

1. Topic of assessment

EIA title:	FRS Changes to emergency response cover for Spelthorne
EIA author:	Greg Finneron, Policy Officer

2. Approval

	Name	Date approved
Approved by¹	Russell Pearson	

3. Quality control

Version number	Final Version 1	EIA completed	22/01/2014
Date saved	22/01/2014	EIA published	23/01/2014

4. EIA team

Name	Job title (if applicable)	Organisation	Role
Greg Finneron	Policy Officer	SCC	EIA author
Mark Arkwell	Station Manager, East Area	SCC	FRS advisor
Doug Feery	Barrister		External advisor
Allan Wells	Legal Lead Manager	SCC	Internal advisor

5. Explaining the matter being assessed

What policy, function or service is being introduced or reviewed?	<p>The functions being considered are those of the Council as a fire services authority. The Council’s SFRS Public Safety Plan 2011-2020 (PSP) outlines 12 outcomes to be achieved by 2020. These include improving the balance of service provision across Surrey and improving the provision and use of property.</p> <p>This proposal will support that outcome, in order to be better positioned to achieve the Surrey Response standard for the whole of Surrey / across Surrey, whilst remaining within the available budget for the Service.</p>
What proposals are you assessing?	<p>Surrey Fire and Rescue Service (SFRS) currently base one 24-hour fire engine at both Sunbury and Staines Fire Stations, which provide most of the initial response cover for the Spelthorne area. SFRS proposes to create a new fire station in the borough of Spelthorne with either a single full time fire engine (Option 4), or with a full time fire engine and an additional 24 hour ‘on call’ appliance (Option 5). This means:</p> <ul style="list-style-type: none"> i) Procuring a suitable site in the Ashford area and building a new fire station. ii) Deploying either one fire engine, or one fire engine and an “on call” appliance at this new station from a target date of April

¹ Refer to earlier guidance for details on getting approval for your EIA.

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	<p>2015.</p> <p>iii) Closing Sunbury and Staines fire stations once the new station is operational.</p> <p>Cabinet will determine which Option will be taken forward. Cabinet is being asked to support Option 5, and agree to Option 4, should the provision of Option 5 and the 'on-call unit not be secured.</p> <p>It should be noted that Option 4 was the original preferred option by SFRS and it is therefore this Option that was put forward in the consultation. Option 5, has been developed in response to feedback from the Consultation. In the development of Option 5, a new modelling of response times was conducted and is included in Section 7 of this EIA.</p> <p>It is Option 4 and Option 5 that are being assessed by this EIA. The other Options open to Cabinet are not being assessed by this EIA but for reference these include:</p> <p style="padding-left: 40px;">Option 1: Do nothing and secure no improvements in terms of service provision across the county or contribution towards the savings required by the Medium Term Financial Plan.</p> <p style="padding-left: 40px;">Option 2: Implement the PSP Phase 1 deployment (24 hour cover at Sunbury, 12 hour cover at Staines)</p> <p style="padding-left: 40px;">Option 3 (a): Close Sunbury and maintain Staines</p> <p style="padding-left: 40px;">Option 3 (b): Close Staines and maintain Sunbury</p>
<p>Who is affected by the proposals outlined above?</p>	<p>There is potential for this proposal, if implemented to impact on residents and businesses in the area of Spelthorne (continued cover), Runnymede and Elmbridge, as well as staff (re-location).</p> <p>The detailed impact of Option 4 on emergency response times was established at the beginning of July 2013 and shared with the public and partners during the consultation phase (13 weeks, starting 05/08/13). Modelling has shown that the benefits of the proposals would create a more efficient use of resources across the County (see improved Runnymede and Surrey response levels). Spelthorne residents would receive one fire engine attending incidents on average in less than seven minutes and in many cases that will be sufficient resources to deal with the emergency safely and effectively. The detailed impact on residents is outlined in section 7.</p>

6. Sources of information

Engagement carried out

The Option 4 proposal has been shared with numerous stakeholders during consultation.

Consultation activities included:

- A widely publicised on-line survey,
- Postal questionnaires,
- Easy read questionnaires,

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- Presentations at public meetings,
- Targeted letters and emails to Voluntary, Community and Faith Sector (VCFS)
- Targeted letters and emails to stakeholders and partner agencies,
- Staff and trade union consultation.
- The Empowerment Board North Surrey
- The consultation was publicised in local GP practices, schools, youth centres, churches, Post Offices, libraries, Citizens Advice Bureaux, community centres.
- Local media has also been utilised, eg. SCC media and social media (see consultation plan, Annex 2).

The consultation was also distributed amongst 'hard to reach' and higher risk groups, eg. the elderly, vulnerable adults, those affected by Mental Health issues. The consultation was provided in an alternative format with easy read questionnaires to ensure that those that need an easier questionnaire were reached. This was achieved by contacting local community organisations and day centres, in particular:

- Cross Road Care,
- Surrey Association for the Visually Impaired,
- Surrey Adult Link Disability Registers,
- Voluntary Action In Spelthorne
- Staines Mobility Shop
- Fairways

These organisations were all engaged to establish the most effective method of distribution of questionnaires and consequentially from feedback received from this process, questionnaires were sent to community centres and day centres. The contact for Fairways also agreed to distribute copies to community support groups in Spelthorne.

Spelthorne Talking News were also contacted to ensure publicity of the consultation to visually impaired people in the borough.

Postal questionnaires were sent to 29 care homes in Spelthorne to provide the opportunity for feedback from care home managers.

Data used

To inform the EIA, the project used:

- Impact modelling to ensure we understand the effects of different options
- High risk group analysis using MOSAIC and Surrey-i data to understand the demographic makeup of the affected areas. (It should be noted that Mosaic demographic categorisation does not directly correlate with the protected characteristics as provided for by the Equality Act 2010.)
- Consultation and engagement with residents and businesses from affected areas
- Feedback from partners and politicians
- [SFRS Community Risk Profile 2013-14](#)
- [SFRS & ASC Briefing Document for Frontline Staff](#)
- Demographic data on www.surreyi.gov.uk, including the Joint Strategic Needs Assessment (JSNA).
- Correlation of Index of Multiple Deprivation against Incident Type and Distribution.

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7. Impact of the new / amended policy, service or function

7.1. Emergency response times

Surrey Fire and Rescue Service set targets for itself against a set of outcomes which are reported monthly. The current target is:

Attendance times against Surrey Standard: One fire engine at critical incidents within 10 minutes and a second one (where required) within 15 minutes on 80% of occasions.

The proposals have been created following response modelling aimed at ensuring that throughout Surrey, more fire engines reach emergencies within the response standard than they do now. Key to the modelling is a travel time matrix which incorporates vehicle type, time of day, road type and travel times between nodes on the road network. A quantitative understanding of the service profile provides a baseline position and modelling extracts data on workload from the last five years. Around 50 data fields are collected for each mobilisation including geographical/address information, all time components, vehicle properties, incident classification, etc. In addition other information sources include data regarding unavailability, station and appliance locations, mobilisation protocols and geographic boundaries.

This model includes considering an average week for Surrey which would include false alarms, fires in a dwelling, other property and non property (secondary fires), as well as vehicle collisions and other incidents (special services). The fire engines would also have been used as required to standby at other locations to maintain emergency response cover across the County as required, for example where there has been an incident requiring the use of the fire engines in an area, fire engines from other localities would be re-positioned so as to maintain a level of cover for that area, and this positioning built into the modelling.

This is a countywide approach, based upon using our resources more efficiently for the whole of Surrey. The proposals impact on the estimated response time in 3 boroughs/districts, resulting in a slight overall increase to Surrey's average 1st response time.

Option 4: One 24 hour whole-time (immediately crewed) fire engine

In noting the above, the modelling utilised predicts a decrease in the average 1st response time in Runnymede, with a higher proportion of responses within the Surrey Standard of 10 minutes. At present, Runnymede's average first response time, at 08:36, while still within the Surrey Response Standard, is significantly above the Surrey average, of 07:28.

In Elmbridge and Spelthorne modelling predicts an increase in the average 1st response time, and a reduction in the proportion of 1st responses within 10 minutes. While the change is slight for Elmbridge, it is greater in Spelthorne. It is for this reason that Spelthorne has been the main focus for consultation activity and risk profiling. In both instances, the average 1st response time would remain well within the Surrey Response Standard of 10 minutes, and below the Surrey average of 07:33s.

The changes to the deployment of fire engines means that residents in Runnymede that have previously had longer than average response times will have an improved provision (i.e. first engines are more likely to reach them within 10 minutes).

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Response standard		1st response to all 2+ fire engine incidents		2nd response to all 2+ fire engine incidents		1st response to other emergencies
		Average	% in 10 mins	Average	% in 15 mins	% in 16 mins
Current situation	Surrey	07:28s	80.8	10:27s	86.7	96.8
	Spelthorne	05:44s	97.0	09:13s	98.2	99.8
	Elmbridge	06:45s	89.5	11:01s	95.0	99.5
	Runnymede	08:36s	69.2	10:21s	90.1	97.5
Proposal	Surrey	07:33s	82.5	10:27s	90.5	98.3
	Spelthorne	06:42s	91.4	10:24s	94.5	98.9
	Elmbridge	06:48s	88.6	11.14s	93.0	99.3
	Runnymede	07:18s	82.7	10:35s	92.5	98.8

Option 5: One 24 hour whole-time (immediately crewed) fire engine and one 24 hour “On-call” fire appliance

The provision of a second “On-call” fire engine compared to one whole-time fire engine improves in Spelthorne the average first response time by 8 seconds compared to Option 4 and the second response times by just over 1 minute (see table below).

Predicted response times to emergency incidents under Option 5

Response standard		1st response to all 2+ fire engine incidents		2nd response to all 2+ fire engine incidents		1st response to other emergencies
		Average	% in 10mins	Average	% in 10mins	% in 16 mins
Current situation	Surrey	07:28s	80.8	10:27s	86.7	96.8
	Spelthorne	05:44s	97.0	09:13s	98.2	99.8
	Elmbridge	06:45s	89.5	11:01s	95.0	99.5
	Runnymede	08:36s	69.2	10:21s	90.1	97.5
Proposal	Surrey	07:33s	82.5	10:27s	90.5	98.3
	Spelthorne	06:34s	93.2	09:13s	97.5	99.7
	Elmbridge	06:47s	88.7	11.13s	93.1	99.4
	Runnymede	06:34s	88.7	11.13s	93.1	99.4

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7.2. General Background on the Most Vulnerable Groups:

SFRS Community Risk Profile (CRP) 2011/12 and 2013-14

The CRPs are an analysis of fire deaths and injuries that occurred in Surrey. The CRP 2011/12 data set on fatal fires is from the reporting period 2006-09 and injuries from April 2010 – March 2011. The updated CRP 2013/14 builds on this and covers a six year period between April 2006 and March 2012. The CRP provides as follows: ‘A healthy person, excluding infants, with well positioned and working smoke alarms, should be able to escape without injury or the need to be rescued from an accidental dwelling fire at any time of the day or night.’

It also highlights that those particularly at risk from a fire in their home fall into one or more categories of:

- Those over 60
- Those living alone
- Those with impairment
- Those that smoke
- Those that drink

Fatalities

Smoking – The CRP 2013/14 identifies that 44% of the fire deaths in Surrey (2006-12), smoking material was the primary cause of the fires. Of the 8 people who smoked, the primary cause in 5 of these incidents was smoking related. Although relevant, this is the primary cause of fire and all of these victims had additional underlying issues of mobility, mental health and alcohol problems.

Where a person is a smoker there are significant additional risks if the person is:²

- elderly,
- alcohol dependant,
- infirm (limited mobility) and/or
- has mental health needs³

In the CRP 2013/14, both sleeping and smoking are issues that have been found to have affected 16 of the 25 fire deaths in Surrey but are not the real underlying causes of these fire deaths. Fire investigations at the time concluded that:

²[SFRS ASC Briefing for Staff](#)

³[SCC ASC What is a mental illness](#)

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- **Alcohol** – In 7 (45%) of the cases the casualty was, to some degree, under the influence of alcohol at the time of the fire. 2 were male and 5 were female.
- **Mobility issues** – of the 16 people who died in a fire, 7 (45%) were known to have mobility issues that affected their ability to escape the fire.
- **Mental health** – of the 16 people who died in a fire, 11 (70%) were known to have mental health and/or depression issues. In addition to this the people who died in fire outside their home all suffered from mental health issues and all the fires were started deliberately by the person who died.

Table: Underlying Causes (to 16 of 25) Fire Deaths in Surrey 2006-12

Underlying Causes	Fire Deaths	Percentage of 16 Fire Deaths
Smoking	5	30%
Alcohol	7	45%
Mobility issues	7	45%
Mental Health	11	70%

(Source CRP 2013/14)

Age and Fatalities from Fire: The age range of all who died in accidental fires from 2006-2009 was 17–97 years of age.

Table: Average age of those who died in Surrey 2006-09

Male / Female	Average Age
Male	64
Female	69
Overall	67

(Source: CRP 2011/12)

Table: Number of those who died under/over Statutory Retirement Age in Surrey 2006-09

Under Statutory Retirement Age	Over Statutory Retirement Age	Total
5	9	14

(Source: CRP 2011/12)

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Injuries and/or Rescues

Between April 2010 and March 2011, SFRS attended 111 fires involving 145 injuries and/or rescues, 91 of these were in accidental dwelling fires.

Table: Underlying Causes of Injury in Accidental Dwelling Fires 2010-11

Underlying Causes	Number of injuries
Alcohol / Drugs	14
Mobility Issues	10
Medical conditions	5
Disabilities or special needs	5

(Source CRP 2011/12)

Road Traffic Collisions (RTC)

In 2009, a total of 5,755 people were reported as injured in road collisions in Surrey.

Table: Number of Killed or Seriously Injured and Slight Casualty in RTCs Surrey 2009

Type	Total	% Male	% Young Person (16-24 yrs)	% Child Male
Killed or Seriously Injured	571	72	28	67
Slight Casualty	5,184	56	25	-

(Source CRP 2011/12)

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Census 2011

The CRP identifies that those that are elderly and living alone are at greater risk from fire. The percentage of people aged 65 and above, and living in one person households in Spelthorne is about average for Surrey

Table: % One Person Household Aged 65+ by Spelthorne Ward

Ward	%
Ashford Common	13.90
Ashford East	14.23
Ashford North and Stanwell South	8.50
Ashford Town	11.28
Halliford and Sunbury West	15.34
Laleham and Shepperton Green	11.18
Riverside and Laleham	13.70
Shepperton Town	17.53
Staines	9.21
Staines South	16.32
Stanwell North	10.09
Sunbury Common	11.19
Sunbury East	14.73
Spelthorne	12.73
Surrey	12.62
South East	12.66
England	12.35

(Source: Census 2011)

Table: % One Person Household Aged 65+ in Surrey

Distirct or Borough	%
Mole Valley	14.66
Waverley	14.24
Runnymede	13.28
Tandridge	13.12
Elmbridge	12.74
Spelthorne	12.73
Epsom and Ewell	12.58
Reigate and Banstead	12.13
Guildford	11.41
Woking	11.40
Surrey Heath	10.87

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Joint Strategic Needs Assessment (JSNA) 2011⁴; Smoking:⁵

Total Surrey Population Prevalence: The latest smoking prevalence for the county is 17% however research at parliamentary ward level has suggested that some areas have prevalence levels as high as 40%. At local authority level, data suggests the highest smoking rates can be found in Spelthorne (25.2%), Runnymede (23.4%) and Reigate & Banstead (18.8%)

Health Needs Assessment on Alcohol in Surrey, August 2008⁶

Alcohol Misuse

Alcohol misuse is a general term used to describe any drinking behaviour, which has the potential to cause harm or threatens to damage the health and well-being of the user and those around them. Alcohol misuse would therefore include any level of risk from hazardous drinking through to alcohol dependence.

Categories of Alcohol Use:

Sensible (low risk) drinking is drinking alcohol within limits that do not pose any risk of harm to the person or others (i.e. staying within the current guidelines on alcohol consumption)

Hazardous (increasing risk) drinking is drinking above recognised sensible levels, but not yet experiencing harm (measured by consumption of between 22 and 50 units per week for males and between 15 and 35 units per week for females)

Harmful (high risk) drinking is drinking above recognised sensible levels and experiencing harm, such as an alcohol-related accident, acute alcohol poisoning, hypertension, cirrhosis (measured by consumption of over 50 units per week for males and over 35 units per week for females)

Binge drinking is drinking over double the daily recognised sensible levels in any one day (over eight units a day for men and over six units a day for women)

Alcohol dependence refers to drinking behaviour characterised by an inner drive to consume alcohol, continued drinking despite harm and commonly withdrawal symptoms on stopping drinking

⁴ [JSNA 2011](#)

⁵ [JSNA 2011 Smoking](#)

⁶ [Surrey DAAT](#)

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Joint Strategic Needs Assessment (JSNA) 2011⁷; Alcohol⁸:

Increasing Risk Drinking (formerly hazardous):

Total Surrey Population Prevalence: The overall prevalence of increasing risk drinking in Surrey is 25%. This is the 2nd highest prevalence in the country behind Leeds and is significantly higher than the England average of 20%. 1 in 4 of Surrey adults drink above recommended sensible daily limits and alcohol-related health problems tend to present in people aged over 40 years; who are more likely to drink at increasing risk levels.

All 11 boroughs within the County have prevalence rates above the England average and 7 out of the 11 boroughs feature in the top 10 for increasing risk drinking in the country as a whole. Runnymede has the joint highest prevalence of increasing risk drinking in the country at 26.4%. Spelthorne has below average prevalence for Surrey at 24.13%.

Higher risk drinking (formerly harmful):

In contrast to increasing risk drinking, none of the 11 boroughs feature in the top 10 higher risk drinking boroughs in England. Guildford is ranked the highest out of all the Surrey boroughs at 148 out of 324 boroughs in England. Guildford (4.41%), Runnymede (4.41%) and **Spelthorne** (4.19%) have the highest prevalence in Surrey and are above the Surrey average of 4.04%, although not significantly. All boroughs except the top 3 are significantly lower than the 5.03% England average.

Spelthorne has the third **lowest levels of increasing risk** drinking, but the **third highest level of higher risk** drinking within Surrey, perhaps indicating that whilst less people are drinking at increasing levels, when they do drink they are doing so at levels that cause harm.

In Surrey, high rates of increasing risk drinking are thought to be associated with the relative affluence of the county and with frequent drinking at home where the amount consumed is perhaps not realised. Conversely, higher risk drinking and alcohol dependence are linked to deprivation and need to be addressed in specific areas of the county such as within Surrey's five Priority Places. Further information on health inequalities and deprivation can be found in the JSNA chapter on Deprivation.

Binge drinking:

Binge drinking estimates reveal a similar picture to those for higher risk drinking - none of Surrey's 11 boroughs feature in the top 10 in England. **Spelthorne** is ranked as the second highest (15.97%) of the boroughs in Surrey (15.30% average) behind Guildford (16.41%) in prevalence of binge drinking in Surrey. All boroughs are lower than the England average of 18%.

⁷ [JSNA 2011](#)

⁸ [JSNA 2011 Alcohol](#)

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7.3. Adults at Risk as identified by Adult Social Care

In 2000, the No Secrets guidance⁹ defined a vulnerable adult (now referred to as an adult at risk) as: “a person aged 18 years or over who is or may be in need of community care services by reason of mental or other disability, age or illness; and who is or maybe unable to take care of him or herself, or unable to protect him or herself against significant harm or exploitation whether or not a person is vulnerable in these cases will depend upon surrounding circumstances, environment and each case must be judged on its own merits.”¹⁰

Following a rise in fatal fires involving adults at risk in the year 2011/12, a joint SFRS and Adult Social Care (ASC) working group was set up to report to Surrey County Council (SCC) Cabinet on how the County can seek to reduce the harm being caused by fire. The group took into account the publication of the Chief Fire Officers Association (CFOA) report on an aging population, [Ageing Safely](#) (December 2011), and the report on the fatal fire at [Rosepark Nursing Home](#) (April 2011). The [report to Cabinet](#), in May 2012 included a number of recommendations on how we can reduce the risk and better support adults to live in their own homes and in residential care. The strategy to implement the recommendations is being delivered through four working groups with an overarching, multi-agency Steering Group.¹¹ The working groups are:

- Telecare Group – to use a high risk matrix to identify adults at increased risk of harm from fire and ensure they are offered [telecare](#)¹² with a linked smoke alarm
- Residential Care – to increase the number of residential settings with sprinkler systems, fire retardant materials and improved training for staff
- Community Care – to ensure adults at risk are kept safe when in their own homes through better knowledge of the fire risks, the referral process and equipment available to them to keep them safe
- Marketing group – to increase awareness of the risks, support and equipment available to keep adults safe from fire.

Further, the Fire Investigation and Community Risk Reduction Team now have direct access to the ASC Adult Information System client management system. This is a major step forward for both services as it allows SFRS to streamline its working practices with ASC, saving staff time and allowing SFRS to better serve the adults at risk in Surrey.

⁹ [No Secrets Guidance](#)

¹⁰ [SCC ASC Safeguarding](#)

¹¹ [SFRS ASC Briefing for Staff](#)

¹² Telecare is a 24-hour service using a range of sensors which link with the traditional community or lifeline alarms to help potentially vulnerable people live more independently in their homes.

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Through the use of a Fire Risk Matrix which takes into account factors of age, client group (mental health, drug or alcohol use) and living alone, a risk score can be assigned to all open cases from the Social Care database, i.e. those known to ASC. The matrix does not include information on smokers which is likely to affect fire risk. Any individual may have a risk score of 0 - 6 based on this logic, and up to 3 risk factors recorded.

For the purposes of this EIA, this information was updated in October 2013. Countywide, 2,634 people have been identified with a risk score of 5 or 6, indicating they may be at high risk in a fire situation. This represents 10% of the overall cohort.

In Spelthorne the percentage of people open to ASC that are considered High Fire Risk is 10%. This is slightly above the average of 9.5% for the Boroughs and Districts in Surrey, with Waverley, Woking and Mole Valley all having a higher proportion identified as a High Fire Risk.

Table: Breakdown of people who may be at higher risk in a fire situation by District & Borough

District / Borough	High Fire Risk people out of all people open to ASC	% High Risk people
Elmbridge	256 out of 2720	9%
Epsom and Ewell	151 out of 1780	8%
Guildford	265 out of 3261	8%
Mole Valley	214 out of 1929	11%
Reigate and Banstead	343 out 3455	10%
Runnymede	192 out of 2163	9%
Spelthorne	225 out of 2313	10%
Surrey Heath	184 out of 2110	9%
Tandridge	156 out of 1873	8%
Waverley	403 out of 3444	12%
Woking	245 out of 2202	11%
Grand Total	2634 out of 27250	10%

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Table: Breakdown of people who may be at higher risk in a fire situation by Spelthorne Ward

Ward	High Fire Risk people out of all people open to ASC	% High Risk people
Ashford Common	12 out of 203	6
Ashford East	11 out of 198	6
Ashford North & Stanwell South	12 out of 158	8
Ashford Town	22 out of 177	12
Halliford & Sunbury West	23 out of 175	13
Laleham & Shepperton Green	13 out of 176	7
Riverside & Laleham	6 out of 131	5
Shepperton Town	17 out of 148	11
Staines	8 out of 128	6
Staines South	39 out of 251	16
Stanwell North	20 out of 227	9
Stanwell Common	18 out of 189	1
Sunbury East	24 out of 152	16
Grand Total	225 out of 2312	10

NB: Wards with a % greater than 10% have been highlighted
(Source: ASC, SCC, October 2013)

7.4. Other risk factors

The CRP 2013-14 identifies other factors that impact the risk of fire and / or injury, which include the built environment and society including levels of deprivation. The CRP states that: 'a person's health is influenced by the conditions by which they live. Social and

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economic conditions including low income, social exclusion, unemployment and poor housing have repeatedly shown to influence health and length of life. People in more deprived circumstances are more likely to die sooner and be unwell more often than the more affluent parts of the population.’

a) Population density

Spelthorne is only the sixth most populated borough in Surrey, but is the second most densely populated borough. It currently has lower than average growth rates for Surrey but by 2035 the projected population change is expected to be above the Surrey average. The Wards of Ashford, Sunbury Common and Ashford Common are in the top 3 of the most densely populated county electoral wards.

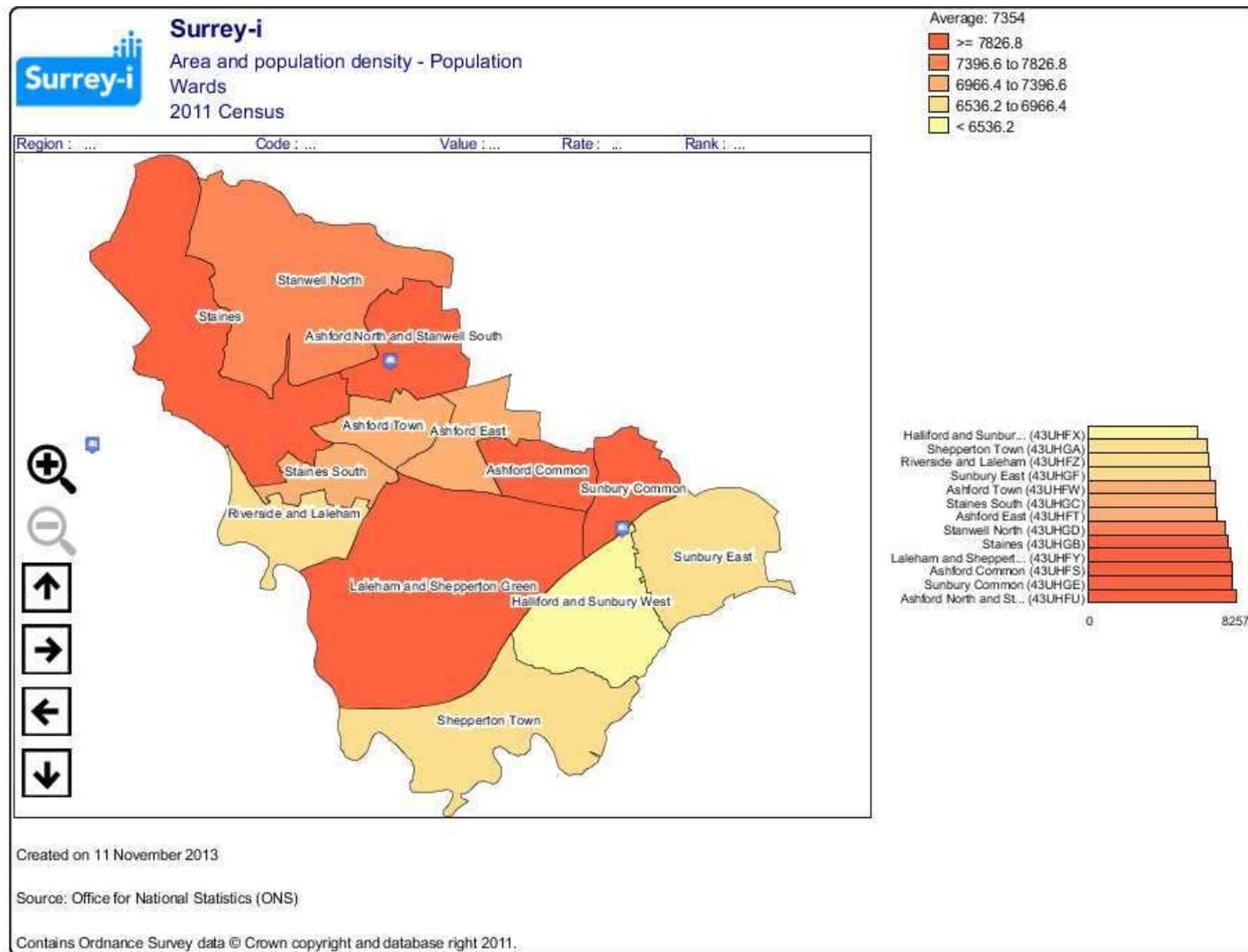
Spelthorne:

Description	Value	Surrey Average	Rank	Source
Total population	95,600	102,900	6	Census, 2011
Population density	21.3 pp hectare	6.8	2 (behind E&E)	Census, 2011
Projected density in 2035	25.2 pp hectare	-	2	Census, 2011
Population Change 2001 - 2011	5.8%	6.9%	8	Census, 2011
Projected Population Change 2010-35	20.6%	18.91%	4 (behind R&B, E&E, Runnymede)	ONS, 2011 ¹³
Overcrowded households	9%	6.8%	11	Census, 2011

¹³ [Surrey-i: Projected Population 2035](#)

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Spelthorne: Population by Ward



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Source: Office for National Statistics (ONS)

Dataset: Census: Population, households and area

This dataset includes data from the 2011 Census released by the Office for National Statistics (ONS)

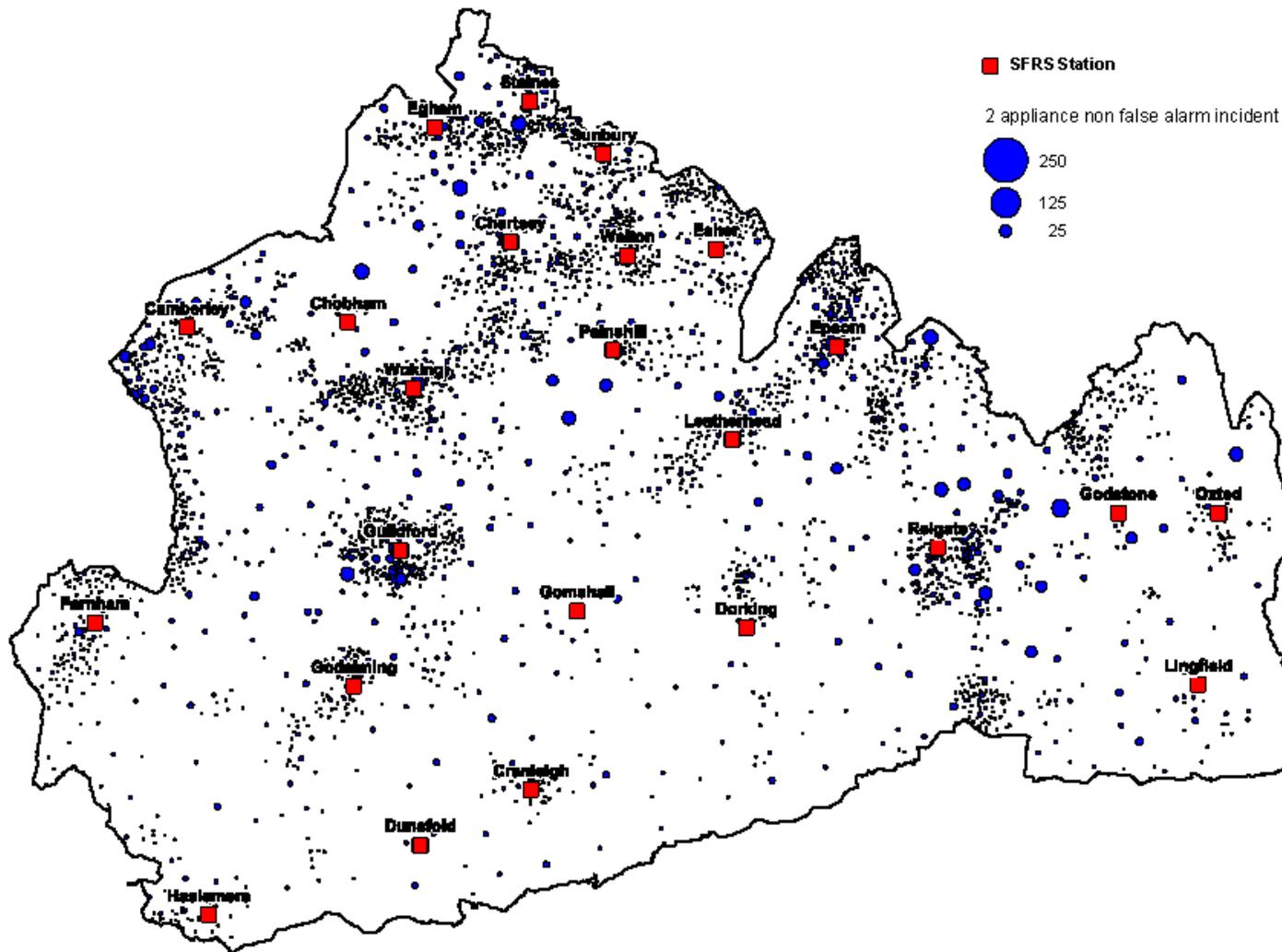
<http://www.surreyi.gov.uk/GeographyDataBrowser.aspx>

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Incident Distributions

The distribution of number of incidents shows that, as expected, frequency is linked to density of population. The key areas for numbers of incidents in Spelthorne are the urban areas of South-West Staines and Sunbury. However, severity of incidents is not linked to population density. An incident is defined as any occasion where a fire officer or fire appliance attends on scene.

Incident distribution (5 year - 2007/08 to 2011/12) - 2 fire engine non false alarm incidents



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b) Building type

Spelthorne has a high number of high rise buildings (5 floors or more) in comparison to other Surrey areas. Escaping a fire from a high-rise can be more difficult than low-rise, particularly for those with disabilities or small children. Once a fire has broken out, the actual process of firefighting poses some unique challenges (i.e. extended lines of communication, falling objects, complexity of internal layout, etc).

'In England and Wales, all buildings over 18m in height must have provisions for firefighting and search and rescue. Basic facilities to be provided include a Firefighting Shaft, Fire Main (with a wet system in buildings exceeding 50m in height (60m prior to 2007) and a Firefighting Lift). Firefighting Shafts including Fire Mains (but not necessarily Firefighting Lifts) may be found in some buildings with floor heights exceeding 7.5m.'¹⁴

Operations involving high-rise building pose certain challenges that need to be reflected in the SFRS risk assessment and training programme.

In terms of residential property, Spelthorne has the lowest percentage of the population 0.8% living in communal establishments compared with Guildford with the highest at 4.6%¹⁵. (A communal establishment resident is a person living in managed residential accommodation who has lived, or intends to live there for six months or more). However, Spelthorne has above average accommodation as unshared apartments in Surrey, at 9,167 with the Surrey average at 8,526. Spelthorne also has the third highest percentage of accommodation as unshared apartments at 23.2%. This is above the Surrey, South East and England average. Between 2001 and 2011, the percentage increase in unshared apartment accommodation in Spelthorne was below the Surrey average.

¹⁴ [Shropshire Fire High Rise Buildings](#)

¹⁵ [Surrey-i Population Communal Establishments](#)

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Table: Unshared Apartment Accommodation in Surrey 2011

Region	Accommodation type - Unshared dwelling: Flat maisonette or apartment		
	%	Total	% Increase 2001 - 2011
Reigate and Banstead	24.07	13341	16.27
Woking	23.78	9385	16.32
Spelthorne	23.20	9167	11.12
Epsom and Ewell	22.87	6813	14.26
Elmbridge	22.60	11959	10.73
England	21.16	4668839	12.60
Surrey	20.58	93788	13.43
Runnymede	20.43	6684	25.13
South East	20.27	720703	15.65
Tandridge	20.09	6700	11.92
Mole Valley	19.00	6808	14.35
Guildford	18.26	9856	7.51
Waverley	16.05	7908	6.73
Surrey Heath	15.40	5167	19.81

(Source: Surrey-i; 2011 Census)

c) Indices of Multiple Deprivation (IMD)

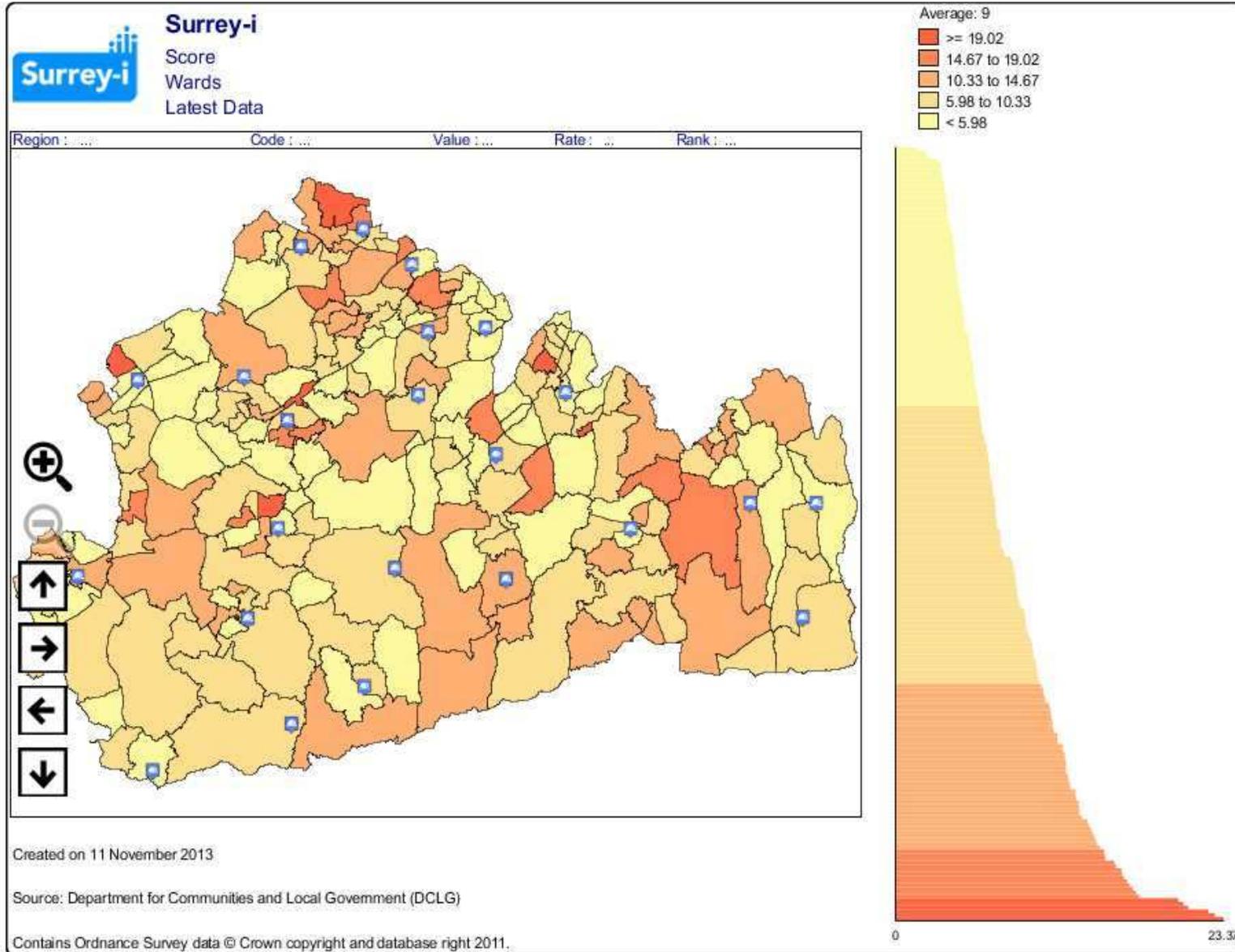
Spelthorne:

- Overall the most deprived borough in Surrey with an IMD overall score of 11.2, followed by Tandridge (10.0). (department for Communities & Local Government, 2010)
- 9% claim working age benefits (average 7%) –ranked 11th (DWP, 2013)
- The local authority with the highest proportion of Lower Super Output Areas (LSOAs) found in the most deprived half of England is Guildford (14.4% of its population) followed by Reigate & Banstead (13.1% of its population). Only 1 Lower Super Output Area in Spelthorne is amongst the top 20 deprived LSOAs in Surrey (Stanwell North) (DLCG, 2010).
- However, there are more pockets of deprivation elsewhere in Surrey (Woking, Reigate and Banstead).

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Surrey Indices of Multiple Deprivation by Ward 2011

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Deprivation and Incident Correlation

SFRS commissioned a research analysis to be carried out on the relationship between IMD and incident demand using a six year sample of incident data (April 2007 - March 2013). Correlation analysis was conducted on the data for the IMD score and rank (within Surrey) against incident demand and rank for all incidents and all primary fire incidents within Surrey.

- Reigate and Banstead with the second highest LSOA IMD score has the highest primary fire demand.
- Guildford has the highest incident demand and average LSOA IMD score.
- Spelthorne is the most deprived ward but has the fourth lowest number of all incidents in the 6 year period and below average primary fires.

For primary fire demand and IMD score there is a weak trend of increasing incident demand with increasing IMD score. The average demand per LSOA, for both incident and primary fire demand, shows a general increase with IMD score, with the relationship for average primary fire demand with IMD score being stronger than for all incident demand.

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SFRS Consultation on Changes to Emergency Response Cover in Spelthorne 2013

Around 77% of respondents were willing to complete all questions in the Equality and Diversity section. Compared to the demographic makeup of Spelthorne, the sample was slightly older, more male and with fewer representatives of the BME section.

Age: The distribution of age groups for the population of Spelthorne and the age distribution for the survey is as follows:

Age	Spelthorne	Applied to sample (18-85+)	Consultation sample (public)
18-24	7%	9%	3%
25-44	28%	35%	28%
45-64	27%	33%	45%
65-84	15%	19%	23%
85+	2%	3%	2%

It is not representative of the demographic makeup of the borough, as respondents of middle and old age are over-represented (45%) and younger residents under-represented (despite using youth centres and schools as communication outlets).

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The survey contains questionnaires that were completed by care home managers, who represent old age pensioners (predominantly 75+). When looking at the postal questionnaires from care home managers, we find that all rejected the proposal outright, the main concern being the safety of the elderly residents.

Only nine members of the public were aged under 25 and they were least supportive of the proposal. The reasoning however reflected the average causes for objection and had no reference to young age.

Also, the older age groups were more likely to oppose the proposal (75%). Amongst the non-supporters, there were 22% 65+, and only 7% in the supporter group.

Age	Sample size		Yes		Not sure		No		No opinion	
	Count	%	Count	%	Count	%	Count	%	Count	%
up to 24	11	2%	1	9%	2	18%	8	73%	0	0%
25-44	142	31%	33	23%	8	6%	99	70%	2	1%
45-64	207	46%	48	23%	12	6%	147	71%	0	0%
65+	93	21%	6	6%	15	16%	70	75%	2	2%
Overall	453	100%	88	19%	37	8%	324	72%	4	1%

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In this survey, 24 comments were left with specific concerns about vulnerable people and how this proposal might impact them. Eight of those comments were non-specific and just mentioned 'vulnerable people'. Eleven comments revolved around old people and their increased risk, while three comments mentioned concerns around young children. For example a care home manager and a former social worker stated the following:

"The current station in Sunbury is nearer to our business which would need attendance as soon as possible. We do not want a potentially slower time for attendance as we deal with old and vulnerable people 24/7."

"When I was working as a social worker in Spelthorne (Now retired) I had several dealings with the fire service in times of flooding, supporting very vulnerable older people etc and I fear this aspect of the work may be cut back."

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Disability: Mobility issues and mental health issues are known to be fire risk factors. The sample reflects the 15% prevalence of disabled population in Spelthorne (Census, 2011). Looking at the 60 respondents stating to have a disability, there was significant shift in support. The main concerns for the disabled group were the longer response times and the likelihood of gridlock on Spelthorne's roads, meaning that their requirement for quick assistance would not be met under the proposal. Also out of the 24 verbatim items received, four mentioned their concern for disabled people and those of ill health:

"I'm not sure if one fire engine will be able to cope. What happens if there is an emergency at the airport, plus a fire in the residential area, say in a block of flats with older residents or disabled people who would need assistance to evacuate the premises." (Spelthorne resident)

Disability	Sample size		Yes		Not sure		No		No opinion	
Yes	60	14%	12	20%	6	10%	41	68%	1	2%
No	366	86%	69	19%	30	8%	266	73%	1	0%
Overall	426	100%	81	19%	36	8%	307	72%	2	0%

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Gender: The survey was completed by more men than women. However, looking at the staff and public cohorts separately, we can see that for public members the ratio of women outweighs men compared to the borough's usual distribution. Also, females are more at risk of injury or death by fire.¹⁶ Females were slightly less supportive of the proposals than men (only 33% of supporters were female, whereas 47% of non-supporters were female). Men had a slightly higher approval rate (reflecting the fact that 95% of SFRS staff, who were more supportive of the proposal, were male).

Gender	Sample size		Yes		Not sure		No		No opinion	
Female	198	46%	28	14%	23	12%	146	74%	1	1%
Male	235	54%	56	24%	11	5%	165	70%	3	1%
Overall	433	100%	84	19%	34	8%	311	72%	4	1%

Ethnicity: We know that the majority of those suffering injuries or death through fire are White British. In the survey, 94% of those members of the public that stated their ethnicity were White British (which is above the overall rate for Spelthorne, 81%). Eight respondents from the public domain came from an Other White background (3%) and five from an Asian background (2%), two (1%)

¹⁶ Community Risk Profile, 2011-12

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from a Mixed Asian-White background. One member of the public came from the Black community. There were no ethnicity-specific comments amongst any of the ethnic groups. The attitude towards the proposal amongst non-White British respondents falls broadly amongst the overall split; the sample is too small to assign any meaning to small variances in support levels.

Ethnicity	Sample size		Yes		Not sure		No		No opinion	
White British	387	94%	75	19%	36	9%	272	70%	4	1%
Not White British	23	6%	6	26%	0	0%	17	74%	0	0%
Overall	410	100%	81	20%	36	9%	289	70%	4	1%

Religion: The majority of respondents that stated their religion classed themselves as Christian (53% of all respondents responding to the question, average for Spelthorne is 64%). 23% said they had no religion (average for Spelthorne is 23%). Two members of the public were Buddhist, two Jewish and one was Muslim. There were no Hindu respondents amongst the sample. There were no religious-specific comments amongst those that held a religion.

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Religion	Sample size		Yes		Not sure		No		No opinion	
Christian	249	67%	57	23%	25	10%	164	66%	3	1%
Other faiths (Buddhist, Muslim, Jewish, Other)	19	5%	1	5%	2	11%	16	84%	0	0%
No religious / faith group	102	28%	21	21%	6	6%	74	73%	1	1%
Overall	370	100%	79	21%	33	9%	254	69%	4	1%

Marital status: Single occupancy is known to be a fire risk factor. Hence, looking at the 120 respondents stating to be single, divorced, separated and widowed, we can say that their level of support is not as positive but also that their negativity is slightly weaker. A considerable part was not sure about the proposal. The main concerns for the single group were reduced resources, longer response times and Spelthorne's urban makeup – however no comments about individual living conditions.

Status	Sample size		Yes		Not sure		No		No opinion	
Married, co-habiting, civil partnership	301	71%	62	21%	16	5%	221	73%	2	1%
Single, widowed, separated, divorced	120	29%	23	19%	19	16%	76	63%	2	2%
Overall	421	100%	85	20%	35	8%	297	71%	4	1%

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Sexual orientation: 10 of 356 respondents that answered that question stated to be lesbian, gay or bisexual (LGB). There is no discernible difference between the level of support amongst this group compared to the heterosexual group. However, it was only a very small sample, which makes this data unrepresentative. The verbatim that the unsupportive respondents gave had no reference to their sexuality or any other lifestyle choice associated with this protected characteristic (single occupancy, etc).

Status	Sample size		Yes		Not sure		No		No opinion	
Heterosexual	346	97%	74	21%	31	9%	240	69%	1	0%
LGB	10	3%	3	30%	0	0%	7	70%	0	0%
Overall	356	100%	77	22%	31	9%	247	69%	1	0%

Pregnancy / maternity: Ten respondents stated that they were pregnant / had been pregnant in the last 12 months (one of whom identified himself as a gay male). Eight of these respondents objected to the proposal (80%), because of the increase of the response times and the growing population in Spelthorne. There was one specific comment about the difficulty of quickly evacuating a high rise flat with small children.

“I live at Sunbury Cross, in a high rise flat with two children under three. The thought of a fire terrifies me, and the thought that there will be just one fire engine operating in Spelthorne is awful. [...]” (Spelthorne resident)

Gender reassignment: Three respondents stated that they had undergone gender reassignment (out of 391 responding to the question) – this would mean nearly 1% of the sample was transgender which is well above the national average of 0.04% (GIRES 2009). Regardless of the truthfulness of the respondents’ answers, no comments were made that refer specifically to gender reassignment or issues related to gender reassignment.

For more information on the Consultation, please see Annex 2: Consultation Report

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7a. Impact of the proposals on residents and service users with protected characteristics

Protected characteristic ¹⁷	Potential Impacts	Evidence
Age	<p>Data Analysis There is a link between fire deaths/injuries people 65 years and over. This risk is compounded in cases where there are other risk factors, e.g living alone, mobility, mental health problems, smoking, etc). There is also an increase in fire deaths during the winter months.</p> <p>Spelthorne has a medium prevalence of older people and older people living at home alone</p> <p>Potential Positive Impacts The overall improved response rates across Runnymede and Surrey as a whole will benefit residents including older people who are at greater risk statistically of being injured or killed as a result of a fire.</p>	<p>Community Risk Profile 2013/14 <i>'Eighteen of the twenty-five people who died in accidental dwelling fires (April 2006-March 2012) were above the statutory retirement age with seven under the retirement age.'</i></p> <p><i>'All the people who were asleep at the time of the fire had additional underlying issues of restricted mobility, mental health and/or alcohol misuse.'</i></p> <p>Community Risk Profile 2011/12 <i>'Between 2006-2009, of 13 people who were asleep at the time of the fire, 7 were under the influence of drugs or alcohol'</i></p> <p><u>Joint Strategic Needs Assessment 2011</u></p> <p>Age and Alcohol Misuse: Different types of drinking and alcohol misuse are associated with different ages. For example, binge drinking is more prevalent in 18-24 year olds while 'increasing risk drinking' (formally hazardous) is more common among 25-44 year olds.¹⁸</p> <p>Age and Mobility: There is a positive correlation between age and mobility limitations, i.e walking and movement difficulties (especially for people aged 70 years and over). Gender (i.e women live longer increasing the likelihood of mobility limitations), marital status, and health behaviours e.g. smoking and alcohol misuse, and changes in health behaviours in smoking and physical activity affect age-mobility relation.</p> <p>Age and Mental Health: Older people are particularly affected by several risk factors for depression: poor physical health, caring responsibilities, loss and bereavement and isolation.¹⁹</p> <p>Age and Smoking (see also disability/health): Children from deprived households are more likely to be exposed to tobacco smoke and to be</p>

¹⁷ More information on the definitions of these groups can be found [here](#).

¹⁸ [JSNA 2011 Alcohol](#)

¹⁹ [JSNA 2011 Mental Health & Age](#)

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	<p>Potential Negative Impacts The increase in response times for Spelthorne will align with the County average for other areas and will still be below the average for Surrey and well within the targeted response times. It has been argued that the increase in response times will mean greater risk to life and that this will have a greater impact on the elderly given their vulnerability statistically to be injured or killed in fires, and on the elderly and parents with young children given that they may have greater difficulty escaping a fire.</p> <p>Please see Section 9 Action Plan for mitigating activity.</p>	<p>smokers than those in more affluent circumstances. This is particularly the case in Surrey, where overall smoking rates are low, but significantly higher in deprived areas and populations. Surrey's Families in Poverty Needs Assessment , 2011 highlights prevalence amongst young people is likely to be geographically concentrated as having higher than average prevalence: Spelthorne, Reigate & Banstead and Runnymede²⁰</p> <p>Age and Substance Misuse Among younger people, 'groups identified as more vulnerable to substance misuse include: children of substance misusing parents; young offenders; young people in care; homeless young people; excluded pupils or frequent non-attenders; sexually exploited young people; young people from BME groups.'²¹</p> <p>Children Young children and their Parents maybe at greater risk in the event of evacuating from a fire, particularly in high rise buildings.</p> <p>Spelthorne:²²</p> <ul style="list-style-type: none"> • Fourth highest % of people aged 65+: 17.4% (average: 17.2%) – ranked 4th. • 21 residential care homes (743 beds) (6% of Surrey – below average) • Average % of households with people aged 65+ only: 22% – ranked 7th • Average % of one person households aged 65+: 12.7% – ranked 6th • The Wards of Shepperton Town, Staines South and Ashford Common have the highest numbers of people aged 65 and over in one person households with Spelthorne. This is 17.5% of all households in Shepperton Town.²³ • Lowest expected percentage increase in Surrey of people aged over 65 between 2013-2020.²⁴ • Slightly above average % of those open to ASC considered High Risk in a fire situation. • Slightly lower than average numbers of young children between 0-10 years of age, and the lowest number of children per family.²⁵
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²⁰ [JSNA 2011 Smoking](#)

²¹ [JSNA 2011 Substance Misuse](#)

²² [Surrey-i: Local Area Profiles/Census 2011/Key statistics & Household characteristics](#)

²³ [Surrey-i: Data by Geography/Census 2011 Household composition/Household type](#)

²⁴ [JSNA 2011 Older People](#)

²⁵ [Surrey-i:Census 2011](#)

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		<p><u>Consultation feedback:</u></p> <p>Care home managers for the providers in the Spelthorne area opposed the proposal, voicing their concerns with regards to evacuating the elderly, frail and those with mobility difficulties when a fire breaks out at their establishment.</p> <p>Respondents across the age ranges were opposed to the proposals, with the older (65+) and younger (up to 24) age groups most opposed. The reasoning however in the younger age group reflected the average causes for objection and had no reference to young age.</p> <p>Eleven comments revolved around old people and their increased risk, while three comments mentioned concerns around young children. Concerns were raised about the impact on evacuating high rise flats, particularly for children, and for those with mobility problems. Comments were made about the possible impact on less essential services such as dealing with flooding and the impact this might have on the elderly, children and disabled. There was one specific comment about the difficulty of quickly evacuating a high rise flat with small children.</p> <p>Please see Section 9 Action Plan for mitigating activity.</p>
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<p>Disability / health</p>	<p>Data Analysis The Community Risk Profile 2013/14 identifies a link between fire deaths/injuries and mobility. This risk is compounded in cases where there are one or multiple other risk factors, for example, people who are older, living alone, have mental health needs or are smokers.</p> <p>Spelthorne has a high prevalence of poor health and risky behaviour (smoking, alcohol), compared with other boroughs in Surrey. Mobility issues and physical impairments, however, occur at an average level in the borough. Also, the state of the population's mental health and prevalence of learning disability is average or below average in Spelthorne.</p>	<p>Census 2011 In 2011, 13.5% of residents in Surrey reported a health problem, with 7.8% limited a little and 5.7% limited a lot. The overall proportion reporting a health problem was unchanged from 2001. The proportion of the Surrey population reporting a health problem is highest in Spelthorne (14.9%) and lowest in Elmbridge (12.1%). Fewer Surrey residents reported a health problem than the national average. In England as a whole 17.6% reported a health problem with 9.3% limited a little and 8.3% limited a lot.</p> <p>Disability and Mobility: Between April 2006 and March 2012, of the 16 people who died in a fire in Surrey, 7 (45%) were known to have mobility issues that affected their ability to escape the fire. All the people who were asleep at the time of the fire had additional underlying issues of restricted mobility, mental health and/or alcohol misuse. (CRP 2013/14)</p> <p>In addition to the large body of literature on mobility limitations among older adults, there are also a number of studies on mobility limitations among the intellectually and developmentally disabled and the visually impaired (Cleaver, Hunter, and Ouellette-Kuntz, 2008; Salive, Guralnik, Glynn, and Christen, 1994).</p> <p>Mental Health: Between April 2006 and March 2012, of the 16 people who died in fire, 11 (70%) were known to have mental health and/or depression issues. In addition to this 8 of the 10 people who died in fires outside the home were suffering from mental health issues and started these fires as a deliberate act. (CRP 2013/14)</p> <p>Race and ethnic Differences in the levels of mental well-being and prevalence of mental disorders are influenced by a complex combination of socio-economic factors, racism, diagnostic bias and cultural and ethnic differences and are reflected in how mental health and mental distress are presented, perceived and interpreted.</p> <p>Gender: Gender impacts significantly on risk and protective factors for mental health and expression of the experience of mental distress. Neurotic disorders including depression, anxiety, attempted suicide and self-harm are more prevalent in women than men, while suicide, drug and alcohol abuse, anti-social personality disorder, crime and violence are more prevalent among men.</p> <p>Gay, lesbian, bisexual and gender reassignment people are at increased risk for some mental health problems – notably anxiety, depression, self-harm and substance misuse – and more likely to report psychological distress than their heterosexual counterparts.</p>
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	<p>Potential Positive Impacts The overall improved response rates across Runnymede and Surrey as a whole will benefit residents including people with mobility and mental health issues who are at greater risk statistically of being injured or killed as a result of a fire.</p>	<p>Smoking (and Mental Health): Surrey's Joint Strategic Needs Assessment (JSNA) also identifies that mental health service users exhibit rates of smoking at least twice that found among the general population.</p> <p>Between April 2006 and March 2012, in 44% of the fire deaths smoking material was the primary cause of the fires. Of the 8 people who smoked, the primary cause in 5 of these incidents was smoking related. Although relevant, this is the primary cause of fire and all of these victims had additional underlying issues of mobility, mental health and alcohol problems. (CRP 2013/14).</p> <p>The JSNA also states that: 'the latest smoking prevalence for the county is 17% however research at parliamentary ward level has suggested that some areas have prevalence levels as high as 40%. At local authority level, data suggests the highest smoking rates can be found in Spelthorne (25.2%), Runnymede (23.4%) and Reigate & Banstead (18.8%)' (JSNA 2011²⁶).</p> <p>Spelthorne:</p> <p>Highest rates per population 2013:</p> <table border="1" data-bbox="846 794 2069 1142"> <thead> <tr> <th>Description</th> <th>Value per population</th> <th>Average per population</th> <th>Rank pp</th> <th>Rank (total population)</th> </tr> </thead> <tbody> <tr> <td>Bad or very bad health²⁷</td> <td>4.1%</td> <td>3.5%</td> <td>1</td> <td>5</td> </tr> <tr> <td>Limiting long term illness²⁸</td> <td>14.9%</td> <td>13.6%</td> <td>1</td> <td>5</td> </tr> <tr> <td>Smoking²⁹</td> <td>23.9%</td> <td>14%</td> <td>1</td> <td>-</td> </tr> <tr> <td>Disability Living Allowance³⁰</td> <td>3.3%</td> <td>3%</td> <td>1</td> <td>4</td> </tr> <tr> <td>Alcohol Related Hospital Admissions³¹</td> <td>1.8</td> <td>1.5</td> <td>2</td> <td>5</td> </tr> </tbody> </table> <p>Smoking:</p> <ul style="list-style-type: none"> Mapping³² of smoking prevalence suggests that the following wards in Spelthorne have the highest smoking rates: Stanwell North, Sunbury Common, Ashford North and 	Description	Value per population	Average per population	Rank pp	Rank (total population)	Bad or very bad health ²⁷	4.1%	3.5%	1	5	Limiting long term illness ²⁸	14.9%	13.6%	1	5	Smoking ²⁹	23.9%	14%	1	-	Disability Living Allowance ³⁰	3.3%	3%	1	4	Alcohol Related Hospital Admissions ³¹	1.8	1.5	2	5
Description	Value per population	Average per population	Rank pp	Rank (total population)																												
Bad or very bad health ²⁷	4.1%	3.5%	1	5																												
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Smoking ²⁹	23.9%	14%	1	-																												
Disability Living Allowance ³⁰	3.3%	3%	1	4																												
Alcohol Related Hospital Admissions ³¹	1.8	1.5	2	5																												
	<p>Potential Negative Impacts</p>																															

²⁶ [JSNA 2011 Smoking](#)

²⁷ [Surrey-i: Data by Geography/Health & Wellbeing/People Characteristics/General Health /Census 2011](#)

²⁸ [Surrey-i: Data by Geography/Long term illness or disability/ Census 2011](#)

²⁹ [Surrey-i: Data by Geography/Smoking prevalence NHS London Health Observatory 2011](#)

³⁰ [Surrey-i: Topics/ Health & Wellbeing/Disability Living Allowance Claimants/DWPQ22013](#)

³¹ [Surrey-i: Topics/Health & Wellbeing/JSNA 2013 Data Alcohol/Alcohol related hospital admissions](#)

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The increase in response times for Spelthorne will align with the County average for other areas and will still be below the average for Surrey and well within the targeted response times. It has been argued that the increase in response times will mean greater risk to life and that this will have a greater impact on those with mobility or mental health issues given their vulnerability statistically to be injured or killed in fire, and on the disabled given that they may have greater difficulty escaping a fire.

Please see Section 9 Action Plan for mitigating activity.

Stanwell South, Staines, and Staines South.

Suicides:

- Average number of suicides per 100,000 population:4.9 (average: 5) – ranked 4th ³³

Lower than average numbers predicted 2020:

Description	Value	Average	Rank
Mobility / PSD³⁴			
Unable to manage one mobility activity on their own (aged 65+)	3,886	4,248	7
Physical Disability: Moderate (aged 18-64)	4,887	5,262	5
Hearing Impairment: Moderate or severe (aged 65+)	8,870	9,614	6
Visual Impairment: Moderate or severe (aged 75+)	1,240	1,346	7
Mental Health / Dementia			
Common Mental Disorder (aged 18-64)	9,715	10,406	6
Learning Disability (aged 18-64)	1,471	1,566	6
Dementia (% increase) (aged 65+)	28%	31%	8

Mental Health:

- Lowest hospital admissions on grounds of Mental Health³⁵

Consultation feedback:

Care home managers for the providers in the Spelthorne area opposed the proposal, voicing their concerns with regards to evacuating the elderly, frail and those with mobility difficulties when a fire breaks out at their establishment.

³² <http://www.mapsinternational.co.uk/subroot1/ash/ash.html>

³³ [ONS 2008-10](#)

³⁴ [Surrey-i:Topics/Health & Wellbeing/Population 18 + Predicted etc./POPPI &PANSI](#)

³⁵ [JSNA 2011 Mental Health Related Admissions](#)

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		<p>Concerns were also raised about the impact on evacuating high rise flats, particularly for children and for those with mobility problems including wheelchair users. Particular issues were raised about the unfamiliarity of fire fighters from other areas having to attend these buildings.</p> <p>There were also concerns about the vulnerability of those who use hearing aids when they switch these off at night.</p> <p>The Disability Empowerment Board made reference to the possible increased number of callouts as a result of false alarms from Telecare.</p> <p>The Board also made reference to the potential for reduced preventative fire safety work that might be done as a result of these proposals – and the impact on potentially increasing the risk to the elderly and disabled.</p> <p>Please see Section 9 Action Plan for SFRS mitigating activity.</p>
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<p style="text-align: center;">Gender reassignment</p>	<p>Potential Positive Impacts The improved response rates across Runnymede and Surrey as a whole will benefit residents overall.</p> <p>Potential Negative Impacts The increase in response times for Spelthorne will align with the County average for other areas and will still be below the average for Surrey and well within the targeted response times. It has been argued that the increase in response times will mean greater risk to life for people generally in the Borough but there is no indication that this would have a particular adverse effect on people with this protected characteristic.</p>	<p>Gender Variance in the UK: Prevalence, Incidence, Growth and Geographic Distribution Report for Gender Identity Research Organisation (GIREs), June, 2009³⁶</p> <p>According to the GIREs report, in Surrey the prevalence of people, 16 or over, who have presented with gender dysphoria is 37 per 100,000, %, but there is no validated estimate of the population of transgender people in the UK.</p> <p>‘A high degree of stress accompanies gender variance with 34% of transgender adults reporting at least on suicide attempt.’</p> <p><u>Consultation feedback:</u> Consultation has not produced any specific issues related to gender reassignment. There was no feedback from the gender reassignment population.</p>
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³⁶ [Report for Gender Identity Research Organisation \(GIREs\), June, 2009](#)

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<p>Pregnancy and maternity</p>	<p>Potential Positive Impacts The improved response rates across Runnymede and Surrey as a whole will benefit residents overall.</p> <p>Potential Negative Impacts The increase in response times for Spelthorne will align with the County average for other areas and will still be below the average for Surrey and well within the targeted response times. It has been argued that the increase in response times will mean greater risk to life for people generally in the Borough but there is no indication that this would have a particular adverse effect on people with this protected characteristic.</p>	<p>Expectant and new mothers could potentially be more at risk when escaping from a fire, as emergency evacuation may be difficult due to reduced agility, dexterity, co-ordination, speed, reach and balance. Mothers will also face the additional difficulty of evacuating babies and/or young children.</p> <p><u>Spelthorne:</u></p> <ul style="list-style-type: none"> • Below average births in 2012: 1,224 (average 1,294) – ranked 6th • Above average under 5s: 6.3% (average 6%) – ranked 4th <p><u>Consultation feedback:</u> From those that engaged with the consultation process, it was highlighted that those with young children expressed concern of the difficulty of evacuating young children in the event of a fire incident, this was not however raised as a particular issue for pregnant women or those caring for babies.</p>
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EQUALITY IMPACT ASSESSMENT TEMPLATE

Race

Data Analysis

The CRP 2011-12 found that:

- The majority of those injured in fires (68 of 91) were white.

The second highest group was White Other (3 of 91)

Potential Positive Impacts

The improved response rates across Runnymede and Surrey as a whole will benefit residents overall.

Potential Negative Impact

Census 2011: Spelthorne Ethnic Profile

% Population of Spelthorne								
White: British	White: Irish	White: Gypsy or Irish Traveller	White: Other White	White and Black Caribbean	White and Black African	White and Asian	Other Mixed	Indian
80.98	1.43	0.20	4.69	0.60	0.33	0.95	0.61	4.20

% Population of Spelthorne								
Pakistani	Bangladeshi	Chinese	Other Asian	African	Caribbean	Other Black	Arab	Any other ethnic group
0.69	0.27	0.65	1.83	1.02	0.44	0.16	0.34	0.63

The three largest minority ethnic groups in Spelthorne are Other White, Indian and Other Asian. It is in the North of Spelthorne in the wards of Staines; Stanwell North; and Ashford North and Stanwell South that these populations are resident.

Community Risk Profile 2011-12

The CRP found that:

- The majority of those injured in fires (68 of 91) were white.
- The second highest group was white other (3 of 91).

Surrey Police

In 2012 there was only one recorded Arson offence with a hate flag against it (racial flag). This offence was in Mole Valley. Prevention work needs to take into account possible requirements for translation and other culturally sensitive approaches.

(Source: D10 Partnership Product, Surrey Police Incident Recording System, March 2012)

Age and ethnicity:

People living alone are at higher risk of accidental fires. The proportion of White men aged 85

EQUALITY IMPACT ASSESSMENT TEMPLATE

	<p>The increase in response times for Spelthorne will align with the County average for other areas and will still be below the average for Surrey and well within the targeted response times. It has been argued that the increase in response times will mean greater risk to life for people generally in the Borough but there is no indication that this would have a particular adverse effect on people with this protected characteristic.</p>	<p>and above living alone is around 42%, which is much higher than for other ethnic groups.³⁷</p> <p>Gypsy, Roma and Traveller (GRT) communities: The JSNA indicates that GRT communities can be more likely to display some of the factors that place people more at risk of fire:</p> <ul style="list-style-type: none"> • There is a high prevalence of mental health issues within the GRT community including anxiety and depression. • Alcohol consumption and substance misuse are a concern as GRT young people assume adult roles and responsibilities earlier in life than their non GRT peers.³⁸ <p>The JSNA identifies 7 GRT sites within Spelthorne, with further sites in neighbouring Elmbridge and Runnymede, some of which are on the district/borough boundaries.</p> <p>Ethnicity and substance misuse: JSNA indicates that young people from BME groups are more at risk of substance misuse³⁹</p> <p>Spelthorne:</p> <ul style="list-style-type: none"> • Prevalence of White British / travellers • 0.1% cannot speak English (Surrey average: 0.1%) – ranked 8th (Census, 2011) <p>Consultation feedback: Consultation has not produced any specific issues related to ethnicity. All ethnic groups' concerns were similar and reflected those of the general population.</p>
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³⁷ [ASC Outcomes Framework Equality Analysis, DoH 2010](#)

³⁸ [JSNA Gypsy Roma and Travellers](#)

³⁹ [JSNA Substance Misuse 2011](#)

EQUALITY IMPACT ASSESSMENT TEMPLATE

Religion and belief

Data Analysis

The 2011 Census indicates a changing borough profile in terms of religion. The percentage of people identifying themselves as Christian decreased from 75% in 2001, to 64% in 2011, and the percentage saying they had no religion increased to 23% in 2011, from 14% in 2001. The proportion of residents with non-Christian religions doubled, to 7%, over the same period. The proportion of Christian people, and those with no religion is roughly in line with the Surrey average⁴⁰, and the proportion of non-Christian religions is slightly higher than average.

Within Spelthorne there is a significant degree of variation between wards of those from non-Christian religions. In Stanwell North and Staines wards, the percentage of people is relatively high at 12% whilst in Shepperton Town and Halliford and Sunbury West it is just 3%.

Census 2011: Faith and Belief in Spelthorne

% Population of Spelthorne							
Year	Christian	Hindu	Muslim	All other Religions	No Religion	Religion Not Stated	Non Christian Religions
2001	75.3	1.0	0.9	1.5	14.1	7.2	3.4
2011	63.8	2.4	1.9	2.4	22.5	7.0	6.7

In Stanwell North and Staines wards, the percentage of people from non Christian religions is 12%. And in Ashford North and Stanwell South ward it is 11%. This compares to just 3% in Shepperton Town and Halliford and Sunbury West.

Surrey Residents Survey 2012/13

In the annual Surrey Residents Survey⁴¹ in 2012/13, 84% of respondents indicated that they either strongly agree, or tend to agree, that their neighbourhood is a place where people from different backgrounds get on well together. This is in line with the county average, and the proportion of these responses has increased year on year from 79% since the survey started in 2008/09. The proportion of those who strongly disagreed, or tended to disagree with this statement was 5% in 2012/13, down from 8% the year before.

Joint Strategic Needs Assessment

Surrey's Joint Strategic Needs Assessment states that: 'higher levels of deprivation were associated with higher proportions of people thinking that racial or religious harassment is a very or fairly big problem. For example, 3% of people in England in the 10% least deprived areas said that racial or religious harassment is a very or fairly big problem in their local area, compared with 21% of people in the 10% most deprived areas. Although this survey was not undertaken with Surrey residents, it is reasonable to suggest that these figures might also apply to this community.⁴² It is possible therefore that concerns around arson attacks based on religious hate crime will be highest in the most deprived areas of the borough. However, there were no crimes recorded qualified by religion or faith in any Spelthorne ward.

⁴⁰ [Surrey-i: Ethnicity & Religion Census 2011](#)

⁴¹ The Surrey Residents' Survey is a telephone interview survey conducted throughout the year with randomly selected Surrey residents. It began in April 2008.

⁴² [JSNA Religion & Belief 2013](#)

EQUALITY IMPACT ASSESSMENT TEMPLATE

	<p>Potential Positive Impacts The improved response rates across Runnymede and Surrey as a whole will benefit residents overall.</p> <p>Potential Negative Impact The increase in response times for Spelthorne will align with the County average for other areas and will still be below the average for Surrey and well within the targeted response times. It has been argued that the increase in response times will mean greater risk to life for people generally in the Borough but there is no indication that this would have a particular adverse effect on people with this protected characteristic.</p>	<p>Surrey Police In 2012, in Surrey, only one arson incident was recorded as hate crime with a racial or religious motivation. This was in Mole Valley. (Source: D10 Partnership Product, Surrey Police Incident Recording System, March 2012)</p> <p><u>Consultation feedback:</u> Consultation has not produced any specific issues related to ethnicity. All ethnic groups' concerns were similar and reflected those of the general population.</p>
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EQUALITY IMPACT ASSESSMENT TEMPLATE

<p style="text-align: center;">Sex</p>	<p>Data Analysis The data suggests that the individuals most at risk of fire are White British males and females in the 30 - 60 year age range. Across all the age ranges, White British females are shown to be the biggest groups at risk from injury and/or rescue from fire. In England, alcohol misuse is greater among men than women.</p> <p>Potential Positive Impacts The improved response rates across Runnymede and Surrey as a whole will benefit residents overall.</p> <p>Potential Negative Impact The increase in response times for Spelthorne will align with the County average for other areas and will still be below the average for Surrey and well within the targeted response times. It has been argued that the increase in response times will mean greater risk to life for people generally in the Borough. As regards this protected characteristic the Community Risk Profile indicates that more women than men were injured and/or rescued in fires in 2011/12, and 72% of road casualties were male.</p>	<p>Community Risk Profile 2011/12 52 of the 91 people who were injured and/or rescued in accidental dwelling fires were female and 39 were male. The average age of the males who were injured and/or rescued was 45 years, and for females it was 53 years.</p> <p>Of road casualties, 72% were male. And in terms of slight casualties 56% were male.</p> <p>Gender and alcohol consumption: In England, 38% of men and 16% of women consume more alcohol than is recommended by the Department of Health (3-4 units per day for men, 2-3 units per day for women).⁴³</p> <p>Spelthorne: Overall, 50.7% of Spelthorne's population are female. However this proportion varies according to age.</p> <p>Consultation feedback: Consultation has not produced any specific issues related to gender. Both genders' concerns were similar and reflected those of the general population.</p>
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⁴³ [JSNA Alcohol 2011](#)

EQUALITY IMPACT ASSESSMENT TEMPLATE

<p style="text-align: center;">Sexual orientation</p>	<p>Potential Positive Impacts The improved response rates across Runnymede and Surrey as a whole will benefit residents overall.</p> <p>Potential Negative Impact The increase in response times for Spelthorne will align with the County average for other areas and will still be below the average for Surrey and well within the targeted response times. It has been argued that the increase in response times will mean greater risk to life for people generally in the Borough but there is no indication that this would have a particular adverse effect on people with this protected characteristic.</p>	<p>The JSNA states that ‘The UK Government estimates that 7% of the population are lesbian, gay, bisexual, transgender or questioning (LGBTQ) (1). Applying this to mid-2009 population estimates for Surrey, there may be around 5,700 people aged 11 to 16 in Surrey who are LGBTQ.’⁴⁴</p> <p>The JSNA suggests that ‘LGBTQ young people are likely to experience some degree of identity-related stigma’, and this can contribute to, in some instances, issues that put them more at risk of fire including – poor mental health, self-harm and suicide, smoking and substance abuse⁴⁵.</p> <p>There may be an associated risk relating to living alone. People living alone at higher risk of accidental fires. National research has found that Gay men and women in Britain are far more likely to end up living alone and have less contact. It has been found that 75% of older LGBT people live alone, compared to 33% of the general population.</p> <p>Of the 25 victims, 18 lived on their own in the property and 19 were alone in the property at the time of the fire, (CRP 2013/14).</p> <p>Spelthorne:</p> <ul style="list-style-type: none"> • 28.5% are one person households (average 27%) – ranked 3rd • 12.7% are one person households where resident is 65+ (average 13%) – ranked 6th • 2.6% of residents are recorded as being in a same-sex civil partnership in Spelthorne. The highest proportions are in the wards of Staines and Shepperton Town.⁴⁶ • There is a youth club for young LGBTQ people aged 13-19 in Spelthorne. <p>Consultation feedback: Consultation has not produced any specific issues related to sexual orientation. Concerns from all groups were similar and reflected those of the general population.</p>
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⁴⁴ [JSNA 2011 Lesbian, Gay, Bisexual and Transgender](#)

⁴⁵ [JSNA 2011 Lesbian, Gay, Bisexual and Transgender](#)

⁴⁶ [Surrey-i: Data by Geography/Census 2011 Marital & Civil Partnership Status](#)

EQUALITY IMPACT ASSESSMENT TEMPLATE

<p>Marriage and civil partnerships</p>	<p>Potential Positive Impacts The improved response rates across Runnymede and Surrey as a whole will benefit residents overall.</p> <p>Potential Negative Impact The increase in response times for Spelthorne will align with the County average for other areas and will still be below the average for Surrey and well within the targeted response times. It has been argued that the increase in response times will mean greater risk to life for people generally in the Borough but there is no indication that this would have a particular adverse effect on people with this protected characteristic.</p>	<p>People who live alone, rather than those who live with partners, are at higher risk of accidental fires.</p> <p>“The increase in those living alone also coincides with a decrease in the percentage of those in this age group who are married – from 79 per cent in 1996 to 69 per cent in 2012 – and a rise in the percentage of those who have never married or are divorced, from 16 per cent in 1996 to 28 per cent in 2012.” Labour Force Survey 2012.</p> <p>Spelthorne:</p> <ul style="list-style-type: none"> • 28.5% are one person households (average 27%) – ranked 3rd <p>Consultation feedback: Consultation has not produced any specific issues related to status of marriage or civil partnership. Concerns from all groups were similar and reflected those of the general population.</p>
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EQUALITY IMPACT ASSESSMENT TEMPLATE

<p style="text-align: center;">Carers⁴⁷</p>	<p>Potential Positive Impacts The improved response rates across Runnymede and Surrey as a whole will benefit residents overall.</p> <p>Potential Negative Impact The increase in response times for Spelthorne will align with the County average for other areas and will still be below the average for Surrey and well within the targeted response times. It has been argued that the increase in response times will mean greater risk to life for people generally in the Borough and on Carers and the children of people they are caring for in particular given that they may have greater difficulty escaping a fire.</p>	<p>As people with mobility and health issues are at higher risk of fire and / or injury from fire, carers are linked to that risk, mainly by being the enabling factor to prevent fires and to evacuate in case of emergencies.</p> <p>Carers themselves can also be at risk of poor health, as a result of their caring responsibilities. This is documented in the JSNA: 'The impact of caring can be detrimental to carers health. Carers UK's analysis of the 2001 Census findings, 'In Poor Health', found that those caring for 50 hours a week or more are twice as likely to be in poor health as those not caring (21% against 11%). (6) This can be due to a range of factors including stress related illness and physical injury⁴⁸.</p> <p>Many carers are older people, caring for their spouse or partner. There is therefore a link between caring and age. As the general population ages, the number of older people providing unpaid care is also expected to increase. Estimates have been produced of the number of older carers in Surrey, Spelthorne is expected to have the lowest increase in unpaid Carers over the age of 65 between 2013-2020.⁴⁹</p> <p>Spelthorne:</p> <ul style="list-style-type: none"> • 9,844 estimated number of carers in Spelthorne (ranked 2nd % providing unpaid care)⁵⁰ • Reflecting the population with long-term illness or disability, Mole Valley (10.4%), Spelthorne (10.3%) and Tandridge (10.3%) have the highest proportion of carers and Elmbridge (8.9%) the lowest. (Census, 2011) • Shepperton Town has the highest number of people aged 65 and over living in households and also the highest number of people aged 65 and over providing unpaid care (238 people). • 4 other wards in Spelthorne also each have 200 or more people over 65 providing unpaid care, as per the 2011 Census: Riverside and Laleham, Laleham and Shepperton Green, Sunbury East and Ashford Common. As a proportion of the population, Ashford North also has higher levels of older people providing unpaid care.⁵¹
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⁴⁷ Carers are not a protected characteristic under the Public Sector Equality Duty, however we need to consider the potential impact on this group to ensure that there is no associative discrimination (i.e. discrimination against them because they are associated with people with protected characteristics). The definition of carers developed by Carers UK is that 'carers look after family, partners or friends in need of help because they are ill, frail or have a disability. The care they provide is unpaid. This includes adults looking after other adults, parent carers looking after disabled children and young carers under 18 years of age.'

⁴⁸ [JSNA 2013 Carers](#)

⁴⁹ [JSNA Older People 2013](#)

⁵⁰ [Surrey-i: Local Area Profiles/Census 2011 key statistics \(carers\)/All People Providing Unpaid Care](#)

⁵¹ [Surrey-i: Data by Geography/Census 2011 Provision of unpaid care by age & gender](#)

EQUALITY IMPACT ASSESSMENT TEMPLATE

7b. Impact of the proposals on staff with protected characteristics

Protected characteristic	Potential positive impacts	Potential negative impacts	Evidence																																							
Age	The new station in Spelthorne may be a more convenient location for some staff to access. .	The new station in Spelthorne may be a less convenient location for some staff to access.	<p>Due to the nature of the Service and retirement age, the bulk of staff are between 30- 50 years old (over 70%).</p> <p>% of Staff by Age Group</p> <table border="1"> <thead> <tr> <th>Age</th> <th>SFRS %</th> <th>SCC %</th> </tr> </thead> <tbody> <tr><td>15-19</td><td>0.12</td><td>1.03</td></tr> <tr><td>20-24</td><td>2.20</td><td>4.69</td></tr> <tr><td>25-29</td><td>8.29</td><td>9.51</td></tr> <tr><td>30-34</td><td>14.15</td><td>11.68</td></tr> <tr><td>35-39</td><td>16.10</td><td>12.34</td></tr> <tr><td>40-44</td><td>23.66</td><td>15.32</td></tr> <tr><td>45-49</td><td>19.51</td><td>16.96</td></tr> <tr><td>50-54</td><td>9.88</td><td>16.35</td></tr> <tr><td>55-59</td><td>3.66</td><td>13.06</td></tr> <tr><td>60-64</td><td>1.95</td><td>7.70</td></tr> <tr><td>65-69</td><td>0.49</td><td>2.41</td></tr> <tr><td>70-75</td><td>0.00</td><td>0.42</td></tr> </tbody> </table>	Age	SFRS %	SCC %	15-19	0.12	1.03	20-24	2.20	4.69	25-29	8.29	9.51	30-34	14.15	11.68	35-39	16.10	12.34	40-44	23.66	15.32	45-49	19.51	16.96	50-54	9.88	16.35	55-59	3.66	13.06	60-64	1.95	7.70	65-69	0.49	2.41	70-75	0.00	0.42
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Disability	The new station in Spelthorne may be a more convenient location for some staff to access.	<p>The new station in Spelthorne may be a less convenient location for some staff to access.</p> <p>Reasonable adjustments may need to be considered in relevant cases.</p>	<p>% of Staff with a Disability</p> <table border="1"> <thead> <tr> <th>Staff</th> <th>SFRS %</th> </tr> </thead> <tbody> <tr><td>Headcount</td><td>1.34</td></tr> <tr><td>Front Line Staff</td><td>1.49</td></tr> <tr><td>Team Leaders</td><td>0.82</td></tr> <tr><td>Middle Mgr</td><td>6.67</td></tr> <tr><td>Senior Mgr</td><td>0.00</td></tr> </tbody> </table>	Staff	SFRS %	Headcount	1.34	Front Line Staff	1.49	Team Leaders	0.82	Middle Mgr	6.67	Senior Mgr	0.00																											
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EQUALITY IMPACT ASSESSMENT TEMPLATE

Gender reassignment	No specific issues have been identified.	No specific issues have been identified.	No specific concerns have been raised on grounds of a protected characteristic during the Consultation.																		
Pregnancy and maternity	The new station in Spelthorne may be more accessible to some staff, e.g in terms of changing rooms, etc.	The new station in Spelthorne may be less accessible to some staff.	No specific concerns have been raised on grounds of a protected characteristic during the Consultation.																		
Race	The new station in Spelthorne may be a more convenient location for some staff to access.	The new station in Spelthorne may be a less convenient location for some staff to access	<p>% of BME Staff</p> <table border="1" data-bbox="1377 598 1960 861"> <thead> <tr> <th>Staff</th> <th>SFRS %</th> <th>SCC %</th> </tr> </thead> <tbody> <tr> <td>Headcount</td> <td>1.95</td> <td>7.58</td> </tr> <tr> <td>Front Line Staff</td> <td>0.75</td> <td>7.87</td> </tr> <tr> <td>Team Leaders</td> <td>2.46</td> <td>7.61</td> </tr> <tr> <td>Middle Mgr</td> <td>0.00</td> <td>6.67</td> </tr> <tr> <td>Senior Mgr</td> <td>0.00</td> <td>5.29</td> </tr> </tbody> </table>	Staff	SFRS %	SCC %	Headcount	1.95	7.58	Front Line Staff	0.75	7.87	Team Leaders	2.46	7.61	Middle Mgr	0.00	6.67	Senior Mgr	0.00	5.29
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EQUALITY IMPACT ASSESSMENT TEMPLATE

Sex	The new station in Spelthorne may be a more convenient location for some staff to access.	The new station in Spelthorne may be a less convenient location for some staff to access.	<p>Due to the makeup of the workforce, more males will be affected by the proposals than females.</p> <p>Some firefighters may need to be relocated which might mean increased travelling times and cause potential childcare/caring issues.</p> <p>% of Staff by Gender</p> <table border="1" data-bbox="1442 466 1960 609"> <thead> <tr> <th>Gender</th> <th>SFRS %</th> <th>SCC %</th> </tr> </thead> <tbody> <tr> <td>Female</td> <td>9.51</td> <td>73.00</td> </tr> <tr> <td>Male</td> <td>90.49</td> <td>27.00</td> </tr> </tbody> </table> <p>% of Male/Female Staff Full and Part Time</p> <table border="1" data-bbox="1438 716 2076 940"> <thead> <tr> <th>Male/Female Full Time/Part Time</th> <th>SFRS %</th> <th>SCC %</th> </tr> </thead> <tbody> <tr> <td>Female FT</td> <td>83.33</td> <td>38.26</td> </tr> <tr> <td>Female PT</td> <td>16.67</td> <td>61.74</td> </tr> <tr> <td>Male FT</td> <td>84.64</td> <td>72.48</td> </tr> <tr> <td>Male PT</td> <td>15.36</td> <td>27.52</td> </tr> </tbody> </table> <p>% of Female Staff</p> <table border="1" data-bbox="1467 1048 2047 1272"> <thead> <tr> <th>Female Staff</th> <th>SFRS %</th> <th>SCC %</th> </tr> </thead> <tbody> <tr> <td>Front Line Staff</td> <td>8.96</td> <td>80.73</td> </tr> <tr> <td>Team Leaders</td> <td>9.51</td> <td>57.78</td> </tr> <tr> <td>Middle Mgr</td> <td>8.33</td> <td>68.41</td> </tr> <tr> <td>Senior Mgr</td> <td>18.75</td> <td>46.47</td> </tr> </tbody> </table>	Gender	SFRS %	SCC %	Female	9.51	73.00	Male	90.49	27.00	Male/Female Full Time/Part Time	SFRS %	SCC %	Female FT	83.33	38.26	Female PT	16.67	61.74	Male FT	84.64	72.48	Male PT	15.36	27.52	Female Staff	SFRS %	SCC %	Front Line Staff	8.96	80.73	Team Leaders	9.51	57.78	Middle Mgr	8.33	68.41	Senior Mgr	18.75	46.47
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EQUALITY IMPACT ASSESSMENT TEMPLATE

<p>Sexual orientation</p>	<p>The new station in Spelthorne may be a more convenient location for some staff to access.</p>	<p>The new station in Spelthorne may be a less convenient location for some staff to access.</p>	<p>% of Staff by Sexual Orientation</p> <table border="1"> <thead> <tr> <th>Sexual Orientation</th> <th>SFRS %</th> <th>SCC %</th> </tr> </thead> <tbody> <tr> <td>Bisexual</td> <td>0.61</td> <td>0.60</td> </tr> <tr> <td>Gay Man</td> <td>0.61</td> <td>0.43</td> </tr> <tr> <td>Heterosexual</td> <td>55.49</td> <td>47.18</td> </tr> <tr> <td>Lesbian</td> <td>0.12</td> <td>0.32</td> </tr> <tr> <td>Prefer Not to Say</td> <td>19.88</td> <td>24.47</td> </tr> <tr> <td>Not Stated</td> <td>23.29</td> <td>27.00</td> </tr> </tbody> </table>	Sexual Orientation	SFRS %	SCC %	Bisexual	0.61	0.60	Gay Man	0.61	0.43	Heterosexual	55.49	47.18	Lesbian	0.12	0.32	Prefer Not to Say	19.88	24.47	Not Stated	23.29	27.00									
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<p>Marriage and civil partnerships</p>	<p>The new station in Spelthorne may be a more convenient location for some staff to access.</p>	<p>The new station in Spelthorne may be a less convenient location for some staff to access.</p>	<p>No specific concerns were raised by staff during the Consultation.</p>																														
<p>Religion and belief</p>	<p>The new station in Spelthorne may be more accessible to some staff, e.g in terms of prayer space, etc.</p>	<p>The new station in Spelthorne may be less accessible to some staff. However such accessibility will need to be ensured as part of the relocation.</p>	<p>% of Staff by Religion/Belief</p> <table border="1"> <thead> <tr> <th>Religion</th> <th>SFRS %</th> <th>SCC %</th> </tr> </thead> <tbody> <tr> <td>Any other religion</td> <td>3.90</td> <td>5.34</td> </tr> <tr> <td>Buddhist</td> <td>0.73</td> <td>0.57</td> </tr> <tr> <td>Christian - all faiths</td> <td>33.78</td> <td>32.98</td> </tr> <tr> <td>Hindu</td> <td>0.12</td> <td>0.67</td> </tr> <tr> <td>Jewish</td> <td>0.12</td> <td>0.12</td> </tr> <tr> <td>Muslim</td> <td>0.37</td> <td>0.84</td> </tr> <tr> <td>No Faith / Religion</td> <td>17.20</td> <td>17.89</td> </tr> <tr> <td>Sikh</td> <td>0.00</td> <td>0.22</td> </tr> <tr> <td>Not Stated</td> <td>43.78</td> <td>41.36</td> </tr> </tbody> </table>	Religion	SFRS %	SCC %	Any other religion	3.90	5.34	Buddhist	0.73	0.57	Christian - all faiths	33.78	32.98	Hindu	0.12	0.67	Jewish	0.12	0.12	Muslim	0.37	0.84	No Faith / Religion	17.20	17.89	Sikh	0.00	0.22	Not Stated	43.78	41.36
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EQUALITY IMPACT ASSESSMENT TEMPLATE

8. Amendments to the proposals

Change	Reason for change
<p>Impact on Residents and Users Prevention and protection arrangements will remain in place to reduce the risk from fire incidents and other emergencies, and these are targeted to vulnerable groups. Evidence demonstrates that suitable prevention arrangements have the most positive affect on enabling vulnerable people to live safely in the community rather than relying solely on emergency response once an incident has occurred.</p> <p>As a result of the consultation, the original proposals have been amended, with Option 5 proposing the use of an additional appliance with “on-call” staff.</p> <p>Impact on Staff The project will pursue a cooperative and voluntary approach where possible to minimise negative impact. The Service may need to post staff to locations where they do not chose to work, but this is within current contractual terms & conditions and will be avoided if possible. Furthermore, union representatives will be involved throughout the project.</p>	

EQUALITY IMPACT ASSESSMENT TEMPLATE

9. Action plan

Potential impact (positive or negative)	Action needed to maximise positive impact or mitigate negative impact	By when	Owner
<p>The change in fire cover will allow the service to even out response times in Surrey, enabling an equalising effect. This improved balance of service provision will result in some areas having improved first fire engine response times, with other areas a longer first response time for 2 plus fire engine incidents.</p> <p>The average first response for two plus fire engine incidents in Surrey will be 7 minutes 33 seconds and in Spelthorne the average first response time, although lengthened by the changes, will be below this at just over six and half minutes for both Options. In all these cases the response times come within the Surrey standards.</p> <p>In Runnymede the first response as a result reduces from over 8 minutes 30 seconds to over a minute less in Option 4 and by over two minutes in Option 5.</p> <p>Any potential negative impact of an increased response time is likely to have the greatest effect on the vulnerable elderly, those with disabilities, parents with small children and those with caring responsibilities in Spelthorne. As identified in Section 7, the older population, those with mobility difficulties and mental health issues are statistically more likely to be affected by a fire related incident either fatal or injury and similar to those with disabilities or parents with small children they may experience greater difficulty in escaping a fire. There are statistically also more women than men involved injured or rescued from fires, and significantly more men than women injured in road accidents.</p> <p>The consultation identified concerns including the impact of the increased risk on those residents occupying high rise buildings, particularly for those with small children, and residents of care homes with mobility difficulties.</p>	<p>Prevention work takes place from a range of organisations across Surrey, including SFRS, Adult Social Care, Emergency Planning and Public Health to mitigate the risk of those groups identified as high risk, this includes work with vulnerable adults and through the public health agenda, the negative impacts of smoking, alcohol and drugs are addressed.</p>	<p>Ongoing</p>	<p>Strategic Director for Adult Social Care</p>

EQUALITY IMPACT ASSESSMENT TEMPLATE

However, the increase in response times for all types of incidents will still be below the average for Surrey and well within the targeted response times. In addition it will improve the overall figures for Surrey for the percentage of first and second responses, and significantly so in Runnymede.

Other issues raised in the consultation include the risk of those who turn off their hearing aids at night, and the possibility of increased false alarms or call outs from an increasing use of telecare. These are legitimate concerns with regard to fire safety but are not negative impacts directly resulting from this proposal.

Option 4 and 5 will not have a detrimental impact on the preventative work of SFRS. The reconfiguration of SFRS will ensure that resources continue to be directed into targeted preventative work with those identified as vulnerable and at risk in Surrey, particularly if emergency service partners as indicated, also relocate to the new fire station premises. The “on-call” arrangements of Option 5 will protect front line services and through efficiencies allow for an improvement in having the appropriate staffing levels and enhance effective use of resources. Option 5 also facilitates greater resident involvement and influence on the design and provision of services.

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10. Potential negative impacts that cannot be mitigated

Potential negative impact	Protected characteristic(s) that could be affected
Potential negative impacts will be mitigated so far as possible given the actions referred to in Section 9.	

EQUALITY IMPACT ASSESSMENT TEMPLATE

11. Summary of key impacts and actions

Information and engagement underpinning equalities analysis	<p>Consultation process JSNA, GIREs 2009, Community Risk Profile, Census 2011</p>
Key impacts (positive and/or negative) on people with protected characteristics	<p>Option 4 and 5: Modelling predicts;</p> <ul style="list-style-type: none"> • Throughout Surrey more fire engines will reach emergencies within the response standard than they do now and greater equality in average response times between Boroughs to be achieved. • A decrease in the average first response time to all 2 plus fire engine incidents in Runnymede. • In Elmbridge and Spelthorne an increase in the average first response to all 2 plus fire engine incidents, and a reduction in the proportion of first responses within 10 minutes. While the change is slight for Elmbridge, it is greater in Spelthorne, but both will remain within the Surrey Response Standard of 10 minutes. <p>Additional in Option 5: Modelling predicts;</p> <ul style="list-style-type: none"> • A decrease in the average first response time to all 2 plus fire engine incidents in Runnymede by over 2 minutes. • The provision of a second “On-call” fire engine compared to one whole-time fire engine improves in Spelthorne the average first response to all 2 plus fire engine incidents by 8 seconds compared to Option 4 and the second response times by just over 1 minute. <p>Any potential negative impact of an increased response time is likely to have a greater effect on the vulnerable elderly, those with disabilities, parents with small children and those with caring responsibilities in Spelthorne. As identified in Section 7, the older population, those with mobility difficulties and mental health issues are statistically more likely to be involved in a fire related incident either fatal or injury and similar to those with disabilities or parents with small children they may experience greater difficulty in escaping a fire. There are statistically also more women than men involved injured or rescued from fires, and significantly more men than women injured in road accidents.</p> <p>The consultation identified concerns including the impact of the increased risk on those residents occupying high rise buildings, particularly for those with small children, and residents of care homes with mobility difficulties.</p>

EQUALITY IMPACT ASSESSMENT TEMPLATE

Changes you have made to the proposal as a result of the EIA	<p>As a result of the consultation the Service is proposing Option 5 as a change to the original proposal, ie. retaining a second appliance to be crewed by an “on-call” team if possible.</p>
Key mitigating actions planned to address any outstanding negative impacts	<p>An increased risk in Spelthorne is mitigated by the response time remaining within the Surrey standard response and is also still below the average for Surrey. Prevention work takes place from a range of organisations across Surrey, including SFRS, Adult Social Care, Emergency Planning and Public Health to mitigate the risk of those groups identified as high risk, this includes work with vulnerable adults and through the public health agenda, the negative impacts of smoking, alcohol and drugs are addressed.</p>
Potential negative impacts that cannot be mitigated	<p>Potential negative impacts will be mitigated so far as possible given the actions referred to in Section 9.</p>

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