

## Equality Impact Analysis Template

Section 01: Overall Information	Details of Full Equality Impact Analysis
Financial Year and Quarter	2021 Q1
Name & details of proposed activity (i.e. the policy/ strategy/ process/ function / service/ restructure/ programme etc) to be assessed - hereafter referred to as ' <i>proposed activity</i> '	<p>The proposed activity is the adoption of the Royal Brompton Hospital Supplementary Planning Document (SPD). The SPD provides further details to the policies contained in the Council's adopted Local Plan (Policy CK1). It contains guidance on how medical uses can be viably retained and enhanced on the site and will be a material planning consideration in respect of any future planning application on the site. The Royal Brompton Hospital SPD has been prepared following the announcement that, due to a merger, all services from the Royal Brompton Hospital will be relocated, allowing for the sale of the site. This decision has been made by the relevant hospital trusts and the NHS.</p> <p>The alternative to this proposed activity (i.e. if the SPD was not adopted) is that medical uses would unlikely be retained on the site.</p> <p>The SPD does not control who owns the land, it only suggests a way that medical uses could be retained on the site when the Royal Brompton Hospital Trust 'go'. This EqlA is assessing the impact of adopting the SPD (vs not adopting the SPD).</p> <p>The SPD sets out the background and context on the site, and five key development principles that summarise how development should come forward, if it does. These are:</p> <ol style="list-style-type: none"> <li>1. To create a site-wide masterplan approach which retains and enhances the existing world class medical facilities, prioritising sites B and C for such uses;</li> <li>2. If enabling development is required to facilitate the retention of medical uses and enhancing of medical facilities, to demonstrate how it is complementary to medical uses and/or its contribution to maintaining a healthcare hub;</li> <li>3. To protect high quality historic environment within and nearby the site by ensuring exceptional design quality which takes opportunities to improve the existing streetscape;</li> <li>4. To upgrade connections and the public realm environment;</li> </ol>

	<p>5. To ensure any proposals adhere to or exceed the strict borough requirements for sustainability, waste, air quality, servicing, biodiversity, flooding, noise and vibration and contaminated land.</p> <p>The SPD then assesses the site as existing, including site opportunities and constraints. Healthcare typologies and parameters are discussed, and conclusions then drawn as to the appropriateness of each of the existing site buildings in providing these best practise modern standards of healthcare into the future.</p> <p>Commercial viability of different healthcare uses is discussed in Chapter 3 and compared to residential maximum and minimum values. It is concluded that, in terms of financial viability, a mix of healthcare uses including outpatient (hospital treatment without overnight stay), inpatient (treatment involving overnight stay), post-acute rehabilitation (stopping place between hospital and home where patient can recover from major surgery), elderly care and key worker accommodation (amongst others) would likely deliver a viable scheme on this site. These uses are then set out across the site within an indicative masterplan. The document is clear that this mix of uses and spatial layout is <i>one way</i> to retain medical uses on this site viably. The inclusion of this indicative masterplan does not mean the Council are not open to other methods to achieve this and also does not guarantee that development would come forward in this way.</p> <p>When reading this EqlA it is important to note that the adoption of this SPD does not guarantee that development will come forward in the way/form outlined in the indicative masterplan because, as the SPD recognises, this is one option to viably retain medical uses one the site. The Council recognise that this could be achieved in an alternative format.</p> <p>However, the inclusion of certain uses within the illustrative masterplan may guide any future developer to consider including these uses within their masterplan. The assessment of impact below is therefore made within this context.</p>
<p><b>Lead Officers</b> (i.e. those responsible for /managing the proposed activity)</p>	<p>Daniel Massey Growth and Delivery Team Leader <a href="mailto:Daniel.Massey@rbkc.gov.uk">Daniel.Massey@rbkc.gov.uk</a> 07739 313 776</p> <p>Eleanor Selby Senior Planning Projects Officer <a href="mailto:Eleanor.Selby@rbkc.gov.uk">Eleanor.Selby@rbkc.gov.uk</a> 07970 915611</p>
<p><b>Single or BI-Borough</b></p>	<p>Single borough – RBKC</p>

