

General Equality Impact Assessment (EIA) Form

Support:

An [EIA toolkit](#), [workshop content](#), and guidance for completing an [Equality Impact Assessment \(EIA\) form](#) are available on the [EIA page](#) of the [EDI Internal Hub](#). Please read these before completing this form.

For enquiries and further support if the toolkit and guidance do not answer your questions, contact the Equality, Diversity, and Inclusion (EDI) team by emailing Equalities@Brighton-Hove.gov.uk. If your request is urgent, please mention this in the subject line of your email so we can support as required.

Processing Time:

- EIAs can take up to 10 business days to approve after a completed EIA of a good standard is submitted to the EDI Team. This is not considering unknown and unplanned impacts of capacity, resource constraints, and work pressures on the EDI team at the time your EIA is submitted.
- If your request is urgent, we can explore support exceptionally on request.
- We encourage improved planning and thinking around EIAs to avoid urgent turnarounds as these make EIAs riskier, limiting, and blind spots may remain unaddressed for the 'activity' you are assessing.

Process:

- Once fully completed, submit your EIA to the Equalities team by emailing the Equalities inbox and copying in your Head of Service, Business Improvement Manager (if one exists in your directorate), any other relevant service colleagues to enable EIA communication, tracking and saving.
- Your EIA will be reviewed, discussed, and then approved by the assigned EDI Officer and after seeking additional approval as appropriate for your EIA.
- Only approved EIAs are to be attached to Committee reports. Unapproved EIAs are invalid.

1. Assessment details

Throughout this form, 'activity' is used to refer to many different types of proposals being assessed.

Read the [EIA toolkit](#) for more information.

Name of activity or proposal being assessed:	Expanding Smoke Control Areas
Directorate:	City Infrastructure
Service:	Regulatory Services
Team:	Environmental Protection, Air Quality
Is this a new or existing activity?	New
Are there related EIAs that could help inform this EIA? Yes or No (If Yes, please use this to inform this assessment)	Yes, Air Quality Action Plan (2015 not changed 2022)

2. Contributors to the assessment (Name and Job title)

Responsible Lead Officer:	Samuel Rouse
Accountable Manager:	Temitayo Oluntanji
Additional stakeholders collaborating or contributing to this assessment:	David Currie Head of Regulatory Services, Public Health Consultants

3. About the activity

Briefly describe the purpose of the activity being assessed:

Expand smoke control areas to the urban part of Brighton & Hove City Council

What are the desired outcomes of the activity?

Reduced pollution, healthier air for everyone including protected characteristics

Which key groups of people do you think are likely to be affected by the activity?

Vulnerable groups very young and old. Sedentary or housebound people spending 99% of their time at one dwelling place, some with disabilities, limited mobility that may be related to gender reassignment, domestic abuse, pregnancy & maternity, race, religion & belief. Women and girls are more vulnerable to pollution inhalation due to smaller lung capacity (on average).

4. Consultation and engagement

What consultations or engagement activities have already happened that you can use to inform this assessment?

- For example, relevant stakeholders, groups, people from within the council and externally consulted and engaged on this assessment. **If no consultation** has been done or it is not enough or in process – state this and describe your plans to address any gaps.

Air quality action plan consultation 2022. Expanding smoke control areas consultation 2026 (Your Voice survey), library events 2026. Seasonal communications (every year) and pollution monitoring (continuous) to raise awareness.

5. Current data and impact monitoring

Do you currently collect and analyse the following data to enable monitoring of the impact of this activity? Consider all possible intersections.

(State Yes, No, Not Applicable as appropriate)

Age	Yes Available from Public Health Insight, Census and Office of National Statistics.
Disability and inclusive adjustments, coverage under equality act and not	Yes

Ethnicity, 'Race', ethnic heritage (including Gypsy, Roma, Travellers)	YES Available from Public Health Insight, Census and Office of National Statistics. A higher percentage of ethnic minorities in high density urban areas where pollution is relatively concentrated. The measure will have benefits that help to address these inequalities.
Religion, Belief, Spirituality, Faith, or Atheism	YES Available from Public Health Insight and Census and Office of National Statistics. Lower than national average in the area.
Sex	YES Slightly more than 50% female in the area
Gender (including non-binary and Intersex people)	YES Non-binary higher than national average
Gender Reassignment	YES Non-binary higher than national average
Sexual Orientation	YES
Marriage and Civil Partnership	YES
Pregnant people, Maternity, Paternity, Adoption, Menopause, (In)fertility (across the gender spectrum)	NO
Armed Forces Personnel, their families, and Veterans	NO
Expatriates, Migrants, Asylum Seekers, and Refugees	NO
Carers	NO
Looked after children, Care Leavers, Care and fostering experienced people	NO
Domestic and/or Sexual Abuse and Violence Survivors, and people in vulnerable situations (All aspects and intersections)	NO
Socio-economic Disadvantage	NO
Homelessness and associated risk and vulnerability	YES
Human Rights	?
Another relevant group (please specify here and add additional rows as needed)	N/A

Additional relevant groups that may be widely disadvantaged and have intersecting experiences that create exclusion and systemic barriers may include:

- Ex-offenders and people with unrelated convictions
- Lone parents
- People experiencing homelessness
- People facing literacy, numeracy and /or digital barriers
- People on a low income and people living in the most deprived areas
- People who have experienced female genital mutilation (FGM)
- People who have experienced human trafficking or modern slavery

- People with experience of or living with addiction and/ or a substance use disorder (SUD)
- Sex workers

If you answered “NO” to any of the above, how will you gather this data to enable improved monitoring of impact for this activity?

Equalities <Equalities@brighton-hove.gov.uk>

What are the arrangements you and your service have for monitoring, and reviewing the impact of this activity?

Available from Public Health Insight, Census and Office of National Statistics. A number of complementary pollution monitoring contracts and tools.

6. Impacts

Advisory Note:

- **Impact:**
 - Assessing disproportionate impact means understanding potential negative impact (that may cause direct or indirect discrimination), and then assessing the relevance (that is: the potential effect of your activity on people with protected characteristics) and proportionality (that is: how strong the effect is).
 - These impacts should be identified in the EIA and then re-visited regularly as you review the EIA every 12 to 18 months as applicable to the duration of your activity.
- **SMART Actions mean:** Actions that are (SMART = Specific, Measurable, Achievable, Realistic, T = Time-bound)
- **Cumulative Assessment:** If there is impact on all groups equally, complete **only** the cumulative assessment section.
- **Data analysis and Insights:**
 - In each protected characteristic or group, in answer to the question ‘If “YES”, what are the positive and negative disproportionate impacts?’, describe what you have learnt from your data analysis about disproportionate impacts, stating relevant insights and data sources.
 - Find and use contextual and wide ranges of data analysis (including community feedback) to describe what the disproportionate positive and negative impacts are on different, and intersecting populations impacted by your activity, especially considering for [Health inequalities](#), review guidance and inter-related impacts, and the impact of various identities.
 - For example: If you are doing road works or closures in a particular street or ward – look at a variety of data and do so from various protected characteristic lenses. Understand and analyse what that means for your project and its impact on different types of people, residents, family types and so on. State your understanding of impact in both effect of impact and strength of that effect on those impacted.
- **Data Sources:**
 - **Consider a wide range (including but not limited to):**
 - [Population and population groups](#)
 - [Census 2021 population groups Infogram: Brighton & Hove by Brighton and Hove City Council](#)
 - [Census](#) and [local intelligence data](#)
 - Service specific data
 - Community consultations
 - Insights from customer feedback including complaints and survey results

- Lived experiences and qualitative data
 - [Joint Strategic Needs Assessment \(JSNA\) data](#)
 - [Health Inequalities data](#)
 - Good practice research
 - National data and reports relevant to the service
 - Workforce, leaver, and recruitment data, surveys, insights
 - Feedback from internal 'staff as residents' consultations
 - Insights, gaps, and data analyses on intersectionality, accessibility, sustainability requirements, and impacts.
 - Insights, gaps, and data analyses on 'who' the most intersectionally marginalised and excluded under-represented people and communities are in the context of this EIA.
- Learn more about the [Equality Act 2010](#) and about our [Public Sector Equality Duty](#).

6.1 Age

Does your analysis indicate a disproportionate impact relating to any particular Age group? For example: older people, people who may be housebound, those under 16, young adults, with other intersections.	YES
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If "YES", what are the positive and negative disproportionate impacts?

Please share relevant insights from data and engagement to show how conclusions about impact have been shaped. Include relevant data sources or references.

YES oldest and youngest more likely to be impacted by pollution. Available from Public Health Insight, Census and Office of National Statistics.
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6.2 Disability:

Does your analysis indicate a disproportionate impact relating to Disability, considering our anticipatory duty?	YES / NO
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If "YES", what are the positive and negative disproportionate impacts?

Please share relevant insights from data and engagement to show how conclusions about impact have been shaped. Include relevant data sources or references.

YES those with many disabilities and underlying health conditions are more likely to be impacted by pollution. Available from Public Health Insight, Census and Office of National Statistics.
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What [inclusive adjustments](#) are you making for diverse disabled people impacted? For example: those who are housebound due to disability or disabling circumstances, D/deaf, deafened, hard of hearing, blind, neurodivergent people, those with non-visible disabilities, and with access requirements that may not identify as disabled or meet the legal definition of disability, and have various intersections (Black and disabled, LGBTQIA+ and disabled).

Accessible reports online.

6.3 Ethnicity, 'Race', ethnic heritage (including Gypsy, Roma, Travellers):

Does your analysis indicate a disproportionate impact relating to ethnicity?	YES
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If "YES", what are the positive and negative disproportionate impacts?

Please share relevant insights from data and engagement to show how conclusions about impact have been shaped. Include relevant data sources or references.

Available from Public Health Insight, Census and Office of National Statistics.

6.4 Religion, Belief, Spirituality, Faith, or Atheism:

Does your analysis indicate a disproportionate impact relating to Religion, Belief, Spirituality, Faith, or Atheism?	NO
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If "YES", what are the positive and negative disproportionate impacts?

Please share relevant insights from data and engagement to show how conclusions about impact have been shaped. Include relevant data sources or references.

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6.5 Sex:

Does your analysis indicate a disproportionate impact relating to Sex ?	YES
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If "YES", what are the positive and negative disproportionate impacts?

Please share relevant insights from data and engagement to show how conclusions about impact have been shaped. Include relevant data sources or references.

Women and girls are more vulnerable to pollution inhalation due to smaller lung capacity (on average).
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6.6 Gender and Gender Reassignment:

Does your analysis indicate a disproportionate impact relating to Gender Identity (including non-binary and intersex people)?	YES
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If "YES", what are the positive and negative disproportionate impacts?

Please share relevant insights from data and engagement to show how conclusions about impact have been shaped. Include relevant data sources or references.

Does your analysis indicate a disproportionate impact relating to Gender Reassignment ?	YES
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If "YES", what are the positive and negative disproportionate impacts?

Please share relevant insights from data and engagement to show how conclusions about impact have been shaped. Include relevant data sources or references.

Higher proportion in Brighton & Hove where pollution is more concentrated than in the countryside, other towns and cities

6.7 Sexual Orientation:

Does your analysis indicate a disproportionate impact relating to Sexual Orientation ?	YES
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If “YES”, what are the positive and negative disproportionate impacts?

Please share relevant insights from data and engagement to show how conclusions about impact have been shaped. Include relevant data sources or references.

Higher proportion in Brighton & Hove where pollution is more concentrated than in the countryside, other towns and cities

6.8 Marriage and Civil Partnership:

Does your analysis indicate a disproportionate impact relating to Marriage and Civil Partnership?	NO
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If “YES”, what are the positive and negative disproportionate impacts?

Please share relevant insights from data and engagement to show how conclusions about impact have been shaped. Include relevant data sources or references.

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6.9 Pregnant people, Maternity, Paternity, Adoption, Menopause, (In)fertility (across the gender spectrum):

Does your analysis indicate a disproportionate impact relating to Pregnant people, Maternity, Paternity, Adoption, Menopause, (In)fertility (across the gender spectrum)?	YES
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If “YES”, what are the positive and negative disproportionate impacts?

Please share relevant insights from data and engagement to show how conclusions about impact have been shaped. Include relevant data sources or references.

Foetus, neo natal and newborn infants more vulnerable to pollution

6.10 Armed Forces Personnel, their families, and Veterans:

Does your analysis indicate a disproportionate impact relating to Armed Forces Members and Veterans?	YES
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If “YES”, what are the positive and negative disproportionate impacts?

Please share relevant insights from data and engagement to show how conclusions about impact have been shaped. Include relevant data sources or references.

Can be more vulnerable to pollution due to mobility compromising injury or PTSD

6.11 Expatriates, Migrants, Asylum Seekers, and Refugees:

<p>Does your analysis indicate a disproportionate impact relating to Expatriates, Migrants, Asylum seekers, Refugees, those New to the UK, and UK visa or assigned legal status? (Especially considering for age, ethnicity, language, and various intersections)</p>	<p>YES</p>
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If “YES”, what are the positive and negative disproportionate impacts?

Please share relevant insights from data and engagement to show how conclusions about impact have been shaped. Include relevant data sources or references.

More likely to live in poor quality housing. Less likely to access awareness raising information.

6.12 [Carers](#):

<p>Does your analysis indicate a disproportionate impact relating to Carers (Especially considering for age, ethnicity, language, and various intersections).</p>	<p>YES</p>
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If “YES”, what are the positive and negative disproportionate impacts?

Please share relevant insights from data and engagement to show how conclusions about impact have been shaped. Include relevant data sources or references.

Can be in tied to one dwelling place most of the time. Limiting time in fresh air.

6.13 Looked after children, Care Leavers, Care and fostering experienced people:

<p>Does your analysis indicate a disproportionate impact relating to Looked after children, Care Leavers, Care and fostering experienced children and adults (Especially considering for age, ethnicity, language, and various intersections). Also consider our Corporate Parenting Responsibility in connection to your activity.</p>	<p>YES</p>
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If “YES”, what are the positive and negative disproportionate impacts?

Please share relevant insights from data and engagement to show how conclusions about impact have been shaped. Include relevant data sources or references.

Can be in tied to one dwelling place most of the time. Limiting time in fresh air.

6.14 Homelessness:

Does your analysis indicate a disproportionate impact relating to people experiencing homelessness, and associated risk and vulnerability? (Especially considering for age, veteran, ethnicity, language, and various intersections)	YES
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If “YES”, what are the positive and negative disproportionate impacts?

Please share relevant insights from data and engagement to show how conclusions about impact have been shaped. Include relevant data sources or references.

Can spend time, sitting or lying on the footway at low height where pollution is more concentrated.

6.15 Domestic and/or Sexual Abuse and Violence Survivors, people in vulnerable situations:

Does your analysis indicate a disproportionate impact relating to Domestic Abuse and Violence Survivors, and people in vulnerable situations (All aspects and intersections)?	YES
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If “YES”, what are the positive and negative disproportionate impacts?

Please share relevant insights from data and engagement to show how conclusions about impact have been shaped. Include relevant data sources or references.

Can be trapped at one premises, limiting opportunity for exercise and fresh air.
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6.16 Socio-economic Disadvantage:

Does your analysis indicate a disproportionate impact relating to Socio-economic Disadvantage? (Especially considering for age, disability, D/deaf/ blind, ethnicity, expatriate background, and various intersections)	YES
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If “YES”, what are the positive and negative disproportionate impacts?

Please share relevant insights from data and engagement to show how conclusions about impact have been shaped. Include relevant data sources or references.

Associated with poor quality housing, roadside & junction dwelling places. Poor fenestration. Limited opportunity for ventilation and fresh air.
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6.17 Human Rights:

Will your activity have a disproportionate impact relating to Human Rights?	NO
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If “YES”, what are the positive and negative disproportionate impacts?

Please share relevant insights from data and engagement to show how conclusions about impact have been shaped. Include relevant data sources or references.

6.18 Cumulative, multiple [intersectional](#), and complex impacts (including on additional relevant groups):

What cumulative or complex impacts might the activity have on people who are members of multiple Minoritised groups?

- For example: people belonging to the Gypsy, Roma, and/or Traveller community who are also disabled, LGBTQIA+, older disabled trans and non-binary people, older Black and Racially Minoritised disabled people of faith, young autistic people.
- Also consider wider disadvantaged and intersecting experiences that create exclusion and systemic barriers:
 - People being housebound due to disabilities or disabling circumstances
 - Environmental barriers or mobility barriers impacting those with sight loss, D/deafness, sensory requirements, neurodivergence, various complex disabilities
 - People experiencing homelessness
 - People on a low income and people living in the most deprived areas
 - People facing literacy, numeracy and/or digital barriers
 - Lone parents
 - People with experience of or living with addiction and/ or a substance use disorder (SUD)
 - Sex workers
 - Ex-offenders and people with unrelated convictions
 - People who have experienced female genital mutilation (FGM)
 - People who have experienced human trafficking or modern slavery

Greater exposure to pollution in high density urban neighbourhoods. Less opportunity for activity, change of scene and clean air.

7. Action planning

What SMART actions will be taken to address the disproportionate and cumulative impacts you have identified?

- Summarise relevant SMART actions from your data insights and disproportionate impacts below for this assessment, listing appropriate activities per action as bullets. (This will help your Business Manager or Fair and Inclusive Action Plan (FIAP) Service representative to add these to the Directorate FIAP, discuss success measures and timelines with you, and monitor this EIA's progress as part of quarterly and regular internal and external auditing and monitoring)

1. Replace this sentence and write your first [SMART Action](#) – you can add more actions and rows as needed and add details of activities you will carry out to fulfil your [SMART Action](#)

- Activity 1 to fulfil your [SMART Action](#)
- Activity 2 to fulfil your [SMART Action](#)

2. Replace this sentence and write your second [SMART Action](#) – you can add more actions and rows as needed and add details of activities you will carry out to fulfil your [SMART Action](#)

- Activity 1 to fulfil your [SMART Action](#)

- Activity 2 to fulfil your [SMART Action](#)

Which action plans will the identified actions be transferred to?

- For example: Team or Service Plan, Local Implementation Plan, a project plan related to this EIA, FIAP (Fair and Inclusive Action Plan) – mandatory noting of the EIA on the Directorate EIA Tracker to enable monitoring of all equalities related actions identified in this EIA. This is done as part of FIAP performance reporting and auditing. Speak to your Directorate’s Business Improvement Manager (if one exists for your Directorate) or to the Head of Service/ lead who enters actions and performance updates on FIAP and seek support from your Directorate’s EDI Business Partner.

Expand Smoke Control Area is a key measure cited in the Air Quality Action Plan.

8. Outcome of your assessment

What decision have you reached upon completing this Equality Impact Assessment? (Mark ‘X’ for any ONE option below)

Stop or pause the activity due to unmitigable disproportionate impacts because the evidence shows bias towards one or more groups.	
Adapt or change the activity to eliminate or mitigate disproportionate impacts and/or bias.	
Proceed with the activity as currently planned – no disproportionate impacts have been identified, or impacts will be mitigated by specified SMART actions.	X
Proceed with caution – disproportionate impacts have been identified but having considered all available options there are no other or proportionate ways to achieve the aim of the activity (for example, in extreme cases or where positive action is taken). Therefore, you are going to proceed with caution with this policy or practice knowing that it may favour some people less than others, providing justification for this decision.	

If your decision is to “Proceed with caution”, please provide a reasoning for this:

Summarise your overall equality impact assessment recommendations to include in any committee papers to help guide and support councillor decision-making:

Expanding SCA actions will benefit vulnerable groups and protected characteristics.

9. Publication

All Equality Impact Assessments will be published. If you are recommending, and choosing not to publish your EIA, please provide a reason:

10. Directorate and Service Approval

Signatory:	Name and Job Title:	Date: DD-MMM-YY
Responsible Lead Officer:	Samuel Rouse	22-April-2026
Accountable Manager:	Temitayo Oluntanji, Operations Manager	

Notes, relevant information, and requests (if any) from Responsible Lead Officer and Accountable Manager submitting this assessment:

EDI Review, Actions, and Approval:

Equality Impact Assessment sign-off

EDI Officer to cross-check against aims of the equality duty, public sector duty and our civic responsibilities the activity considers and refer to relevant internal checklists and guidance prior to recommending sign-off.

Once the EDI Officer has considered the equalities impact to provide approval for by those submitting the EIA, they will get the EIA signed off and sent to the requester copying the Head of Service, Business Improvement Manager, [Equalities inbox](#), any other service colleagues as appropriate to enable EIA tracking, accountability, and saving for publishing. Budget and Staffing EIAs secure approval via different templates.

Signatory:	Name:	Date: DD-MMM-YY
EDI Business Partner:		
EDI Manager:		

Notes and recommendations from EDI Business Partner reviewing this assessment:

Notes and recommendations (if any) from EDI Manager reviewing this assessment: