

SURBITON NEIGHBOURHOOD COMMITTEE

22 JULY 2021

LATE MATERIAL

The following material has been received since the publication of the agenda for this meeting in relation to **Item 6** on the agenda:

Equalities Impact Assessment

ROYAL BOROUGH OF KINGSTON**King Charles Road area Low Traffic Scheme- creation of public space****FULL EQUALITIES IMPACT ASSESSMENT FORM B**

Function being assessed:

The Council's Highways and Transportation Service are the authority responsible for the preparation and submission of schemes on the public highway, and in this case the scheme in question is a proposal for an experimental Traffic Management Scheme to look at creating a public space

It sets out how the Council proposes to deliver the Mayor's Transport Strategy (MTS), published in March 2018, in the borough as well as contributing to other local and sub-regional goals.

This Equalities Impact Assessment (EqIA) assesses the potential implications of the scheme.

The need to undertake an EqIA arises from Section 149 of the Equality Act 2010 which introduces a 'general duty on all public sector bodies to have regard to the following considerations in the exercise of their functions – i.e. eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under the Act; advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it; and foster good relations between persons who share a relevant protected characteristic and persons who do not share it.

The key issues to be considered are:

The proposal which is being assessed

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

The decision-making route being taken

Is this a new function or a review of an existing function?

New changes:

Physical changes have been introduced to King Charles Road in Surbiton Neighbourhood to reduce motor traffic volumes to create space for people to safely walk and cycle. with walking and cycling only access points. Motor vehicles will be able to drive to these points from one end of the road or the other but will not be able to drive through. and it is highlighted that all journeys previously possible can still be made, they must take a little longer depending on the route being used..

Low cost, adaptable features have been used to introduce this change, allowing the Council to make amendments through working with the local community to

understand improvement opportunities. These schemes have been introduced on an experimental basis, which requires a full review of all of the project's elements for members to consider. At the start of the project the approach to the EqIA was set out in the Response and Recovery Committee report of 30 July, with a key point being that officers will ensure that all impacts on protected characteristics are considered at every stage of delivery of our LSP programme in Kingston. This will involve anticipating the consequences on these groups and making sure that, as far as possible, any negative consequences are eliminated or minimised and opportunities for promoting equality are maximised. The creation of an inclusive environment is one of the key design considerations of projects and it is expected that the overall effect on equality target groups will be positive.

It is added that the key objectives of the scheme are in line with those in LIP3, which sets out long term transport objectives for the borough over the next 20 years. The key objectives from LIP 3 are achieving the MTS goals of creating Healthy Streets and Healthy People, good Public Transport experience and new homes and jobs. When considering how we propose to do this we must be mindful of those residents who have the protected characteristics.

What are the aims/purpose of the function?

The objective of the scheme is to create more welcoming, social and accessible street environments for all road users. These changes will significantly change the way that streets are used; complementary changes to the way spaces are laid out can accompany this change in use and be developed over the longer term. This will help to enable the use of this new space by people and business to reinforce messaging around social distancing and support active travel.

As a result of these changes, motor vehicle journeys in and around the area will change in a range of ways. Depending on how traffic movements change there are different potential equality impacts and benefits to be considered.

The changes described above will significantly change the way that streets are used, physical changes to the way spaces are laid out should accompany this change in use and be developed over the longer term. This will help to enable the use of this new space by people and business to reinforce messaging around social distancing and support active travel.

This EqIA will be reviewed and updated as the project develops during the consultation and monitoring process.

An EqIA is defined by the Equality and Human Rights Commission as “a tool that helps public authorities make sure their policies, and the ways they carry out their functions, do what they are intended to do for everybody”. EqIAs help

local authorities to identify potential sources of discrimination against specific equalities groups arising from their policies or operations and take appropriate steps to address them. This can also highlight opportunities to promote equalities and make a positive contribution to improving quality of life for local communities.

The [Public Sector Equality Duty](#) ensures public bodies play their part in making society fairer by tackling discrimination and providing equality of opportunity for all. It requires public bodies to work towards:

- eliminating unlawful discrimination, harassment and victimisation
- advancing equality of opportunity between people who share a protected characteristic and those who do not
- fostering good relations between people who share a protected characteristic and those who do not

This means 'consciously thinking' about equality issues and the influence of any decisions on Council policies, services and functions.

Protected characteristics, in relation to our duties, include:

- age
- disability
- gender reassignment
- pregnancy and maternity
- race (including ethnic or national origin, colour, nationality or caste)
- religion or belief (including lack of belief)
- sex (men and women)
- sexual orientation
- marriage and civil partnership (only in respect of unlawful discrimination)

Is the function designed to meet specific needs such as the needs of minority ethnic groups, older people, disabled people etc?

No, the function is not designed with specific needs in mind for individuals,

As a result of these changes, motor vehicle journeys in and around the area will change in a range of ways. Depending on how traffic movements change there are different potential equality impacts and benefits to be considered.

It is reasonable to anticipate some displacement of traffic, at least initially, as well as changes to travel choices and modes in response to the changes. The way in which vehicles re-route will vary depending on the total length of the journey being made and whether or not it starts or stops in the wider local area. Satnavs and Google Maps will also re-route people based on traffic levels at

any given time, dispersing traffic across a broader geographic area. The changes described above will significantly change the way that streets are used, physical changes to the way spaces are laid out should accompany this change in use and be developed over the longer term. This will help to enable

the use of this new space by people and business to reinforce messaging around social distancing and support active travel.

Disability

Much of current public realm / road network has the effect of excluding disabled people. The proposal seeks to address this by creating a more inclusive street environment. Reducing road danger also has the potential to enable more people to participate in active travel. For example, cycles can improve mobility and access for disabled people, many of whom do not have access to motor vehicles.

For those that do have access to a car, or rely on taxis or carers in some cases journey times may be increased for some trips and different routes might be needed. Feedback gathered since the trial scheme was launched indicates some individuals have had to change their routes to access essential services and support. This includes parents and carers of disabled children accessing schools and disabled people and carers accessing shops, pharmacies and GP services for essential goods, prescriptions and appointments.

All areas will remain accessible, however, and reduced traffic on the local streets is expected to result in a safer, less stressful and more convenient trip making for local journeys by car for those that need to drive. Disability is a broad category and ongoing engagement and monitoring will be needed to identify impacts on different groups.

It is highlighted that a standard part of any scheme developed on the highway undergoes the appropriate audit process. Traditionally this has involved the Road Safety Audit process, which not only assess layouts in terms of safety from a modal perspective, but it also assesses layouts from the mobility impaired perspective.

What information has been gathered on this function? (Indicate the type of information gathered e.g. statistics, consultation, other monitoring information)? Attach a summary or refer to where the evidence can be found.

The majority of the data and information available relates to the Census from 2011, but it is also highlighted that officers have referenced the boroughs Joint Strategic Needs Assessment.

Kingston has one of the lowest populations in London, excluding the City of London, but the population of the borough has been growing in recent years and it is expected to continue to increase for the foreseeable future.

Key Statistics

Kingston Estimated Borough Population in 2013 162,167, which is now estimated to be 174,600, so has seen a significant increase in recent years, when compared assessments on Population Projection - Percentage increase 2011 to 2031 10.4%

Age group with the largest percentage change in population 2011 to 2031 65 and over (+39.7%)

Source: Greater London Authority (GLA) 2012-Round SHLAA Standard Fertility Population Projections
GLA Population Estimates for 2013

The population projections from the GLA estimated the population of the borough to be 162,167 in 2013. A breakdown of the population by age and gender is shown in the table below.

Note that these figures are not counts but estimates rolled forward from the 2011 Census, based on assumptions about the number of births and deaths, migration and housing capacity.

Kingston's population is expected to increase by 10.4% between 2011 and 2031, with the largest increases in population amongst those aged 65 and over. The GLA predicts the number of 20-39 year olds, currently the largest age group in the borough, will stay about the same.