<b>Date of completion of final Full EqIA</b>	19 / 04 / 21
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<b>Section 02</b>	<b>Scoping of Full EqIA</b>		
<b>Plan for completion</b>	<p>Timing: The SPD is due to be adopted in April/May 2021. On adoption it will become a material consideration in planning decisions.</p> <p>Resources: The SPD has been prepared by the existing staff and budget resources within the Growth and Delivery team.</p>		
<b>Analyse the impact of the proposed activity</b>	<b>Protected characteristic</b>	<b>Borough Analysis</b>	<b>Impact:</b> Positive, Negative, Neutral
	Age	<p><b>RBKC</b></p> <p>The guidance in the SPD will work alongside the Local Plan 2019 to help retain medical uses on the Royal Brompton Hospital site.</p> <p>In general, medical services are required to a greater extent by older people. However, as existing, the Royal Brompton Harefield Trust (RBHT) delivers specialist heart (congenital, inherited and acquired), lung and paediatric services and so serves patients of all ages on the site. Following the merger, it is likely that the Trust will relocate, sell the land and begin delivering these services from a different site outside RBKC, meaning RBKC will lose these services.</p> <p>Chapter 4 sets out an indicative masterplan – one option to retain medical uses on the site viably. The document is clear that this is one way to achieve this, and that the Council remain open minded about alternative methods/designs. The indicative masterplan includes acute/inpatient; diagnostics; outpatient and post-acute rehabilitation uses, which would be comparable to the existing uses on the site in relation to the ‘Age’ characteristic. Although the inclusion of these uses within the illustrative masterplan does not require or ensure the proposal/delivery of them, the suggestion may steer any future developer to consider including these uses within their site-wide viable masterplan, which would therefore have a neutral impact on this target group.</p>	Neutral/ slight positive

	<p>Chapter 3 of the SPD set out the commercial viability of different medical and healthcare associated uses, and this list includes elderly care, retirement living and extra care. These uses are designed to cater for older people. Chapter 4 of the SPD sets out an illustrative masterplan, and all three of these uses are suggested within this masterplan option.</p> <p>Although the inclusion of these uses within the illustrative masterplan does not require or ensure the proposal/delivery of them, the suggestion may steer any future developer to consider including these uses within their site-wide viable masterplan. Therefore, if these uses are included in any future masterplan, the impact on older people group would be positive.</p>	
Disability	<p><b>RBKC</b> The guidance in the SPD will work alongside the Local Plan 2019 to help retain medical uses on the Royal Brompton Hospital site. It will not have direct equality impacts on this target group.</p>	Neutral
Gender reassignment	<p><b>RBKC</b> The guidance in the SPD will work alongside the Local Plan 2019 to help retain medical uses on the Royal Brompton Hospital site. It will not have direct equality impacts on this target group.</p>	Neutral
Marriage and Civil Partnership	<p><b>RBKC</b> The guidance in the SPD will work alongside the Local Plan 2019 to help retain medical uses on the Royal Brompton Hospital site. It will not have direct equality impacts on this target group.</p>	Neutral
Pregnancy and maternity	<p><b>RBKC</b> The guidance in the SPD will work alongside the Local Plan 2019 to help retain medical uses on the Royal Brompton Hospital site. It will not have direct equality impacts on this target group.</p>	Neutral
Race	<p><b>RBKC</b> The guidance in the SPD will work alongside the Local Plan 2019 to help retain medical uses on the Royal Brompton Hospital site. It will not have direct equality impacts on this target group.</p>	Neutral

	Religion/belief (including non-belief)	<b>RBKC</b> The guidance in the SPD will work alongside the Local Plan 2019 to help retain medical uses on the Royal Brompton Hospital site. It will not have direct equality impacts on this target group.	Neutral
	Sex	<b>RBKC</b> The guidance in the SPD will work alongside the Local Plan 2019 to help retain medical uses on the Royal Brompton Hospital site. It will not have direct equality impacts on this target group.	Neutral
	Sexual Orientation	<b>RBKC</b> The guidance in the SPD will work alongside the Local Plan 2019 to help retain medical uses on the Royal Brompton Hospital site. It will not have direct equality impacts on this target group.	Neutral
	The following groups are not specifically protected by the Equality Act, but RBKC considers them as part of our broader approach to supporting equal outcomes for communities that may be disadvantaged, marginalised or excluded. Please consider whether they may be impacted.		
	Socio-economic	<b>RBKC</b> Slight positive if delivered as per the indicative masterplan as there would be some key worker housing delivered.	Slight positive
	Geographical	<b>RBKC</b> i.e. those from more disadvantaged parts of the borough	Neutral
	Carers	<b>RBKC</b> Likely to a neutral impact as the suggested uses within the illustrative masterplan would deliver comparable care for those who are disabled and their carers.	Neutral
	Other relevant groups:	<b>RBKC</b> N/A	N/A
	<b>Human Rights &amp; Children's Rights</b>		
	Does your proposal impact on Human Rights as defined by the Human Rights Act 1998? (See guidance for more information on this)		
No			
Does your proposal impact on the rights of children as defined by the UN Convention on the Rights of the Child?			

	No <input type="checkbox"/>
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<b>Section 03</b>	<b>Analysis of relevant data</b> Examples of data include census data; customer satisfaction surveys; customer complaints data workforce demograpinc data. Data should involve specialist data and information and, where possible, should be disaggregated by different protectd characteristics.
<b>Documents and data reviewed</b>	N/A
<b>New research</b>	If new research is required, please complete this section

<b>Section 04</b>	<b>Consultation</b>
	The Council published a draft of the SPD for a six-week consultation from 18 November to 30 December 2020. In total there were 41 responses. The vast majority of the responses were supportive of the document and of the aims of the Council. One comment was raised which was relevant to the protected characteristics which related to cycle lanes being for particular age groups (i.e. not catering for older people and women). The Council do not have data on the age of people who use cycle lanes, but it is believed that children and adults benefit from their existence and make good use of them. The illustrative masterplan suggests improved walking routes and improved public realm, however, which would positively affect older people. Some comments related to the disappointment that the Royal Brompton were merging and relocating, however, the SPD and Council do not control this process. There were no further findings relevant to the EqIA screening.
<b>Consultation</b>	N/A
<b>Analysis of consultation outcomes</b>	N/A

<b>Section 05</b>	<b>Analysis of impact and outcomes</b>
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<b>Analysis</b>	<p>What has your consultation (if undertaken) and analysis of data shown?</p> <p>You will need to make an informed assessment about the actual or likely impact that the proposed activity will have on each of the protected characteristic groups by using the information you have gathered. The weight given to each protected characteristic should be <b>proportionate and relevant</b> to the proposed activity that you are assessing (see guidance).</p>
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<b>Section 06</b>	<b>Reducing any adverse impacts and recommendations</b>
<b>Outcome of Analysis</b>	<p>Include any specific actions you have identified that will remove or mitigate the risk of adverse impacts and / or unlawful discrimination. This should provide the outcome for each borough, and the overall outcome.</p>

<b>Section 07</b>	<b>Action Plan</b>					
<b>Action Plan</b>	N/A					
	Issue identified	Action (s) to be taken	When	Lead officer and borough	Expected outcome	Date added to business/service plan

<b>Section 08</b>	
<b>Director/ Head of Service sign-off</b>	<p>Name: Jonathan Wade          Position: Head of Spatial Planning          Email: <a href="mailto:jonathan.wade@rbkc.gov.uk">jonathan.wade@rbkc.gov.uk</a>          Telephone No: <b>07739 313758</b></p>
<b>Key Decision Report (if relevant)</b>	<p>If the EqIA relates to a <b>'Key Decision'</b>, sign off from the relevant lead Member is required.</p> <p>Name of Lead/ Cabinet Member: Cllr Johnny Thalassites</p> <p>Date of report to Lead Member: 23 / 04 / 21</p> <p>Key equalities issues have been included and the EqIA presented alongside the KDR: <b>Yes</b></p>
<b>Lead ED&amp;I Officer (where involved)</b>	<p>Name: Angela Chaudhry          Position: Corporate Equality and Diversity Lead          Date advice / guidance given: 16/04/2021          Email: <a href="mailto:angela.chaudhry@rbkc.gov.uk">angela.chaudhry@rbkc.gov.uk</a>          Telephone No: 02073612654</p>

**Review Date/s  
Recommended at:  
3 months; 6 months and  
12 months**

1st Review:  
2<sup>nd</sup> Review:  
3rd Review: