sustainable manner. This will enhance the economic vitality of the town as there is strong evidence that pedestrians and cyclists spend more than people arriving by motorised transport.

Intended audiences and target groups for the service change

The intended immediate audience for the Shrewsbury Movement and Public Space Strategy is everyone who lives in, works in or visits Shrewsbury. Given its county town status, there is also a wider impact on Shropshire as a whole and its direct hinterlands and therefore all groupings within the community, as well as those who serve them such as; the Council, town and parish councils, the wider business community and education sector, the voluntary and community sector, the health and social care sector, and organisations and bodies involved in enabling and facilitating economic growth.

This also means that neighbouring authorities, including Herefordshire and Telford and Wrekin Council as part of the triumvirate of local authorities in the Marches Local Enterprise Partnership, and authorities across the borders into Wales and across to the West Midlands are included.

The main stakeholder groups were identified as follows:

- Local businesses
- Business partnerships and support bodies, including Shrewsbury Business Improvement District
- Public sector bodies
- Town and Parish Councils
- Members of Parliament in Shropshire
- Organisations with strategic and cross boundary economic and environmental interests, including neighbouring local authorities, and the Marches Local Enterprise Partnership (LEP)
- Public Transport Operators
- Active Travel User Groups
- Public Transport User Groups
- Emergency Services
- Resident Groups / Local Activists
- Young Peoples Groups
- Accessibility Groups
- Environmental Groups
- Media
- Members of the public

This list is not intended to be exhaustive or in order of priority and will be added to and amended as and when appropriate, including through feedback from consultation.

Evidence used for screening of the service change

The Movement and Public Space Strategy is supported by a robust evidence base.

The Shrewsbury Movement and Public Space Strategy is framed by the wider town centre vision ([The Big Town Plan](#)) which supports the delivery of inclusive, sustainable transport modes. The Strategy is also consistent with current Local Transport Plan 3 (LTP3) and the emerging LTP4 which sets out the long-term strategy for highways, transport, and mobility for Shropshire.

Over the last three years Shrewsbury has been the focus of an ambitious plan for growth, driven forward by the Big Town Plan. This plan outlined a series of key themes for the town, which included rethinking movement and place. The plan has since been progressed in 2020 through the creation of the [Shrewsbury Masterplan Vision](#) to drive forward the aspirations of the original Big Town Plan. This Masterplan Vision was created in unison with a Movement vision for Shrewsbury for all residents. A key driver of both these plans has been to connect communities and create balanced growth.

The Strategy outlines a set of key principles which have been developed to align with the Big Town Plan:

- Reduce / remove through traffic from town centre.
- Ensure convenient access to town centre and local facilities and uptake of sustainable modes for these journeys.
- Reduce vehicle speeds and volume of private cars.
- Reduce severance caused by River Severn
- Increase priority given to buses, pedestrians and cyclists and improve road safety for all users.
- Provide a more sympathetic backdrop for historic and environmental assets.
- Enhance Park and Ride offer and incentivise use.
- Improve resilience of local transport network to extreme weather events
- Provide an efficient public transport network, with improved bus facilities in town centre.
- Improve cross-town connectivity by sustainable transport modes.
- Ensuring servicing access to businesses and event sites is maintained.
- Improve environmental quality and air quality.
- Reallocate road space to provide more space for businesses and event activity, pedestrians, and cyclists.

The [Shropshire Local Plan Review](#) outlines key objectives that Shropshire must take regarding transport, most notably to reduce our dependency on private motor vehicles and fossil fuels by using 'active' travel opportunity by walking, wheeling, or cycling wherever possible.

According to the [House of Commons library](#), Shrewsbury and Atcham has the worst asthma rate in the West Midlands, at 7.3 per cent of the total population. The intended interventions will seek to reduce the dominance of the private vehicle, helping to reduce harmful greenhouse emissions and encourage physical activity, helping to ease issues associated with asthma.

Specific consultation and engagement with intended audiences and target groups for the service change

Throughout the development of the Movement and Public Space strategy, key stakeholders have been invited to shape ideas for Shrewsbury and create a working strategy.

Engagement to date has been conducted with four key stakeholder groups:

1. Internal stakeholders

Internal stakeholders from Shropshire Council, Shrewsbury BID (Business Improvement District) and Shrewsbury Town Council were constantly kept up to date as part of the Shrewsbury Movement Delivery Working Group and Steering Group, enabling robust governance arrangements to be established.

2. Key external stakeholders / interest groups

To balance multiple interests that key external stakeholders hold, a Core Advisory Group was established. This consisted of a range of organisations from the public, private and charity sector who were seen as fundamental to the success of the project. Consultation and collaboration with this advisory group was conducted throughout the development of the Strategy through 4 workshops across the development of the strategy.

3. Councillors / Businesses

Bespoke councillor and business workshops were organised to ensure these stakeholder groups were well-informed about the Strategy and allow opportunities to ensure that the Strategy met their aspirations.

4. The public

Members of the public were kept up to date with the progress of the strategy through the Shrewsbury Moves website and Commonplace.

The public consultation for the Movement and Public Space Strategy took place over a 9-week period from 26 January to 31 March 2024, and demonstrates an overall positive sentiment towards the key principles within the strategy and the proposed interventions.

The Commonplace website, utilised for the consultation [Community Forum - Shrewsbury Moves - Commonplace](#), received 8,881 visitors and 4,547 contributions were submitted from 1,018 respondents. There was a weekly in-person presence over the 9-week period and the boards remain in situ within St Marys Church on Dogpole within the town centre. It was accompanied with a PR campaign associated with raising awareness of the consultation, including totems around the town centre, press releases and radio interviews and meetings with special interest groups.

The results of the public consultation identified what the Top 5 priorities were that the public wished to see addressed:

- Key Principle A – Reduce/remove through traffic from the town centre.
- Key Principle I – Provide an efficient public transport network with improved facilities in the town centre.
- Key Principle C – Reduce vehicle speeds and volumes of private motor vehicles.
- Key Principle M – Reallocate road space to provide space for business and event activity, pedestrians and cyclists.
- Key Principle J – Improve cross-town connectivity by sustainable transport modes.

This demonstrates the positive impact that the Strategy could have on equality and social inclusion considerations through their delivery via the interventions detailed.

There is an 86-page report of the Public Consultation results included in the Appendices of the associated Cabinet Report – provided as Appendix 3 and a You said: we did extract provided as Appendix 6.

Initial equality impact assessment by grouping (Initial health impact assessment is included below this table)

Please rate the impact that you perceive the service change is likely to have on a group, through stating this in the relevant column.

Please state if it is anticipated to be neutral (no impact) and add any extra notes that you think might be helpful for readers.

Protected Characteristic groupings and other groupings in Shropshire	High negative impact <i>Stage Two ESHIA required</i>	High positive impact <i>Stage One ESHIA required</i>	Medium positive or negative impact <i>Stage One ESHIA required</i>	Low positive, negative, or neutral impact (please specify) <i>Stage One ESHIA required</i>
<u>Age</u> (please include children, young people, young people leaving care, people of working age, older people. Some people may belong to more than one group e.g., a child or young person for whom there are safeguarding concerns e.g., an older person with a disability)			X	
<u>Disability</u> (please include cancer; HIV/AIDS; learning disabilities; mental health conditions and syndromes; multiple sclerosis; neurodiverse conditions such as autism; hidden disabilities such as Crohn's disease; physical and/or sensory disabilities or impairments)			X	
<u>Gender re-assignment</u> (please include associated aspects: safety, caring responsibility, potential for bullying and harassment)				Neutral
<u>Marriage and Civil Partnership</u> (please include associated aspects: caring responsibility, potential for bullying and harassment)				Neutral
<u>Pregnancy and Maternity</u> (please include associated aspects: safety, caring responsibility, potential for bullying and harassment)			X	
<u>Race</u> (please include ethnicity, nationality, culture, language, Gypsy, Roma, Traveller)				Neutral

Religion or belief (please include Buddhism, Christianity, Hinduism, Islam, Jainism, Judaism, Nonconformists; Rastafarianism; Shinto, Sikhism, Taoism, Veganism, Zoroastrianism, and any others)				Neutral
Sex (this can also be viewed as relating to gender. Please include associated aspects: safety, caring responsibility, potential for bullying and harassment)				Neutral
Sexual Orientation (please include associated aspects: safety; caring responsibility; potential for bullying and harassment)				Neutral
Other: Social Inclusion (please include families and friends with caring responsibilities; households in poverty; people for whom there are safeguarding concerns; people you consider to be vulnerable; people with health inequalities; refugees and asylum seekers; rural communities; and veterans and serving members of the armed forces and their families)			X	

Initial health and wellbeing impact assessment by category

Please rate the impact that you perceive the service change is likely to have with regard to health and wellbeing, through stating this in the relevant column.

Please state if it is anticipated to be neutral (no impact) and add any extra notes that you think might be helpful for readers.

Health and wellbeing: individuals and communities in Shropshire	High negative impact <i>Part Two HIA required</i>	High positive impact	Medium positive or negative impact	Low positive negative or neutral impact (please specify)
Will the proposal have a <i>direct impact</i> on an individual's health, mental health and wellbeing?		X – Improvements to road safety and health and wellbeing		

<p>For example, would it cause ill health, affecting social inclusion, independence and participation?</p> <p>.</p>		<p>through improved walking and cycling infrastructure</p>		
<p>Will the proposal indirectly impact an individual's ability to improve their own health and wellbeing?</p> <p>For example, will it affect their ability to be physically active, choose healthy food, reduce drinking and smoking?</p> <p>.</p>		<p>X – Proposals will make walking and cycling safer through much less traffic within the town</p>		
<p>Will the policy have a direct impact on the community - social, economic and environmental living conditions that would impact health?</p> <p>For example, would it affect housing, transport, child development, education, employment opportunities, availability of green space or climate change mitigation?</p> <p>.</p>			<p>X – Measures will provide improved opportunities for walking and cycling and will reallocate space from private cars to other uses such as parklets, play space or green space.</p>	
<p>Will there be a likely change in demand for or access to health and social care services?</p> <p>For example: Primary Care, Hospital Care, Community Services, Mental Health, Local Authority services including Social Services?</p> <p>.</p>				<p>Neutral</p>

Guidance Notes

1. Legal Context

It is a legal requirement for local authorities to assess the equality and human rights impact of changes proposed or made to services. It is up to us as an authority to decide what form our equality impact assessment may take. By way of illustration, some local authorities focus more overtly upon human rights; some include safeguarding. It is about what is considered to be needed in a local authority's area, in line with local factors such as demography and strategic objectives as well as with the national legislative imperatives.

Carrying out these impact assessments helps us as a public authority to ensure that, as far as possible, we are taking actions to meet the general equality duty placed on us by the Equality Act 2010, and to thus demonstrate that the three equality aims are integral to our decision-making processes. These are: eliminating discrimination, harassment and victimisation; advancing equality of opportunity; and fostering good relations.

These screening assessments for any proposed service change go to Cabinet as part of the committee report, or occasionally direct to Full Council, unless they are ones to do with Licensing, in which case they go to Strategic Licensing Committee.

Service areas would ordinarily carry out a screening assessment, or Stage One equality impact assessment. This enables energies to be focussed on review and monitoring and ongoing evidence collection about the positive or negative impacts of a service change upon groupings in the community, and for any adjustments to be considered and made accordingly.

These screening assessments are recommended to be undertaken at timely points in the development and implementation of the proposed service change.

For example, a Stage One ESHIA would be a recommended course of action before a consultation. This would draw upon the evidence available at that time, and identify the target audiences, and assess at that initial stage what the likely impact of the service change could be across the Protected Characteristic groupings and our additional categories. This ESHIA would set out intended actions to engage with the groupings, particularly those who are historically less likely to engage in public consultation eg young people, as otherwise we would not know their specific needs.

A second Stage One ESHIA would then be carried out after the consultation, to say what the feedback was, to set out changes proposed as a result of the feedback, and to say where responses were low and what the plans are to engage with groupings who did not really respond. This ESHIA would also draw more upon actions to review impacts in order to mitigate the negative and accentuate the positive.

Meeting our Public Sector Equality Duty through carrying out these ESHIAs is very much about using them as an opportunity to demonstrate ongoing engagement across groupings and to thus visibly show we are taking what is called due regard of the needs of people in protected characteristic groupings.

2. Council Wide and Service Area Policy and Practice on Equality, Social

Inclusion and Health

This involves taking an equality and social inclusion approach in planning changes to services, policies, or procedures, including those that may be required by Government. The decisions that you make when you are planning a service change need to be recorded, to demonstrate that you have thought about the possible equality impacts on communities and to show openness and transparency in your decision-making processes.

This is where Equality, Social Inclusion and Health Impact Assessments (ESHIA) come in. Where you carry out an ESHIA in your service area, this provides an opportunity to show:

- What evidence you have drawn upon to help you to recommend a strategy or policy or a course of action to Cabinet.
- What target groups and audiences you have worked with to date.
- What actions you will take in order to mitigate any likely negative impact upon a group or groupings, and enhance any positive effects for a group or groupings; and
- What actions you are planning to monitor and review the impact of your planned service change.

The formal template is there not only to help the service area but also to act as a stand-alone for a member of the public to read. The approach helps to identify whether or not any new or significant changes to services, including policies, procedures, functions, or projects, may have an adverse impact on a particular group of people, and whether the human rights of individuals may be affected.

There are nine Protected Characteristic groupings defined in the Equality Act 2010. The full list of groupings is: Age; Disability; Gender Reassignment; Marriage and Civil Partnership; Pregnancy and Maternity; Race; Religion or Belief; Sex; and Sexual Orientation.

There is also intersectionality between these. Eg a young person with a disability would be in the groupings of Age and Disability, and if they described themselves as having a faith they would then also be in the grouping of Religion or Belief.

We demonstrate equal treatment to people who are in these groups and to people who are not, through having what is termed 'due regard' to their needs and views when developing and implementing policy and strategy and when commissioning, procuring, arranging, or delivering services.

Social inclusion is then the wider additional category we use in Shropshire, in order to help us to go beyond the equality legislation in also considering impacts for individuals and households with regard to the circumstances in which they may find themselves across their life stages. This could be households on low incomes, or households facing challenges in accessing services, such as households in rural areas, and veterans and serving members of the armed forces and their families, or people that we might consider to be vulnerable, such as young people leaving care or refugee families.

Please note that the armed forces are now a grouping to whom we are required to give due regard under new Armed Forces legislation, although in practice we have been doing so for a number of years now, and that we also now have young people leaving care as an additional grouping to whom we give due regard as well. This groupings were already identified in the groupings of Age and of Social inclusion.

When you are not carrying out an ESHIA, you still need to demonstrate and record that you have considered equality in your decision-making processes. It is up to you what format you choose. You could use a checklist, an explanatory note, or a document setting out our expectations of standards of behaviour, for contractors to read and sign. It may well not be something that is in the public domain like an ESHIA, but you should still be ready for it to be made available.

Both the approaches sit with a manager, and the manager has to make the call, and record the decision made on behalf of the Council.

3. Council wide and service area policy and practice on health and wellbeing

This is a relatively new area to record within our overall assessments of impacts, for which we ask service areas to consider health and wellbeing impacts, and to look at these in the context of direct and indirect impacts for individuals and for communities.

A better understanding across the Council of these impacts will also better enable the Public Health colleagues to prioritise activities to reduce health inequalities in ways that are evidence based and that link effectively with equality impact considerations and climate change mitigation.

Health in All Policies – Health Impact Assessment

Health in All Policies is an upstream approach for health and wellbeing promotion and prevention, and to reduce health inequalities. The Health Impact Assessment (HIA) is the supporting mechanism

- Health Impact Assessment (HIA) is the technical name for a process that considers the wider effects of local policies, strategies and initiatives and how they, in turn, may affect people's health and wellbeing.
- Health Impact Assessment is a means of assessing both the positive and negative health impacts of a policy. It is also a means of developing good evidence-based policy and strategy using a structured process to review the impact.
- A Health Impact Assessment seeks to determine how to maximise health benefits and reduce health inequalities. It identifies any unintended health consequences. These consequences may support policy and strategy or may lead to suggestions for improvements.
- An agreed framework will set out a clear pathway through which a policy or strategy can be assessed and impacts with outcomes identified. It also sets out the support mechanisms for maximising health benefits.

The embedding of a Health in All Policies approach will support Shropshire Council through evidence-based practice and a whole systems approach, in achieving our corporate and partnership strategic priorities. This will assist the Council and partners in promoting, enabling and sustaining the health and wellbeing of individuals and communities whilst reducing health inequalities.

Individuals

Will the proposal have a *direct impact* on health, mental health and wellbeing?

For example, would it cause ill health, affecting social inclusion, independence and participation?

Will the proposal directly affect an individual's ability to improve their own health and wellbeing?

This could include the following: their ability to be physically active e.g., being able to use a cycle route; to access food more easily; to change lifestyle in ways that are of positive impact for their health.

An example of this could be that you may be involved in proposals for the establishment of safer walking and cycling routes (e.g., green highways), and changes to public transport that could encourage people away from car usage. and increase the number of journeys that they make on public transport, by foot or on bicycle or scooter. This could improve lives.

Will the proposal *indirectly impact* an individual's ability to improve their own health and wellbeing?

This could include the following: their ability to access local facilities e.g., to access food more easily, or to access a means of mobility to local services and amenities? (e.g. change to bus route)

Similarly to the above, an example of this could be that you may be involved in proposals for the establishment of safer walking and cycling routes (e.g. pedestrianisation of town centres), and changes to public transport that could encourage people away from car usage, and increase the number of journeys that they make on public transport, by foot or on bicycle or scooter. This could improve their health and well being.

Communities

Will the proposal directly or indirectly affect the physical health, mental health, and wellbeing of the wider community?

A *direct impact* could include either the causing of ill health, affecting social inclusion, independence and participation, or the promotion of better health.

An example of this could be that safer walking and cycling routes could help the wider community, as more people across groupings may be encouraged to walk more, and as there will be reductions in emission leading to better air quality.

An *indirect impact* could mean that a service change could indirectly affect living and working conditions and therefore the health and well being of the wider community.

An example of this could be: an increase in the availability of warm homes would improve the quality of the housing offer in Shropshire and reduce the costs for

households of having a warm home in Shropshire. Often a health promoting approach also supports our agenda to reduce the level of Carbon Dioxide emissions and to reduce the impact of climate change.

Please record whether at this stage you consider the proposed service change to have a direct or an indirect impact upon communities.

Demand

Will there be a change in demand for or access to health, local authority and social care services?

For example: Primary Care, Hospital Care, Community Services, Mental Health and Social Services?

An example of this could be: a new housing development in an area would affect demand for primary care and local authority facilities and services in that location and surrounding areas. If the housing development does not factor in consideration of availability of green space and safety within the public Space, further down the line there could be an increased demand upon health and social care services as a result of the lack of opportunities for physical recreation, and reluctance of some groupings to venture outside if they do not perceive it to be safe.