Age Group Projected percentage change in population 2011 to 2031 65 and over +39.7%

Source: GLA 2012-Round SHLAA Standard Fertility Population Projections
Age

Like the rest of London, Kingston has a relatively young population and fewer older people compared to the rest of the country. Most of the population is aged between 20 and 39, with a particularly high number of 20-24 year olds due to the large student population attending Kingston University.

Over 65's make up a relatively small proportion of the population (20,358 people or 12.7% of the population), compared to 16.4% in England and 11.1% in London.

Population (mid-2017 est.)

- Total 174,600
- Rank 109th ([of 326](#))
- Density 4,700/km² (12,000/sq mi)
- Ethnicity^[1] 63.1% [White British](#)
1.7% [White Irish](#)

0.1% White Gypsy or Irish Traveller
 9.6% [Other White](#)
 0.8% White & Black Caribbean
 0.4% White & Black African
 1.6% White & Asian
 1.1% Other Mixed
 4% [Indian](#)
 1.9% [Pakistani](#)
 0.6% [Bangladeshi](#)
 1.8% [Chinese](#)
 8.1% Other Asian
 1.6% [Black African](#)
 0.6% [Black Caribbean](#)
 0.2% Other Black
 1.5% [Arab](#)
 1.2% [Other](#)

Ethnicity

Between 2001 and 2011, the proportion of Kingston's population that came from Black, Asian and Minority Ethnic (BAME) groups rose from 15.5% to 25.5%. The Greater London Authority (GLA) expects this proportion to rise to 28% by 2023. The younger population is even more ethnically diverse: the GLA estimate that 33% of 0-19 year olds came from BAME groups in 2011. The 2011 Census also gave us information on the main languages spoken in the borough: the top five are English (83.6%), Tamil (1.7%), Korean (1.7%), Polish (1.3%) and Arabic (1%).

Disability

The majority of Kingston residents reported that they were in good health on Census day in 2011, a greater majority than in London or England. 52.7% of Kingston residents stated they were in very good health, compared to 0.8% in very bad health. Out of 348 Local Authorities in England & Wales, Kingston had the tenth highest percentage of people stating they were not affected by a health problem or disability on a daily basis.

Approximately one in eight residents stated that their day-to-day activities were limited a lot (5.4%) or a little (7.1%) by a long-term health problem or disability, including those related to old age. This is lower than the London and England averages. A similar proportion of people to 2001 (8.3%) are providers of unpaid care (to family, friends, neighbours etc.).

As well as the standard data above, and as a part of the 6 month trial period officers approached Stakeholder Groups to understand any issues that they had and welcomed input from them. A workshop was held, and stakeholders invited

to attend and share their feedback, and an interesting point to note was raised, whereby colleagues from KCIL highlighted that many of their members had actually been shielding for most of the experimental trial period, and as such would not have experienced its impact. It was agreed that further sessions with KCIL would be set up to revisit the scheme, and feedback from those sessions will be incorporated into the 12 month review.

Does your analysis of the information show different outcomes for any different groups (higher or lower uptake/failure to access/receive a poorer or inferior service)? If yes, indicate which groups and which aspects of the policy or function contribute to inequality?

Every effort is made to ensure that all of the groups within the protected characteristics have equal opportunity to take part in and contribute to the delivery of schemes that are being delivered across the borough.

There is the opportunity to amend an experimental scheme during the first 6 months of its operation but it must be noted that by making amendments it effectively restarts the 6 month consultation period.

COVID Related Equality Considerations

The transport measures introduced in King Charles Road are intended to enable residents to travel safely and minimise risk of infection during the pandemic. Therefore, we have also considered the equalities evidence base for Covid-19 in the UK to help think about the risk and benefits of these interventions. There are several ways in which risks and outcomes as a result of COVID-19 differ relative to protected characteristics as identified by this study of June 2020 by Public Health England:

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/892085/disparities_review.pdf.

There are a range of support services that will be introduced in areas to increase uptake of walking and cycling, such as bike loan and training programmes. We will work with local community organisations to deliver community design programmes that allow local people to get involved in the project. Specific focus will be on engaging younger people under 25y/o, from BAME backgrounds, and older people who are typically under-represented in these activities.

Our monitoring activity from a movement and air quality perspective will also help to quantify the benefits that are being delivered and communicate this with local people.

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How do you plan to address & mitigate any negative impact of the proposal:

How we will monitor

This LTN scheme was implemented in response to the impact that the Covid-19 pandemic has had on our transport network. Traffic volumes and patterns have been affected by the pandemic since March 2020. This being the case, we did not commission baseline traffic counts immediately prior to the creation of the LTN and instead will rely on data collected pre-COVID and its impact on traffic flows.

As a guide, scheme operation will be monitored in up to 3 stages.

- Stage 1: Initial Adjustment (first few weeks) - Assessment will focus on identifying community issues and traffic problems to make specific design improvements where needed
- Stage 2: Settling down: Up to 6 months after implementation
- Stage 3: Regular Use Up to 18 months after implementation

This approach will need to be flexible to allow for unforeseen changes in trip rates resulting from COVID and/or other unforeseen scheme impacts.

We will also be collecting qualitative data before and during the implementation of the scheme. Council staff will be regularly contacting residents and business owners to gather information on the impact of the scheme, and the council will use the online engagement site, Let's Talk portal, to gather feedback directly from residents online. Equalities data will be gathered and analysed as part of this process. This information will be used to assess the impact of the interventions against the policy aims and put in place improvements where necessary.

It was identified through our engagement with the stakeholder groups that many of their members had been shielding for significant parts of the experimental period, and there was an agreement that officers would continue to liaise directly with interested stakeholder groups to continue to monitor any impacts not yet reported.

Travel times for those reliant on vehicles for certain trips

Travel times and journey routes could change or increase for those who are reliant on motor vehicles, including those with protected characteristics in the Equalities Act. An exemption for SEND transport providers will be put in place for all LTNs.

COMMENTS FROM EMERGENCY SERVICES:

1. Representatives of the emergency services covering the borough of Kingston were invited to comment, along with attending an emergency services stakeholder working group.
2. The London Fire Brigade (LFB) - The LFB's position regarding the use of physical barriers throughout the Borough to create LTNs is that this could cause an increase in traffic levels and access issues, therefore increasing response times to incidents. For these reasons the LFB does not support their use but does accept there is a need for the Council to implement these measures in response to central government guidelines
3. The LFB would prefer to see the use of alternate measures such as automatic number plate recognition (ANPR) cameras to enforce LTN's. Moreover, the LFB will continue to engage and offer guidance to Kingston council when supplied with plans on proposed, or changes to, existing LTN measures. The LFB agreed with a LAS comment at the stakeholder meeting, that as the lockdown measures are relaxed and road traffic levels increase, further analysis of emergency vehicle response and any difficulties encountered will need to be discussed and current LTN's reviewed.
4. Where residents complain and claim that emergency vehicles are delayed/stuck/impinged by LTN measures, data such as times and dates are useful to gather views and information from crews. To date, we have not received any information from crews of any delay in attendance to an incident within the Borough.
5. The London Ambulance Service (LAS) - LAS commented as follows; We are opposed to any physical barriers in place on any LTN schemes but would support enforcement through ANPR cameras with exemptions for emergency service vehicles. We have worked with various other boroughs across London who have listened and changed the method of enforcement to the camera system.
6. It would not be practical to equip our fleet with these universal keys (to allow bollards to be unlocked) as it is not always guaranteed that we would have a local ambulance crew attend if for example call volumes were high and the nearest vehicle was dispatched from Fulham.
7. The Metropolitan Police Service (MPS) - The MPS traffic officer commented; My only view is that the Met Police prefer 'No motor vehicle' signage with ANPR camera enforcement, rather than any physical barrier. This allows emergency vehicle access without the

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need to remove barriers, whilst preventing any other access.

In order to mitigate these comments, it is recommended to replace the planters with ANPR to remove any impact from the emergency services on their service delivery.

Assessment completed by:

NAME: Ian Price, Team Leader Strategy and Commissioning

SERVICE: Highways and Transport Shared Service

DATE: 19/07/ 2021

Please send your completed assessment to your service head. A copy should then be sent to the Equality Adviser.