



ADVANCE PUBLICATION OF REPORTS

This publication gives five clear working days' notice of the decisions listed below.

These decisions are due to be signed by individual Cabinet Members
and operational key decision makers.

Once signed all decisions will be published on the Council's
Publication of Decisions List.

- 1. AMENDMENTS TO EXISTING PERMANENT QUIETER
NEIGHBOURHOODS (Pages 1 - 152)**

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London Borough of Enfield**Portfolio Report****Report of: Richard Eason, Healthy Streets Programme Director**

Subject: Amendments to existing permanent Quieter Neighbourhoods**Cabinet Member: Cllr Nesil Caliskan****Director: Doug Wilkinson****Ward: Arnos Grove, Bowes, New Southgate, Palmers Green, Southgate, Winchmore Hill****Key Decision: KD 5512**

Purpose of Report

1. Enfield Council implemented two Quieter Neighbourhoods (QNs) in summer 2020 as a trial. Following a period of community feedback and monitoring, each QN was made permanent early in 2022. During the trial periods, some enhancements and associated activities were identified. The Council has been progressing these and are now seeking to provide an overview of the proposed changes and where appropriate approval to proceed.

Proposal(s)

2. This proposal is to:
 - a) Make the necessary traffic management orders (TMOs) to:
 - (i) Convert four fixed (bollard) modal filters to camera enforced modal filters by introducing a 'no motor vehicles' restriction. This is proposed at the following locations: Maidstone Road, Selborne Road, Oakfield Road and The Mall.
 - (ii) Introduce exemptions for Blue Badge holders and Dial-a-Ride vehicles to the existing camera enforced modal filters on Fox Lane, Meadway and Conway Road, and extend exemptions to the locations listed in 2a(i).
 - b) Carry out monitoring on selected roads outside of the QN areas.
 - c) Continue with small scale and minor improvements across both QNs (as outlined at para 25).
 - d) Recommend that following further review the potential alterations to the layout of the Bowes Primary Area QN (Bowes QN) are not taken forward.

- e) Recommend that following further review the potential of altering the modal filter on the Meadway is not taken forward.
- f) Continue to engage and coordinate with Haringey Council as they deliver the Bounds Green Low Traffic Neighbourhood (LTN) adjacent to the Bowes QN.
- g) Note that Officers have raised the issue of potential funding for investigation of major improvements to Southgate Circus, but that this will require funding and partnership with TfL, for example with TfL buses.

Reason for Proposal(s)

- 3. The TMOs to amend some existing fixed (bollard) modal filters and introduce exemptions to camera enforced modal filters are to provide increased permeability for all exempted vehicles, including Blue Badge holders and the emergency services. This has been informed by feedback from residents and emergency services, and the equalities impact assessment process.
- 4. Activities such as monitoring and small-scale improvements are proposed to complement and enhance the QNs in response to feedback received and provide mitigation where measures have been identified.
- 5. The southern side of the Bowes QN is bordered by the London Borough of Haringey. As they plan to introduce a Low Traffic Neighbourhood to roads to the south of the Bowes QN, Enfield and Haringey Councils continue to work together to monitor the proposed changes and their impacts.
- 6. Two surveys were conducted whereby residents could provide their views on options regarding the modal filter on Meadway in the Fox Lane area, and access to and from part of the Bowes QN area. Responses have been reviewed and the recommendation is that on balance, further changes to the layout are not made.

Relevance to the Council's Corporate Plan

- 7. Good homes in well-connected neighbourhoods. These proposals increase permeability for Blue Badge holders, Dial-a-Ride vehicles, and emergency services, improving the connectivity for many residents.
- 8. Sustain strong and healthy communities. The proposals aim to enhance the existing QNs which, alongside other Healthy Streets projects, seek to create healthier streets. This is part of a long-term plan for improving the user experience of streets, enabling people to be more active and enjoy the subsequent health benefits.
- 9. Build our local economy to create a thriving place. Wider investment in the walking and cycling network forms part of the Council's strategy to support our high streets and town centres by providing safe and convenient access to local shops and services. These proposals enhance the QNs which are part of the Council's walking and cycling network.

Background

10. Quieter Neighbourhoods are one of many Healthy Streets projects delivered by Enfield Council. The Enfield Healthy Streets framework, approved by Cabinet in June 2021, sets out the Council's intention to develop and deliver a range of active travel and supporting projects in line with the Mayor's Transport Strategy 2018.
11. A number of experimental traffic orders were made in summer 2020 to bring into operation trial measures in the Bowes and Fox Lane QN areas. The measures were made permanent in January 2022 and March 2022 respectively.
12. Based on consultation feedback, engagement with stakeholders, monitoring, and the Equalities Impact Assessment from the trial periods, several enhancements and other activities (for example high level monitoring) have been identified. The Council now wish to seek approval to continue with these enhancements and activities.

Main Considerations for the Council

Amending modal filters from a bollard to camera enforced

13. The Council are proposing to convert four existing fixed (bollard) modal filters to camera enforced. This is to increase the permeability of the existing QNs for emergency services and other exempted vehicles. The locations of the filters to be amended are Maidstone Road, Oakfield Road, Selborne Road and The Mall. These locations were selected following a review of incidents reported by emergency services in the QN areas.
14. The Council has invested in technological solutions so that mapping updates are made to commercially available navigation solutions such as Google, TomTom and Bing. The Council remains committed to working with emergency services and through regular dialogue will continue to be responsive to any issues raised.

Exemptions

15. As a result of the consultation and Equalities Impact Assessment during the trial periods of the Bowes and Fox Lane QNs, it was recommended to consider measures to improve access for residents with disabilities and of those with caring responsibilities through potential exemptions.
16. The Council has now taken steps to exempt Dial-a-Ride vehicles from all camera enforced modal filters within the QNs, and to provide exemptions for permit holders. These changes were introduced to the Bowes QN in June 2022, and are now planned to be rolled out in the Fox Lane QN.
17. The current approach to permits allows Blue Badge holders residing within the QN area to apply for a permit to nominate one vehicle to be exempt from camera enforced filters within their 'home QN'. The permit could apply to the Blue Badge holder's own vehicle or they could nominate someone else's vehicle where a user of that vehicle has a role in the care of a Blue Badge holder within a QN. This approach has been selected based on feedback received and is similar to the approach taken in several other London

boroughs. It also considers the aim to maintain the low traffic environment of the QNs and the Council's current operational capabilities.

18. The Council is reviewing its wider approach to exemptions for QNs, including those for disabled persons living within the QNs who do not possess, or qualify for, a Blue Badge, and this will continue to be progressed.

Traffic Management Orders (TMOs)

19. Draft Traffic Management Orders (TMOs) proposing amendments to the Bowes and Fox Lane QNs were published on 23 February 2022 and 23 March 2022 respectively. The statutory consultation period for the Bowes QN TMO amendments ended on 16 March 2022, with no objections or representations received. The statutory consultation period for the Fox Lane QN TMO amendments ended on 13 April 2022 with 18 objections and representations received. Objections and representations, and the Council's response to the grounds made, are addressed in Appendix 1.

20. On the basis of no objections to the Bowes TMO, the Council made the amendments to the Bowes QN in part in June 2022. The general effect of the Order was to make provision for the issue of BOW permits, and Dial-a-Ride vehicles, that would exempt them from the existing no motor vehicle restriction on Warwick Road. Blue Badge holders within the Bowes QN area can apply for a BOW permit to exempt one vehicle from the camera enforced filter. The Council now wish to proceed to make the remainder of the advertised TMO amendment to the Bowes QN. The general effect of this is to convert the fixed modal filter on Maidstone Road near its junction with Warwick Road to a camera enforced modal filter by introducing a 'no motor vehicles' restriction.

21. After considering objections and representations to the Fox Lane QN TMO amendments, the Council now wish to make the TMO. The general effect of this is to convert the fixed modal filters on Oakfield Road, Selborne Road and The Mall to camera enforced modal filters by introducing a 'no motor vehicles' restriction, and to introduce exemptions for FOX permit holders and Dial-a-Ride vehicles to camera enforced filters.

Monitoring

22. Various monitoring activities were carried out during the trial period of the QNs and results were presented in earlier portfolio reports. The reports identified that some high-level monitoring in the QN area shall be carried out, and a further review of traffic speed and volume on some roads outside of the Fox Lane QN is undertaken.

23. Traffic counts on boundary and some surrounding roads will be carried out. Analysis of the data will be completed following receipt of the data from the Contractor and published once completed. Longer term monitoring sites are planned to collect pedestrian and cycle volumes at strategic locations.

24. Diffusion tubes in place during the trial period remain. Data is reported annually within the Enfield Council Air Quality Annual Status Report.

Small scale adjustments and improvements

25. Some small scale and minor improvements across both QNs were identified during the trial periods in response to feedback received and monitoring data. Each of the activities are at varying stages of planning and implementation. These include:

- New advanced warning signage to enhance the existing compliant signage for the modal filters.
- Replacing active speed warning signs on Brownlow Road to reflect the new permanent speed limit of 20mph.
- Short term improvements at Southgate Circus, as identified at the end of the trial period of the Fox Lane QN.
- Upgrading the existing on-carriageway pedestrian path across Fox Lane bridge (implemented during the trial period of the Fox Lane QN).
- Relaxing parking restrictions on Fox Lane between the railway bridge and Pellipar Close.
- New parking restrictions on Cannon Hill & Aldermans Hill to remove identified pinch points to aid traffic flow for buses.

Meadway modal filter in the Fox Lane QN

26. Residents were invited to share their views on options regarding potential changes to the Meadway restrictions on motor vehicles from 18 March to 22 May 2022. Approximately 14,000 letters were delivered in the area which detailed the purpose of the survey and invited residents to share their views. Analysis of the responses and a summary of the engagement is presented in Appendix 2.

27. The response themes are detailed below and are listed with a range of other considerations.

Category	Comment
Number of responses	<p>816 responses to the survey were received (746 via the online survey, and 38 via paper copies of the survey), plus 32 emails.</p> <p>During the time when the survey was open, the Council received a petition signed by 163 residents of Wynchgate and Park View.</p>
Response themes	<ul style="list-style-type: none"> • Of the survey respondents: <ul style="list-style-type: none"> ○ 566 respondents state they want the filter removed, 177 to remain, and 41 timed ○ There was variation of responses by location, for example 46 out of 55 on Meadway stated they wanted the filter to be retained and 6 to be timed, and 30 out of 30 on Wynchgate stated they wanted the filter to be removed. • The signatories to the petition supported opening the Meadway and stated “the re-opening of this road will mitigate some of the damaging impact the LTN has had on

	<p>Wynchgate and Park View residents. We have experienced a fall in road safety with several accidents, a substantial increase in noise & air pollution, and a reduction in mobility due to congestion due to our adjoining roads and at the high street roundabout.”</p> <ul style="list-style-type: none"> • Emails expressed some concerns about the impact of traffic on Meadway and surrounding roads, Meadway being part of a conservation area, opening Meadway being against the aims of the QN • Some communications received during the survey period stated that they wished to see all restrictions removed across the entire QN. It is possible that this contributed to the number of respondents who stated they want the filter removed entirely. This assumption is based on the detail included in email responses received.
Impact of permit introduction	Exemptions for Blue Badge holders residing within the QN area will enable access through the filter. The proposal to introduce these permits for the Fox Lane QN is contained within this report.
Traffic considerations	<p>Significant negative impact on Meadway and immediate roads (Bourne Avenue, Greenway), but also other roads that would enable through traffic such as Amberley Road through to Caversham Avenue.</p> <p>Potential for short term reduction of traffic on some surrounding roads such as Southgate Circus, which was already congested prior to the QN.</p>
Other factors	Results in a change of QN approach whereby a non-classified road becomes a boundary road which is inconsistent with wider approaches to neighbourhood interventions.

28. The Council have carefully considered the results of the survey and petition. Considering the above, and the potential impacts of a change, the Council will not be proceeding further with the option of removing the restriction on Meadway, nor operating it on a timed basis. Removing all filters was not an option presented in the survey, nor being considered by Council as the QN is in place permanently. The variation of responses from the survey will be reviewed when confirming locations for future monitoring. For example, Wynchgate will be included, due to the volume and nature of responses on Wynchgate.

Access to and from parts of the Bowes QN

28. The placement of modal filters within the Bowes QN area means that a number of streets, located between Brownlow Road, the A406 North

Circular Road and Bounds Green Road are accessed from the A406 North Circular Road.

29. Some residents suggested during the trial period of the Bowes QN that they would prefer access to the area from the south. This led to consideration of altering the QN layout in the Decision Report (PL 21.056 P), and the decision was not to proceed further. Since publishing the portfolio report, the Council was asked to revisit this topic.

30. A survey was carried out for residents to express their opinion from 18 March to 22 May 2022. Approximately 16,000 letters were distributed in the area with details about the survey. Analysis of the responses and a summary of the engagement is included in Appendix 3.

31. The survey response themes are detailed below and are listed with a range of other considerations.

Category	Comment
Number of responses	340 responses to the survey were received (289 via the online survey, 51 via paper copies of the survey), plus 10 emails.
Response themes	<ul style="list-style-type: none"> • 209 respondents stated they want the access to/from the south, 106 to the north, and 25 no preference. • Emails expressed some concerns about congestion, journey times, dangerous u-turns and community impact if access changed • Suggestions to amend York Road filter, public space improvements, and exemptions for residents.
Impact of permit introduction	Exemptions for Blue Badge holders, which have been introduced since the survey closed, enables permit holders to access their home by vehicle from the north or south. Converting the filter on Maidstone Road to a camera-enforced filter will further enhance permeability.
Traffic considerations	An alternative design has benefits for those uncomfortable driving on the A406. The current arrangement however utilises a signalised junction, whereas the Warwick Road / Bounds Green Road junction is unsignalised. The number of access points would be reduced in an alternative design. The current layout enables more space for any motor vehicles who inadvertently arrive at the closure point and need to turnaround.
Other factors	The current layout has been in place for close to 2 years now, over which time residents, businesses and visitors have had time to adjust to the layout introduced as part of the Bowes QN. Further changes now, based on the level of participation in

	<p>the survey, may lead to confusion and uncertainty.</p> <p>Subject to future funding, there are opportunities to enhance public realm around the Maidstone Road filter, which could extend into and around the Warwick Road filter. The opportunity for public realm, whilst still possible if an alternative design were to be implemented, would be reduced.</p>
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32. Despite there being a preference amongst survey respondents for access to the south, combined with the reasons listed above, on balance the Council do not recommend that any changes to the layout are made.

Bowes QN & the London Borough of Haringey

33. The Bowes QN is bordered to the south by the London Borough of Haringey. As Haringey introduces a Low Traffic Neighbourhood in the area immediately to the south of the Bowes QN, Enfield and Haringey Councils continue to work together to review the proposed changes and their impacts.

Safeguarding Implications

34. None identified.

Public Health Implications

35. These proposals seek to enhance the existing permanent QNs, which support mode shift towards active travel.

36. Methods of active transport are beneficial to health as they increase physical exercise, improve mental health and reduce air pollution and carbon emissions. Promoting active transport is an essential component of a strategic approach to increasing physical activity and may be more cost-effective than other initiatives that promote exercise, sport and active leisure pursuit. Creating an environment that enables more walking and cycling would also positively impact upon health inequalities as income or wealth would become a less significant factor in a person's ability to travel within the borough e.g. access to employment, healthcare and social networks. Achieving a modal shift towards active travel can also help reduce the health damaging effects of motorised transport including road traffic injuries, air pollution, community segregation, and noise.

Equalities Impact of the Proposal

37. An Equalities Impact Assessment (EqIA) was completed and reviewed for each of the Bowes and Fox Lane QNs and was considered before the schemes were made permanent. These were informed by feedback received throughout the trial periods. The EqIAs from the trial period are attached at Appendix 4 & 5.

38. The proposed changes to convert some modal filters to a camera enforced filter and introduce permits are expected to have a positive impact on some disabled people. Older people who have a disability may also benefit. Blue

Badge holders residing with the QN area will be eligible to apply for a permit to nominate a vehicle to be exempt from the camera enforced filters in their 'home QN'. The Blue Badge scheme provides an administratively efficient mechanism for identifying those with disabilities residing in the QN area for whom an exemption is required, and for implementing the exemption. Persons residing within the QN area who are disabled but do not hold a Blue Badge will not experience a change, similarly those Blue Badge holders who do not live within the QN area. However, the wider approach to exemptions is being reviewed, and further categories may be added. Implementing the proposals now does not preclude the Council's ability to make changes in future. Other protected characteristics are not considered to be disproportionately impacted by the proposals. The EqlA is attached at Appendix 6.

Environmental and Climate Change Considerations

39. These proposals complement the measures already in place which is part of a wider programme to encourage active and sustainable modes of travel. Taking a proactive approach to support walking and cycling will help to achieve required mode shift in line with the Mayor's Transport Strategy and preferred pathway to net zero in the mid-term.

Risks that may arise if the proposed decision and related work is not taken

40. The following risks have been identified:

Risk	Risk Description
Potential for further incidents of navigational issues with the LAS	This decision will provide increased permeability for all emergency services.
Negative impact to some people with disabilities	Converting fixed modal filters to camera enforced provides greater permeability for permit holders. Permits for each QN area are currently available for Blue Badge holders within the according QN area.
Residents and visitors to the area will not benefit from the proposed minor improvements	Improvements have been identified through feedback from residents and are being delivered for their benefit.
Reputational damage	Enfield Council has committed to progressing these measures. Not implementing them may result in reputational damage.

Risks that may arise if the proposed decision is taken and actions that will be taken to manage these risks

41. The following risks have been identified:

Risk	Risk Description and mitigating action
Potential for navigational issues by emergency services at locations where a fixed (bollard) filter will remain.	The Council has invested in technological solutions so that mapping updates are made to commercially available navigation solutions such as Google, TomTom and Bing. This enables the emergency services

	to update their own navigational systems as they deem necessary. The Council remains committed to working with emergency services through regular dialogue and continues to work with the LAS to gain greater insights into the causes of any delays. The Council will continue to respond to any further measures that are identified, beyond the work already done, to ensure that LAS navigational systems have access to the latest data.
Negative impact to some people with disabilities	The proposed decision will not materially affect the impact on those with disabilities who do not possess, or qualify for, a Blue Badge. This group will not benefit, however, from the proposed exemption for Blue Badge holders as it is not administratively practicable to include them at this stage. The Council is reviewing its wider approach to exemptions for QNs which will continue to be progressed. Taking this decision does not preclude the Council's ability to expand its current approach to exemptions.
Reputational damage from not progressing with the highest chosen responses to the surveys	The responses to the survey for the Meadway and access to and from the Bowes QN area have been considered against several other factors in making the recommendation as set out in this report. A summary of the engagement is appended to this report.

Financial Implications

42. £444k is the total estimated spend of this proposal, £156k is for Bowes Quieter Neighbourhood and £288k for Fox Lane Quieter Neighbourhood.
43. The scheme will be funded through TFL grant (£159k) and the remaining £285k is capital expenditure, to be funded by revenue through additional Minimum Revenue Provision, spread over 5 years (£60k per annum).

Legal Implications

44. Section 122 of the Road Traffic Regulation Act (RTRA) 1984 places a duty on the Council to exercise its functions, so far as practicable having regard to certain specified matters, to secure, as far as reasonably practicable, the 'expeditious, convenient and safe movement of vehicular and other traffic (including pedestrians) and the provision of suitable and adequate parking facilities on and off the highway'. The specified matters are the desirability of securing and maintaining reasonable access to premises, and the effect on the amenities of any locality affected, the national air quality strategy, the importance of facilitating the passage of public service vehicles and of securing the safety and convenience of persons using or

desiring to use such vehicles, and other relevant matters. In considering whether to take forward the proposals listed in this report, regard needs to be had to this duty.

45. Section 6 of the RTRA enables the Council to make permanent traffic management orders.
46. A decision to take forward the proposals listed in this report must also be consistent with the Council's network management duty under section 16 of the Traffic Management Act 2004 ("the 2004 Act"). That is, the duty "to manage their road network with a view to achieving, so far as may be reasonably practicable having regard to their other obligations, policies and objectives, the following objectives (a) securing the expeditious movement of traffic on the authority's road network; and (b) facilitating the expeditious movement of traffic on road networks for which another authority is the traffic authority".
47. Procedures for making traffic management orders are set out in the Local Authorities' Traffic Orders (Procedure) (England and Wales) Regulations 1996 ("the 1996 Regulations").
48. Section 149 of the Equality Act 2010 requires the Council to pay due regard to public sector equality considerations in the exercise of its functions. Such due regard has been had in arriving at the proposals set out in this report.
49. The proposals set out within the report are in accordance with the Council's powers and duties as the Highway Authority, and it would be rational for the Council to adopt these proposals weighing up the benefits and disadvantages.

Workforce Implications

50. None identified.

Property Implications

51. Given that the works and the outcomes of the project relate solely to the public highway and traffic control measures, there are no property implications arising from this report.

Other Implications

Procurement Implications

52. Existing Corporate Contracts are intended to be used to undertake the delivery of the works elements of these projects.
53. Any additional procurement to support the delivery of the proposed schemes, where existing corporate contracts are not a viable option, must be undertaken in accordance with the Councils Contract Procedure Rules

(CPR's) and the Public Contracts Regulations (2015), in consultation with Procurement Services.

Options Considered

54. The following alternative options have been considered:

Option	Comment
Converting additional or all of the remaining fixed filters to camera enforced.	The Council has selected the locations of the proposed amendments based on data supplied by the LAS. We have invested in technological mapping solutions so that commercially available navigation solutions are updated effectively and work closely with the LAS to discuss navigational requirements. Making this decision does not rule out the Council's ability to make further changes, should they be required.
Introducing additional categories for exemptions at the same time as converting some filters to camera enforced.	Council is reviewing its wider approach to exemptions. This work has not concluded and delaying these improvements would be unreasonably justified. Council previously considered the option of providing access for residents through the camera enforced modal filters (for example via ANPR) prior to making the Bowes Primary Area and Fox Lane Area QNs permanent. The Council's position has not changed for reasons previously outlined.
Removing the filter on Meadway or operating it on a timed basis.	The decision to retain the Meadway filter has been detailed in this report.
Amending the layout of part of the Bowes QN to change the access point(s).	The decision to retain the current layout has been detailed in this report.

Conclusions

55. The Council initiated its Quieter Neighbourhood programme in 2020 with the implementation of trials, followed by these becoming permanent in early 2022 following a period of review and consultation. Based on feedback received and monitoring activities, some improvements have been identified. The Council are proposing to introduce permits for Blue Badge holders living within the QNs to improve access for residents with disabilities. Dial-a-Ride vehicles will also be exempt. Permits have already been introduced to the Bowes QN area. The Council are continuing to review its wider approach to QN exemptions.

56. Four fixed (bollard) filters are proposed to be converted to camera enforced filters to increase permeability for emergency services and other exempted vehicles.

57. In addition, other activities such as minor improvements and some high-level monitoring are proposed. Engagement survey results regarding potential changes to the Meadway filter and access to and from the Bowes QN are presented in this report alongside recommendations for these to not be progressed further.

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Date of report October 2022

Appendices

Appendix 1: Statutory consultation (amendment to the Fox Lane Quieter Neighbourhood area including the provision of permits)

Appendix 2: Engagement results (Meadway)

Appendix 3: Engagement results (Bowes QN access)

Appendix 4: Bowes QN EqIA (trial period)

Appendix 5: Fox Lane QN EqIA (trial period)

Appendix 6: Amendments to existing permanent QNs EqIA

Background Papers

None.

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Appendix 1: Statutory consultation (amendment to the Fox Lane Quieter Neighbourhood area including the provision of permits)

Notice of the intent to make a traffic order was published in the London Gazette and Enfield Independent newspapers on 23 March 2022. The statutory consultation period ended 21 days later on 13 April 2022. Statutory consultees were sent notice of the traffic order.

16 objections opposing the order and 2 representations supporting the order were raised during the consultation period. A further objection was received quoting the TMO reference (TG52/1498) objecting to the opening of Meadway, however is not relevant to the details of the TMO.

In addition to the 16 objections and 2 representations, the Metropolitan Police Service (MPS) requested a minor amendment to the wording of the clause exempting emergency service vehicles, which will be incorporated into the made order.

The grounds for objections are listed below, together with the officer response.

1. General

Ref	Objection based on the grounds that:	LBE response
1.1	The amendments shouldn't be necessary because the whole QN should be removed, or that the improvements aren't sufficient or don't address address concerns previously raised.	The portfolio report PL 22.072 P published in January 2022 sets out the reasons and recommendation to retain the Fox Lane QN. Making these changes does not preclude the Council's abilities to make changes in future.

2. Permits for Blue Badge holders

Ref	Objection based on the grounds that:	LBE response
2.1	The new proposal fails to acknowledge or understand how the Blue Badge scheme works and how it is used by the holder. This is because a Blue Badge is registered to a holder rather than a vehicle and can be used in any vehicle the holder is travelling in.	Details of a specific vehicle need to be registered so that it can be recognised by the camera enforcement system and the exemption applied. Eligible Blue Badge holders therefore must apply for a permit and nominate a vehicle to be exempt from the camera enforced filters. The exemption permit issued is virtual and does not require the Blue Badge to be displayed. Permit holders have some flexibility to change the registered vehicle.
2.2	The provision for permits is not wide enough.	The council is developing its approach to exemptions. Further categories may be added in future.

	<p>Specifically, some references were made to:</p> <ul style="list-style-type: none"> • Disabled people who are cared for by family, friends and professional carers • Disabled people who do not hold a blue badge • Disabled people and/or Blue Badge holders who do not live inside the QN • Family members caring for those with a protected characteristic • SEN transport carrying children to and from Durants Special school <p>One objection went on to say that because of this, residents are not being treated equally and fairly.</p>	<p>There is clear benefit in exempting Blue Badge holders living in the QN and this is being taken forward currently.</p> <p>Provision is being made to exempt Dial-a-Ride vehicles from the camera enforced filters. These services were identified during the Equalities Impact Assessment as a preferred means of transport by some disabled people or those who may find it more difficult to walk or cycle.</p>
2.3	<p>The proposals do not assist Blue Badge holders, elderly people, disabled people and/or critically ill people living on Derwent Road, Lakeside Road, Grovelands Road, Devonshire Road and Old Park Road as they are still not able to exit their roads at their junction with Fox Lane.</p>	<p>Blue Badge holders within the QN will be able to utilise all existing and proposed camera enforced filters, providing additional options for entering and leaving the area.</p>
2.4	<p>The Council has been forced in to making the changes because of discrimination, and no apology has been made.</p>	<p>The Council is introducing the exemptions for Blue Badge holders and Dial-a-Ride vehicles in response to its Equalities Impact Assessment and wider feedback.</p>
2.5	<p>The scheme is limited to one vehicle only per Blue Badge holder, and it should be more (one objection suggested it should be two, another suggested that permits should be provided to all friends, family and carers).</p>	<p>Permit holders will have some flexibility to change the nominated vehicle.</p> <p>The Council is reviewing its wider approach to exemptions for QNs which will continue to be progressed.</p>

3. 'No motor vehicle' restrictions

Ref	Objection based on the grounds that:	LBE response
3.1	<p>Adding more cameras would generate more money / is money gathering</p>	<p>The changes are being proposed to improve permeability for Blue Badge holders and emergency services. Camera enforcement is necessary to enable this.</p>

3.2	<p>The scheme has wasted money as the barriers initially installed will be removed</p>	<p>The benefits of the changes with respect to improved access for Blue Badge holders and the emergency services outweigh the expected cost.</p> <p>Planters installed will either remain in place or can be removed and allocated to another project. Flexible materials were selected to be installed as part of the experimental approach taken to initially implement and monitor the QN.</p>
3.3	<p>Five physical closures are retained (Derwent Road, Lakeside Road, Grovelands Road, Devonshire Road and Old Park Road).</p> <p>Specific comments related to:</p> <ul style="list-style-type: none"> • The proposal fails to address disabled people who live on the roads that will retain physical closures (Old Park Road, Grovelands Road, Derwent Road, Lakeside Road). Some objections also mentioned Devonshire Road. • Emergency service access remains impeded by these locations, which disproportionately impact protected groups. • LAS requested “that hard closures be avoided where possible in favour of camera enforced or soft closures to ensure unimpeded emergency access and egress is maintained”. • No reason is given for retaining some of the hard closures. It’s likely that converting all filters to camera enforced would only result in a potentially small increase in motor traffic. • Reasons for selecting the three locations (Fox Lane, The Mall, and Oakfield Road) are not clear; they provide similar routes to each other 	<p>Blue Badge holders within the QN will be able to utilise all existing and proposed camera enforced filters, providing additional options for entering and leaving the area.</p> <p>The Council has invested in technological solutions so that mapping updates are made to commercially available navigation solutions such as Google, TomTom and Bing. This enables the emergency services to update their own navigational systems as they deem necessary. The Council remains committed to working with emergency services through regular dialogue and continues to work with the LAS to gain greater insights into the causes of any delays. The Council will continue to respond to any further measures that are identified, beyond the work already done, to ensure that LAS navigational systems have access to the latest data.</p>

	and / or all run off Cannon Hill, compared to the five locations off Aldermans Hill which are proposed to remain as hard closures.	
3.4	Not enough information was provided for residents to assess if replacing more bollards with cameras will permit manageable access to the family and friends of those with mobility problems or other needs.	Details of the proposed locations and those eligible for permits, including a map, was provided with the traffic order documentation.

4. Themes not relevant to the details of the proposed amendments

Ref	Comment	LBE response
4.1	<p>Many grounds for objections were related to not supporting the Fox Lane QN as a scheme.</p> <p>Themes raised included:</p> <ul style="list-style-type: none"> • Large vehicles/HGVs being forced to reverse the full length of the filtered roads and out onto boundary roads and associated safety concerns • Crime, and fear of crime, has increased since the implementation of the Fox Lane QN scheme, in particular by women and girls • Enfield reported that there had been no improvement in air quality / being ineffective on climate change • Negative impact on bus journey times • Congestion on the boundary roads leading to Southgate Circus have seen a disproportionate increase in displaced vehicular traffic • Signage is unclear and leads to unfair fines • Impact on emergency services, support vehicles, refuse collection and delivery services • Displacement of traffic to other roads 	<p>These are not relevant to the making of the traffic order this decision refers to. The Council has previously responded to grounds for objections to the making of the Fox Lane QN main traffic orders permanent in its January 2022 report. A link to this report is here: PL 22.072 P - Annex 4 Responses to Objections (002) - 26 JAN 22.</p>

	<ul style="list-style-type: none"> • Longer, slower and more polluting car journeys • Impact of traffic on boundary roads, and air quality concerns • The QN benefits the wealthier residents inside the QN area at the expense of those outside the QN area • Impact on traffic during roadworks, and limited alternative routes being available • Empty, unsafe cycle lanes introduced at considerable cost • Community division • Favouring small groups of people • Distrust in local politics • Alienation from a cause that most would support given decent engagement and debate. • Rejection of certain views • Not responding thoughtfully to concerns raised • The project doesn't have majority support • Money-gathering scheme • Impact on carers, disabled people, businesses, tradespeople, delivery services • Impact on mental health 	
4.2	Some objections referred to the concept of potential changes to the Meadway filter.	Changes to the Meadway filter, other than introducing permits and exemptions for Dial-a-Ride vehicles are not proposed as part of this traffic order.

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Fox Lane and Surrounding Streets Quieter Neighbourhood Meadway Filter Survey

Summary Report August 2022
Prepared by the London Borough of Enfield



Introduction

The Fox Lane and Surrounding Streets Quieter Neighbourhood (Fox Lane QN) was made permanent by Enfield Council in March 2022 following a trial that commenced in October 2020. A map of the area can be found on the slide 4.

As part of the trial, a statutory consultation on the Experimental Traffic Order was delivered from 12 October 2020 to 11 January 2021 where objections and representations were made to the traffic order. In response to the feedback received during this process, the Council committed to exploring a number of improvements to the project as detailed in the decision report. One of the options to explore was whether the scheme would work better for residents if the current restriction on Meadway was removed entirely, or operated on a timed basis.

A survey was delivered online with paper copies available upon request which asked residents to respond to the following question: *'What is your preference?' (Select one)*

- *I would prefer for the Meadway restrictions on motor vehicles to remain in place*
- *I would prefer to see the Meadway restrictions on motor vehicles removed entirely*
- *I would prefer to see the Meadway restrictions on motor vehicles to operate on a timed basis*

Introduction

The survey was hosted on the Fox Lane QN project page on the Let's Talk Enfield website (<https://letstalk.enfield.gov.uk/FoxLaneQN>), and residents were also invited to comment by email or letter. The engagement period ran from 18 March to 22 May 2022.

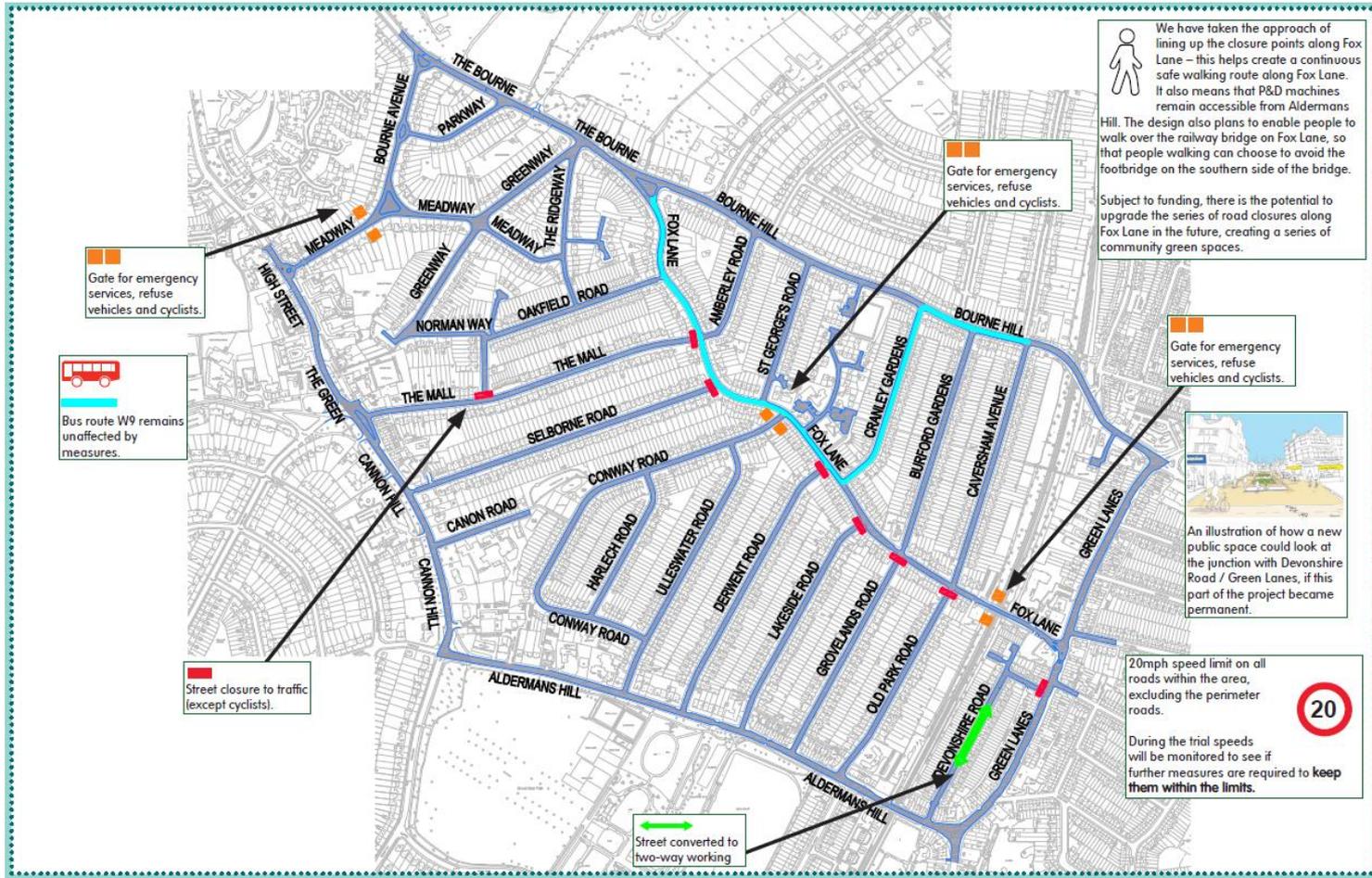
A total of 746 survey responses were received online, 38 survey responses received by post, and 32 emails received. Of the survey responses received 72% stated that they would prefer to see the Meadway restrictions on motor vehicles removed entirely, 23% stated they would prefer they remain in place, and 5% stated that they would prefer that the restrictions operate on a timed basis. A free text box for comments was not provided within the survey online, however there were a number of themes raised by those who emailed or who wrote comments on returned paper copies of the survey. Most of the comments were outside of the scope of this engagement process however are noted in this report for completeness. During the time that the survey was open, the Council also received a petition signed by 163 residents of Wynchgate and Park View requesting the Meadway filter is removed permanently.

Enfield Council will be considering all responses received as part of this engagement process on the restriction on Meadway within the Fox Lane QN. Updates will be posted on the project page at <https://letstalk.enfield.gov.uk/FoxLaneQN>.

This report details the approach to and findings of the engagement on the Meadway restrictions.

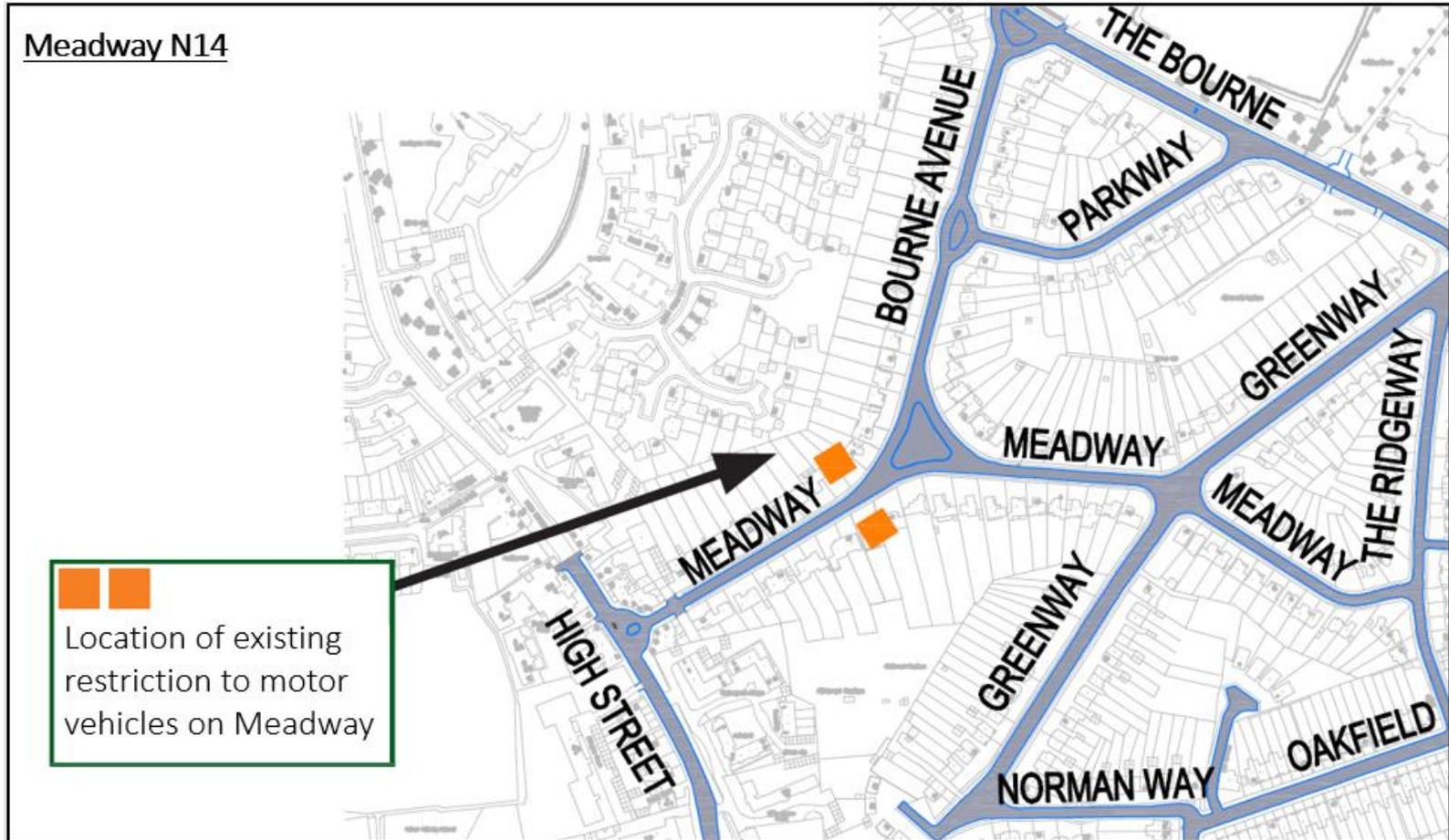
Introduction

A map of the Fox Lane QN is shown below.



Introduction

The existing restriction for motor vehicles on Meadway is shown below.



Engagement approach

Residents were invited to share their views on the Meadway restrictions on motor vehicles from 18 March to 22 May 2022. Approximately 14,000 letters were delivered to residents who live in and near to the Fox Lane QN on 18 March 2022 which detailed the purpose of the survey and invited residents to share their views in one of the following ways:

- Completing the survey online at <https://letstalk.enfield.gov.uk/FoxLaneQN>
- Requesting a paper copy of the survey by emailing healthystreets@enfield.gov.uk, or calling the Council
- Writing to: ATTN Healthy Streets team, Enfield Council, Silver Street, London EN1 3XA.

Information on how to obtain information and materials was also included in the letter written in Greek, Polish, Turkish and Gujarati.

Participants

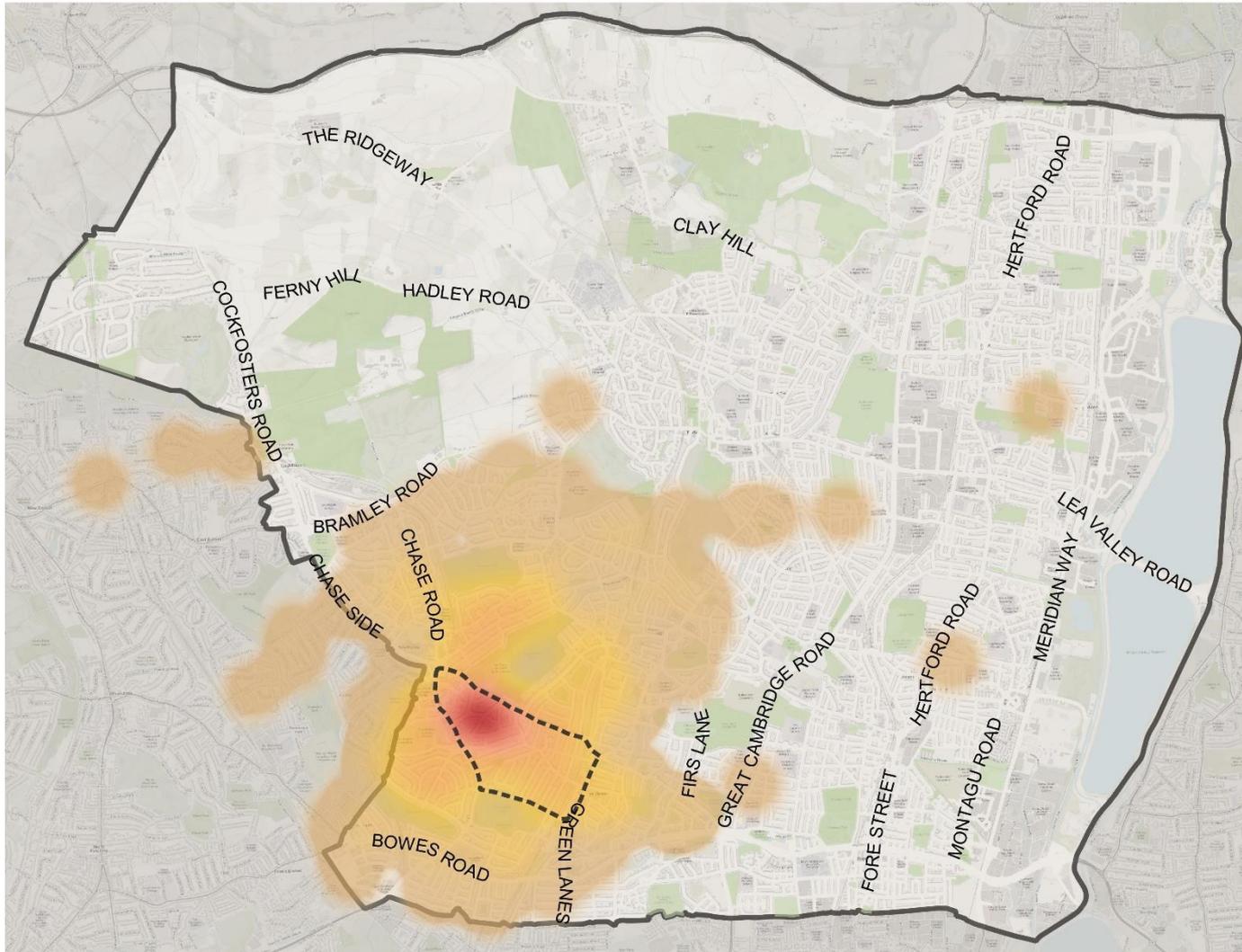
During the engagement period, 746 responses were collected through the survey hosted on the Let's Talk Enfield project page, 38 paper copies of the survey were received and 32 email responses were received. No posted letters were received. The Council also received a petition during the engagement period signed by 163 residents of Wynchgate and Park View.

Demographic and equalities data was collected through the online survey and paper survey and is reported on in the following slides. Questions were not mandatory, and as a result not every participant completed these questions with many choosing to complete a selection of the questions only. No demographic data was collected for those who emailed the Council and is not available for the petition signatories.

Of all survey respondents, 98% responded to the survey on behalf of themselves. N14 was the most common postcode of participants (455), followed by N13 (157), and N21 (132). A map of responses by location (postcode) of respondents is shown on the following slide.

Participants

Below shows a heat map of survey responses by location (postcode).



Survey Responses



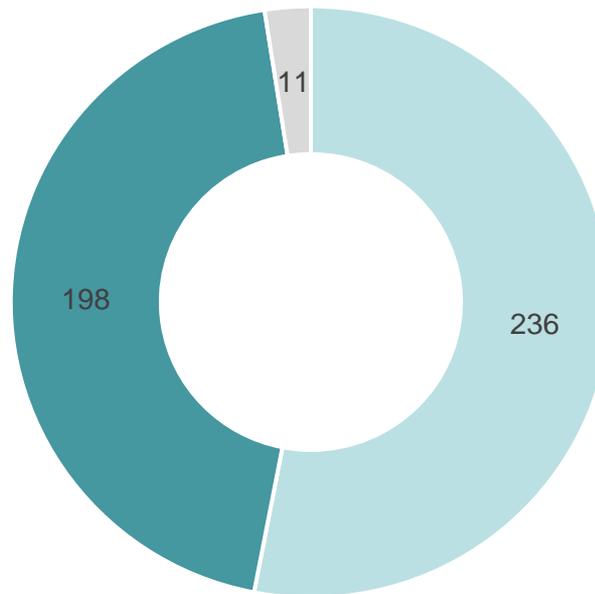
 Fox Lane QN Boundary

 Borough Boundary

Participants

Of respondents who provided their gender (445), 236 were female, 198 were male, and 11 stated 'Prefer not to say' as shown in the graph below.

Gender of survey respondents (n=445)

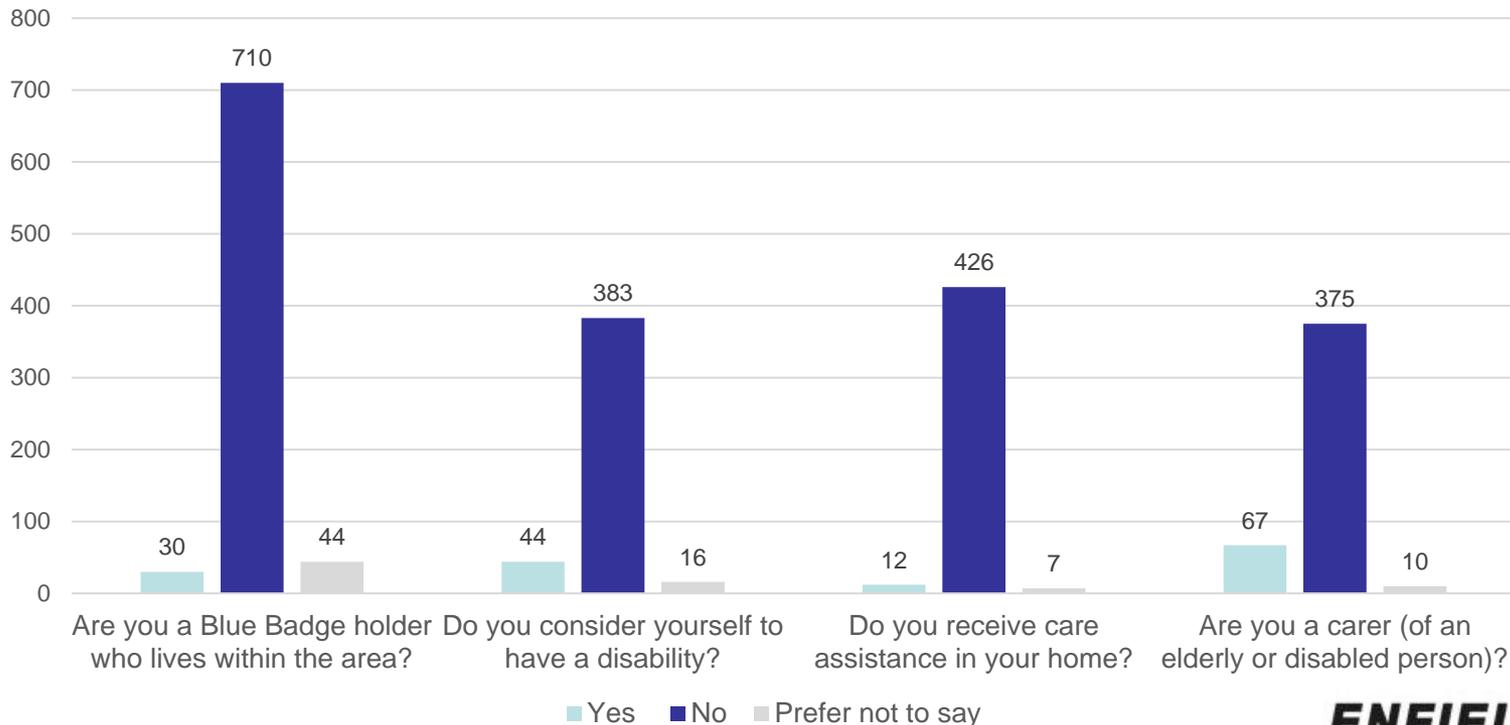


■ Female ■ Male ■ Prefer not to say

Participants

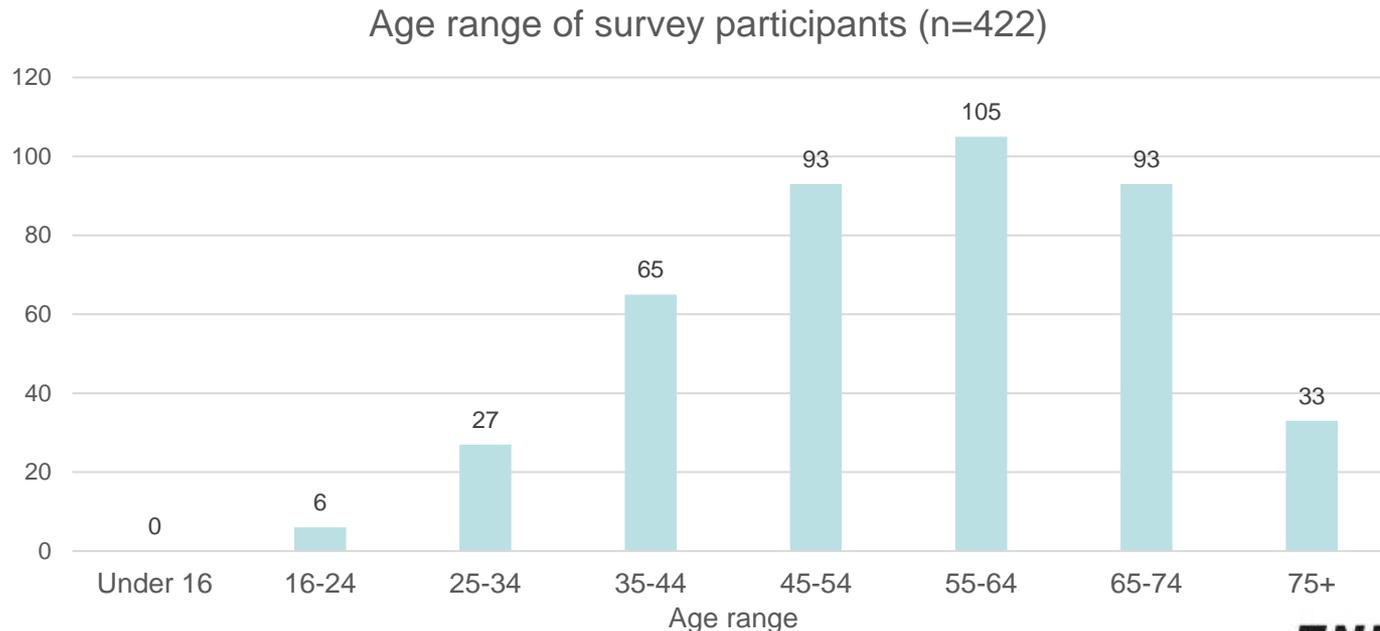
Thirty respondents stated that they are a Blue Badge holder, and 44 respondents stated that they consider themselves to have a disability. Twelve respondents stated that they receive care in their home, and 67 stated that they provide care for someone such as an elderly or disabled person, as shown in the graph below.

Survey respondents who have a disability (n=443), are a Blue Badge holder (n=784), receive care (n=445) or provide care (n=452)



Participants

In order to determine age brackets of participants, year of birth was asked in the survey and where no response was provided, year of birth from the sign-up form was used. The age bracket was determined by the age respondents will turn in 2022. Of those who provided their year of birth (422), respondents aged 55-64 years were the most represented with 105 respondents, followed by respondents aged 45-54 and 65-74 with 93 each. Age brackets of survey respondents who provided their year of birth are shown in the graph below. One person stated a number that was not a year of birth and this response has not been included in the analysis.



Engagement findings - survey

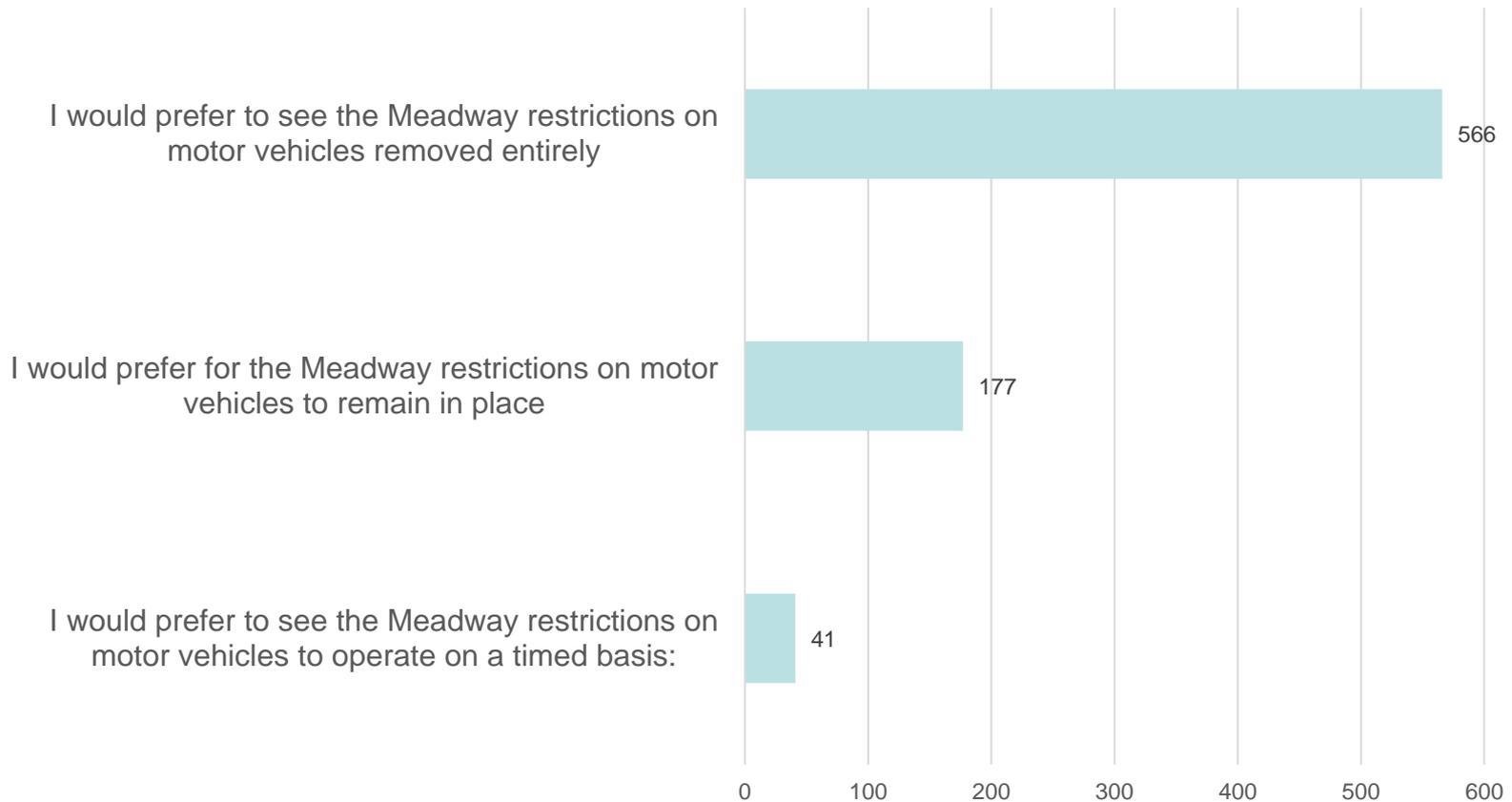
Of the 784 survey responses received, 566 (73%) stated that they would prefer to see the Meadway restrictions on motor vehicles removed entirely, 177 (23%) stated they would prefer they remain in place, and 41 (5%) stated that they would prefer that the restrictions operate on a timed basis.

Of the 41 respondents who stated they would prefer to see the restrictions operate on a timed basis, almost half (20) stated they would prefer they operate during peak hours only (vehicle access would be restricted during the morning and evening weekday peak times).

The results are shown in the graphs on the following slides.

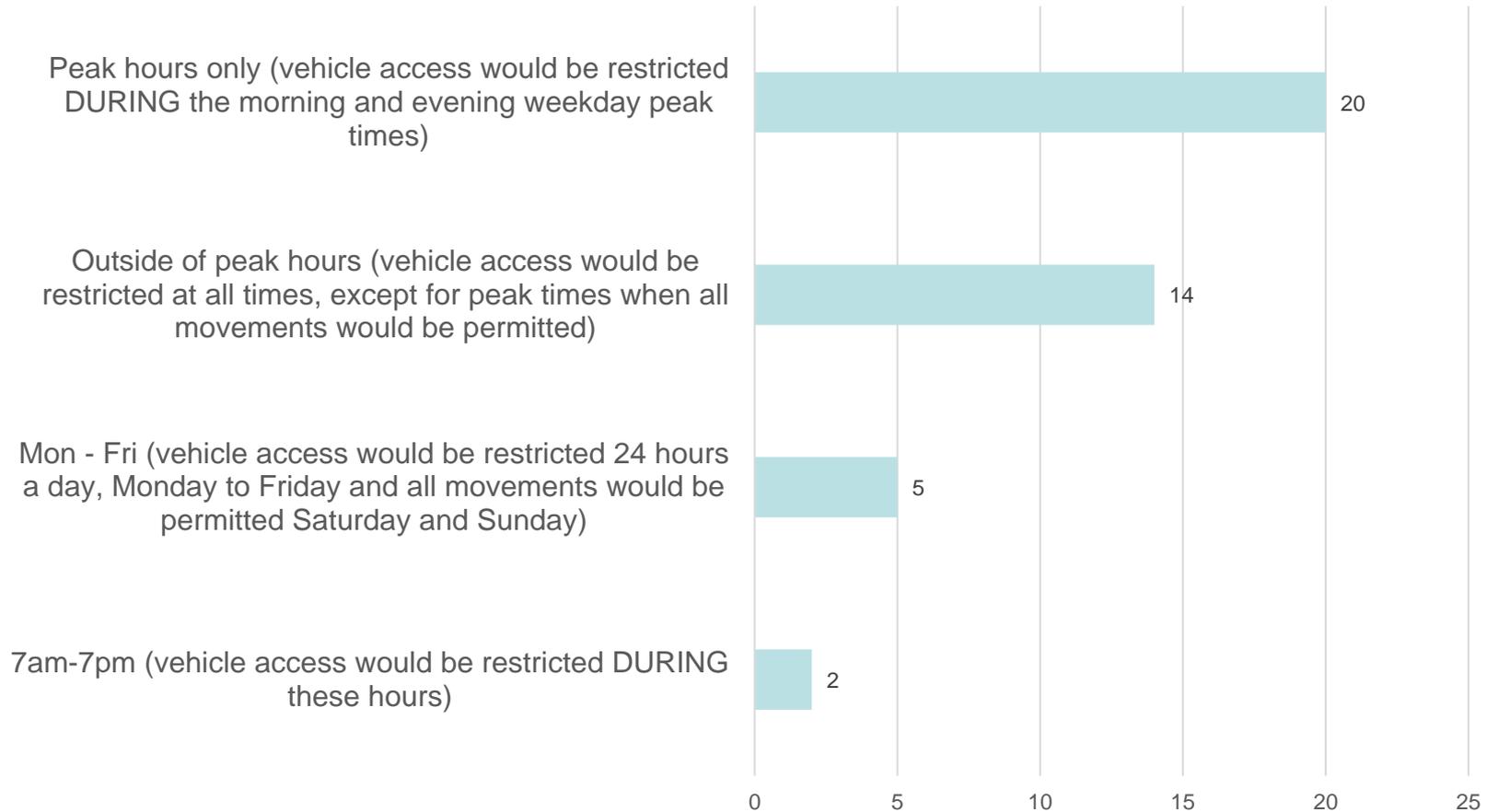
Engagement findings - survey

Survey respondents' preferences for the Meadway restrictions on motor vehicles (n=784)



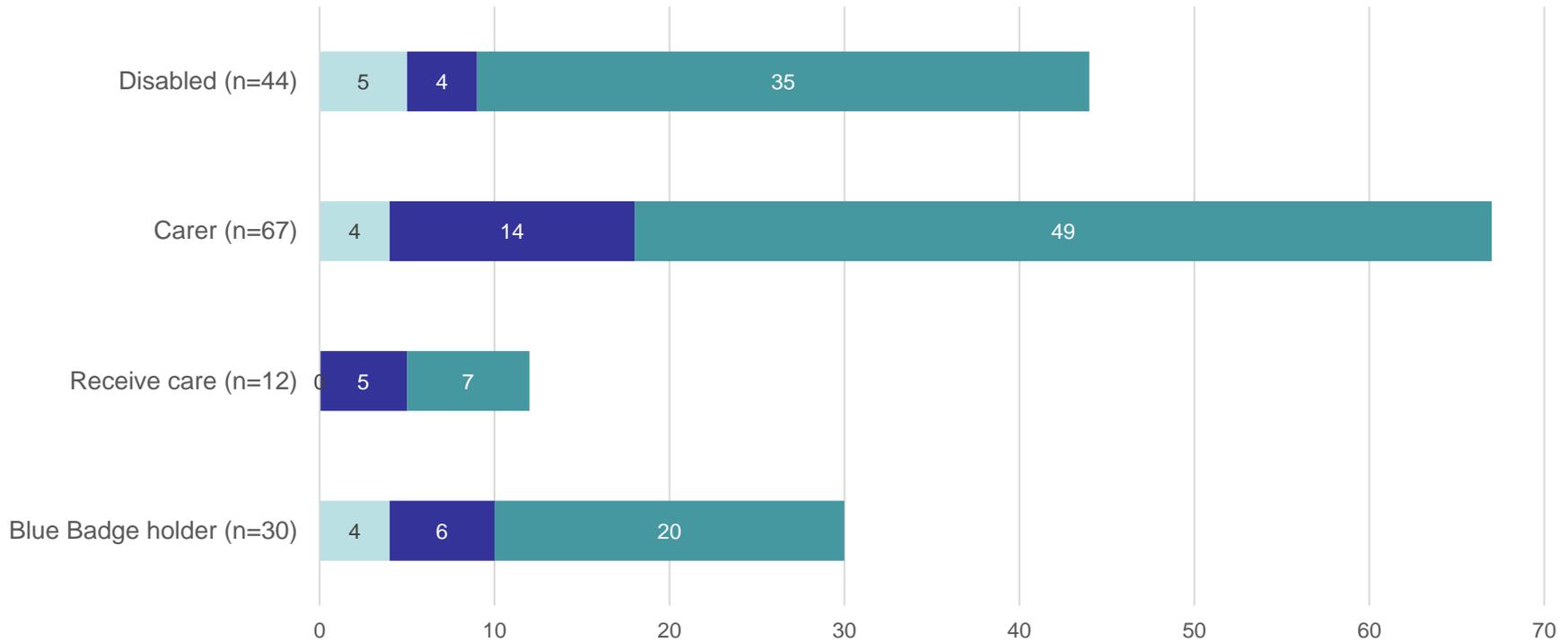
Engagement findings - survey

Survey respondents' preference of timed basis options (n=41)



Engagement findings - survey

Survey respondents (Blue Badge holder, Carer, Receive care and disabled) preferences for Meadway restrictions on motor vehicles



- I would prefer to see the Meadway restrictions on motor vehicles to operate on a timed basis:
- I would prefer for the Meadway restrictions on motor vehicles to remain in place
- I would prefer to see the Meadway restrictions on motor vehicles removed entirely

Engagement findings – emails

Twenty-eight emails from 27 people were received by the Council with comments regarding the Meadway modal filter. Of these, 17 people said they would prefer that the Meadway remains closed to motor traffic as per the current arrangements, five stated they would prefer it to open to motor traffic, three did not specify and two said they would not have selected an option proposed in the survey, but would rather the Quieter Neighbourhood be removed entirely.

The most prominent theme from the emails received was regarding the impact on Meadway should it be opened to motor traffic whilst other roads remain closed, mentioned by 12 respondents, namely an increase in traffic volumes and congestion (specifically mentioned by 11 people). Six people noted that their concern was due to Meadway being part of a conservation area. Eight people also mentioned their concern for the impact on surrounding roads if Meadway were to be opened.

Other concerns detailed in regards to the possibility of Meadway opening included that it would:

- be contradictory to the aims of the Quieter Neighbourhood (6)
- cause Meadway to be used as a shortcut route (4)
- reduce air quality or cause excess pollution (4)
- cause HGVs to travel through the road (2)
- cause vehicles to speed along the road (2)
- negatively affect the local community (1)
- cause more people to change back to driving over walking and cycling (1).

Engagement findings – emails

One person said that they would like Meadway to be opened to motor traffic to decrease journey times and so it can be used as a shortcut route.

There were a number of comments made that are outside of the scope of this engagement process. These included concerns over the survey or approach to engagement (two), that the restriction uses locked bollards which negatively impact emergency services (1), and that not all emergency or healthcare workers are not eligible for exemptions (1).

There were some comments made regarding the Quieter Neighbourhood project as a whole, also outside of the scope of this engagement process. These included concerns that the Quieter Neighbourhood :

- has not achieved its objectives (3)
- negatively impacts emergency services (2)
- has increased air pollution (2)
- has increased congestion (2)
- has displaced traffic (1)
- consultation was inadequate or unfair (1).

Engagement findings – petition

The signatories to the petition supported opening the Meadway and stated “the re-opening of this road will mitigate some of the damaging impact the LTN has had on Wynchgate and Park View residents. We have experienced a fall in road safety with several accidents, a substantial increase in noise & air pollution, and a reduction in mobility due to congestion due to our adjoining roads and at the high street roundabout.”

Conclusion and next steps

In conclusion, 566 (72%) of respondents to the survey stated that they would prefer to see the Meadway restrictions on motor vehicles removed entirely, 177 (23%) stated they would prefer they remain in place, and 41 (5%) stated that they would prefer that the restrictions operate on a timed basis. Enfield Council will consider the feedback received when determining any future changes to the Fox Lane QN.

This engagement report will be considered as part of a Key Decision (KD5512) report. The Key Decision report will present a recommendation and will be published on the Enfield Council website.

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Bowes Primary and Surrounding Streets Quieter Neighbourhood Motor Vehicle Access Survey

Summary Report August 2022
Prepared by the London Borough of Enfield



Introduction

The Bowes Primary and Surrounding Streets Quieter Neighbourhood (Bowes Primary QN) was made permanent by Enfield Council in January 2022 following a trial that commenced in August 2020. A map of the area can be found on the slide 4.

As part of the trial, a statutory consultation on the Experimental Traffic Order was delivered from 28 September 2020 to 2 May 2021 where objections and representations were made to the traffic order. A further opportunity to comment was offered from 1 to 21 November 2021. Following the feedback received, the Council wanted to explore a number of improvements to the project as detailed in the decision report. One of the options to explore was how people would prefer to access the area by motor vehicle; if from the north or from the south. Currently, as introduced as part of the Quieter Neighbourhood, access to the Bowes Primary QN is from the north via the A406 North Circular Road.

A survey was delivered online with paper copies available upon request which asked residents their preference of accessing the area from the north or south, or if they do not have a preference either way. The survey was hosted on the Bowes Primary QN project page on the Let's Talk Enfield website (<https://letstalk.enfield.gov.uk/BowesQN>), and residents were also invited to comment by email or letter. The engagement period ran from 18 March to 22 May 2022.

Introduction

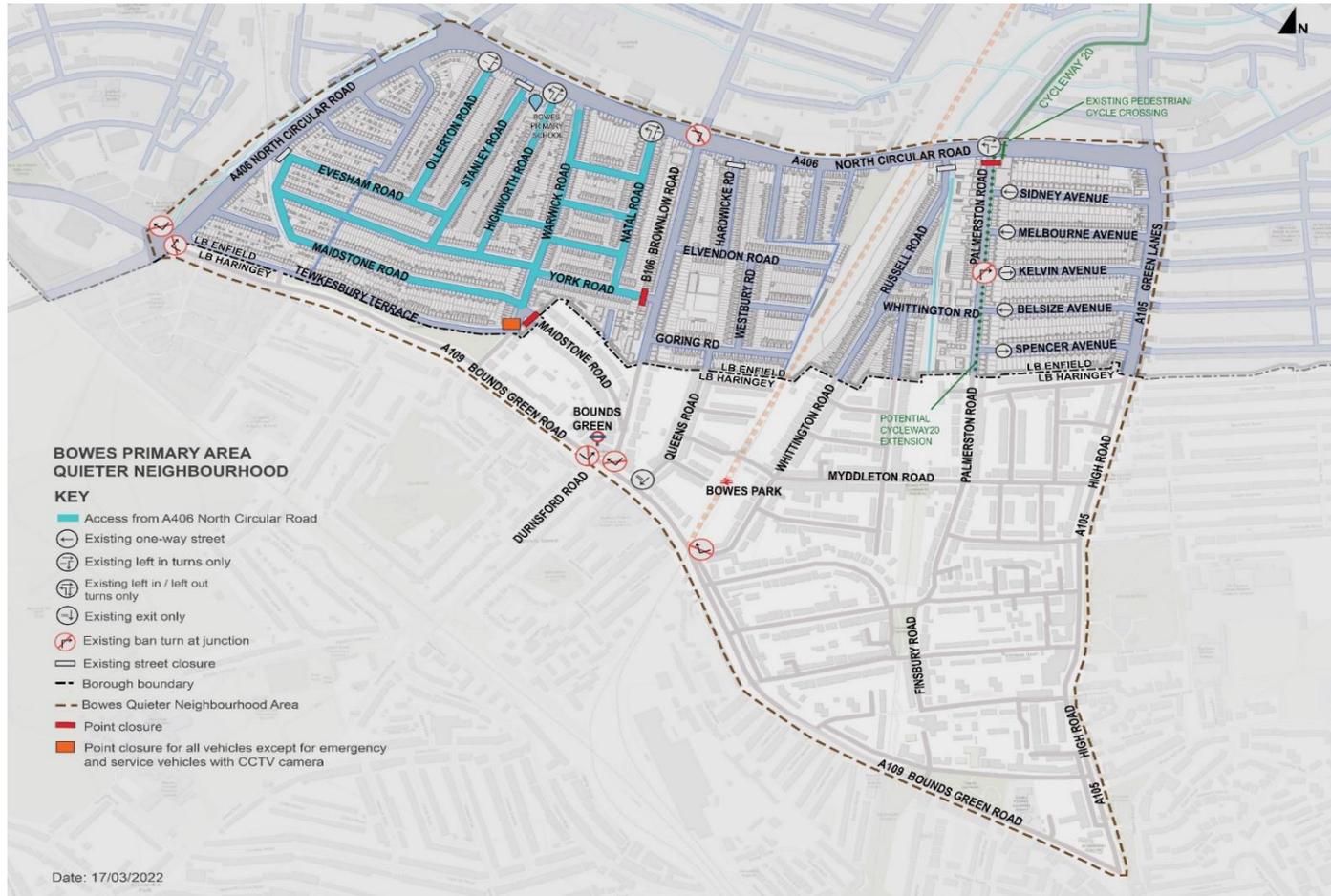
A total of 289 survey responses were received online, 51 survey responses received by post, and 10 emails received. An additional three paper surveys were received however did not answer the survey question and as such have not been included in this analysis. Of the survey responses received 31% stated that they would prefer to see motor vehicle access to the Bowes Primary QN from the north, 62% stated they would prefer access from the south, 7% stated that they do not have a preference either way. A free text box for comments was not provided within the survey online, however there were a number of themes raised by those who emailed or who wrote comments on returned paper copies of the survey. Some of the comments were outside of the scope of this engagement process however are noted in this report for completeness.

Enfield Council will be considering all responses received as part of this engagement process on the Bowes Primary QN. Updates will be posted on the project page at <https://letstalk.enfield.gov.uk/BowesQN>.

This report details the approach to and findings of the engagement on motor vehicle access to the Bowes Primary QN.

Introduction

The map below shows the Bowes Primary and Surrounding Streets Quieter Neighbourhood.



Engagement approach

Residents were invited to share their views on motor vehicle access to the Bowes Primary QN from 18 March to 22 May 2022. Approximately 16,000 letters were delivered in March 2022 to residents who live in and near to the Bowes Primary QN which detailed the purpose of the survey and invited residents to share their views in one of the following ways:

- Completing the survey online at <https://letstalk.enfield.gov.uk/bowesQN>
- Requesting a paper copy of the survey by emailing healthystreets@enfield.gov.uk, or calling the Council
- Writing to: ATTN Healthy Streets team, Enfield Council, Silver Street, London EN1 3XA.

Information on how to obtain information and materials was also included in the letter written in Greek, Polish, Turkish and Gujarati.

Participants

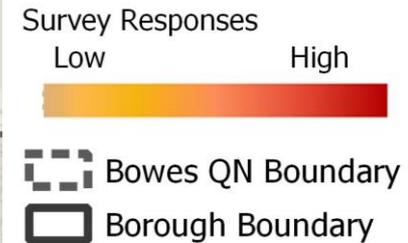
During the engagement period, 289 responses were collected through the survey hosted on the Let's Talk Enfield project page, 51 paper copies of the survey were received and 10 email responses were received. No posted letters were received.

Demographic and equalities data was collected through the online survey and paper survey and is reported on in the following slides. Questions were not mandatory, and as a result not every participant completed these questions with many choosing to complete a selection of the questions only. No demographic data was collected for those who emailed the Council.

All respondents to the survey provided their postcode, of which N11 was the most common (296). Twenty-two people said they lived in N13, 20 in N22 and one person in N14. A map of survey responses received by location (postcode) is shown on the following slide.

Participants

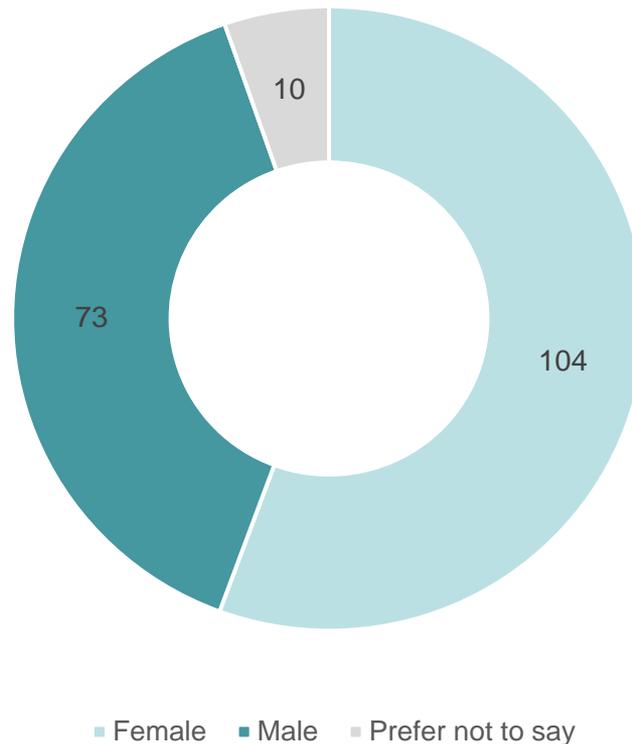
Below shows a heat map of survey responses by location (postcode).



Participants

Of respondents who provided their gender (187), 104 were female, 73 were male, and 10 stated 'Prefer not to say', as shown in the graph below.

Gender of survey respondents (n=187)



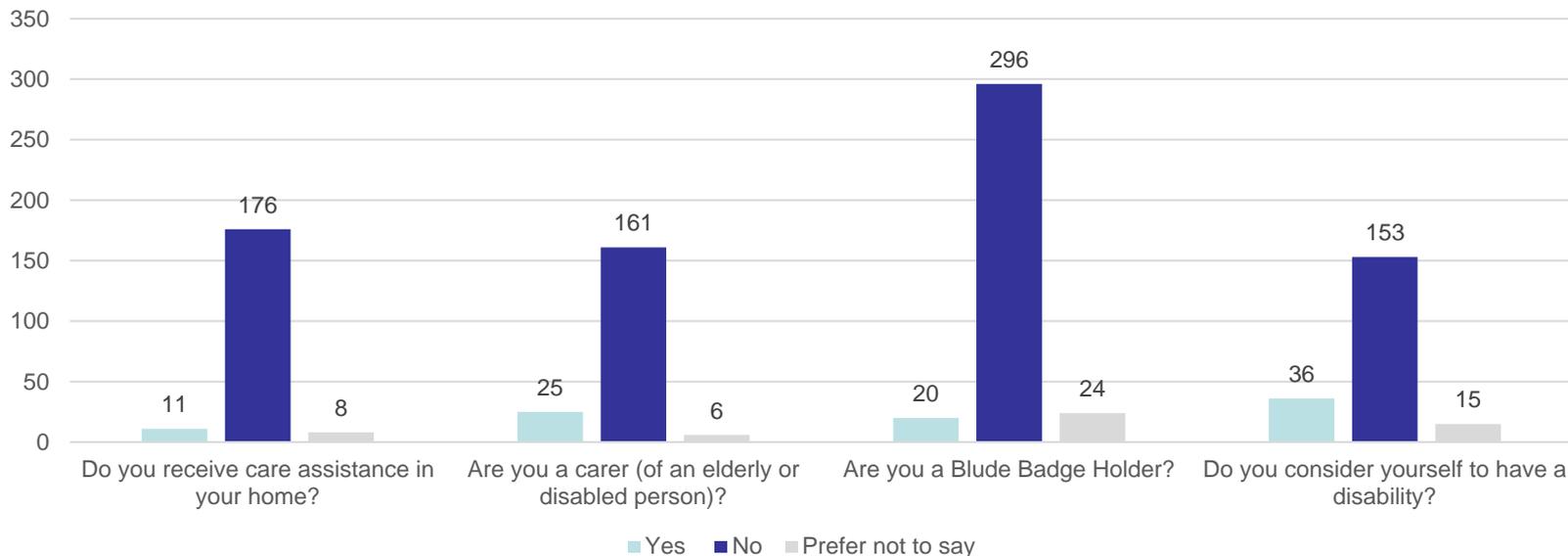
Participants

Of respondents who provided their gender (187), 104 were female, 73 were male, and 10 stated 'Prefer not to say'.

Twenty respondents stated that they are a Blue Badge holder, and 36 stated that they consider themselves to have a disability, as shown in the graph below.

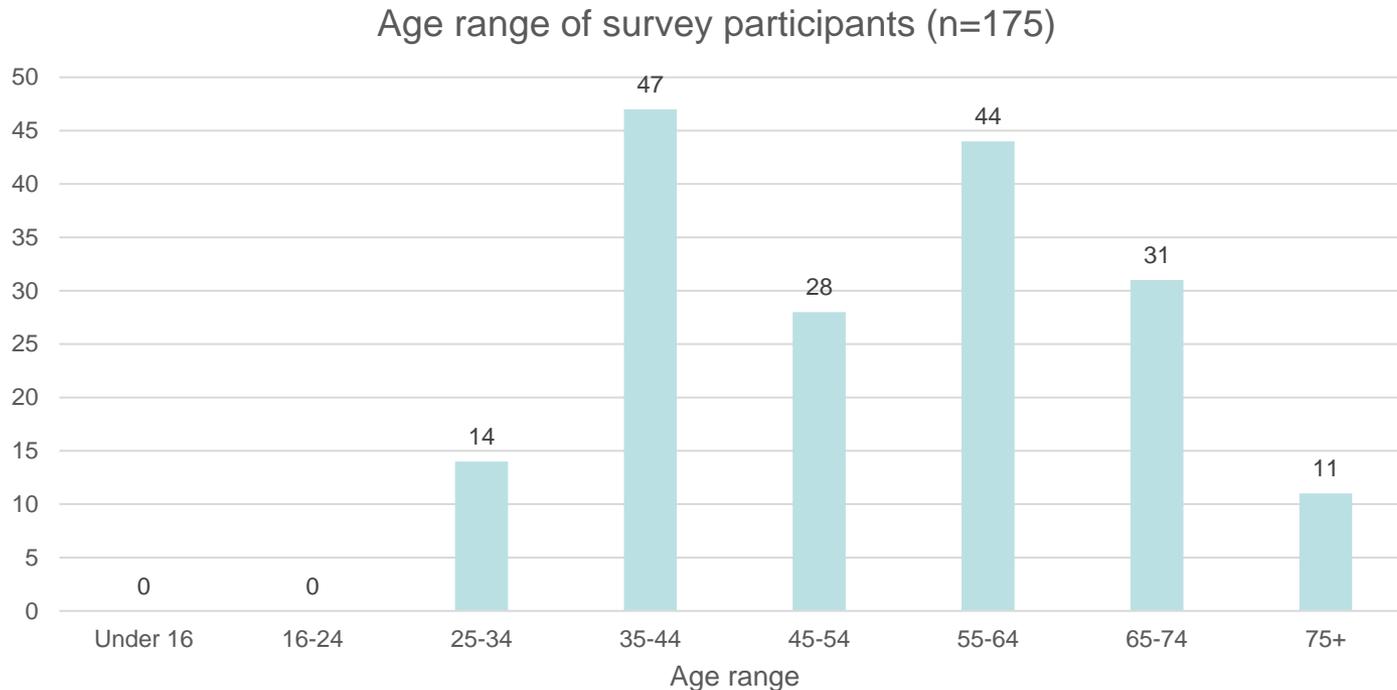
Eleven respondents stated that they receive care in their home, and 25 stated they provide care for someone such as an elderly or disabled person, as shown in the graph below.

Survey respondents who have a disability (n=204), are a Blue Badge holder (n=340), receive care (n=195), and who provide care (n=192)



Participants

In order to determine age brackets of participants, year of birth was asked in the survey and where no response was provided, year of birth from the sign-up form was used. The age bracket was determined by the age respondents will turn in 2022. Of those who provided their year of birth (175), respondents aged 35-44 years and 55-64 years were the most represented with 47 and 44 survey respondents in each of these age groups respectively. Age brackets of survey respondents who provided their year of birth are shown in the graph below.



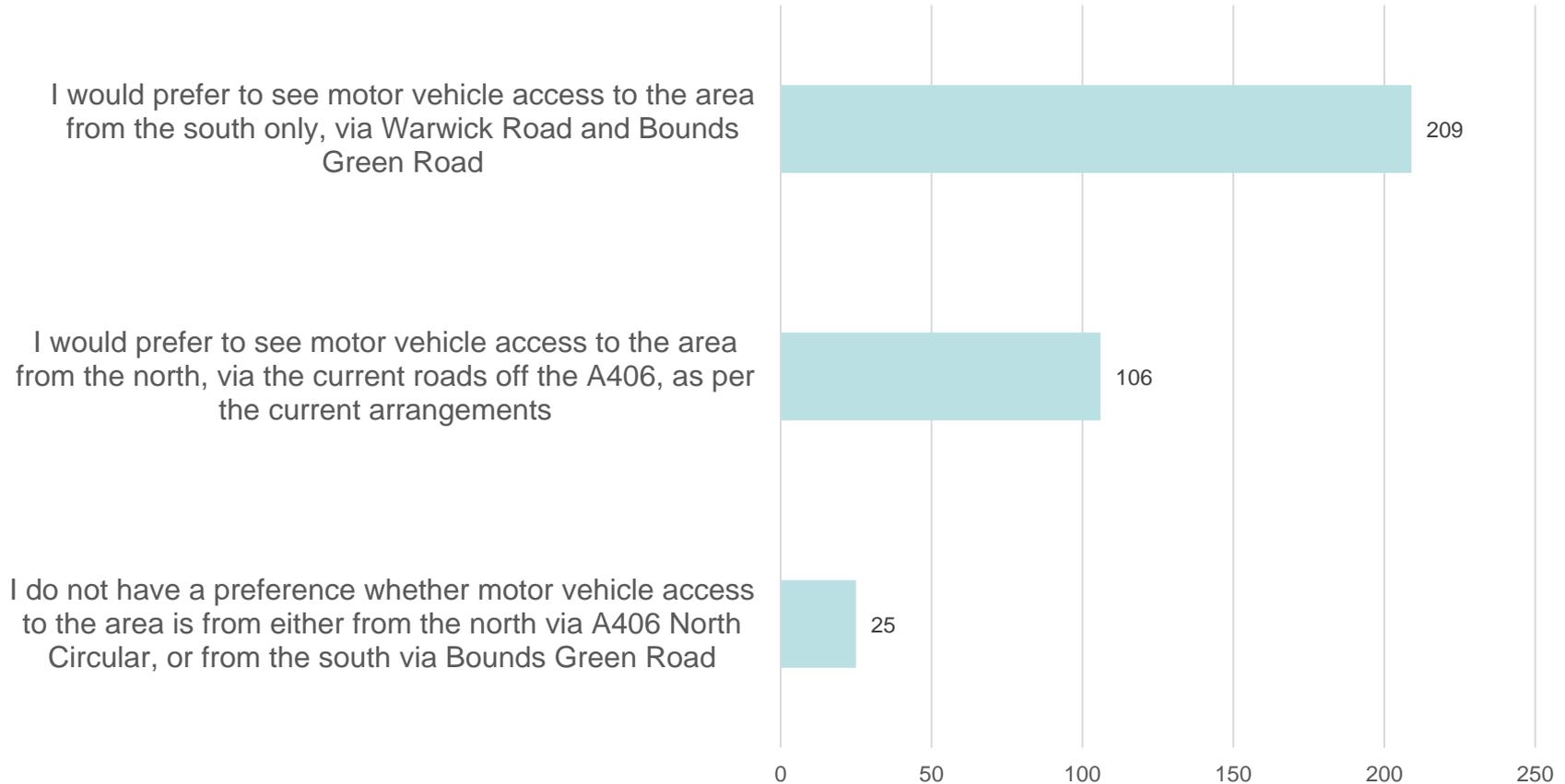
Engagement findings - survey

Of the 340 survey responses received, 209 respondents (62%) stated that they would prefer to see motor vehicle access to the Bowes Primary QN from the south, whereas 106 (31%) stated that they would rather see access from the north. Twenty-five respondents (7%) said they do not have a preference.

The graphs on the following slide shows the response from all survey respondents and respondents who stated they are a Blue Badge holder, carer, receive care at home and have a disability.

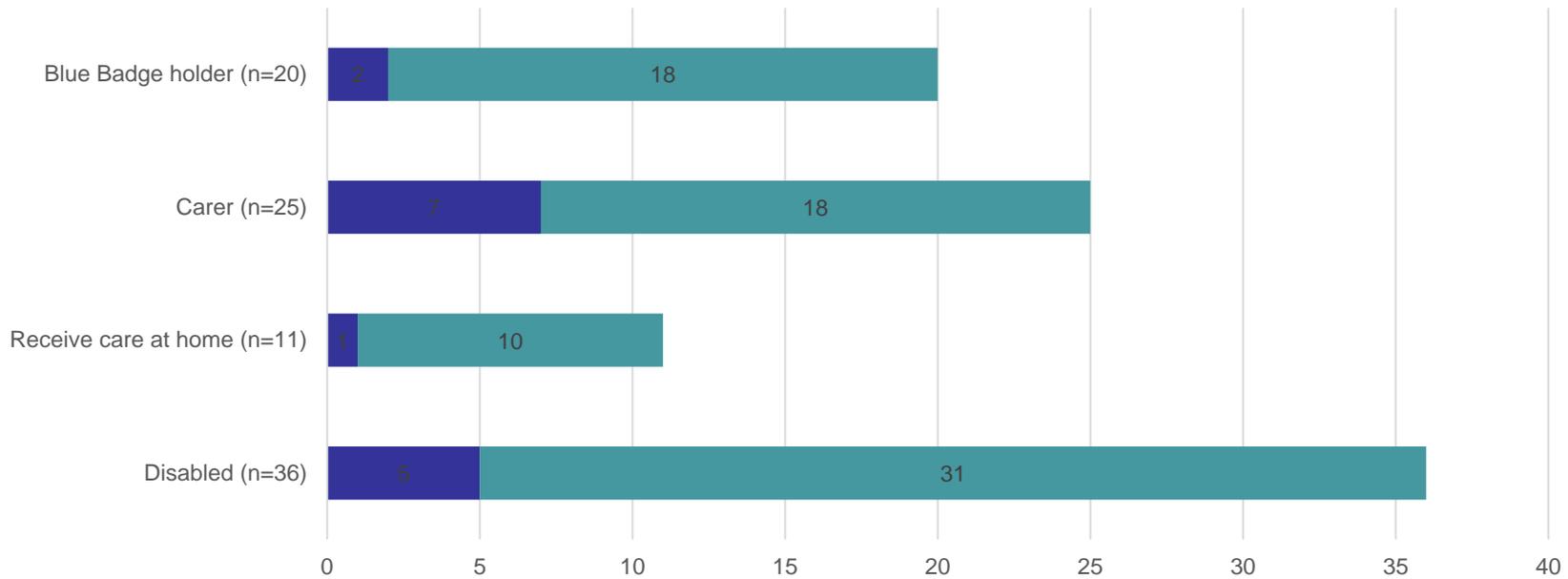
Engagement findings - survey

Survey respondents' preferences for access to the Bowes QN (n=340)



Engagement findings - survey

Survey respondents' (Blue Badge holder, carer, receive care and disabled) preferences for access to the Bowes QN



- I do not have a preference whether motor vehicle access to the area is from either from the north via A406 North Circular, or from the south via Bounds Green Road
- I would prefer to see motor vehicle access to the area from the north, via the current roads off the A406, as per the current arrangements
- I would prefer to see motor vehicle access to the area from the south only, via Warwick Road and Bounds Green Road

Engagement findings - emails

Ten emails were received related to the survey on access to the Bowes Primary QN, including one from the Warwick Road Action Group. Four people who emailed stated that they would prefer access remains to the north of the Bowes Primary QN, and shared concerns about the possibilities of congestion, tailbacks, increased journey times and dangerous driving such as people making U-turns if access were changed to the south. Concerns about the impact on the community were also shared, with one stating that the introduction of the Quieter Neighbourhood was a significant change for local residents who have now had time to adjust and for whom it could disrupt should there be a change in access points.

There were also a number of suggestions made by those who emailed. One person suggested adding a one-way access point from York Road onto Brownlow Road. Another suggested providing camera-controlled access for residents, similar to the exemptions for eligible Blue Badge holders. There was also a suggestion for public spaces improvements to the junction of Warwick Road and Maidstone Road if there were a change in access to the south.

Three people who emailed stated that they would prefer access to and from both the north and south, with two of these people saying they would like the Quieter Neighbourhood removed in its entirety. One stated that they do not have a preference in terms of access from the north or south.

Five people provided feedback on the survey, some of whom did not feel it offered an opportunity to provide more feedback or an option that they would prefer such as access from both the north and south.

Conclusion and next steps

In conclusion, 209 (62%) out of 339 respondents stated that they would prefer to see access to the Bowes Primary and Surrounding Streets Quieter Neighbourhood from the south, via Warwick Road and Bounds Green Road, 106 (31%) said they would prefer access to the area is from the north via the A406 North Circular Road, and 25 (7%) said they do not have a preference. Currently access is to the north of the area.

This engagement report will be considered as part of a Key Decision (KD5512) report. The Key Decision report will present a recommendation and will be published on the Enfield Council website.

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Enfield Equality Impact Assessment (EqIA)

Introduction

The purpose of an Equality Impact Assessment (EqIA) is to help Enfield Council make sure it does not discriminate against service users, residents and staff, and that we promote equality where possible. Completing the assessment is a way to make sure everyone involved in a decision or activity thinks carefully about the likely impact of their work and that we take appropriate action in response to this analysis.

The EqIA provides a way to systematically assess and record the likely equality impact of an activity, policy, strategy, budget change or any other decision.

The assessment helps to focus on the impact on people who share one of the different nine protected characteristics as defined by the Equality Act 2010 as well as on people who are disadvantaged due to socio-economic factors. The assessment involves anticipating the consequences of the activity or decision on different groups of people and making sure that:

- unlawful discrimination is eliminated
- opportunities for advancing equal opportunities are maximised
- opportunities for fostering good relations are maximised.

The EqIA is carried out by completing this form. To complete it you will need to:

- use local or national research which relates to how the activity/ policy/ strategy/ budget change or decision being made may impact on different people in different ways based on their protected characteristic or socio-economic status;
- where possible, analyse any equality data we have on the people in Enfield who will be affected e.g. equality data on service users and/or equality data on the Enfield population;
- refer to the engagement and/ or consultation you have carried out with stakeholders, including the community and/or voluntary and community sector groups and consider what this engagement showed us about the likely impact of the activity/ policy/ strategy/ budget change or decision on different groups.

The results of the EqIA should be used to inform the proposal/ recommended decision and changes should be made to the proposal/ recommended decision as a result of the assessment where required. Any ongoing/ future mitigating actions required should be set out in the action plan at the end of the assessment.

The completed EqIA should be included as an appendix to relevant EMT/ Delegated Authority/ Cabinet/ Council reports regarding the service activity/ policy/ strategy/ budget change/ decision. Decision-makers should be confident that a robust EqIA has taken place, that any necessary mitigating action has been taken and that there are robust arrangements in place to ensure any necessary ongoing actions are delivered.

SECTION 1 – Equality Analysis Details

Title of service activity / policy/ strategy/ budget change/ decision that you are assessing	Bowes Primary & Surrounding Streets Quieter Neighbourhood Area
Lead officer(s) name(s) and contact details	Richard Eason
Team/ Department	Place – Healthy Streets
Executive Director	Sarah Cary
Cabinet Member	Leader of the Council Cllr Caliskan
Date of EqIA Commencement	1st July 2020
Last Updated	7th December 2021

SECTION 2 – Summary of Proposal

Please give a brief summary of the proposed service change / policy/ strategy/ budget change/project plan/ key decision

Please summarise briefly:

What is the proposed decision or change?

What are the reasons for the decision or change?

What outcomes are you hoping to achieve from this change?

Who will be impacted by the project or change - staff, service users, or the wider community?

The consultation survey for this project ran from 28 September 2020 to 2 May 2021. Consultation analysis was ongoing during this period and a report (referred to as 'Consultation Analysis' in this EqIA) provides a detailed analysis and summaries of the responses. In recognition of comments from disabled people and carers during the consultation period, an additional consultation exercise was launched in March

2021 which specifically targeted disabled people, carers, those receiving care, and Blue Badge holders that live within the Bowes Primary area.

Residents in the Bowes Primary & Surrounding Streets Quieter Neighbourhood Area have raised concerns with Enfield Council over traffic issues in the area for many years. In 2018, MP Bambos Charalambous presented a petition to Parliament on behalf of the Bowes ward, calling for a live trial of a low traffic neighbourhood. This petition was signed by 377 local residents. In response to this petition, in 2019 the Council engaged residents in the Bowes Primary & Surrounding Streets Quieter Neighbourhood Area through a Perception Survey to better understand the issues that they were experiencing.

In total 263 residents participated and provided these top responses:

- Concerns about streets being used as rat-runs.
- Concerns about speed and volume of traffic; and
- Concerns about pollution.

78% of participants thought vehicle speeds are a serious problem and 87% of participants said the volume of traffic is a serious problem¹. The full findings from the survey can be found at <https://letstalk.enfield.gov.uk/BowesQN>

Enfield Council has implemented various restriction points with the intention to:

- 1) deny a route to motorised through-traffic along Warwick Road and connecting estate roads
- 2) deny a route to motorised through-traffic along the northern section of Palmerston Road and connecting estate roads.

The Council extended into the Enfield part of Brownlow Road, and the estate to the east, the 20mph speed limit to complement the same speed limits in the adjacent areas to the south of A406 to the south and west. This offers better consistency to drivers and should reduce the sense of traffic domination on Brownlow Road. A second phase is planned to remove through-traffic, except buses, on Brownlow Road by way of a further restriction point on Brownlow Road and potentially a point closure on Westbury Road which will be subject to where the bus gate on Brownlow Road will be located.

Warwick Road, Palmerston Road and their connecting estate roads are unclassified roads. They are typically narrow and have close-fronting homes. Through traffic is better accommodated on the perimeter roads that border the area, namely: A406 North Circular Road, A105 Green Lanes, and A109 Bounds Green Road. Removing through traffic within these neighbourhoods has established more attractive conditions for walking and cycling within the neighbourhood, with modal filters for cycling at the closure points further boosting the convenience of cycling over car use for local trips. Access for buses is also planned to be maintained on Brownlow Road which further priorities use of public transport of private car.

¹ <https://letstalk.enfield.gov.uk/2794/widgets/9476/documents/4491>

Lowering the level of traffic on Palmerston Road aims to make it better suited for on-road cycling, helping complete a cycle route into Haringey that already links to Palmers Green and Enfield Town to the north. Reducing the overall volume of traffic to levels that better match the character of these narrow, densely populated streets also aims to improve air quality within the zone.

These proposals followed ongoing engagement with London Fire Brigade, London Ambulance Service and Metropolitan Police as well as Enfield Waste Collection services. Camera controls, rather than a physical barrier, are included on Warwick Road to avoid hindering emergency access and waste collection services in and out of the estate to/from the south and reducing response times. In this regard the proposals represent an improvement over the existing width restriction. Where closure points and islands are placed, the removal of some adjacent kerbside parking/loading space will be required so that parking does not foul access around narrowed sections of road or occupy space needed to be left clear for drivers to turn vehicles around. The proposals, including the localised parking controls, are supported by experimental traffic orders so that the Council can assess their impact further, consider representations and make amendments if necessary.

A conscious decision has been made to trial the proposals experimentally. Experimental traffic orders allow for schemes to be implemented and a consultation to take place whilst they are live. This allows a true consultation to take place in respect of the actual impact. During the experiment, changes can be made to the measures in place and the law requires further consultation following changes before any scheme can be converted to a permanent scheme.

The effects of the implementation are being monitored throughout the experimental phase. The authority does not currently have data for people passing through the scheme area and any protected characteristics they may have; so the ward profile for the Bowes Ward has been used as the basis for demographic data.

SECTION 3 – Equality Analysis

This section asks you to consider the potential differential impact of the proposed decision or change on different protected characteristics, and what mitigating actions should be taken to avoid or counteract any negative impact.

According to the Equality Act 2010, protected characteristics are aspects of a person's identity that make them who they are. The law defines 9 protected characteristics:

1. Age
2. Disability
3. Gender reassignment.
4. Marriage and civil partnership.
5. Pregnancy and maternity.
6. Race
7. Religion or belief.
8. Sex
9. Sexual orientation.

At Enfield Council, we also consider socio-economic status as an additional characteristic.

“Differential impact” means that people of a particular protected characteristic (e.g. people of a particular age, people with a disability, people of a particular gender, or people from a particular race and religion) will be significantly more affected by the change than other groups. Please consider both potential positive and negative impacts, and, where possible, provide evidence to explain why this group might be particularly affected. If there is no differential impact for that group, briefly explain why this is not applicable.

Please consider how the proposed change will affect staff, service users or members of the wider community who share one of the following protected characteristics.

Information has been gathered regarding groups with protected characteristics in Enfield as a whole, and for Bowes specifically (referred to as the ‘Study area’). London Travel Demand Survey (LTDS) and Census 2011 data have been the two primary data sources, though other data sources have been used, and are referenced throughout. For each protected characteristic, data has been collected and analysed, with comparisons made at borough, regional and national level where relevant.

The project team consider that there would be no disproportionate impact on Gender Reassignment, Sexual Orientation or Marriage and Civil Partnerships as protected groups, therefore they have been excluded from the assessment. This is based on the evidence from consultation responses which show no clear trends or patterns

indicating an issue in these protected characteristic groups. The project team will reassess this if deemed necessary.

Age

This can refer to people of a specific age e.g. 18-year olds, or age range e.g. 0 – 18-year olds.

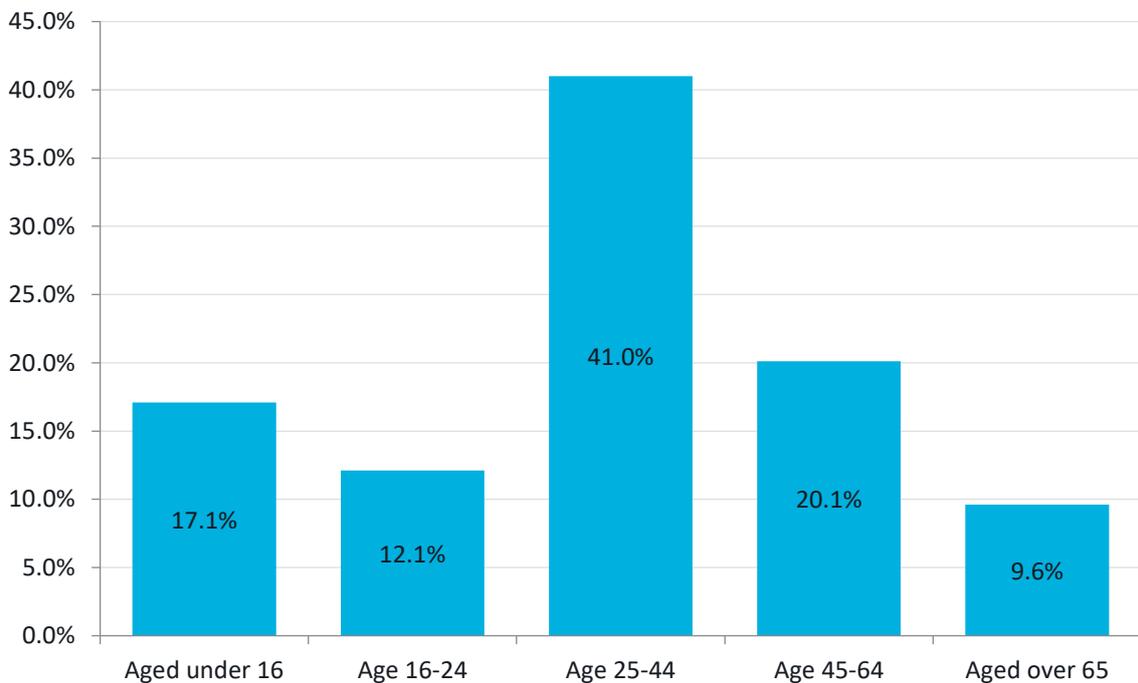
Will the proposed change to service/policy/budget have a **differential impact [positive or negative]** on people of a specific age or age group (e.g. older or younger people)?

Please provide evidence to explain why this group may be particularly affected.

Evidence base

As demonstrated within Figure 1, the majority of residents within Bowes are aged 25-44, making up 41% of all residents. There is an almost even split of those aged older and younger than that age bracket, with 29.2% aged under 24, and 29.7% aged over 45.

Figure 1: Age distribution within study area

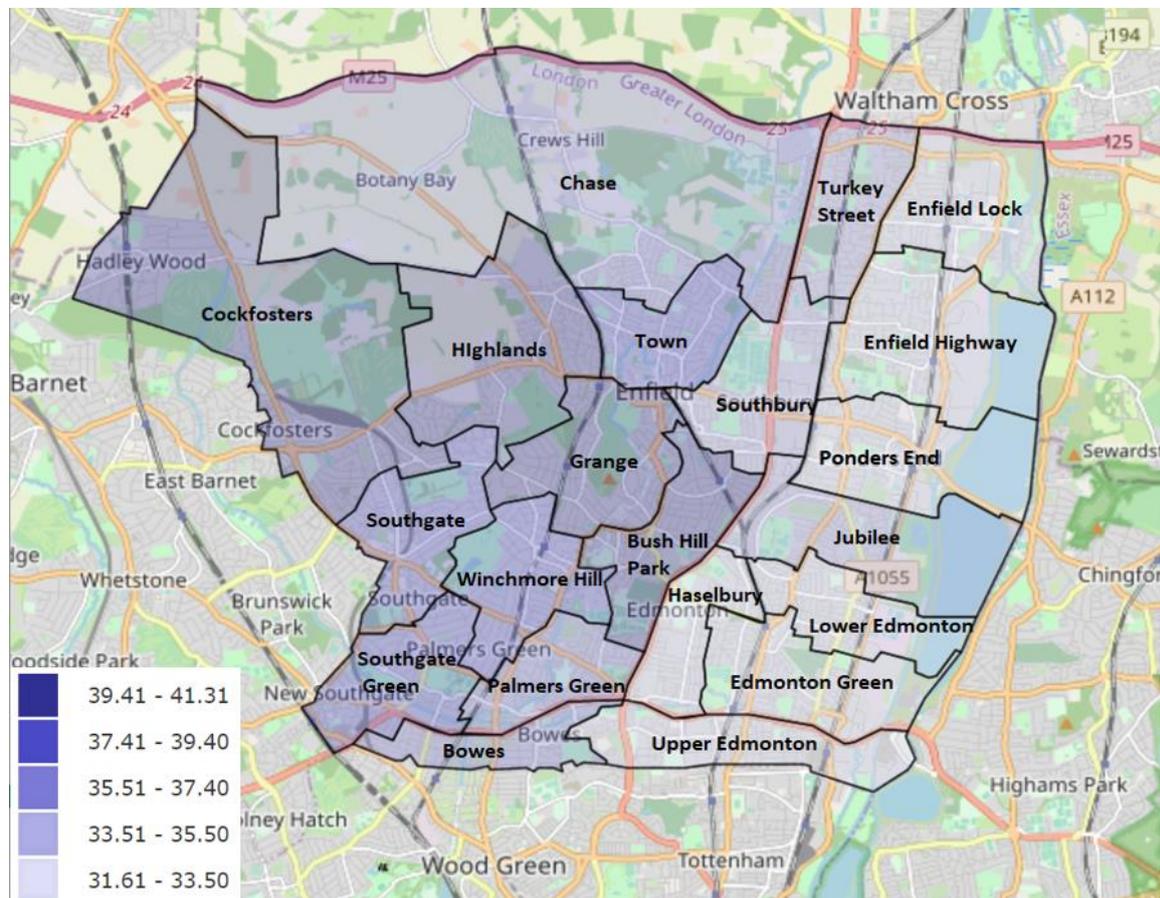


Source: UK Census 2011

Figure 2 presents the spatial distribution of the mean age across Enfield’s wards. A clear trend can be observed whereby the northern and eastern wards have some of the lowest mean ages in Enfield and the southern and western wards some of the

highest. Bowes, located in the southwest of Enfield, has one of the oldest mean ages in the borough.

Figure 2: Mean age by ward in Enfield

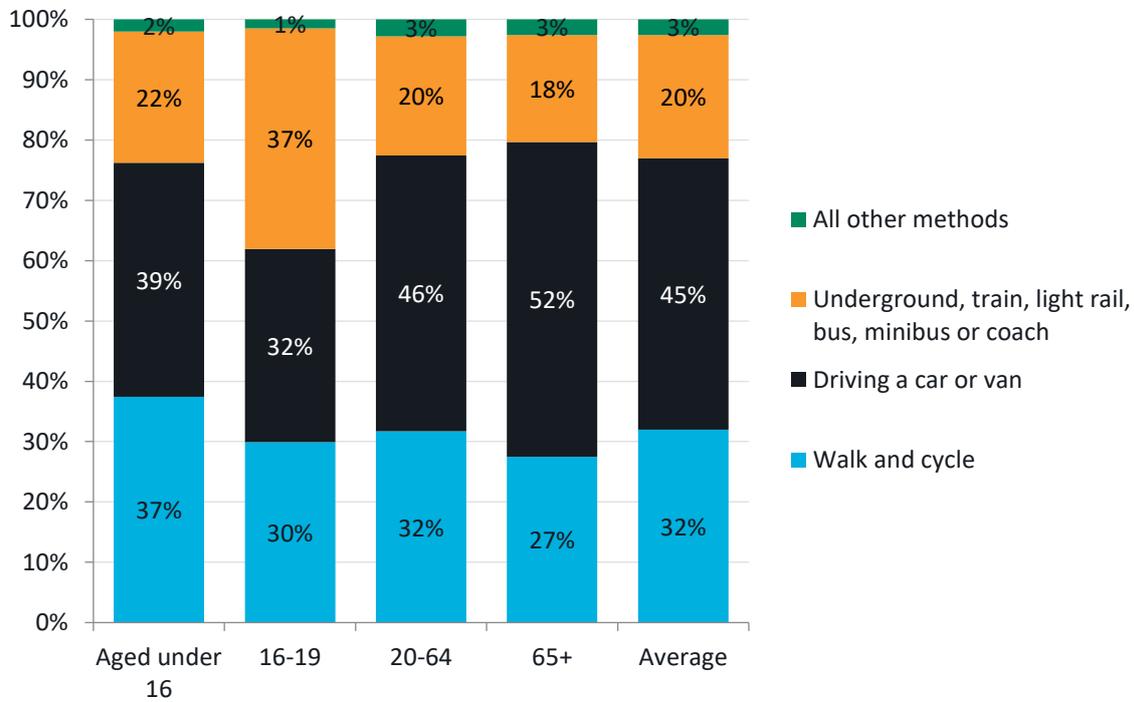


Source: UK Census 2011

Figure 3 presents LTDS data on how people travel around Enfield within each age category.

In general, younger people in Enfield walk and cycle more, and drive less than their elderly counterparts. Young people are less likely to be impacted as a driver and this is reflected in lower levels of response in the engagement surveys. The highest percentages of walking and cycling can be seen in those aged under 16, with 37% of all trips made on foot or by bike. Those aged 65 and over have the lowest levels of walking and cycling, with 27% of all trips, but the highest percentage of trips driven (or as a passenger in a car or van) at 52%. Public transport use is disproportionately higher in 16 to 19-year-old group, making up 37% of all journeys. This is 15% higher than the nearest age group (those aged under 16). Furthermore, as per the latest data from 2016, the average age to start driving in the UK was 26, and this is expected to have reduced further over the previous five years².

² <https://www.insurancefactory.co.uk/news/August-2016/Average-age-to-start-driving-increases-to-26>

Figure 3: Mode share by Age in Enfield


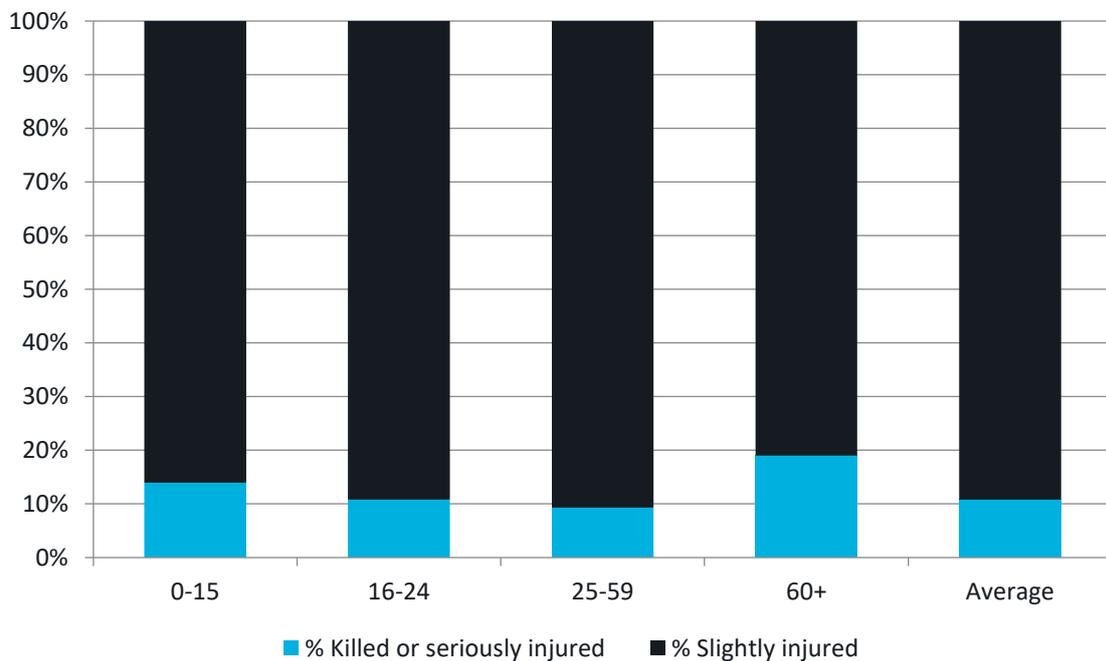
Source: LTDS (2016/17, 2017/18 and 2018/19)

The proportion of Killed or Seriously Injured (KSIs) and Slightly Injured casualties per age category is shown in Figure 4 below. KSIs are higher than average for those age 60 and over (19%) and those aged Under 16 (14%). As such, this indicates that these age groups are disproportionately more likely to suffer more severe consequences if they are a casualty in a collision. Lower speeds and volumes of traffic reduce the chance of children being killed or seriously injured.

Across the UK, 10-14 age group road accidents make up over 50% of all external causes of death. 15-19 years olds experience almost double the risk of death from road traffic accidents (82.5 deaths per million population) in comparison to the general population (42.2 deaths per million population). For males in this age group the risk is higher still at 127.3 deaths per million population³.

3

http://www.racfoundation.org/assets/rac_foundation/content/downloadables/road%20accident%20casualty%20comparisons%20-%20box%20-%2020110511.pdf

Figure 4: Percentage killed or seriously injured by Age in Enfield


Source: DfT Road traffic statistics (2019)

Differential impact assessment

People of young and old age are more vulnerable to poor air quality⁴, and Bowes has one of the oldest mean ages in Enfield. The delivery of this Quieter Neighbourhood aims to enable mode shift, ultimately reducing emissions from private vehicle use and increasing active modes of travel, benefit these age groups disproportionately through improved air quality.

Younger people in Enfield are less likely to drive than older people in the borough, are more likely to walk and cycle. Improvements to volumes of traffic in Bowes will benefit those who already cycle, and therefore may disproportionately benefit younger people. However, the improvements are also likely to benefit those who do not currently cycle by providing safer and more attractive conditions to do so. This may allow for a selection of residents which is more evenly dispersed across the age groups to partake in active travel modes – and reaping the health benefits associated with a more active lifestyle. Therefore, while the changes may initially benefit younger people, over time there may be longer term benefits across the age groups that rectifies this initial imbalance.

The proportions of respondents in the survey in each age group reporting either perceived positive or negative impacts of the QN were generally very similar across the bandings (with around 50% of respondents reporting perceived negative impacts), except for the 80 years and over age group, which consisted of 7 negative responses (78%). However, this outlier must be treated with caution, given this group's very low sample size of nine. The lower age groups (20 up to 49 years of

age) showed higher proportions of responses from respondents that reported perceived positive impacts from the QN.

Variations between age groups were small for both respondents inside and outside the QN, although perceptions were slightly more positive for those inside the QN across all the age groups. The relative proportions of positive and negative perceptions for each age group were broadly similar across those inside and outside the QN.

Reductions in motor vehicle traffic are expected to create safer streets with an improved experience for pedestrians – such as reduced noise and air pollution and reduced fear of being involved in a collision. These improvements to the walking environment are likely to disproportionately benefit those who are aged 16 and under who currently make 37% of journeys by walking (or to a lesser degree, cycling). Furthermore, those aged 16-19 who make 37% of trips by public transport are also likely to disproportionately benefit, as every public transport journey starts or ends on foot or cycle. The scheme should also reduce northbound bus journey times due to the reduction of through traffic in the area which will benefit younger age groups who make most of their trips via public transport or walking/cycling.

On the contrary, this scheme may cause increased congestion in the short to medium term on arterial roads as traffic is reassigned from minor roads within Bowes. As such, these impacts may disproportionately impact younger age groups. This could be mitigated with Bowes Primary school by further developing active travel measures to take advantage of the safer QN environment.

Older people are more likely to suffer from slight mobility impairments due to aging, which do not fall under the disability PCG. This can include slower movement and reaction time, and some may use mobility aids for walking. A reduction in motor vehicle traffic is likely to be particularly beneficial for those who require extra time to cross the street due to physical or visual impairments. The NHS however state that the over 65 age group are the most sedentary age group and should continue to engage in moderate exercise at 150mins a week to prevent mental and physical decline.

The Quieter Neighbourhood measures will significantly reduce the volumes of traffic through the area, reducing the threat caused by motor traffic, particularly from larger vehicles such as vans or HGVs who can no longer pass through the area. While these improvements are likely to benefit all ages groups, as those aged under 16 and over 60 are disproportionately killed or seriously injured by motor traffic, they are likely to benefit the most from the changes.

While these measures are likely to create safer, healthier streets for residents of Enfield, they may lead to longer journey times for people who rely on private cars, taxis or Dial-a-Ride. The scheme may also lead to short- or medium-term delays to motor traffic on arterial roads as traffic is reassigned from minor roads in Bowes.

⁴ https://www.london.gov.uk/sites/default/files/air_quality_for_public_health_professionals_-_city_of_london.pdf

Private cars, taxis or Dial-a-Ride are particularly popular for people aged 65 and over. Travelling can also be uncomfortable for some people, particularly for the elderly, therefore extended journey times could exacerbate this issue.

It is noted that some people may be more likely to use a private car as travel patterns and preferences change due to the pandemic. This may lead to increased journey times for those who rely on private cars, taxis or Dial-a-Ride.

The Consultation Analysis report highlighted an under-representation of younger people responding to the consultation, and an over-representation of older people. In the 2011 Census, those aged 16-29 and 30-39 made up 25% and 21% of all age groups, however in the survey, only 4% of respondents said they were aged 16-29, and 16% aged 30-39. In older people, the opposite trend can be seen. In the Census 2011, 14% of people stated they were aged between 40-49, 10% between 50-59, and 6% between 60-69, however the survey received 29%, 22% and 20% of responses from those age groups, respectively.

The Consultation Analysis report also highlighted some of the opposition to the scheme related to the impacts of the scheme on mobility and alternatives to private car use. 44 responses (out of 447 open question responses to the corresponding question) referred to public transport or active travel not being a suitable alternative due to disability or age (of these, 13 were disabled, and 16 were aged over 60).

Mitigating actions to be taken

Continue to work with Bowes Primary School to develop safer active journeys to school.

Disability

A person has a disability if they have a physical or mental impairment which has a substantial and long-term adverse effect on the person's ability to carry out normal day-day activities.

This could include:

Physical impairment, hearing impairment, visual impairment, learning difficulties, long-standing illness or health condition, mental illness, substance abuse or other impairments.

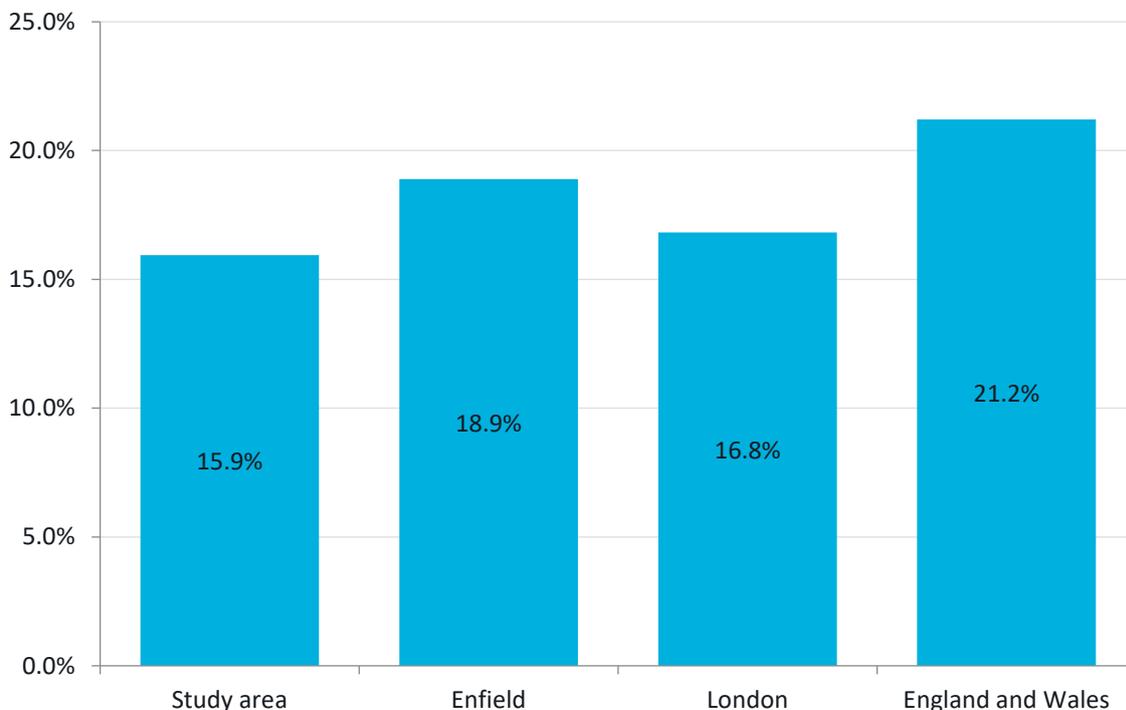
Will the proposed change to service/policy/budget have a **differential impact [positive or negative]** on people with disabilities?

Please provide evidence to explain why this group may be particularly affected.

Evidence base

In Enfield, Census 2011 data shows that 81.1% of residents feel that they have no limitations on their activities. This is slightly higher than both England and Wales (79.8%) but lower than in Greater London (83.2%). 18.9% of the population of Enfield stated that they were limited by a long-term health problem or disability. In Bowes ('Study area') this percentage is lower, at 15.9% of the population.

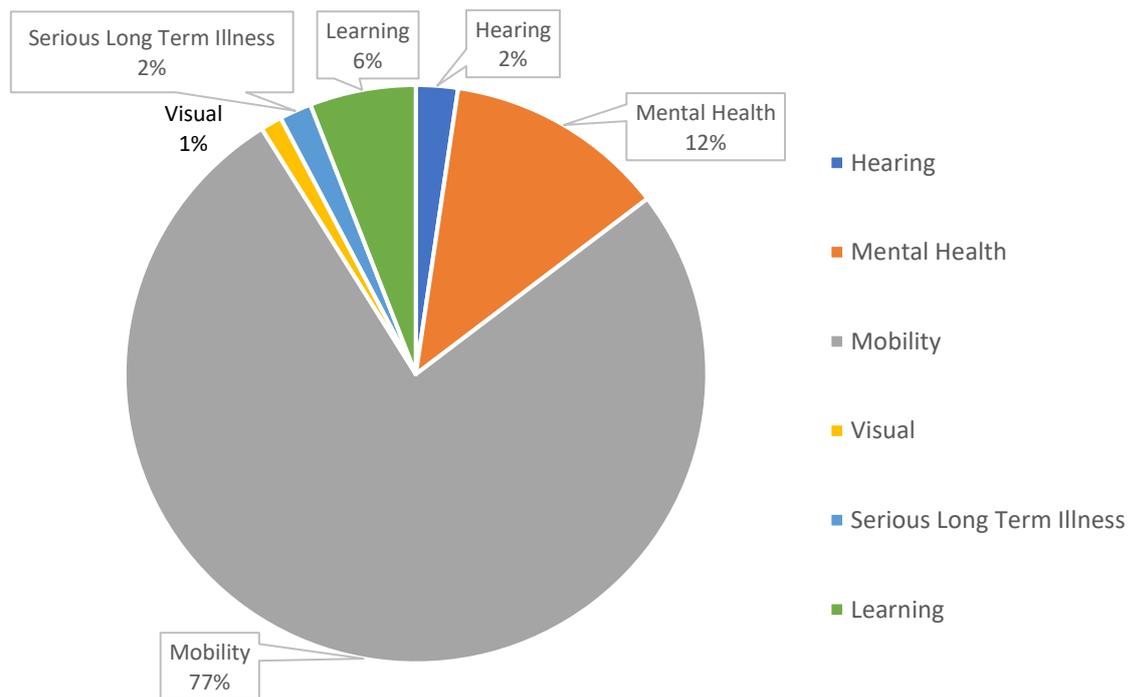
Figure 5: Percentage limited by a long-term health problem or disability in Enfield



Source: UK Census 2011

Disability types stated by those who live in Enfield and have a disability affecting daily travel (including old age) is shown in Figure 6 below. Mobility impairment represents the highest proportion (77%) followed by impairment due to mental health (12%). It should be noted that this data is based on a small sample, therefore results should be taken as a general indication only. It is important to note that various physical and mental disabilities can lead to travel limitations.

Figure 6: Disability types stated by those with a disability affecting travel



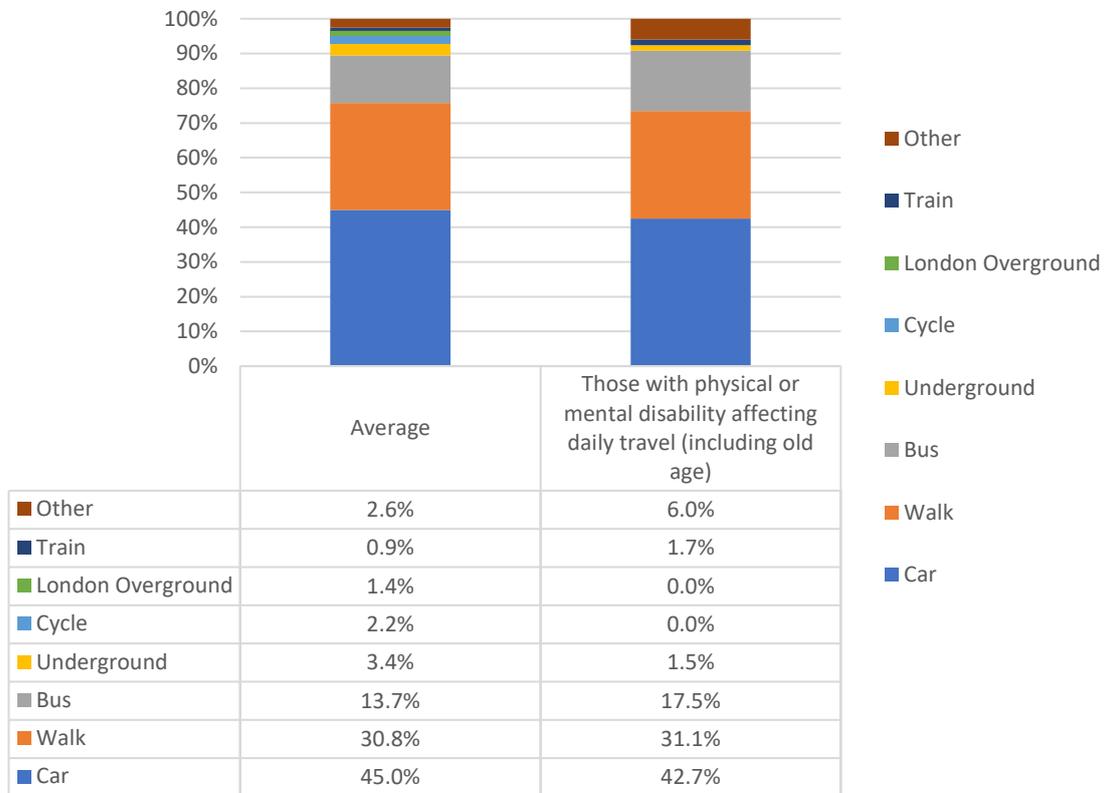
Source: LTDS (2016/17, 2017/18 and 2018/19)

Focusing solely on cyclists who have a disability, the Wheels for Wellbeing annual survey⁵ shows that 72% of disabled cyclists use their bike as a mobility aid, and 75% found cycling easier than walking. Survey results also show that 24% of disabled cyclists' bike for work or to commute to work and many found that cycling improves their mental and physical health. Inaccessible cycle infrastructure was found to be the biggest barrier to cycling.

Mode split for people with a physical or mental disability is shown in Figure 7. When compared to the LTDS mode split of trips made by all people, car use for those with disabilities is lower (42.6% compared to 45%), bus use is greater (17.5% compared to 13.7%) and walking is marginally higher (31.1% compared to 30.8%).

⁵ Wheels for Wellbeing Annual Survey 2018: <https://wheelsforwellbeing.org.uk/wp-content/uploads/2019/04/Survey-report-final.pdf>

Figure 7: Mode split by those with a physical or mental disability affecting daily travel



Source: LTDS (2016/17, 2017/18 and 2018/19)

Let’s Talk is the software platform engagement is conducted on. It meets and exceeds WCAG 2.1, the current global web accessibility standard⁶.

Text, graphics and figures should be able to be read by screen readers, and all content should be made available in alternative formats for those with visual impairments. Braille can be made available on request (though it is acknowledged that only a small proportion of visually impaired people use braille) or the opportunity offered to speak to someone over the phone or in person about the scheme.

Disabled people make less trips than those with no disability, with the difference increasing above the age of 65. Both disabled and non-disabled adults rely predominantly on car travel, but for disabled people in a third of journeys they are likely to be the passenger whereas a non-disabled person is a passenger in around one fifth of journeys. There are lower rates of commuting with disabled people which is expected as a result of the lower proportion of disabled people in full or part time employment.⁷

Differential impact assessment

Improved cycling conditions will benefit disabled cyclists and could potentially encourage people with disabilities to try cycling, if their disability allows. Some disabled people rely upon cycling as their primary means of mobility.

The project aims to decrease motor vehicle traffic in a residential area, creating a safer environment, particularly for disabled people who are more likely to be pedestrians. Quieter roads will also benefit those whose physical impairments necessitate more time to cross the road, or whose mobility aids may require use of the road, such as mobility scooters.

Quieter Neighbourhoods may negatively impact on journey times for those with mobility impairments who may find it more difficult to walk or cycle, and therefore prefer the use of door-to-door transport services such as private cars, taxis or Dial-a-Ride.

Visually impaired people will be pedestrians in the affected area, users of public transport or passengers in other vehicles. Visually impaired people will have varying degrees of ability to see the changes in the environment around them. This will include changes to traffic flows or directions of traffic. Although likely to benefit from decreased traffic flows, the initial change could be confusing.

Within the Bowes area is Bowes Primary School which hosts Special Educational Needs children and has an Additionally Resourced Provision for pupils with autism. Some children may experience discomfort with the changes to the local environment especially where this may cause a change in route.

Any changes or removal of the scheme may disproportionately impact residents with certain impairments or disabilities as adapting to changes in their environment can present challenges.

Reduction to through-traffic is likely to reduce conflict between different road users on the whole. This will create a safer environment, particularly those with physical disabilities. Quieter streets also mean that those traveling with wheelchairs or mobility scooters are able to use the roadway if they choose to circumvent blockages across the pavement (e.g. if the pavement is too narrow to navigate due to bins).

A letter to Blue Badge holders was sent to residents in the area on 26 February 2021. The letter invited residents to participate in a survey, separate to the main consultation survey. This survey aimed to find out more about how people with disabilities and carers perceive the scheme. A paper copy of the survey was included in the letter delivery. Additionally, all respondents to the main consultation survey who indicated they have a disability, receive care, or provide care to someone in the area, were sent an email advising them of the additional survey and how to participate.

⁶ <https://www.w3.org/TR/WCAG/>

⁷

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/972438/transp-ort-disability-and-accessibility-statistics-england-2019-to-2020.pdf

Findings from this disabled people/Blue Badge holder consultation showed that disabled people had concerns about reaching locations such as Bounds Green Group Practice, Bounds Green Underground station, North Middlesex Hospital, Brownlow Road pharmacy and dentists within the area. It was noted that they perceived increases in journey times, increases in traffic, and some responses referred to respondents being unable or finding it much harder to visit friends or family, or to welcome visitors to their own home.

The carers also had concerns about reaching similar destinations, including North Middlesex Hospital, the GP on Gordon Road (Bounds Green Group Practice) as well as a pharmacy or pharmacies in the area. There was a noted perceived increase in journey times, as well as responses referring to respondents finding it harder to access healthcare or for carers to gain access to patients.

The responses recorded were broadly representative of the types of disabilities that people have within Bowes. While those who identified as having a learning disability/difficulty appear to be under-represented, it is possible that a percentage of these people chose the option of 'Other'. It is understood that this may be caused in part by the electronic survey only allowing respondents to select a single disability, rather than multiple, therefore they chose 'Other' and listed numerous disabilities.

Following this disability specific consultation, a report was produced and is attached at appendix A. Respondents indicated whether they would be willing to participate in focus groups.

Three separate focus groups were held with disabled people following this survey in June to delve further into the issues raised in the survey. The attendance at the focus groups was predominantly carers for disabled people and almost all were regular car users.

During the focus groups, the carers described the types of support they provide. In some cases, carers reside with the person they care for, which is particularly true in the case of disabled children. In a few cases, carers described taking car journeys with things like washing or hot food to another address within a mile or so as part of they care they deliver. Their experience had been the journey took longer and at times they may have waited in heavier traffic. An increase in traffic volumes from increased car ownership or use would potentially create a similar effect as the current traffic volumes will not remain constant as since 2008 traffic has continued to increase and has nearly doubled in ten years. Clearly at this rate a similar effect would be felt by the carers in the increased volumes of traffic, notwithstanding the fact that the impact seems to be more immediately felt by them. General issues with congestion and traffic were raised and there was recognition that the situation before the measures was not flowing without congestion.

Attendees were asked about travel to hospitals and expressed general concerns about travel times, but did suggest that travelling to Whittington and Royal Free were journeys which had been impacted.

One member of the group commented that they had used an asthma inhaler twice a day for many years and since the implementation of the LTN they had not used it more than every couple of weeks. No public health data about severity of asthma symptoms in the area is available.

Much of the discussion during focus groups centred on the limitation on travel choices available to disabled people. For example, people with back injuries may find it painful and uncomfortable to use buses or those with walking aids may be unable to get to a bus stop without places to stop and rest. Once at the bus stops, several people remarked that the bus stop seating was not suitable for them to recover and wait for the bus.

Carers also described situations where friends who may have assisted with caring duties previously find the journey by car more difficult now. Attendees also described circumstances where ride hailing services or taxis cancelled journeys at short notice when they had been booked in advance. The team held a meeting with a representative of London Cab Drivers and there seemed to be a misunderstanding that drivers could not enter the area at all. This was corrected in the meeting and conveyed to back to black cab drivers.

Anxiety around the time it might take to return home was cited by some as a factor in making choices to leave the area to social journeys.

Carers described that in some cases therapists include travel time within their appointment, meaning that therapy time has been reduced. The way care costs are funded in some cases means that families are given a care budget to source services. This means providers can deliver the service subject to their own terms and conditions.

In some cases, the initial changes were described as confusing for some people who may have learning difficulties or autistic spectrum disorders. Bowes Primary School has been engaged with on the scheme and is the local SEN provision for ASD's.

Some disabled people with complex needs undertake a significant number of journeys for appointments and to regular locations such as school. They may use a car in order to transport a wheelchair, complex mobility aid or medical equipment. For people with complex needs, journeys in the car can be very uncomfortable or distressing. Whilst the journeys may be considered short in distance for a person who is not disabled, shorter journeys in distance are likely to be disproportionately impacted by the scheme.

In order to better understand the experience of disabled people, the Programme Director and Project Manager visited the home of a disabled resident who had been involved in several events relating to the scheme. During the visit he was able to indicate to them the day to day challenges in moving around the area.

Mitigating actions to be taken
<p>If any changes to the scheme or its removal is recommended, consideration should be given to residents who may have challenges adapting to changes in their surroundings.</p> <p>Consider installing benches or other seating in locations around the area to allow people to stop and rest.</p> <p>Consider installing suitable seating near bus stops to allow places to disabled people to wait for the bus in a more comfortable way.</p> <p>Consider long term monitoring of public health outcomes.</p> <p>Consider a review of how information is conveyed to drivers about access to the zone.</p> <p>Minimise further changes to avoid confusion.</p> <p>Monitor traffic impact to ascertain the actual impact on traffic flow and journey times.</p> <p>An exemption scheme should be explored and considered for deployment to mitigate the impact on shorter journeys which may be undertaken by disabled people and the people providing care for them.</p>

Gender Reassignment
<p>This refers to people who are proposing to undergo, are undergoing, or have undergone a process (or part of a process) to reassign their sex by changing physiological or other attributes of sex.</p>
<p>Will this change to service/policy/budget have a differential impact [positive or negative] on transgender people?</p>
<p>Please provide evidence to explain why this group may be particularly affected.</p>
<p>It is considered that this scheme is unlikely to have a disproportionate impact on grounds of Gender Reassignment and no issues of note were raised during the experimental period from that group.</p>
Mitigating actions to be taken
<p>N/A</p>

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Marriage and Civil Partnership

Marriage and civil partnerships are different ways of legally recognising relationships. The formation of a civil partnership must remain secular, where-as a marriage can be conducted through either religious or civil ceremonies. In the U.K both marriages and civil partnerships can be same sex or mixed sex. Civil partners must be treated the same as married couples on a wide range of legal matters.

Will this change to service/policy/budget have a **differential impact [positive or negative]** on people in a marriage or civil partnership?

Please provide evidence to explain why this group may be particularly affected

It is considered that this scheme is unlikely to have a disproportionate impact on grounds of Marriage and Civil partnership and no issues of note were raised during the experimental period from that group.

Mitigating actions to be taken

N/A

Pregnancy and maternity

Pregnancy refers to the condition of being pregnant or expecting a baby. Maternity refers to the period after the birth and is linked to maternity leave in the employment context. In the non-work context, protection against maternity discrimination is for 26 weeks after giving birth, and this includes treating a woman unfavourably because she is breastfeeding.

Will this change to service/policy/budget have a **differential impact [positive or negative]** on pregnancy and maternity?

Please provide evidence to explain why this group may be particularly affected

Evidence base

The birth rate in Enfield was 15.1 births per 1000 people in 2016, approximately 28% above the national average that year of 11.8, though on par with the Outer London average of 15.0 per 1000 people. Therefore, there are statistically more likely to be pregnant and maternal people who reside in Enfield than the national average, however this is near equal to Outer London.

Differential impact assessment

Reduction to through-traffic is likely to reduce conflict between different road users overall. This will create a safer environment, particularly for pregnant people and parents with infants and/or young children. This will also provide benefits to pedestrians travelling with prams who require additional time to navigate curbs when crossing the street. Quieter streets also mean that those traveling with prams can use the roadway if they choose to circumvent blockages across the pavement (e.g. if the pavement is too narrow to navigate due to bins).

The implementation of the Quieter Neighbourhood scheme may negatively impact on car journey times for a portion of those who are pregnant and with parents with infants and/or young children who may prefer the use of door-to-door transport services such as private cars, taxis or Dial-a-Ride.

Improvements in air quality are likely to disproportionately benefit infants and children who are more vulnerable to breathing in polluted air than adults due to their airways being in development, and their breathing being more rapid than adults.

Expectant mothers and mothers who have recently given birth may have increased numbers of medical appointments. Where this travel is made by car it may take slightly longer, but where the journey is walked or cycled through the experimental area, it is likely to be less polluted and have reduced volumes of traffic. The Royal college of Midwives recommends exercise such as brisk walking for new and expectant mothers. Furthermore, exposure to poor air quality while at home for long periods should reduce over time as a result of lower traffic volumes inside the area.

The Consultation Analysis showed that across all genders, the proportions of responses from people pregnant or with young children stating they had experienced a 'somewhat negative' or 'very negative' impact were very similar to those who were not pregnant or with young children.

Mitigating actions to be taken

Continued monitoring of journey times.

Race

This refers to a group of people defined by their race, colour, and nationality (including citizenship), ethnic or national origins.

Will this change to service/policy/budget have a **differential impact [positive or negative]** on people of a certain race?

Please provide evidence to explain why this group may be particularly affected

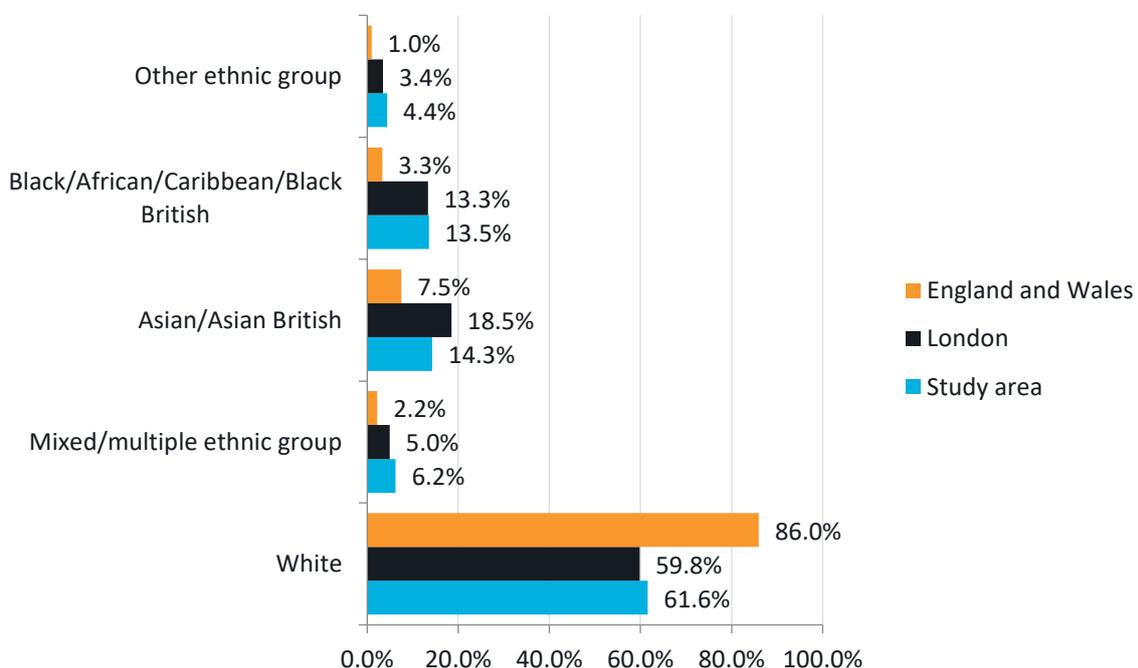
Evidence base

Figure 8 presents the population of Bowes ('Study area') by ethnicity. Based on Census 2011 data, 61.6% of Bowes residential population is 'White', making it the most common ethnicity in the area. This is very similar to the average across London, with Bowes being 1.8% higher than the average across London of 59.8%.

The second most populous ethnicity is 'Asian/Asian British', of which 14.3% of the population identify. This is only 0.8% higher than the next most populous ethnicity 'Black/African/Caribbean/Black British' at 13.5% of the population.

Within the Bowes ward 23.3% of households do not have English as a first language – with Polish, Turkish, Greek, and Gujarati comprising the most common languages otherwise spoken.

Figure 8: Population of Study area by ethnicity (versus London; England and Wales)

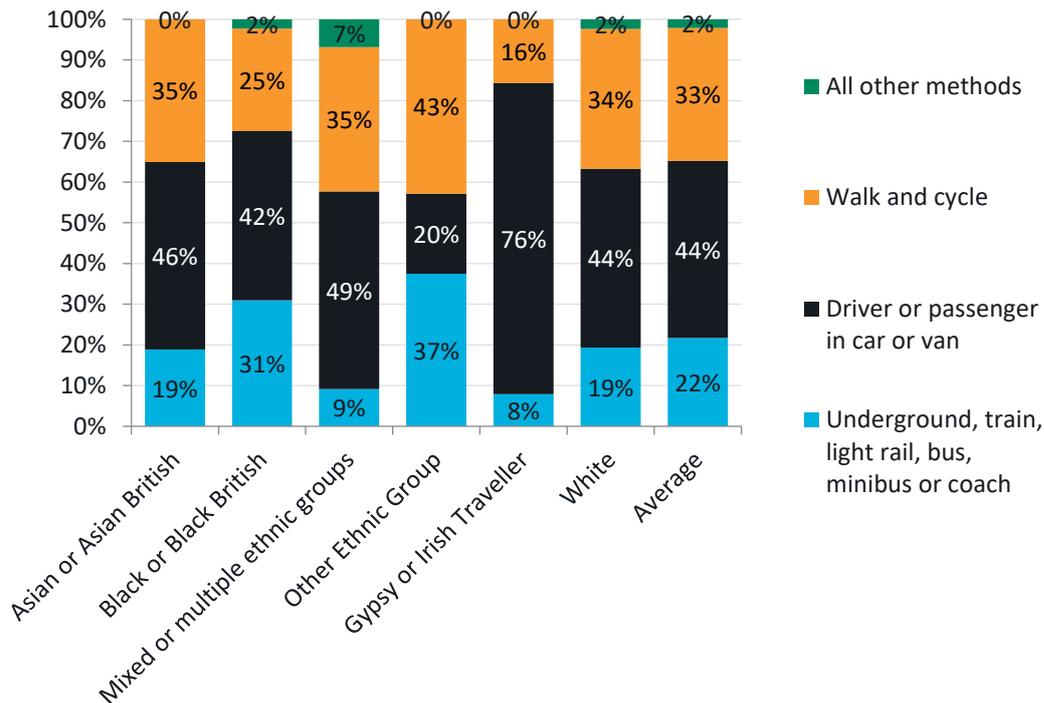


Source: UK Census 2011

Based on average travel modes from the LTDS data presented in Figure 9, in Enfield all ethnic groups except for 'Other Ethnic Group' are more than likely to drive or be driven in a car or van than use any other mode. 'Other Ethnic Group', 'Asian or Asian British' and 'Mixed or multiple ethnic groups' are most likely to walk and cycle, with

a mode share of between 35 and 43%. It is important to note that the sample size of LTDS data is small, therefore these percentages may not accurately reflect the travel behaviours of each ethnic group.

Figure 9: Mode share by ethnicity in Enfield



Source: LTDS (2018/19)

Differential impact assessment

The proposed measures are likely to improve conditions for pedestrians and cyclists, by reducing conflicts with motorised vehicles. This will disproportionately benefit ethnic groups who are disproportionately likely to walk ('Asian or Asian British', 'Mixed or multiple ethnic groups' and 'Other Ethnic Groups'), as well as 'Black and Black British' and 'Other Ethnic Groups' who are disproportionately likely to use public transport (as every public transport journey starts or ends on foot or cycle). On the contrary, this scheme may cause increased congestion in the short to medium term on arterial roads as traffic is reassigned from minor roads within Bowes. As such, these impacts may disproportionately impact 'Black and Black British' and 'Other Ethnic Groups' who are disproportionately likely to use public transport.

Apart from those self-identifying as 'Other Ethnic Groups', car usage in Enfield is high, particularly for 'Gypsy or Irish Travellers'. For this reason, the scheme may disproportionately affect this ethnic group – such as causing slightly longer journey times for trips made by car. This could have some financial impacts such as

increased cost of travel and increased commuting times. However, the delivery of this scheme has the potential to offer genuine alternatives to car journeys and reduce the reliance on cars within this ethnic group.

It is important to note that reducing car dominance and car usage is a key aspect of Enfield's broader transport strategy, and as such it is acknowledged that this disproportionate impact is necessary to facilitate a shift across Enfield to more sustainable, healthy and equitable modes.

The Consultation Analysis highlighted that the proportions of responses from Mixed, Asian and Black respondents was lower than might be expected from the 2011 Census, with Black respondents particularly under-represented (only 1% responding to the consultation identified as Black vs 14% identifying as Black the Census 2011).

The Consultation Analysis also show that a higher proportion of responses from people from Asian backgrounds said that the scheme had 'very negatively' or 'somewhat negatively' impacted them (70%) than average (51%). The White ethnic group showed the highest level of positive impacts, with 28% of responses stating that the schemes had impacted them 'very positively' or 'somewhat positively'. Around half of the Asian respondents were also disabled with an average age of 50 yrs.

Consultation and engagement communications materials have been offered in several languages on request.

There is often poor awareness of local walking and cycling schemes amongst those who rarely walk, cycle or travel outside their immediate area, particularly in those who do not speak English at all, or it is not their first language.

Mitigating actions to be taken

Promote active travel to non-English speaking communities.

It is recommended that Enfield officers work internally with the Gypsy Roma Traveller (GRT) lead to discuss the unique characteristics of this ethnic group. Consideration should be given as to how schemes could assist with reducing car usage and encouraging modal shift.

Continue to monitor bus journey times using TfL data, and consider mitigation measures if there is an impact.

Religion and belief

Religion refers to a person’s faith (e.g. Buddhism, Islam, Christianity, Judaism, Sikhism, Hinduism). Belief includes religious and philosophical beliefs including lack of belief (e.g. Atheism). Generally, a belief should affect your life choices or the way you live.

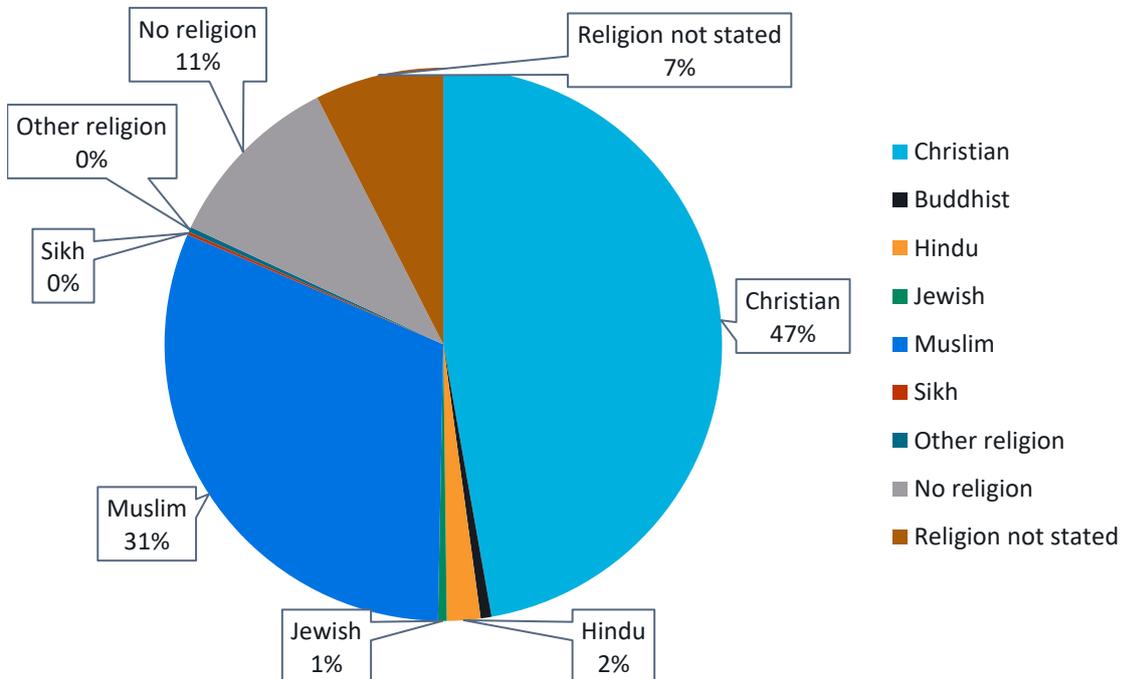
Will this change to service/policy/budget have a **differential impact [positive or negative]** on people who follow a religion or belief, including lack of belief?

Please provide evidence to explain why this group may be particularly affected.

Evidence base

Figure 10 presents Census 2011 data on religion and belief in Enfield. Enfield is a predominantly Christian borough, with 47% of the population identifying as Christian. 23% of people do not follow a religion or did not state a religion. 17% of residents identify as Muslim, making it the second most common religion or belief. Enfield is also home to smaller proportions of residents compared to the other faiths including Buddhist (0.6%), Hindu (3.5%), Jewish (1.4%) and Sikh (0.3%).

Figure 10: Breakdown of religion/belief within Enfield



On certain dates and at certain times of the day, religious services and observances can have an impact on travel patterns. Places of worship and faith-based schools are major destinations for large populations from different groups. There are several places of worship in the Bowes area which have been identified and outlined below. Access to these places of worship will be fully maintained, but the route by motor

vehicle may change due to the restrictions in place. It is acknowledged that the route taken by worshippers accessing places of worship outside the Bowes area may also change.

Palmers Green & Southgate Synagogue

Anyone now arriving to the Synagogue by car from the York Road is prevented from driving to the site up Brownlow Road. However, there is currently limited parking provision at the Synagogue (3 vehicles approx.) and two bus stops are located outside the Synagogue. There is no additional nearby parking apparent and the residential premises nearby have significant crossovers. The scheme should also reduce northbound bus journey times due to the reduction in through traffic.

St Michael at Bowes

Located at junction at Palmerston Road and Whittington Road. Reasonable off-road parking available. Attendees by car now have to leave using the same route as when arriving to the church, as they would be unable to exit from Palmerston Road onto the Westbound North Circular. This may increase some journey times for those travelling by car.

Trinity-at-Bowes Methodist Church

Located on Palmerston Road and adjacent to North Circular. TfL made recent changes as part of which they have prohibited turning left into Palmerston Road when travelling Westbound on A406. There is a reasonable parking provision at the church, and so whilst leaving the church would present a slightly longer journey time, the arrival would be swifter owing to less traffic attempting to join the North Circular from Palmerston Road.

Riverside Community Church

Only on-street parking apparent. Positioned near the end of Russell Road. Attendees by car now have to leave using the same route as when arriving to the church, as they would be unable to exit from Palmerston Road onto the Westbound North Circular.

Elim Pentecostal Church

Only on-street parking apparent. Positioned near the end of Russell Road. Attendees by car now have to leave using the same route as when arriving to the church, as they would be unable to exit from Palmerston Road onto the Westbound North Circular.

Nanak Darbar North London

Only on-street parking apparent. Positioned in High Road New Southgate. From the centre of the Quieter Neighbourhood is around a one-mile journey.

St Marys Church

Limited on street parking. Trinity Road has a historic modal filter in place which prevents through-traffic.

Differential impact assessment

Improving conditions for walking and cycling is likely to positively benefit those who follow a religion and regularly attend places of worship. Destinations such as this are generally local and have large walking and cycling catchments. Although it is acknowledged that this scheme is likely to increase journey times for some worshippers who drive to their place of worship, which remain accessible via car as prior to the implementation of the scheme.

Religious commitments can sometimes leave little time for sporting activities, for example, as young Asian Muslims attend mosque after school, they do not have much leisure time as those from non-religious backgrounds⁸. Therefore, creating environments that enable and encourage people to cycle more often can lead to exercise being built into their day, rather than having to go out of their way to achieve it.

The Consultation Analysis highlighted that there was potential under-representation of those with a religious belief in the consultation period. The proportion of people who identified as having no religion (and the proportion of those not answering the question) is a much higher percentage than what was captured within the 2011 Census. The proportion of responses from Christians, Hindus and Muslims are all lower than would be expected from the 2011 Census data. This may be affected by ward-specific changes since the Census was collected in 2010. However, no comments of significance relating to religion or places of worship were received in the consultation responses.

Mitigating actions to be taken

Any future engagement should target places of worship that were under-represented within the initial consultation period.

Sex

Sex refers to whether you are a man or woman.

Will this change to service/policy/budget have a **differential impact [positive or negative]** on men or women?

Please provide evidence to explain why this group may be particularly affected.

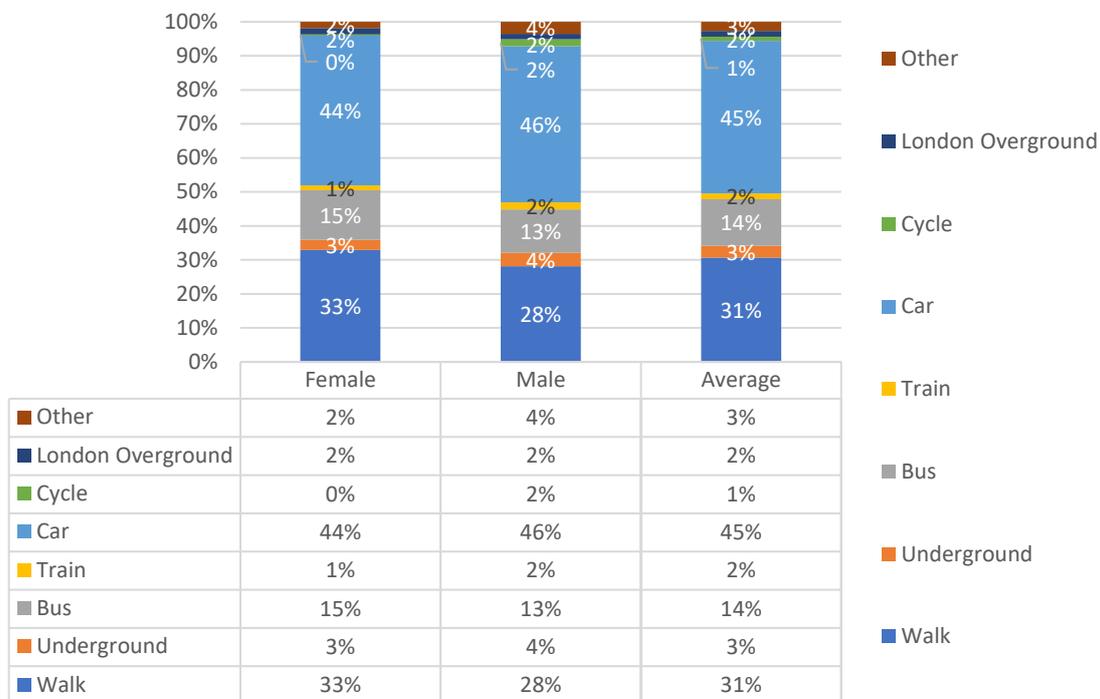
⁸ <http://content.tfl.gov.uk/barriers-to-cycling-for-ethnic-minorities-and-deprived-groups-summary.pdf>

Evidence base

According to the Census 2011, in Enfield 48.9% of residents identify as male and 51.1% as female. This is very similar to the percentage split for London as a whole (49% male, 51% male).

Figure 11 presents the mode share by sex in Enfield. Walking is the most commonly used type of transport by females, making up 33% of all trips. This is 5% higher than males. On average, females drive slightly less than males, making up 44% of trips vs 46% with males. Females are also use the bus more than males (15% vs 13%).

Figure 11: Mode share by sex in Enfield



Source: LTDS (2016/17, 2017/18 and 2018/19)

Across Greater London, research undertaken by TfL shows walking is the most commonly used type of transport by females (95% walk at least once a week). Females are also more likely to use buses than males (62% compared with 56%) but are less likely to use other types of transport including the Tube (38% women compared with 43% males).

Female Londoners take more trips on a weekday than male Londoners, 2.5 compared to 2.3⁹. This pattern however is reversed amongst older adults, with older female Londoners taking fewer weekday trips than older male Londoners, 2.0

⁹ <https://content.tfl.gov.uk/travel-in-london-understanding-our-diverse-communities-2019.pdf>

compared to 2.2. It is important to recognise that females are more likely than males to be travelling with buggies and/or shopping, and this can affect transport choices.

Females aged 17 or over who are living in London are less likely than males to have a full driving licence (58% compared with 72%) or have access to a car (63% of all females compared with 66% of all males). These factors are likely to be related to the frequency of car use as a driver.

79% of females in London report being able to ride a bike, compared with 91% of males¹⁰.

Differential impact assessment

Females are less likely to drive in Enfield and are more likely to walk than males. They are also less likely to cycle. Improvements made to the safety and convenience of cycling to reduce the barriers to cycling disproportionately faced by females and increase the percentage of females choosing to cycle.

Females are more likely to use the bus than males. As many public transport journeys start or end on foot or cycle, improvements in safety and convenience to these networks will improve their access to public transport services. On the contrary, this scheme may cause increased congestion in the short to medium term on arterial roads as traffic is reassigned from minor roads within Bowes. As such, these impacts may disproportionately impact females who use buses more often than males.

Increasing resident access to favourable cycling conditions is likely to disproportionately benefit females, particularly due to higher number of trips they make daily compared to males, as well as their role in taking children to and from educational and recreational facilities. The intervention would reduce a significant barrier to cycling.

Following the murder of Sarah Everard, a national movement highlighted the concerns of women and how safe they feel at particular times of the day, notably at night. Reduced volumes of motor vehicle traffic create a significantly quieter environment which can heighten the apprehension of threat. This perception particularly impacts women making trips by foot or bicycle, as part of a public transport journey or a trip on its own. There is some concern that this perceived risk impacts women's willingness to make trips by active travel modes after dark. In contrast, an academic report¹¹ however suggested a positive improvement in the measured crime rate after introducing low traffic neighbourhoods. The report examined the impact on street crime of introducing low traffic neighbourhoods in Waltham Forest which was associated with a 10% decrease in total street crime,

¹⁰ <http://content.tfl.gov.uk/attitudes-to-cycling-2014-report.pdf>

¹¹ <https://findingspress.org/article/19414-the-impact-of-introducing-a-low-traffic-neighbourhood-on-street-crime-in-waltham-forest-london/>

with significant decreases in violence and sexual offences specifically, and this effect increased with a longer duration since implementation.

Mitigating actions to be taken

Continue to monitor bus journey times using TfL data, and consider mitigation measures if there is an impact.

Continue to engage with the Metropolitan Police and monitor crime and anti-social behaviour within the QN area since implementation.

Provide reassurance messages around personal safety, crime and disorder

Sexual Orientation

This refers to whether a person is sexually attracted to people of the same sex or a different sex to themselves. Please consider the impact on people who identify as heterosexual, bisexual, gay, lesbian, non-binary or asexual.

Will this change to service/policy/budget have a **differential impact [positive or negative]** on people with a particular sexual orientation?

Please provide evidence to explain why this group may be particularly affected.

It is considered that this scheme is unlikely to have a disproportionate impact on grounds of Sexual Orientation.

No matters were raised during the consultation survey.

Mitigating actions to be taken

N/A

Socio-economic deprivation

This refers to people who are disadvantaged due to socio-economic factors e.g. unemployment, low income, low academic qualifications or living in a deprived area, social housing or unstable housing.

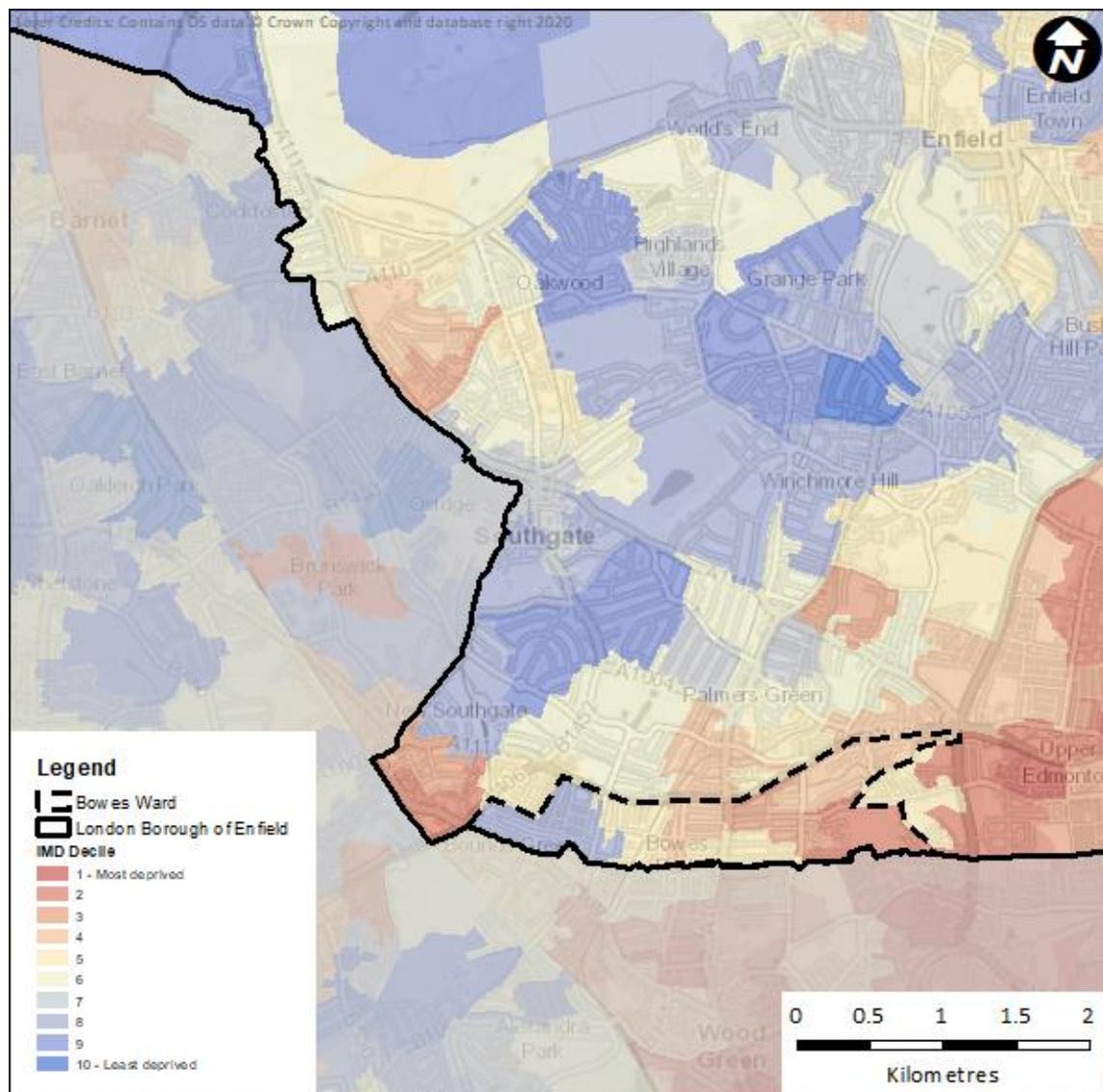
Will this change to service/policy/budget have a **differential impact [positive or negative]** on people who are socio-economically disadvantaged?

Please provide evidence to explain why this group may be particularly affected.

Evidence base

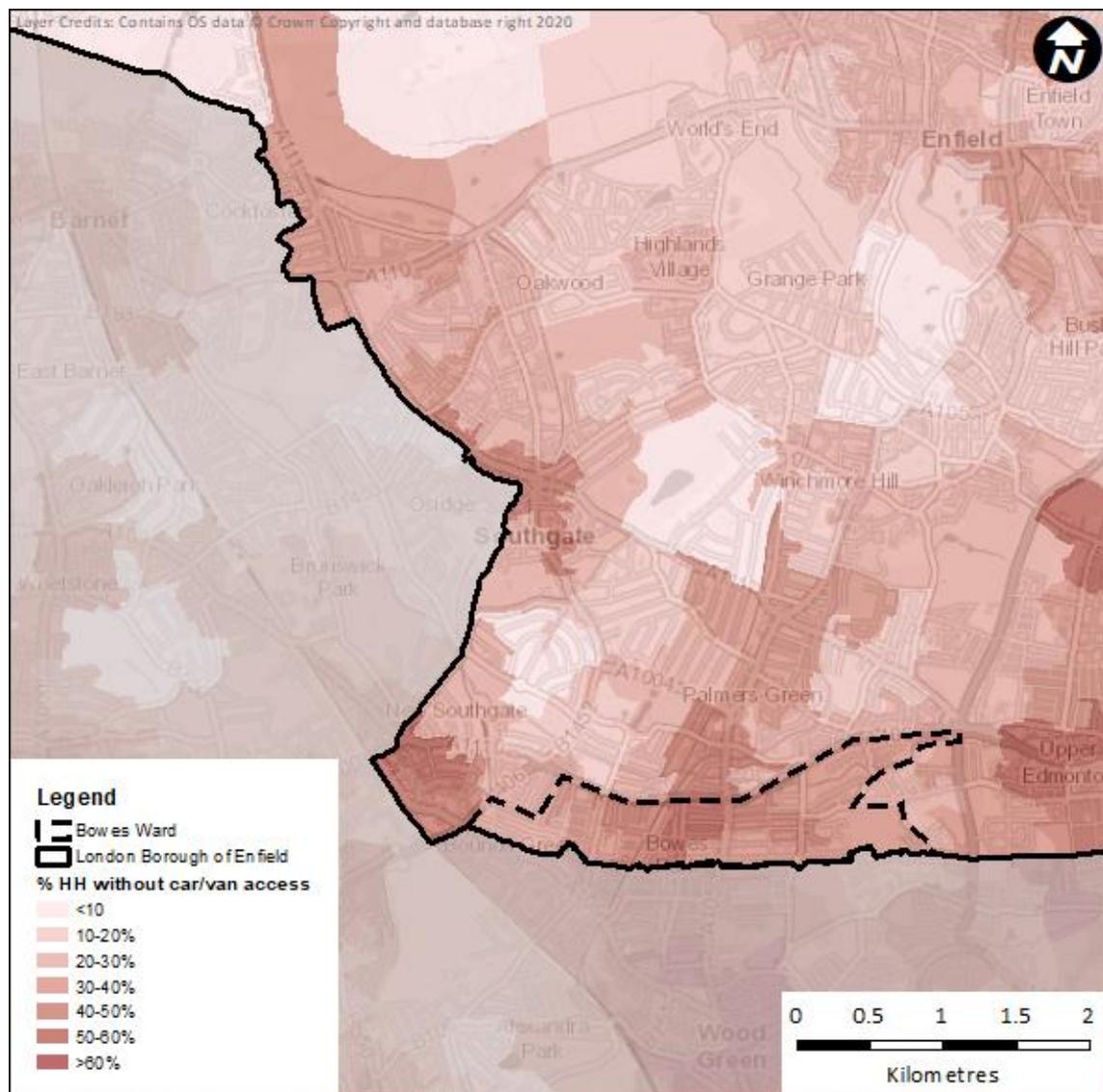
As outlined within the Enfield Transport Plan (2019), Enfield is one of the most deprived Outer London boroughs. Enfield is now the 12th most deprived London borough, whereas it was 14th in 2010. The Borough's overall ranking in the 2015 Indices of Multiple Deprivation remained unchanged from 2010 at 64th most deprived out of 326 English local authorities

Figure 12 presents a visual representative of deprivation across Enfield. Bowes sits within the southwest of Enfield. In broad terms the eastern areas of Enfield have more levels of deprivation, whereas the west and northwest areas have the least. However, Figure 12 shows that the area of interest has a diverse spread of deprivation levels – with the western portion of the area being one of the least deprived within the borough, and the rest of the scheme sitting between 5 and 3 on the IMD Decile, making it some of the most deprived.

Figure 12: Deprivation in Enfield


Data source: Department for Communities and Local Government 2019

Figure 13 presents the percentage of households without access to a car or van. Across the borough, areas with lower access to a car or van broadly correlate with indices of deprivation. This is reflected within the scheme area, as there are lower levels of access to car/van in the eastern portion – which is also the area with the highest levels of deprivation. The rest of the scheme areal has average levels of access to a car or van at around 30-50% without access.

Figure 13: Percentage of Enfield Households Without Access to a Car or Van


Data source: UK Census 2011

TfL research shows that low income Londoners also tend to travel less frequently than Londoners overall – 2.2 trips per weekday on average compared to 2.4 among all Londoners. Among this group, a greater proportion of journeys are completed for the purposes of shopping and personal business: 31% for Londoners with household income of less than £20,000 compared with 22% all Londoners (in line with 31% and 22% observed in 2013/14)¹².

Londoners in lower income households are the most likely equality group to use the bus at least weekly; seven in 10 Londoners in households with an annual income of less than £20,000 do so (69%).

Differential impact assessment

While Bowes is not one of the most deprived areas in Enfield, nor does it have the highest levels of households without access to a car/van, there is still a significant percentage of residents in this category. Cycling and walking present a low-cost form of transport and can connect people safely and quickly to local centres, as well as to stations as part of multi-modal longer distance journeys (e.g. into inner London). As such, the Quiet Neighbourhood improvements to Bowes will benefit cycling and walking and therefore are likely to disproportionately benefit those without access to cars.

Primary roads are more likely to experience the impacts of reassigned traffic in the short term. These roads may have pockets of dense housing on them and so the impact on the residents needs to be considered.

People on lower incomes are less likely to be able to afford to adapt to the measures (e.g. buying a new bike), therefore may not experience the full benefits of the scheme compared to those from higher income backgrounds. This may mean that those on higher incomes disproportionately benefit from the scheme.

Mitigating actions to be taken.

It is recommended that the benefits of this scheme and active travel are advertised, with a specific focus on reaching those with lower households' incomes.

Specific consideration should be given to where traffic is likely to be reassigned to, to review the impact on adjacent properties when reviewing traffic data. This includes consideration for impact on buses which people from more disadvantaged areas are more likely to use more frequently.

Encourage lower income households to make use of free bike repair services, such as Dr Bike, and opportunities to access affordable cycles, such as second-hand bike markets.

SECTION 4 – Monitoring and Review

How do you intend to monitor and review the effects of this proposal?

Who will be responsible for assessing the effects of this proposal?

¹² <https://content.tfl.gov.uk/travel-in-london-understanding-our-diverse-communities-2019.pdf>

The project aims to improve conditions for those already walking and cycling and also to help make non-car transport options more attractive by them safer, more accessible, and ultimately, more convenient. It is acknowledged that these improvements come at an ongoing inconvenience to drivers. The altering of traffic flow will add some level of complication to trips and will increase the length of many car journeys made through the study area. However, access to all locations is maintained. This impact will be felt disproportionately by individuals who rely upon cars as their primary or only mode of transport, which is common for elderly or disabled people and certain ethnic groups. It is important to carry out quality consultation with those who rely upon cars to minimise any adverse impacts.

The monitoring and evaluation for this project is critical for many of the recommendations set out in this EqIA. Alongside consultation and engagement, these are the primary means of monitoring benefits and disbenefits of the project. Activities include monitoring of traffic volumes including bus journey times, air and noise quality, and engagement with emergency services. Consultation and engagement activities are planned to reflect relevant recommendations in this EqIA. The outcomes of monitoring, consultation and engagement will help to inform whether the project has been successful in achieving its objectives and in identifying, and if possible mitigating, the potential inequalities raised in this EqIA.

This EqIA is not a static document will continue to be developed during the course of this project.

SECTION 5 – Action Plan for Mitigating Actions.

Protected Characteristic	Identified Issue	Action Required/Comments	Lead officer	Timescale /By When	Costs	Review Date/ Comments
Age	Under-representation of younger people in consultation responses	Any future engagement should target those aged under 40 (and especially under 30) who have been highly under-represented, to gain better insights into whether there are any specific disproportionate impacts (either positive or negative) on younger people. This could be achieved through measures such as targeted advertising on social media, or at locations frequented by the younger generation such as leisure centres or gyms.	██████████ ██████████	During-scheme monitoring	Included within scheme budget	11/11/21 Further engagement opened for 21 days in November 2021
Age	Traffic reassignment onto main roads may delay bus services, affecting younger people in particular	Continue to monitor bus journey times using TfL bus journey time data, and consider mitigation measures if there is an impact.	██████████ ██████████	During-scheme monitoring	Included within scheme budget	11/11/21 monitoring plan examining bus journey times
Age Disability	Longer journey times for people who rely on private cars, taxis or Dial-a-Ride.	Investigate the impact on local private hire vehicle and taxi with respect to journey times, cost and accessibility.	██████████ ██████████	During-scheme monitoring	Included within scheme budget	21/07/21 Meeting held with Black cab representative

Disability	Consultation showed that disabled people had concerns about reaching locations such as hospitals, pharmacies and dentists within the area.	Identify travel patterns to local hospitals to monitor whether the scheme is having a disproportionate impact on those who make regular essential trips by car. This could be reviewed via focus groups with disabled residents.	██████████ ██████████	During-scheme monitoring	Included within scheme budget	15/06/21 Focus groups held, updated text.
Disability	Some children may experience discomfort with the changes to the local environment especially where this may cause a change in route.	Maintain contact with Bowes Primary School to discuss any changes and to review impacts.	██████████ ██████████	During-scheme monitoring	Included within scheme budget	11/11/21 Scheme maintained in current form with minimal changes
Disability	Changes or removal of the scheme may present challenges for people with certain disabilities.	If any changes to scheme or its removal is recommended, consideration should be given to residents who may have challenges in their surroundings.	██████████ ██████████	During-scheme monitoring	Included within scheme budget	11/11/21 Scheme maintained in current form with minimal changes
Race	Consultation analysis highlighted that the proportions of responses from	Any future engagement to target community organisations.	██████████ ██████████	During-scheme monitoring	Included within scheme budget	11/11/21 Further engagement opened for

	Mixed, Asian and Black respondents was lower than might be expected from the 2011 Census.					21 days in November 2021
Race	Car usage in Enfield is high, particularly for 'Gypsy or Irish Travellers'. For this reason, the scheme may disproportionately affect this ethnic groups – such as causing longer journey times for trips made by car.	It is recommended that Enfield officers work internally with the Gypsy Roma Traveller (GRT) lead to discuss the unique characteristics of this ethnic group. Consideration should be given as to how schemes could assist with reducing car usage and encouraging modal shift.	██████████ ██████████	During-scheme monitoring	Included within scheme budget	11/11/21 GRT accommodation needs assessment reviewed. No issues. Specific mode shift targeting as part of broader programme.
Race	Traffic reassignment onto main roads may cause short term delays to bus services, affecting 'Other Ethnic Groups' in particular.	Continue to monitor bus journey times using TfL data, and consider mitigation measures if there is an impact.	██████████ ██████████	During-scheme monitoring	Included within scheme budget	11/11/21 Monitored as part of monitoring plan

Religion and belief	Consultation analysis highlighted that there was potential under-representation of those with a religious belief in the initial consultation period.	Any future engagement should target places of worship that were under-represented within the initial consultation period.	████████ ████████	During-scheme monitoring	Included within scheme budget	11/11/21 Review of responses did not yield any concerns. Further consultation period open.
Religion and belief	The scheme is likely to increase journey times for some worshippers that live within the QN	Any future engagement should target places of worship to review the specific needs of their religious community.	████████ ████████	During-scheme monitoring	Included within scheme budget	11/11/21 Review of responses did not yield any concerns. Further consultation period open.
Sex	Traffic reassignment onto main roads may cause short term delays to bus services, affecting females in particular	Continue to monitor bus journey times using TfL data, and consider mitigation measures if there is an impact.	████████ ████████	During-scheme monitoring	Included within scheme budget	11/11/21 Monitored as part of monitoring plan

Sex	Public perception of personal security due to the reduced 'passive surveillance' of passing motor traffic.	Continue to engage with the Metropolitan Police and monitor crime and anti-social behaviour within the QN area since implementation.	████████ ████████	During-scheme monitoring	Included within scheme budget	11/11/21 Monitored as part of monitoring plan.
Socio-economic deprivation	People on lower incomes are less likely to be able to afford to adapt to the measures (e.g. buying a new bike).	Encourage lower income households to make use of free bike repair services, such as Dr Bike, and opportunities to access affordable cycles, such as second hand bike markets.	████████ ████████	During-scheme monitoring	Included within scheme budget	11/11/21 A number of Dr Bike sessions and bike markets held since scheme introduced
Socio-economic deprivation	Reassignment of motor traffic may disproportionately impact those on lower incomes who are more likely to live on busier roads.	Specific consideration should be given to where traffic is likely to be reassigned to, to review the impact on adjacent properties when reviewing traffic data. This includes consideration for impact on buses which people from more disadvantaged areas are more likely to use more frequently.	████████ ████████	During-scheme monitoring	Included within scheme budget	11/11/21 Traffic impact monitored as part of plan.

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Enfield Equality Impact Assessment (EqIA)

Introduction

The purpose of an Equality Impact Assessment (EqIA) is to help Enfield Council make sure it does not discriminate against service users, residents and staff, and that we promote equality where possible. Completing the assessment is a way to make sure everyone involved in a decision or activity thinks carefully about the likely impact of their work and that we take appropriate action in response to this analysis.

The EqIA provides a way to systematically assess and record the likely equality impact of an activity, policy, strategy, budget change or any other decision.

The assessment helps to focus on the impact on people who share one of the nine different protected characteristics as defined by the Equality Act 2010 as well as on people who are disadvantaged due to socio-economic factors. The assessment involves anticipating the consequences of the activity or decision on different groups of people and making sure that:

- unlawful discrimination is eliminated
- opportunities for advancing equal opportunities are maximised
- opportunities for fostering good relations are maximised.

The EqIA is carried out by completing this form. To complete it you will need to:

- use local or national research which relates to how the activity/ policy/ strategy/ budget change or decision being made may impact on different people in different ways based on their protected characteristic or socio-economic status;
- where possible, analyse any equality data we have on the people in Enfield who will be affected e.g. equality data on service users and/or equality data on the Enfield population;
- refer to the engagement and/ or consultation you have carried out with stakeholders, including the community and/or voluntary and community sector groups and consider what this engagement showed us about the likely impact of the activity/ policy/ strategy/ budget change or decision on different groups.

The results of the EqIA should be used to inform the proposal/ recommended decision and changes should be made to the proposal/ recommended decision as a result of the assessment where required. Any ongoing/ future mitigating actions required should be set out in the action plan at the end of the assessment.

The completed EqIA should be included as an appendix to relevant EMT/ Delegated Authority/ Cabinet/ Council reports regarding the service activity/ policy/ strategy/ budget change/ decision. Decision-makers should be confident that a robust EqIA has taken place, that any necessary mitigating action has been taken and that there are robust arrangements in place to ensure any necessary ongoing actions are delivered.

SECTION 1 – Equality Analysis Details

Title of service activity / policy/ strategy/ budget change/ decision that you are assessing	Fox Lane Area Quieter Neighbourhood
Lead officer(s) name(s) and contact details	Richard Eason
Team/ Department	Place – Healthy Streets
Executive Director	Sarah Cary
Cabinet Member	Leader of the Council Cllr Caliskan
Date of EqIA Commencement	July 2020
Last Updated	25th January 2022

SECTION 2 – Summary of Proposal

Please give a brief summary of the proposed service change / policy/ strategy/ budget change/project plan/ key decision

Please summarise briefly:

What is the proposed decision or change?

What are the reasons for the decision or change?

What outcomes are you hoping to achieve from this change?

Who will be impacted by the project or change - staff, service users, or the wider community?

Enfield Council has heard concerns from residents and Ward Councillors in the Fox Lane area for many years about the impact of motor traffic passing through the area. A conversation with the community on potential solutions started back in 2014 as part of the then Cycle Enfield programme. However, these discussions were paused whilst there was a focus on delivery of the major Cycle Enfield project.

This work was re-commenced in 2018 with a trial where roads were not closed but planters were placed at junctions to form a narrowing of the road in an attempt to discourage people from cutting through the area and reduce vehicle speeds. At the time of this implementation, a commitment to the community was made that if the trial was not successful then alternative approaches would be trialled. The trial commenced in December 2018 and was removed in April 2019 after the impact on traffic volumes and vehicle speeds were not consistent with the objectives of the trial.

The current trial is delivering on this commitment to the community to continue the work that was initiated through earlier engagement. The project now forms part of the Enfield Healthy Streets programme which is delivering projects to help enable more walking and cycling across Enfield. The project is delivered in the context of local, regional and national policies which seek to respond to the climate emergency, reduce traffic congestion and increase levels of physical activity, and post-pandemic, to enable a green recovery. Nationally the government has committed to achieving net zero carbon emissions by 2050 and is supporting local authorities to encourage sustainable transport through its Active Travel Fund and the 2020 national walking and cycling strategy, Gear Change. The foundations for this project are the Healthy Streets indicators adopted in the Mayor's Transport Strategy 2018.

Building on the project's history and wider policy context, the project has the following high level objectives:

- Create healthier streets in the Fox Lane area in line with the Healthy Streets indicators
- Significantly reduce the volume of through motor traffic on minor roads within the project area
- Enable a longer-term increase in the levels of walking and cycling within and through the project area.

Enfield Council has implemented various restriction points with the intention to deny a route to motorised through traffic along Fox Lane, Meadway and connecting roads.

Fox Lane, Meadway and their connecting roads are unclassified roads. They are typically narrow and have close-fronting homes. Removing through traffic within these neighbourhoods establishes more attractive conditions for walking and cycling within the neighbourhood, with modal filters for cycling at the closure points further boosting the convenience of cycling over car use for local trips. The placement of filters maintains access for buses.

These proposals follow engagement with London Fire Brigade, London Ambulance Service and Metropolitan Police as well as Enfield Waste Collection services. Camera controls, rather than a physical barrier, are included on Meadway, Fox Lane and Conway Road to avoid hindering emergency access in and out of the area to/from the south and reducing response times. Where closure points and

islands are placed, the removal of some adjacent kerbside parking/ loading space was required so that parking does not restrict access around narrowed sections of road or occupy space needed to be left clear for drivers to turn vehicles around.

The proposals are supported by experimental traffic orders so that the Council can assess their impact further, consider representations and make amendments if necessary. Experimental traffic orders allow for schemes to be implemented and a consultation to take place whilst they are live. In contrast, permanent Traffic Regulation Orders cannot easily be amended or removed after implementation. This allows a true consultation to take place in respect of the actual impact. During the experiment, changes can be made to the measures in place and the law requires further consultation following changes before any scheme can be converted to a permanent scheme. In November 2020, the Conway Road filter was converted to a camera enforced filter in a direct response to feedback from emergency services.

The effects of the implementation are monitored throughout the experimental phase. The authority does not currently have data specifically for people passing through the project area and any protected characteristics they may have; so, the ward profiles for the Southgate, Southgate Green, Winchmore Hill and Palmers Green Wards have been used as the basis for demographic data as parts of each of these wards make up the Fox Lane project area.

Consultation on this scheme has been running since the 12th October 2020 and will close on 11 July 2021. Analysis on the responses to date is underway.

The Fox Lane Area QN project and consultation is similar in nature to that of the Bowes Primary Area QN, albeit the project's background and physical location differs. The consultation for the Bowes Primary Area project ran from 28 September 2020 to 2 May 2021. In addition to observations and experience to date on the existing trial, we have drawn on observations from that consultation with respect to responses from protected characteristics under the Equality Act 2010 and also structured this EqlA in a similar format.

SECTION 3 – Equality Analysis

This section asks you to consider the potential differential impact of the proposed decision or change on different protected characteristics, and what mitigating actions should be taken to avoid or counteract any negative impact.

According to the Equality Act 2010, protected characteristics are aspects of a person's identity that make them who they are. The law defines 9 protected characteristics:

1. Age
2. Disability
3. Gender reassignment.
4. Marriage and civil partnership.
5. Pregnancy and maternity.
6. Race
7. Religion or belief.
8. Sex
9. Sexual orientation.

At Enfield Council, we also consider socio-economic status as an additional characteristic.

“Differential impact” means that people of a particular protected characteristic (e.g. people of a particular age, people with a disability, people of a particular gender, or people from a particular race and religion) will be significantly more affected by the change than other groups. Please consider both potential positive and negative impacts, and, where possible, provide evidence to explain why this group might be particularly affected. If there is no differential impact for that group, briefly explain why this is not applicable.

Please consider how the proposed change will affect staff, service users or members of the wider community who share one of the following protected characteristics.

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Age

This can refer to people of a specific age e.g. 18-year olds, or age range e.g. 0 – 18-year olds.

Will the proposed change to service/policy/budget have a **differential impact [positive or negative]** on people of a specific age or age group (e.g. older or younger people)?

Please provide evidence to explain why this group may be particularly affected.

Evidence base

The mean age of Enfield's wards tends to vary by location within the borough. The northern and eastern wards have some of the lowest mean ages in Enfield and the southern and western wards where the Fox Lane area is located have some of the highest mean ages.

Table 1 presents the age distribution across the four Fox Lane area wards which cover the project area. This shows the four Fox Lane area wards generally follow the trend outlined above across Enfield with notable differences in the percentages of residents in the 5-14 age bracket lower than the Borough average, and the percentages of residents in the 65-74 and 75+ age bracket higher than the Borough average.

Table 1: Age distribution (2019) for study area and Borough average

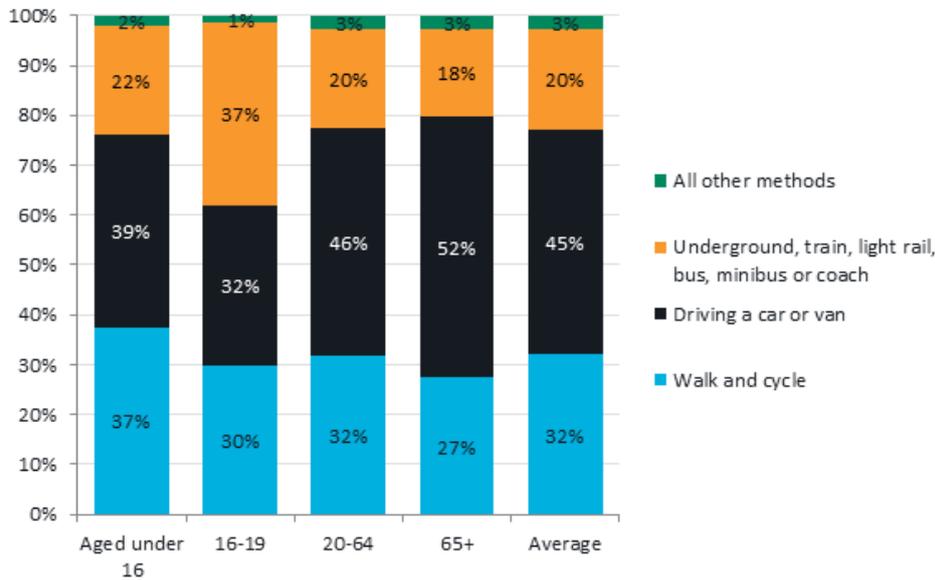
Age distribution-2019	Southgate (%)	Southgate Green (%)	Winchmore Hill (%)	Palmers Green (%)	Borough of Enfield (%)
0-4	6.6	5.8	6.6	6.5	7.2
5-14	13.4	11.4	11.4	11.2	14.4
15-24	10	10.1	9.0	10.7	11.5
25-34	15	15.8	14.0	16.8	14.8
35-44	16.4	14.6	15.1	15.7	14.4
45-54	13.8	13.9	14.7	13.2	13.6
55-64	9.9	11.6	12.5	11.3	10.7
65-74	6.7	8.7	8.6	7.9	7.0
75+	8.2	8	8.0	6.6	6.4

Data source: [ONS mid-year estimate 2019](#)

Figure 1 presents LTDS data on how people travel around Enfield within each age category.

In general, younger people in Enfield walk and cycle more, and drive less than older people. The highest percentages of walking and cycling can be seen in those aged under 16, with 37 per cent of all trips made on foot or by bike. Those aged 65 and over have the lowest levels of walking and cycling, with 27 per cent of all trips, but the highest percentage of trips driven (or as a passenger in a car or van) at 52 per cent. Public transport use is disproportionately higher in 16 to 19-year-old group, making up 37 per cent of all journeys. This is 15 per cent higher than the nearest age group (those aged under 16).

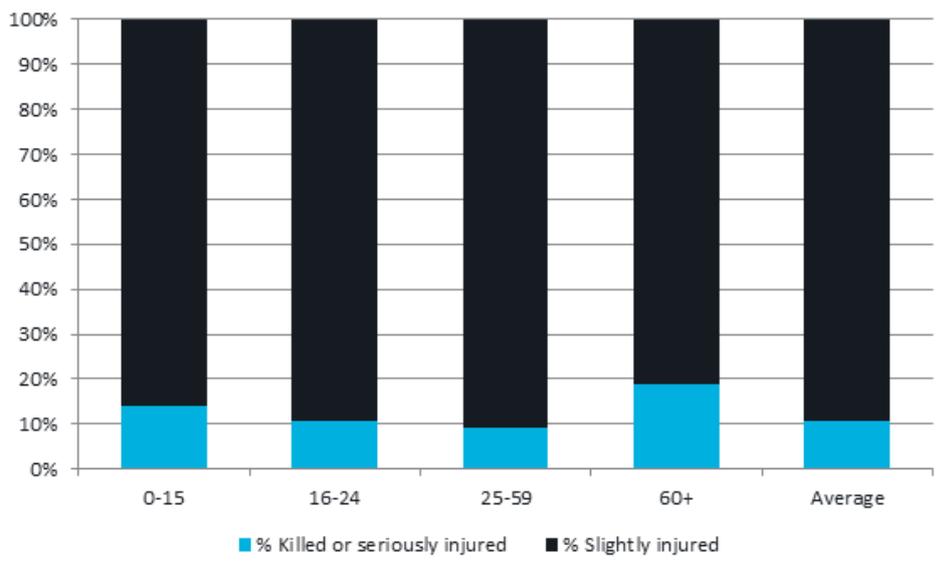
Figure 1: Mode share by Age in Enfield



Source: LTDS (2016/17, 2017/18 and 2018/19)

The proportion of Killed or Seriously Injured (KSIs) and Slightly Injured casualties per age category is shown in Figure 2 below. KSIs are higher than average for those age 60 and over (19 per cent) and those aged Under 16 (14 per cent). As such, this indicates that these age groups are disproportionately more likely to suffer more severe consequences if they are a casualty in a collision.

Figure 2: Percentage killed or seriously injured by Age in Enfield



Source: DfT Road traffic statistics (2019)

Differential impact assessment

- People of younger and older ages are more vulnerable to poor air quality¹, and Southgate, Southgate Green and Winchmore Hill typically have higher mean ages when compared to other wards within the borough. An aim of the Quieter Neighbourhood is to enable mode shift, ultimately reducing emissions from private vehicle use and increasing active modes of travel. This will benefit these age groups disproportionately through improved air quality.
- Younger people in Enfield are less likely to drive than older people in the borough and are more likely to walk and cycle. Improvements to volumes of traffic in Fox Lane will benefit those who already cycle, and therefore may disproportionately benefit younger people. However, the improvements are also likely to benefit those who do not currently cycle by providing safer and more attractive conditions to do so. This may allow for a selection of residents which is more evenly dispersed across the age groups to partake in active travel modes – and reaping the health benefits associated with a more active lifestyle. Therefore, while the changes may initially disproportionately benefit younger people, over time there may be longer term benefits across the age groups that rectifies this initial imbalance.
- Engaging with younger people has been challenging despite promotion of the surveys in media used by younger people.
- Reductions in motor vehicle traffic are expected to create safer streets with an improved experience for pedestrians – such as reduced noise and air pollution and reduced fear of being involved in a collision. These improvements to the walking environment are likely to disproportionately benefit those who are aged 16 and under who currently make 37 per cent of journeys by walking (or to a lesser degree, cycling). Furthermore, those aged 16-19 who make 37 per cent of trips by public transport are also likely to disproportionately benefit, as many public transport journeys start or end on foot or cycle.
- Comments from surveys and observational evidence from site visits indicate that children are now playing more regularly in the street as a result of the decreased traffic in the area and increased feelings of safety.
- Older people are more likely to suffer from slight mobility impairments due to ageing, which do not fall under the disability protected characteristic group. This can include slower movement and reaction time, and some may use mobility aids for walking. A reduction in motor vehicle traffic is likely to be particularly beneficial for those who require extra time to cross the street due to physical or visual impairments.

¹ https://www.london.gov.uk/sites/default/files/air_quality_for_public_health_professionals_-_city_of_london.pdf

- The Quieter Neighbourhood measures will significantly reduce the volumes of traffic through the area, reducing the threat caused by motor traffic, particularly from larger vehicles such as vans or HGVs who can no longer pass through the area. While these improvements are likely to benefit all ages groups, as those aged under 16 and over 60 are disproportionately killed or seriously injured by motor traffic, they are likely to benefit the most from the changes.
- While these measures are likely to create safer, healthier streets for residents of Enfield, they may lead to longer journey times for people who rely on private cars, taxis or Dial-a-Ride. The scheme may also lead to short- or medium-term delays to motor traffic on arterial roads as traffic is redirected from minor roads in the Fox Lane area. Private cars, taxis or Dial-a-Ride are particularly popular for people aged 65 and over. Travelling can also be uncomfortable for some people, particularly for the elderly, therefore extended journey times could exacerbate this issue.
- It is noted that some people may be more likely to use a private car as travel patterns and preferences change due to the pandemic. This may lead to increased journey times who rely on private cars, taxis or Dial-a-Ride.
- The proportions of respondents in each age group reporting either perceived positive or negative impacts of the QN were generally very similar across the bandings (with around 50% to 60% of respondents reporting perceived negative impacts). There was no discernible trend in the slight variation in negative responses between age groups. However, it appears that older respondents were more likely to respond positively to this question, with the 80+ age group having the highest proportion of positive respondents (32%) and the 16-29 age group having the lowest proportion of positive respondents (22%). Except for the 40-49 age group, the proportion of positive respondents decreased with decreasing age. However, the difference between these proportions is still relatively small.
- Although perceptions were more favourable for those inside the QN across all age groups, differences between age groups were minimal for both those inside and outside the QN. Within the QN, there appears to be a minor tendency toward older respondents perceiving the QN positively, however the percentage perceiving the QN negatively were consistent across age groups. Outside the QN, respondents in both the oldest and youngest age groups had the highest proportions of negative perceptions of the QN, with slightly lower proportions of those with negative perceptions in the 40 to 69 age group.
- According to the Consultation Analysis report, the 50–59-year age group had the highest proportion of respondents (24%), followed by the 40–49-year age group (23%) and the 60–69-year age group (21%). The next most

represented age groups were 30-39 (13%), 70-79 (10%), and 16-29 (7 %). Only 2% respondents were over the age of 80, making it the only age group over 40 to be under-represented, though to the same extent as the 16-29 (7%) and 30-39 (13%) age groups. Those under 30 represent around 35% of the population but only represent 7% of responses.

- Some of the opposition to the scheme was related to its effects on mobility, according to the Consultation Analysis report. Public transportation or active travel were mentioned as not being a suitable alternative due to age by 10 respondents (out of 292 open question responses to the related question) (50% of these comments came from inside the QN).
- Discussions with the RMT representative for London Taxi Drivers indicated that drivers were reluctant to enter the area and in some cases this was based on a misunderstanding that areas simply were not accessible to them. He indicated that following drop offs exiting the area through traffic was problematic and affected timeliness of pickups.
- In several responses, younger people articulated concern for the impact of the scheme on older or disabled people rather than comment on a negative impact on themselves.
- In respect of the survey responses, for those inside the QN, there seems to be a slight trend of older respondents being more likely to perceive the QN positively, although the proportions perceiving the QN negatively were quite consistent across the age groups. Whereas, for respondents outside the QN, both the two oldest and two youngest groups showed the highest proportions of negative perceptions of the QN, with slightly lower proportions of those with negative perceptions those aged 40 to 69.

Mitigating actions to be taken

- Continue to monitor bus journey times using TfL data, and consider mitigation measures if there is an impact.

Disability

A person has a disability if they have a physical or mental impairment which has a substantial and long-term adverse effect on the person's ability to carry out normal day-day activities.

This could include:

Physical impairment, hearing impairment, visual impairment, learning difficulties, long-standing illness or health condition, mental illness, substance abuse or other impairments.

Will the proposed change to service/ policy/ budget have a **differential impact [positive or negative]** on people with disabilities?

Please provide evidence to explain why this group may be particularly affected.

Evidence base

In Enfield, Census 2011 data shows that Enfield has a slightly higher per cent of residents with a long-term health problem/ disability compared to that across London. The four Fox Lane area wards reflect similar percentages to those in Enfield, except for Winchmore Hill which has fewer persons with a long-term health problem/ disability 'limiting a lot' than the Enfield average, and Southgate which has fewer persons with a long-term health problem/disability 'limiting a little' than the Enfield average. This data is presented in Table 2.

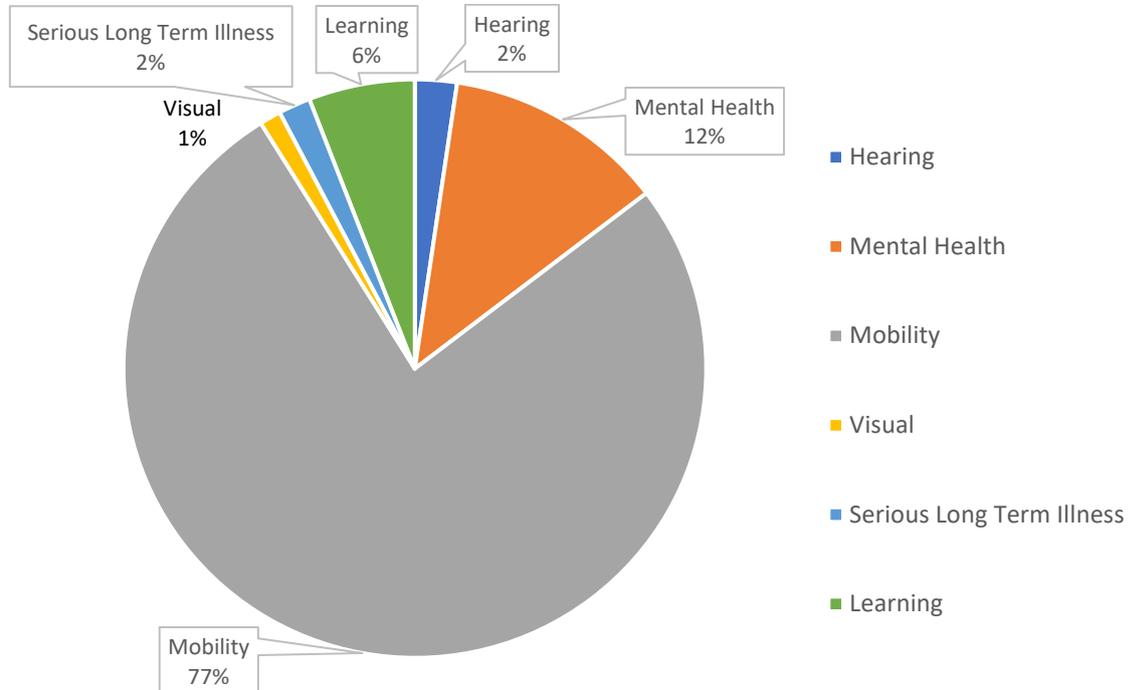
Table 2: Persons with a long-term health problem/ disability in Enfield and Fox Lane area wards

Persons with long-term health problem/ disability (2011)	Southgate (%)	Southgate Green (%)	Winchmore Hill (%)	Palmers Green (%)	Borough of Enfield (%)	London (%)
Limiting a lot	7.0	7.1	6.3	7.4	7.3	6.7
Limiting a little	7.5	8.1	8.0	8.2	8.1	7.4

Source: Census 2011

Disability types stated by those who live in Enfield and have a disability affecting daily travel (including old age) is shown in Figure 3 below. Mobility impairment represents the highest proportion (77 per cent) followed by impairment due to mental health (12 per cent). It should be noted that this data is based on a small sample, therefore results should be taken as a general indication only. It is important to note that various physical and mental disabilities can lead to travel limitations.

Figure 3: Disability types stated by those with a disability affecting travel.



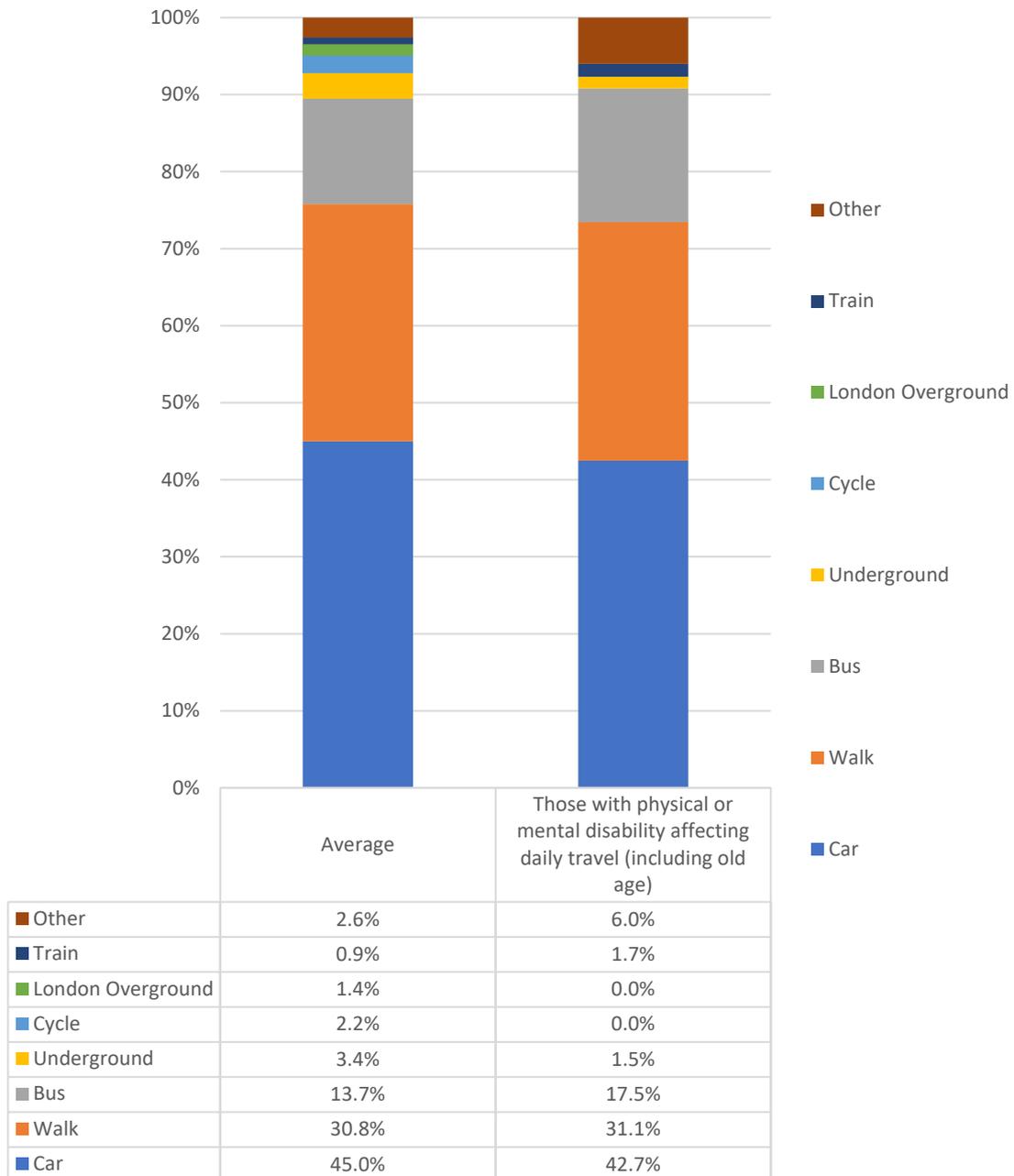
Source: LTDS (2016/17, 2017/18 and 2018/19)

Focusing solely on cyclists who have a disability, the Wheels for Wellbeing annual survey² shows that 72 per cent of disabled cyclists use their bike as a mobility aid, and 75 per cent found cycling easier than walking. Survey results also show that 24 per cent of disabled cyclists' bike for work or to commute to work and many found that cycling improves their mental and physical health. Inaccessible cycle infrastructure was found to be the biggest barrier to cycling.

Mode split for people with a physical or mental disability is shown in in Figure 4. When compared to the London Travel Demand Survey mode split of trips made by all people, car use for those with disabilities is lower (42.6 per cent compared to 45 per cent), bus use is greater (17.5 per cent compared to 13.7 per cent) and walking is marginally higher (31.1 per cent compared to 30.8 per cent).

² Wheels for Wellbeing Annual Survey 2018

Figure 4: Mode split by those with a physical or mental disability affecting daily travel.



Source: LTDS (2016/17, 2017/18 and 2018/19)

Let's Talk is the software platform engagement is conducted on. It meets and exceeds [WCAG 2.1, the current global web accessibility standard](#).

Text, graphics and figures have been made available in alternative formats for those with visual impairments and in some cases completion of surveys etc has been completed over the phone.

Differential impact assessment

- Following the implementation of the experimental phase, the public were able to give their views on the scheme in several ways. A survey was opened with several questions which gathered views and responses were taken by email and in writing. This survey was published on October 12th, 2020 and closed on July 11th, 2021.
- A second survey was developed for disabled people and promoted by writing to blue badge holders in the scheme area. The Disabled People and Carers Survey was designed to be completed either directly by people with disabilities or on their behalf by a carer and was available both online and on paper. Enfield Council got 50 replies from 50 people who took the online survey, and 5 paper surveys were returned. Both forms of this survey were available for just over a month; between 26th February and 31st March 2021. There was a relatively even split between those who answered as carers and those who did not, with 31 respondents (56%) answering as carers and 21 respondents (38%) not answering as carers. Three respondents chose to leave the question unanswered (5%).
- Alternative methods of contributing were made available where requested for accessibility reasons.
- Twelve percent of those who stated they had a disability or were responding on behalf of someone who had a disability said they had a physical or mobility impairment. 8 respondents (20%) said they had a learning disability, while 6 respondents (15%) said they had a long-term disease or health condition. With 9 respondents (23 %) picking the "Other" option, a quite large proportion considered that their impairment or disabilities did not fit into one of the Council's categories. A further eight (20%) respondents elected not to disclose the nature of their condition.
- Following this survey several focus groups were run in order to understand the scheme impact on disabled people and carers in more detail.
- In the responses to the surveys, disabled people and carers tended to show they were happy or unhappy with the scheme based on whether they lived inside the scheme area or not more than any other factor. Other common views were increased journey times in motor vehicles, noise, concerns around health impact in relation to pollution.
- Carers identified that when cars were used, it may have been to transport large boxes of medical or care equipment and not just for convenience.

- Of the respondents who said they had a disability, 72% perceived that the trial had had a 'very negative' or 'somewhat negative' impact on them, whilst 22% perceived that they had experienced a 'very positive' or 'somewhat positive' impact. Overall, respondents with disabilities appear to perceive the QN more negatively than the other survey respondents, although both respondents with and without disabilities inside the QN perceive its impacts more positively their counterparts outside of the QN. In fact, for respondents without disabilities living inside the QN, more respondents felt the impacts had been positive (45%) than negative (36%).
- Public transportation or active travel were mentioned as not being a suitable alternative due to disability by 16 residents (50% of these comments came from inside the QN). 9 respondents referred to a perceived reduction in mobility for disabled people; 11% of these comments came from respondents inside the QN.
- Journey times were described as more impactful by respondents who may be incontinent or where profound learning disabilities, dementia or other mental health conditions meant that being in the car for longer periods of time resulted in attempts at self-harm or severe anxiety. Similar issues were described by people who find being seated for long periods uncomfortable. Carers expressed that the increase in journey times by car had made it more complex to care for dependents as a result.
- Where journey times were raised as an issue, in some cases these appeared to relate to journeys which are quite short. In one case a respondent remarked that a 2-5 minute journey was now 30 minutes long. In another a respondent described how their hairdresser travelled from a mile away by car.
- Issues were raised relating to taxi or ride hailing services. Respondents reported that services refused to undertake journeys into the area or cancelled pickups at short notice. Discussions were held with the RMT representative for the area. He described how some drivers believed the area to be closed off completely rather than just a reduction in permeability. He explained drivers of certain services are required to attend by law, but others are not. For those drivers, driving to the next job is problematic when you are in a heavily congested area.
- Other respondents reported similar experiences with delivery services or providers of care services. Some disabled people reported concern that a regular trusted carer they have built a relationship with may not continue to provide care for them.
- In focus groups, people reported longer journey times to hospital or medical appointments.

- Some asthma sufferers reported in the main roads around the scheme that they felt their condition had worsened, but in focus groups some inside the scheme area reported significant improvement in their condition.
- In respect of Autistic Spectrum Disorders, some respondents who drive described driving as how they manage anxiety. They stated that this was more stressful now with more traffic in the surrounding area and this had impacted on their general feelings of stress and anxiety. One respondent described how they felt that their needs were predictable routes with no traffic jams. However, some people described that the calmer and quieter environment within the scheme area had been more beneficial to children with autistic spectrum disorders; reporting that their children now felt safer walking and moving around the area.
- Other parents of disabled children reported that it was easier to walk around the area without having to 'dodge traffic' and another remarked that children could now play in the street.
- Respondents with mental health conditions relating to anxiety, depression or Obsessive-Compulsive Disorder commented that the increased journey times as a result of congestion or increased distance negatively impacted how they felt. However, some respondents in the area indicated that the quieter environment made them feel less anxious and threatened.
- People with mobility or balance issues expressed various views. Some expressed that the lower volumes of traffic in the area meant they had more time to cross the road. Previously one respondent described how they had been abused by motorists before the scheme for crossing too slowly. However other respondents described that they were unable to take advantage of the scheme benefits as journeys on foot were too far for them to walk.
- The project aims to decrease motor vehicle traffic creating a safer environment, particularly for disabled people who are more likely to be pedestrians. Quieter roads will also benefit those whose physical impairments necessitate more time to cross the road, or whose mobility aids may require use of the road, such as mobility scooters.
- Enfield Disability Action provided a response where they articulated that they had been told by disabled people and carers that they were experiencing increased journey times and the impact this had on some people. They also articulated that users of mobility provided vehicles now found it harder to get around the area and found it harder to secure alternative forms of transport such as taxis. They also reported that some services such as homecare, deliveries of medication and groceries had been negatively affected.

- For people who are deaf or hard of hearing, they described how the reduction in traffic noise in the area made their hearing aids work better and they can more easily distinguish the sound of an approaching vehicle in a quieter environment. There were also benefits in their houses as sounds such as conversations or the television are easier to hear.
- Visually impaired people will be pedestrians in the affected area, users of public transport or passengers in other vehicles. Visually impaired people will have varying degrees of ability to see the changes in the environment around them. This will include changes to traffic flows or directions of traffic. Although likely to benefit from decreased traffic flows, the initial change could be confusing. During the consultation visually impaired people commented on other measures unrelated to the scheme in the area where pedestrians and cyclists may come into conflict.
- Reduction to through-traffic is likely to reduce conflict between different road users overall. This will create a safer environment, particularly those with physical disabilities. Quieter streets also mean that those traveling with wheelchairs or mobility scooters can use the roadway if they choose to circumvent blockages across the pavement (e.g., if the pavement is too narrow to navigate due to bins).
- Improved cycling conditions will benefit disabled cyclists and could potentially encourage people with disabilities to try cycling, if their disability allows. Some disabled people rely upon cycling as their primary means of mobility. Some responses articulated that they had been trying to adopt more active travel modes since the introduction of the scheme and had improved their health as a result.

Mitigating actions to be taken

- If any changes to the scheme or its removal is recommended, consideration should be given to residents who may have challenges adapting to changes in their surroundings.
- A specific exemption scheme should be considered for implementation in relation to disabled people and appropriate carers to mitigate the impacts of the scheme on disabled people.

Gender Reassignment

This refers to people who are proposing to undergo, are undergoing, or have undergone a process (or part of a process) to reassign their sex by changing physiological or other attributes of sex.

Will this change to service/ policy/ budget have a **differential impact [positive or negative]** on transgender people?

Please provide evidence to explain why this group may be particularly affected.

It is considered that this scheme is unlikely to have a disproportionate impact on grounds of Gender Reassignment.

There were no specific issues raised by transgender people in the consultation responses.

Mitigating actions to be taken

N/A

Marriage and Civil Partnership

Marriage and civil partnerships are different ways of legally recognising relationships. The formation of a civil partnership must remain secular, where-as a marriage can be conducted through either religious or civil ceremonies. In the U.K both marriages and civil partnerships can be same sex or mixed sex. Civil partners must be treated the same as married couples on a wide range of legal matters.

Will this change to service/ policy/ budget have a **differential impact [positive or negative]** on people in a marriage or civil partnership?

Please provide evidence to explain why this group may be particularly affected

It is considered that this scheme is unlikely to have a disproportionate impact on grounds of Marriage and Civil partnership.

No issues were raised in the consultation relating to marriage or civil partnership.

Mitigating actions to be taken

N/A

Pregnancy and maternity

Pregnancy refers to the condition of being pregnant or expecting a baby. Maternity refers to the period after the birth and is linked to maternity leave in the employment context. In the non-work context, protection against maternity discrimination is for 26 weeks after giving birth, and this includes treating a woman unfavourably because she is breastfeeding.

Will this change to service/ policy/ budget have a **differential impact [positive or negative]** on pregnancy and maternity?

Please provide evidence to explain why this group may be particularly affected

Evidence base

The birth rate in Enfield was 15.1 births per 1000 people in 2016, approximately 28 per cent above the national average that year of 11.8, though on par with the Outer London average of 15.0 per 1000 people. Therefore, it is statistically more likely for pregnant and maternal people to reside in Enfield than the national average, however this is near equal to Outer London.

Differential impact assessment

- Reduction to through traffic is likely to reduce conflict between different road users overall. This will create a safer environment, particularly for pregnant people and parents with infants and/or young children. This will also provide benefits to pedestrians travelling with prams who require additional time to navigate curbs when crossing the street. Quieter streets also mean that those traveling with prams can use the roadway to circumvent blockages across the pavement (e.g. if the pavement is too narrow to navigate due to bins). It is also noted that advice from the Royal College of Midwives³ highlights the importance of physical activity during pregnancy, such as brisk walking.
- The implementation of the Quieter Neighbourhoods scheme, may negatively impact on journey times by motor vehicle for a portion of those who are pregnant and with parents with infants and/ or young children who may find it more difficult to walk or cycle, and prefer the use of door-to-door transport services such as private cars, taxis or Dial-a-Ride.
- Discussions with the RMT representative for London Taxi Drivers indicated that drivers were reluctant to enter the area and in some cases this was based on a misunderstanding that areas simply were not accessible to them. He indicated that following drop offs exiting the area through traffic was problematic and affected timeliness of pickups.

³ <https://www.rcm.org.uk/media-releases/2019/september/rcm-comments-on-new-cmo-s-guideline-for-physical-activity-during-pregnancy/>

- Improvements in air quality are likely to disproportionately benefit infants and children who are more vulnerable to breathing in polluted air than adults due to their airways being in development, and their breathing being more rapid than adults.
- Small changes in distance from the source, street layouts and physical barriers can make a big difference to exposure. For example, pollution levels next to a busy road can vary from the part of the pavement nearest to the traffic to the part of the pavement farthest away, and will be much lower on a parallel side street. Intense sources such as busy junctions lead to the creation of localised pollution 'hotspots' where very high levels of pollution are reached.⁴
- Maternal exposure to PM during pregnancy is particularly harmful to children's health since this is a phase of rapid human growth and development.⁵
- Expectant mothers and mothers who have recently given birth may have increased numbers of medical appointments. Where this journey, which is approximately two miles to the nearest maternity unit, is made by car it may take slightly longer than prior to the project, but where the journey is walked or cycled through the experimental area, it is likely to be less polluted and have reduced volumes of traffic.
- The analysis from similar consultation for the Bowes Primary Area Quieter Neighbourhood project, showed that across all genders, the proportions of responses from people pregnant or with young children stating they had experienced a 'somewhat negative' or 'very negative' impact were very similar to those who were not pregnant or with young children.
- The Consultation Analysis showed that across all genders, the proportions of responses from people pregnant or with young children stating they had experienced a 'somewhat negative' or 'very negative' impact were very similar to those who were not pregnant or with young children.
- Of the respondents inside the QN who were pregnant or had young children, 32% stated they had experienced a 'somewhat negative' or 'very negative' impact, while 48% said they had experienced a 'somewhat positive' or 'very positive' impact.

Mitigating actions to be taken

Long term public health impact monitoring should be considered for those living in the LTN area.

⁴ https://www.local.gov.uk/sites/default/files/documents/6.3091_DEFRA_AirQualityGuide_9web_0.pdf

⁵ <https://environhealthprevmed.biomedcentral.com/articles/10.1186/s12199-021-00995-5>

Race

This refers to a group of people defined by their race, colour, and nationality (including citizenship), ethnic or national origins.

Will this change to service/ policy/ budget have a **differential impact [positive or negative]** on people of a certain race?

Please provide evidence to explain why this group may be particularly affected

Evidence base

Table 3 presents the population of the Fox Lane Area Wards by ethnicity. The most common ethnicity in the area is 'White British', followed by 'White Other'. The third most populous ethnicity is Greek Cypriot of which all four Fox Lane area wards have a higher percentage than the Enfield percentage.

Table 3: Population of Study area by ethnicity versus Borough

<i>Ethnicity (2019)</i>	Southgate (%)	Southgate Green (%)	Winchmore Hill (%)	Palmers Green (%)	Borough of Enfield (%)
White British	42.7	39.9	59.7	32.8	38.3
White Irish	2.3	2.8	3.7	2.9	1.9
Greek	1.9	1.9	1.7	2.4	1.2
Greek Cypriot	8.3	7.4	6.5	9.3	4.7
Turkish	3.1	3.3	2.6	6.3	7.6
Turkish Cypriot	1.6	1.3	1.6	2.7	1.8
Kurdish	0.4	0.6	0.4	0.7	1.2
White Other	9.5	10.3	5.1	10.7	6.7
White& Black Caribbean	1.1	0.9	0.9	1.0	1.3
White and Asian	1.7	1.6	1.3	1.4	1.1
White and Black African	0.5	0.8	0.7	0.7	0.7
Other mixed	2.2	2.0	1.8	2.3	2.0
Indian	5.6	7.2	3.6	5.7	3.3
Pakistani	1.2	1.1	0.6	1.5	0.7
Bangladeshi	0.6	1.6	0.5	1.1	1.8
Chinese	2.6	1.4	0.5	0.5	0.7

Other Asian	4.0	3.6	2.0	3.6	3.6
Somali	0.5	0.7	0.3	1.6	2.7
Other Black African	2.5	3.5	1.4	3.5	7.5
Black Caribbean	1.9	2.4	2.2	4.0	5.2
Other Black	0.7	1.5	0.9	1.7	2.5
Other Ethnic Group	5.1	4.2	1.9	3.7	3.7

Source: *Census 2011*

The 2011 Census indicates that Enfield has the largest proportion of Greek and Turkish speaking people in the country⁶. The top five non-English languages are shown in Table 4 and shown by wards in Table 5.

Table 4: Top five non-English languages within Enfield-2020

Turkish	6.2%
Polish	2%
Greek	1.6%
Somali	1.1%
Bengali (with Sylheti and Chatgaya)	0.9%

Source: [Enfield Borough profile 2020, Enfield Council](#)

Table 5: Main languages of residents within the four Fox Lane area wards

Main languages of residents	Southgate (%)	Southgate Green (%)	Winchmore Hill (%)	Palmers Green (%)
English	80	78	86	73
Turkish	3	3	2	5
Greek	2	3	2	4
Polish	2	2	2	3
Persian/ Farsi	1	2	1	2

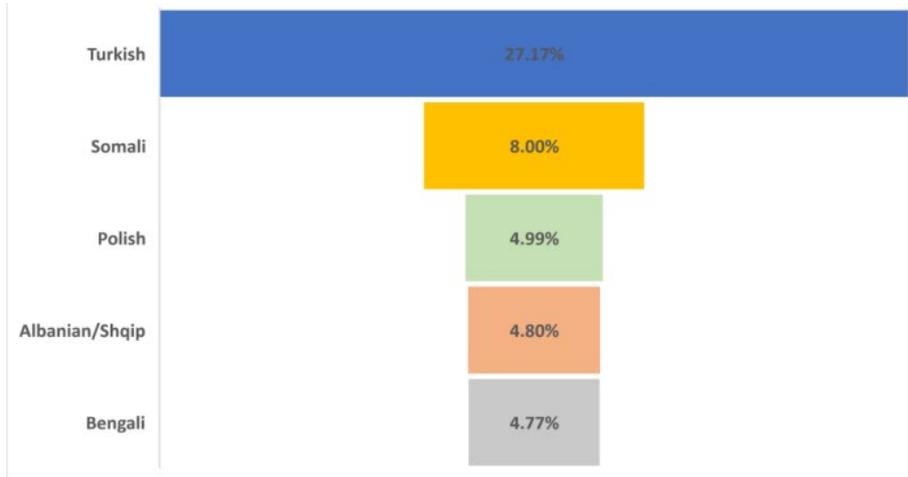
Source: *Census 2011*

The most popular languages for which Enfield Council receives translation and interpreting requests are Turkish, Polish, Albanian, Somali, Bulgarian, British Sign Language and Romanian.

The Spring 2020 School Census records 195 languages or dialects being spoken by pupils who live in Enfield. As of Spring 2020, the top five non-English languages spoken by Enfield school pupils are shown in Figure 5.

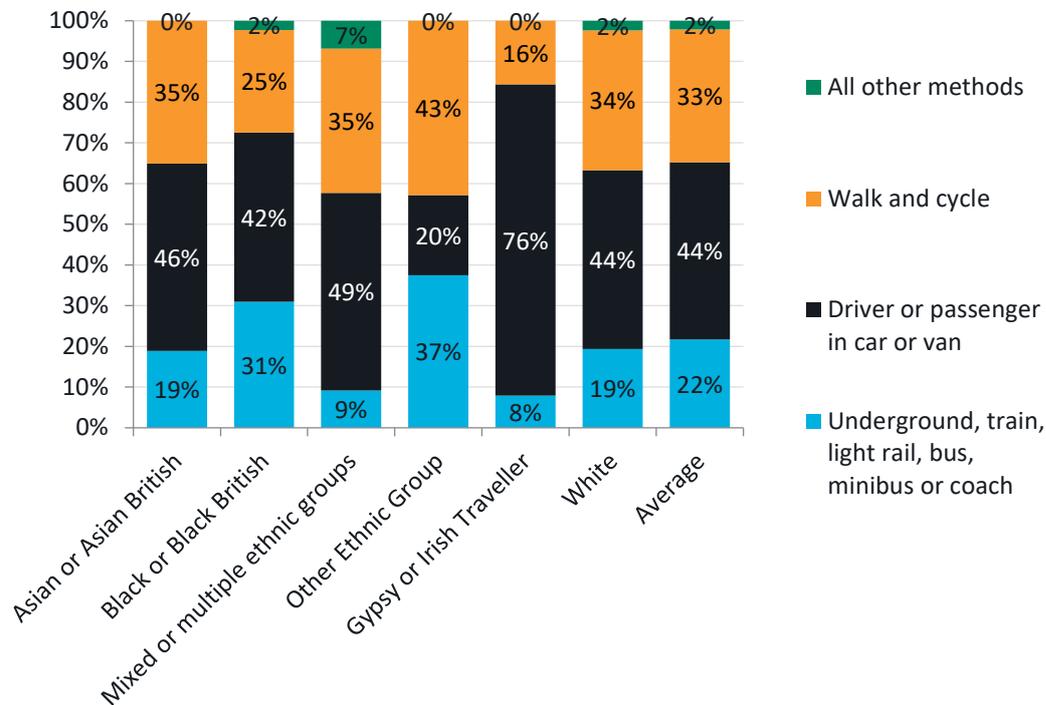
⁶ Enfield [Borough Profile, 2020](#)

Figure 5: Top five non-English languages spoken by Enfield school pupils



Source: Spring 2020 Enfield School Census

Based on average travel modes from the LTDS data presented in Figure 6 in Enfield all ethnic groups except for 'Other Ethnic Group' are more than likely to drive or be driven in a car or van than use any other mode. 'Other Ethnic Group', 'Asian or Asian British' and 'Mixed or multiple ethnic groups' are most likely to walk and cycle, with a mode share of between 35 and 43 per cent. It is important to note that the sample size of LTDS data is small, therefore these percentages may not accurately reflect the travel behaviours of each ethnic group.

Figure 6: Mode share by ethnicity in Enfield


Source: LTDS (2018/19)

Differential impact assessment

- The proposed measures are likely to improve conditions for pedestrians and cyclists, by reducing conflicts with motorised vehicles. This will disproportionately benefit ethnic groups who are disproportionately likely to walk ('Asian or Asian British', 'Mixed or multiple ethnic groups' and 'Other Ethnic Groups'), as well as 'Black and Black British' and 'Other Ethnic Groups' who are disproportionately likely to use public transport (as every public transport journey starts or ends on foot or cycle). On the contrary, this scheme may cause increased congestion in the short to medium term on arterial roads as traffic is reassigned from minor roads within the Fox Lane area. As such, these impacts may disproportionately impact 'Black and Black British' and 'Other Ethnic Groups' who are disproportionately likely to use public transport.
- With the exception of 'Other Ethnic Groups', car usage in Enfield is high, particularly for 'Gypsy or Irish Travellers'. For this reason, the scheme may disproportionately affect this ethnic group – such as causing slightly longer journey times for trips made by car. This could have some financial impacts such as increased cost of travel and increased commuting times. However, the delivery of this scheme has the potential to offer genuine alternatives to car journeys and reduce the reliance on cars within these ethnic groups.

- It is important to note that reducing car dominance and car usage is a key aspect of Enfield's broader transport strategy, and as such it is acknowledged that this disproportionate impact is necessary to facilitate a shift across Enfield to more sustainable, healthy and equitable modes.
- In the survey, when comparing respondents from inside and outside the QN, the proportions of each ethnic group perceiving the QN to be positive or negative relative to one another were similar, although those inside the QN had a more positive perception of the QN.
- The Black ethnic group showed the highest level of perceived positive impacts overall, with 10 respondents (29%) perceiving that the QN had impacted them 'very positively' or 'somewhat positively', and 20 respondents (57%) feeling that the QN had impacted them 'very negatively' or 'somewhat negatively'.

Mitigating actions to be taken

- Monitor bus journey times using TfL data, and consider mitigation measures if there is an impact.
- The Healthy Streets Programme will continue to promote active travel among under-represented ethnic groups such as the Gypsy, Roma and Traveller groups.

Religion and belief

Religion refers to a person's faith (e.g. Buddhism, Islam, Christianity, Judaism, Sikhism, Hinduism). Belief includes religious and philosophical beliefs including lack of belief (e.g. Atheism). Generally, a belief should affect your life choices or the way you live.

Will this change to service/ policy/ budget have a **differential impact [positive or negative]** on people who follow a religion or belief, including lack of belief?

Please provide evidence to explain why this group may be particularly affected.

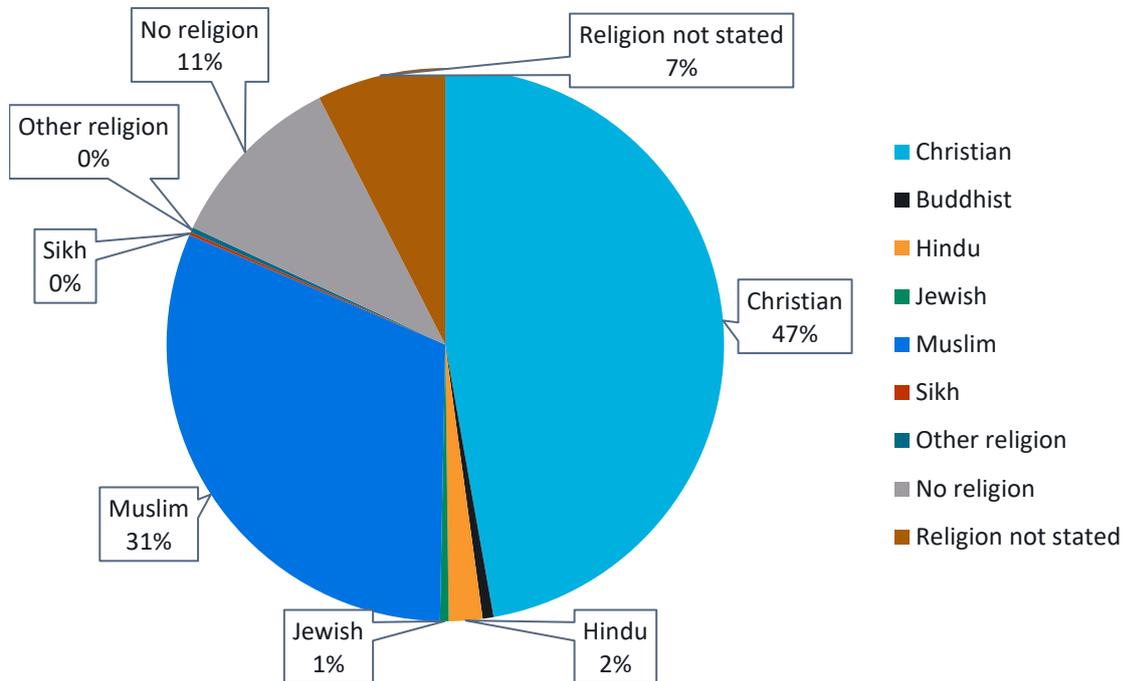
Evidence base

Table 6 presents the population of the Fox Lane Area wards by religion, and Figure 7 presents Census 2011 data on religion and belief in Enfield. The four Fox Lane area wards and Enfield overall is predominantly Christian, with a slightly higher proportion of the population identifying as Christian when compared to the London average. Muslim is the second most common religion or belief identified, however this is less than the proportion of the population identifying as 'other' or 'none' or did not state their religion. The four Fox Lane area wards and Enfield is also home to smaller proportions of residents compared to the other faiths including Buddhist, Hindu, Jewish and Sikh.

Table 6: Religion composition of the study area compared to London and Borough

Religion	Southgate (%)	Southgate Green (%)	Winchmore Hill (%)	Palmers Green (%)	Borough of Enfield (%)	London (%)
Christian	50.6	52.1	58.6	51.1	53.6	48.4
Buddhist	1.0	1.0	0.5	0.5	0.6	1.0
Hindu	5.1	5.3	3.1	4.7	3.5	5.0
Jewish	4.2	3.6	2.2	1.1	1.4	1.8
Muslim	10.0	10.4	8.1	16.8	16.7	12.4
Sikh	0.7	0.6	0.5	0.4	0.3	1.5
Other/ none/ not stated	28.4	27.1	27.1	25.3	23.8	29.8

Source: Census 2011

Figure 7: Breakdown of religion/ belief within Enfield


On certain dates and at certain times of the day, religious services and observances can have an impact on travel patterns. Places of worship and faith-based schools are major destinations for large populations from different groups. There are two places of worship in the Fox Lane area which have been identified and outlined below. Access to these places of worship is fully maintained, but the route by motor vehicle may change due to the restrictions in place. Residents accessing these locations may now require to take a different route if accessing by motor vehicle, however access is fully maintained.

The Bourne Methodist Church

Attendees accessing this location by motor vehicle from the south or east will no longer be able to use the minor roads within the project area, such as Meadway or Fox Lane, as through roads. Instead, attendees will need to arrive via High Street or Green Lanes, and then onto the Bourne. This may increase journey times for these attendees. Access from the north and west is likely to remain unchanged.

Palmers Green United Reformed Church

Located on Fox Lane to the west of the camera enforced modal filter, attendees arriving from the south and east of Fox Lane by motor vehicle will be required to now access from the north or west, resulting in longer journey times. Residents living within the Fox Lane area will benefit from easy walking and cycling access.

Differential impact assessment

- Improving conditions for walking and cycling is likely to positively benefit those who follow a religion and regularly attend places of worship. Destinations such as this are generally local and have large walking and cycling catchments. Although it is acknowledged that this scheme is likely to increase journey times for some worshippers that live within the Quieter Neighbourhood and drive to their place of worship, they can still access their destination as they could before the scheme. It is also acknowledged that some residents attend places of worship outside the immediate project area which are not listed above. Journey times by motor vehicle to these locations may be longer.
- Religious commitments can sometimes leave little time for sporting activities, for example, as young Asian Muslims attend mosque after school, they do not have much leisure time as those from non-religious backgrounds⁷. Therefore, creating environments that enable and encourage people to cycle more often can lead to exercise being built into their day, rather than having to go out of their way to achieve it.
- Respondents were questioned about their religious beliefs. The respondents who left the question blank made up the most significant proportion of the sample (34 %). The largest religious group was Christians (30%), closely followed by those who said they had no religion (26%). Other religious groups represented by a small number of respondents included Buddhists (10 respondents), Hindus (32 respondents), Jews (66 respondents), and Muslims (86 respondents). The number of persons who do not identify with a religion is substantially more significant in survey responses than in the Census. In contrast, the proportion of those who identify as Christian, or Muslim is slightly lower. When comparing these figures, 34% left the question blank; thus the exact distribution of religions among survey participants cannot be determined.
- Where religious organisations provided responses, they articulated the impact they felt had fallen on people with other protected characteristics such as older people, new mothers and disabled people.
- In the survey, respondents were asked about their religion. The largest segment of the sample was from respondents who left the question blank (1,009 – 34%). The largest religious group was Christian with 889 respondents (30%), which was closely followed by those who indicated that they had no religion (773 – 26%). A small number of respondents belonged to other religious groups, including Buddhist (10 respondents), Hindu (32 respondents), Jewish (66 respondents), and Muslim (86 respondents)³. A

⁷ <http://content.tfl.gov.uk/barriers-to-cycling-for-ethnic-minorities-and-deprived-groups-summary.pdf>

further 107 responses were from people who preferred not to answer the question. Table 3-5 below displays these proportions, excluding those who left the question blank, in comparison to the data from the 2011 Census below. This shows that the proportion of people without a religion is much higher in the survey responses than in the Census, whilst proportion of those indicating themselves to be Christian or Muslim is slightly lower. When comparing these statistics, it must be remembered that 1,009 (34%) respondents left the question blank, so we cannot be sure of the exact distribution of religions amongst survey respondents.

Mitigating actions to be taken

Sex

Sex refers to whether you are a man or woman.

Will this change to service/ policy/ budget have a **differential impact [positive or negative]** on men or women?

Please provide evidence to explain why this group may be particularly affected.

Evidence base

Table 7 presents the sex composition of the Fox Lane area wards.

Table 7: Sex composition of the Fox Lane Area wards

Distribution by sex 2019	Southgate (%)	Southgate Green (%)	Winchmore Hill (%)	Palmer's Green	Borough of Enfield (%)
Male	48.8	50.2	50.3	49.8	48.9
Female	51.2	49.8	49.7	50.2	51.1

Source: [ONS mid-year estimate 2019](#)

According to the Census 2011, in Enfield 48.9 per cent of residents identify as male and 51.1 per cent as female. This is very similar to the percentage split for London as a whole (49 per cent male, 51 per cent female).

Figure 8 presents the mode share by sex in Enfield. Walking more commonly used as transport by females, making up 33 per cent of all trips. This is 5 per cent higher

than males. On average, females drive slightly less than males, making up 44 per cent of trips vs 46 per cent with males. Females are also use the bus more than males (15 per cent vs 13 per cent).

Figure 8: Mode share by sex in Enfield



Source: LTDS (2016/17, 2017/18 and 2018/19)

Across Greater London, research undertaken by TfL shows walking is the most commonly used type of transport by females (95 per cent walk at least once a week). Females are also more likely to use buses than males (62 per cent compared with 56 per cent) but are less likely to use other types of transport including the Tube (38 per cent women compared with 43 per cent males).

Female Londoners take more trips on a weekday than male Londoners, 2.5 compared to 2.3⁸. This pattern however is reversed amongst older adults, with older female Londoners taking fewer weekday trips than older male Londoners, 2.0 compared to 2.2. It is important to recognise that females are more likely than males to be travelling with buggies and/ or shopping, and this can affect transport choices.

Females aged 17 or over who are living in London are less likely than males to have a full driving licence (58 per cent compared with 72 per cent) or have access to a car (63 per cent of all females compared with 66 per cent of all males). These factors are likely to be related to the frequency of car use as a driver.

⁸ <https://content.tfl.gov.uk/travel-in-london-understanding-our-diverse-communities-2019.pdf>

79 per cent of females in London report being able to ride a bike, compared with 91 per cent of males⁹.

Differential impact assessment

- Females are less likely to drive in Enfield and are more likely to walk than males. They are also less likely to cycle. Improvements made to the safety and convenience of cycling reduce the barriers to cycling disproportionately faced by females and increase the percentage of females choosing to cycle.
- Females are more likely to use the bus than males. As many public transport journeys start or ends on foot or cycle, improvements in safety and convenience to these networks will improve their access to public transport services. On the contrary, this scheme may cause increased congestion in the short to medium term on arterial roads as traffic is reassigned from minor roads within the Fox Lane area. As such, these impacts may disproportionately impact females who use buses more often than males.
- Increasing residents' access to favourable cycling conditions is likely to disproportionately benefit females, particularly due to higher number of trips they make daily compared to males, as well as their role in taking children to and from educational and recreational facilities. The intervention would reduce a significant barrier to cycling.
- Following the murder of Sarah Everard, a national movement has highlighted the concerns of women and how safe they feel at particular times, notably at night. Reduced traffic volumes create a quieter environment which can heighten the apprehension of threat. This perception particularly impacts women making trips by foot or bicycle, as part of a public transport journey or a trip on its own. There is some concern that this perceived risk impacts women's willingness to make trips by active travel modes after dark. In contrast, an academic report¹⁰ however suggested a positive improvement in the measured crime rate after introducing low traffic neighbourhoods. The report examined the impact on street crime of introducing low traffic neighbourhoods in Waltham Forest which was associated with a 10% decrease in total street crime and this effect increased with a longer duration since implementation.
- In survey responses, some women articulated that they felt safer, but others articulated that they felt less safe as a result of the trial. Reasons given for feeling less safe included a perception of being at greater risk of being a victim of crime in quieter streets, but people felt more safe as road users.

⁹ <http://content.tfl.gov.uk/attitudes-to-cycling-2014-report.pdf>

¹⁰ <https://findingspress.org/article/19414-the-impact-of-introducing-a-low-traffic-neighbourhood-on-street-crime-in-waltham-forest-london>

- The number of female cyclists nationally rose by 50% ¹¹in 2020 according to DfT statistics.

Mitigating actions to be taken

- Monitor bus journey times using TfL data, and consider mitigation measures if there is an impact.

Sexual Orientation

This refers to whether a person is sexually attracted to people of the same sex or a different sex to themselves. Please consider the impact on people who identify as heterosexual, bisexual, gay, lesbian, non-binary or asexual.

Will this change to service/ policy/ budget have a **differential impact [positive or negative]** on people with a particular sexual orientation?

Please provide evidence to explain why this group may be particularly affected.

It is considered that this scheme is unlikely to have a disproportionate impact on grounds of Sexual Orientation.

No matters were raised in consultation responses relating to sexual orientation.

Mitigating actions to be taken

N/A

Socio-economic deprivation

This refers to people who are disadvantaged due to socio-economic factors e.g. unemployment, low income, low academic qualifications or living in a deprived area, social housing or unstable housing.

¹¹ <https://www.gov.uk/government/statistics/walking-and-cycling-statistics-england-2020>

Will this change to service/ policy/ budget have a **differential impact [positive or negative]** on people who are socio-economically disadvantaged?

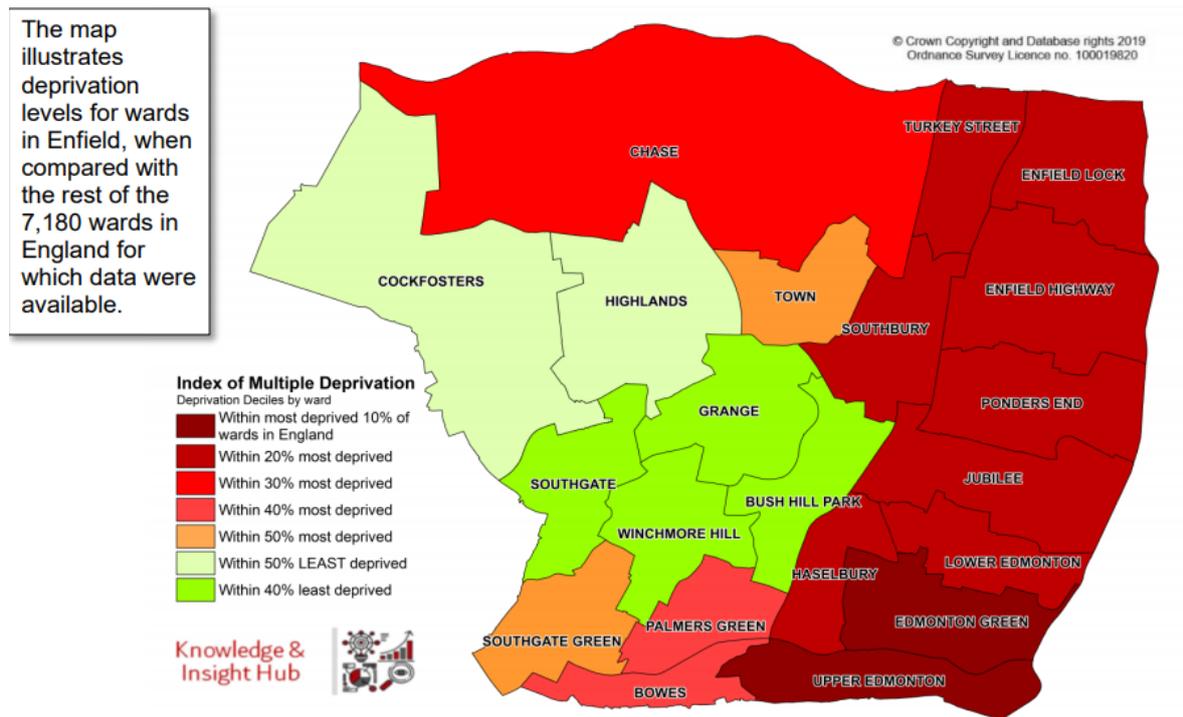
Please provide evidence to explain why this group may be particularly affected.

Evidence base

As outlined within the Enfield Transport Plan (2019), Enfield is one of the most deprived Outer London boroughs. Enfield is now the 12th most deprived London borough, whereas it was 14th in 2010. The Borough’s overall ranking in the 2015 Indices of Multiple Deprivation remained unchanged from 2010 at 64th most deprived out of 326 English local authorities

Figure 9 presents a visual representative of deprivation across Enfield. The Fox Lane area sits within the southwest of Enfield. In broad terms the eastern areas of Enfield have more levels of deprivation, whereas the west and northwest areas have the least. Figure 9 indicates the Fox Lane area has a diverse spread of deprivation levels. This is shown in Figure 9.

Figure 9: Deprivation in Enfield



Data source: Department for Communities and Local Government 2019

Table 8 presents the four Fox Lane area wards to have significantly lower proportions of households with incomes less than £15,000 and claiming Universal Credit than the borough average.

Table 8: Enfield and Fox Lane area wards income, 2020

Income (2020)	Southgate (%)	Southgate Green (%)	Winchmore Hill (%)	Palmers Green (%)	Borough of Enfield (%)
Proportion of households with an income of less than £15,000	8.6	8.9	7.5	9.6	15.6
Households claiming Universal Credit (May 2020)	15.2	18.6	14.6	21.2	23.7

Data source: Ward Profiles 2020, Enfield Council

TfL research shows that low income Londoners also tend to travel less frequently than Londoners overall – 2.2 trips per weekday on average compared to 2.4 among all Londoners. Among this group, a greater proportion of journeys are completed for the purposes of shopping and personal business: 31 per cent for Londoners with household income of less than £20,000 compared with 22 per cent all Londoners (in line with 31 per cent and 22 per cent observed in 2013/14)¹².

Londoners in lower income households are the most likely equality group to use the bus at least weekly; seven in 10 Londoners in households with an annual income of less than £20,000 do so (69 per cent).

Differential impact assessment

- Cycling and walking present a low-cost form of transport and can connect people safely and quickly to local centres, as well as to stations as part of multi-modal longer distance journeys (e.g. into inner London). As such, the Quieter Neighbourhood improvements will benefit cycling and walking and therefore are likely to disproportionately benefit those without access to cars.
- The rate of car ownership increases as income increases and so people who are on lower incomes are less likely to be adversely affected by reassigned traffic.
- Primary roads are more likely to experience the impacts of reassigned traffic in the short term. These roads may have pockets of denser housing on them which tend to be occupied by people with lower incomes. These people may experience the impacts associated with higher volumes of traffic such as noise and congestion.

¹² <https://content.tfl.gov.uk/travel-in-london-understanding-our-diverse-communities-2019.pdf>

- People on lower incomes are less likely to be able to afford to adapt to the measures (e.g. buying a new bike), therefore may not experience the full benefits of the scheme compared to those from higher income backgrounds. This may mean that those on higher incomes disproportionately benefit from the scheme.
- Buses are likely to be used by people on lower incomes and where buses are delayed by any increased traffic this is likely to affect this group.
- By far the income group with proportionally the most negative responses in the survey was the “Below £10,000” group, with 79% (28 respondents) indicating they had been negatively impacted by the QN, compared to the average of 56%.

Mitigating actions to be taken.

- Encourage lower income households to make use of free bike repair services, such as Dr Bike, and opportunities to access affordable cycles, such as second hand bike markets.

SECTION 4 – Monitoring and Review

How do you intend to monitor and review the effects of this proposal?

Who will be responsible for assessing the effects of this proposal?

The project aims to improve conditions for those already walking and cycling and also to help make non-car transport options more attractive by making them safer, more accessible and more convenient. It is acknowledged that the improvements come at an ongoing inconvenience to drivers. The altering of traffic flow will add some level of complication to trips and will increase the length of many car journeys made through the study area. However, access to all properties and locations is maintained. This impact will be felt disproportionately by individuals who rely upon cars as their primary or only mode of transport, which is common for elderly or disabled people and certain ethnic groups. It is important to carry out quality consultation with those who rely upon cars to minimise any adverse impacts.

The monitoring and evaluation for this project is critical for many of the recommendations set out in this EqIA. Alongside consultation and engagement, these are the primary means of monitoring benefits and disbenefits of the project. Activities include monitoring of traffic volumes including bus journey times, air and noise quality, and engagement with emergency services. Consultation and engagement activities are planned to reflect relevant recommendations in this EqIA. The outcomes of monitoring, consultation and engagement will help to inform

whether the project has been successful in achieving its objectives and in identifying, and if possible mitigating, the potential inequalities raised in this EqIA.

This EqIA is not a static document and will continue to be developed during the course of this project.

SECTION 5 – Action Plan for Mitigating Actions.

Protected Characteristic	Identified Issue	Action Required/ Comments	Lead officer	Timescale /By When	Costs	Review Date/ Comments
Age	Longer journey times for people who rely on private cars, taxis or Dial-a-Ride.	Investigate the impact on local private hire vehicles and taxis with respect to journey times, cost and accessibility.	[REDACTED]	During-scheme monitoring	Included within scheme budget	20/01/22 Met with RMT comments in text above
Age	Under-representation of younger people in consultation responses	Target engagement at those aged under 40 (and especially under 30) who are often under-represented in engagement, as was observed in similar consultation for the Bowes Primary Area Quieter Neighbourhood project. This could be achieved through measures such as targeted advertising on social media, or at locations frequented by the younger generation such as leisure centres or gyms.	[REDACTED]	During-scheme monitoring	Included within scheme budget	20/01/22 Social media engaged for consultation. Youth strategy formulated for Healthy Streets Programme; rebranding underway
Age Disability	Traffic reassignment onto main roads may delay bus services, affecting younger people in particular	Monitor bus journey times using TfL data, and consider mitigation measures if there is an impact.	[REDACTED]	During-scheme monitoring	Included within scheme budget	20/01/22 Included in monitoring report

Disability	Findings consultation showed that disabled people had concerns about reaching locations such as hospitals, pharmacies and dentists within the area.	Identify travel patterns to local hospitals to monitor whether the scheme is having a disproportionate impact on those who make regular essential trips by car. This could be reviewed via focus groups with disabled residents.	[REDACTED]	During-scheme monitoring	Included within scheme budget	20/01/22 Discussed in focus groups, updated above.
Disability	Changes or removal of the scheme may be present challenges for people with certain disabilities	If any changes to the scheme or its removal is recommended, consideration should be given to residents who may have challenges adapting to changes in their surroundings.	[REDACTED]	Following scheme monitoring	Included within scheme budget	20/01/22 To be reviewed after consideration of final report
Race	Consultation analysis on a similar project highlighted that the proportions of responses from Mixed, Asian and Black respondents was lower than might be expected from the 2011 Census.	Continue to monitor demographic responses to the consultation for adequate representation of different race groups. Further consultation and engagement to be guided by community organisations.	[REDACTED]	During-scheme monitoring	Included within scheme budget	20/01/22 Demographic breakdown of responses received and contained in final report. EQIA updated.

Race	Car usage in Enfield is high, particularly for 'Gypsy or Irish Travellers'. For this reason, the scheme may disproportionately affect this ethnic groups – such as causing longer journey times for trips made by car.	It is recommended that Enfield officers work internally with the Gypsy Roma Traveller (GRT) lead to discuss the unique characteristics of this ethnic group. Consideration should be given as to how schemes could assist with reducing car usage and encouraging mode shift.	[REDACTED]	During-scheme monitoring	Included within scheme budget	20/01/22 Long term engagement with ethic groups to be developed as part of branding rework and engagement strategy for programme.
Race	Traffic reassignment onto main roads may delay bus services, affecting 'Other Ethnic Groups' in particular.	Monitor bus journey times using TfL data, and consider mitigation measures if there is an impact	[REDACTED]	During-scheme monitoring	Included within scheme budget	20/01/22 Bus journey times examined in monitoring report
Religion and belief	Consultation analysis on a similar project highlighted that there was potential under-representation of those with a religious belief in	Continue to monitor demographic responses to the consultation for adequate representation of different religious groups. Target engagement at places of worship that were under-represented.	[REDACTED]	During-scheme monitoring	Included within scheme budget	20/01/22 Breakdown of religion and belief contained in survey breakdown.

	the consultation period.					
Religion and belief	The scheme is likely to increase journey times for some worshippers when accessing their place of worship by motor vehicle.	Direct engagement with places of worship to review the specific needs of their religious community.		During-scheme monitoring	Included within scheme budget	20/01/22 Some responses received from places of worship in the community.
Sex	Traffic reassignment onto main roads may delay bus services, affecting females in particular	Monitor bus journey times using TfL data, and consider mitigation measures if there is an impact.		During-scheme monitoring	Included within scheme budget	20/01/22 Bus journey times examined in monitoring report
Sex	Public perception of personal security due to the reduced 'passive surveillance' of passing motor traffic	Continue to engage with the Metropolitan Police and monitor crime and antisocial behaviour within the QN area since implementation.		During-scheme monitoring	Included within scheme budget	20/01/22 Included as part of monitoring. Academic research reviewed.
Socio-economic deprivation	Reassignment of motor traffic may disproportionately impact those on lower incomes who are more likely to	Specific consideration should be given to where traffic is likely to be reassigned to, to review the impact on adjacent properties when reviewing traffic data. This includes consideration for impact on buses which people from more		During-scheme monitoring	Included within scheme budget	20/01/22 Traffic reassignment monitored during experimental phase and

	live on busier roads.	disadvantaged areas are more likely to use more frequently.				discussed in monitoring report.
Socio-economic deprivation	People on lower incomes are less likely to be able to afford to adapt to the measures (e.g. buying a new bike).	Encourage lower income households to make use of free bike repair services, such as Dr Bike, and opportunities to access affordable cycles, such as second hand bike markets.		During-scheme monitoring	Included within scheme budget	20/01/22 Increased Dr Bike services delivered. Further planned for 2022

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Enfield Equality Impact Assessment (EqIA)

Introduction

The purpose of an Equality Impact Assessment (EqIA) is to help Enfield Council make sure it does not discriminate against service users, residents and staff, and that we promote equality where possible. Completing the assessment is a way to make sure everyone involved in a decision or activity thinks carefully about the likely impact of their work and that we take appropriate action in response to this analysis.

The EqIA provides a way to systematically assess and record the likely equality impact of an activity, policy, strategy, budget change or any other decision.

The assessment helps us to focus on the impact on people who share one of the different nine protected characteristics as defined by the Equality Act 2010 as well as on people who are disadvantaged due to socio-economic factors. The assessment involves anticipating the consequences of the activity or decision on different groups of people and making sure that:

- unlawful discrimination is eliminated
- opportunities for advancing equal opportunities are maximised
- opportunities for fostering good relations are maximised.

The EqIA is carried out by completing this form. To complete it you will need to:

- use local or national research which relates to how the activity/ policy/ strategy/ budget change or decision being made may impact on different people in different ways based on their protected characteristic or socio-economic status;
- where possible, analyse any equality data we have on the people in Enfield who will be affected eg equality data on service users and/or equality data on the Enfield population;
- refer to the engagement and/ or consultation you have carried out with stakeholders, including the community and/or voluntary and community sector groups you consulted and their views. Consider what this engagement showed us about the likely impact of the activity/ policy/ strategy/ budget change or decision on different groups.

The results of the EqIA should be used to inform the proposal/ recommended decision and changes should be made to the proposal/ recommended decision as a result of the assessment where required. Any ongoing/ future mitigating actions required should be set out in the action plan at the end of the assessment.

Section 1 – Equality analysis details

Title of service activity / policy/ strategy/ budget change/ decision that you are assessing	Amendments to existing permanent Quieter Neighbourhoods
Team/ Department	Healthy Streets
Executive Director	Sarah Cary
Cabinet Member	Cllr Rick Jewell
Author(s) name(s) and contact details	Richard Eason
Committee name and date of decision	

Date the EqIA was reviewed by the Corporate Strategy Service	25 Aug 2022
Name of Head of Service responsible for implementing the EqIA actions (if any)	N/A
Name of Director who has approved the EqIA	Richard Eason

The completed EqIA should be included as an appendix to relevant EMT/ Delegated Authority/ Cabinet/ Council reports regarding the service activity/ policy/ strategy/ budget change/ decision. Decision-makers should be confident that a robust EqIA has taken place, that any necessary mitigating action has been taken and that there are robust arrangements in place to ensure any necessary ongoing actions are delivered.

Section 2 – Summary of proposal

Please give a brief summary of the proposed service change / policy/ strategy/ budget change/project plan/ key decision

Please summarise briefly:

What is the proposed decision or change?

What are the reasons for the decision or change?

What outcomes are you hoping to achieve from this change?

Who will be impacted by the project or change - staff, service users, or the wider community?

Enfield Council implemented two Quieter Neighbourhoods (QNs) in summer 2020 as a trial, the Bowes Primary Area QN (Bowes QN) and the Fox Lane Area QN (Fox Lane QN). Following a period of community feedback and monitoring, each QN was made permanent early in 2022. During the trial periods, some enhancements and associated activities were identified. The Council has been progressing these and are now proposing to:

- Make the necessary traffic management orders (TMOs) to:
- Convert four fixed (bollard) modal filters to camera enforced modal filters by introducing a 'no motor vehicles' restriction. This is proposed at the following locations: Maidstone Road, Selborne Road, Oakfield Road and The Mall.
- Introduce exemptions for Blue Badge holders and Dial-a-Ride vehicles to the existing camera enforced modal filters on Fox Lane, Meadway and Conway Road, and extend exemptions to the locations listed in 2a(i).
- Carry out monitoring on selected roads outside of the QN areas.
- Continue with small scale and minor improvements across both QNs (as outlined at para 25).
- Recommend that the potential alterations to the layout of the Bowes Primary Area QN (Bowes QN) are not taken forward.
- Recommend that the potential of altering the modal filter on the Meadway is not taken forward.
- Continue to engage and coordinate with Haringey Council as they deliver the Bounds Green Low Traffic Neighbourhood (LTN) adjacent to the Bowes QN.

The EqIA process during the trial periods considered the impacts of the establishment of the QNs. The EqIAs for each QN area were included within the portfolio reports recommending that the trials be made permanent. Now that the QNs are permanent, this EqIA focusses on the impacts of the proposed changes to the QNs. Of the above listed items, those most likely to have impacts on protected characteristics are the introduction of permits for Blue Badge holders, exemptions for Dial-a-Ride vehicles, and converting several fixed (bollard) filters to camera controlled. The remaining listed items are not considered to have any significant disproportionate impacts on people with protected characteristics and therefore are typically not explicitly addressed within this EqIA.

Section 3 – Equality analysis

This section asks you to consider the potential differential impact of the proposed decision or change on different protected characteristics, and what mitigating actions should be taken to avoid or counteract any negative impact.

According to the Equality Act 2010, protected characteristics are aspects of a person's identity that make them who they are. The law defines 9 protected characteristics:

1. Age
2. Disability
3. Gender reassignment.
4. Marriage and civil partnership.
5. Pregnancy and maternity.
6. Race
7. Religion or belief.
8. Sex
9. Sexual orientation.

At Enfield Council, we also consider socio-economic status as an additional characteristic.

“Differential impact” means that people of a particular protected characteristic (eg people of a particular age, people with a disability, people of a particular gender, or people from a particular race and religion) will be significantly more affected by the change than other groups. Please consider both potential positive and negative impacts, and provide evidence to explain why this group might be particularly affected. If there is no differential impact for that group, briefly explain why this is not applicable.

Please consider how the proposed change will affect staff, service users or members of the wider community who share one of the following protected characteristics.

Detailed information and guidance on how to carry out an Equality Impact Assessment is available [here](#). (link to guidance document once approved)

Age

This can refer to people of a specific age e.g. 18-year olds, or age range e.g. 0-18 year olds.

Will the proposed change to service/policy/budget have a **differential impact [positive or negative]** on people of a specific age or age group (e.g. older or younger people)?

Please provide evidence to explain why this group may be particularly affected.

The mean age of Enfield's wards tends to vary by location within the borough. The northern and eastern wards have some of the lowest mean ages in Enfield and the southern and western wards have some of the highest mean ages. Table 1 presents the age distribution across the wards where they overlap the permanent QN areas of Fox Lane and Bowes Primary.

Table 1: Age distribution by ward and Borough average

Age distribution	Arnos Grove (%)	Bowes (%)	New Southgate (%)	Palmers Green (%)	Southgate (%)	Winchmore Hill (%)	Borough of Enfield (%)
0-4	5.3	6.7	6.6	6.5	6.1	6.5	7.0
5-14	11.9	11.6	11.3	10.2	12.9	11.4	14.5
15-24	8.8	10.3	10.0	9.8	9.7	9.2	11.4
25-34	13.4	18.9	20.4	17.6	14.6	13.4	14.5
35-44	14.4	15.8	18.1	17.1	16.4	15.2	14.6
45-54	13.6	13.2	13.1	13.6	13.7	14.9	13.4
55-64	13.1	10.7	9.5	11.7	10.8	12.6	11.1
65-74	9.8	7.0	6.2	7.4	7.3	8.9	7.0
75+	9.6	5.7	4.8	6.1	8.5	8.0	6.4

Source: [ONS mid-year estimate 2020](#)

London Travel Demand Survey data from 2016-2019 shows that in general, younger people in Enfield walk and cycle more, and drive less than their elderly counterparts. Those aged 65 and over have the lowest levels by age group of walking and cycling, with 27% of all trips, but the highest percentage of trips driven (or as a passenger in a car or van) at 52%.

The proposals are considered to have a positive impact on older people, in particular those aged 85 or over who currently use, or may use in future, Dial-a-Ride services. Those aged 85 or over are automatically eligible to become a member to use Dial-a-Ride services (<https://tfl.gov.uk/modes/dial-a-ride/>).

Amending the TMOs as part of these proposals introduces an exemption for Dial-a-Ride vehicles from existing camera enforced modal filters, and from the existing fixed (bollard) filters which are being converted to camera enforced.

Older people who have a disability and live within the QN areas may also benefit from exemptions for Blue Badge holders.

Mitigating actions to be taken

N/A

Disability

A person has a disability if they have a physical or mental impairment which has a substantial and long-term adverse effect on the person's ability to carry out normal day-day activities.

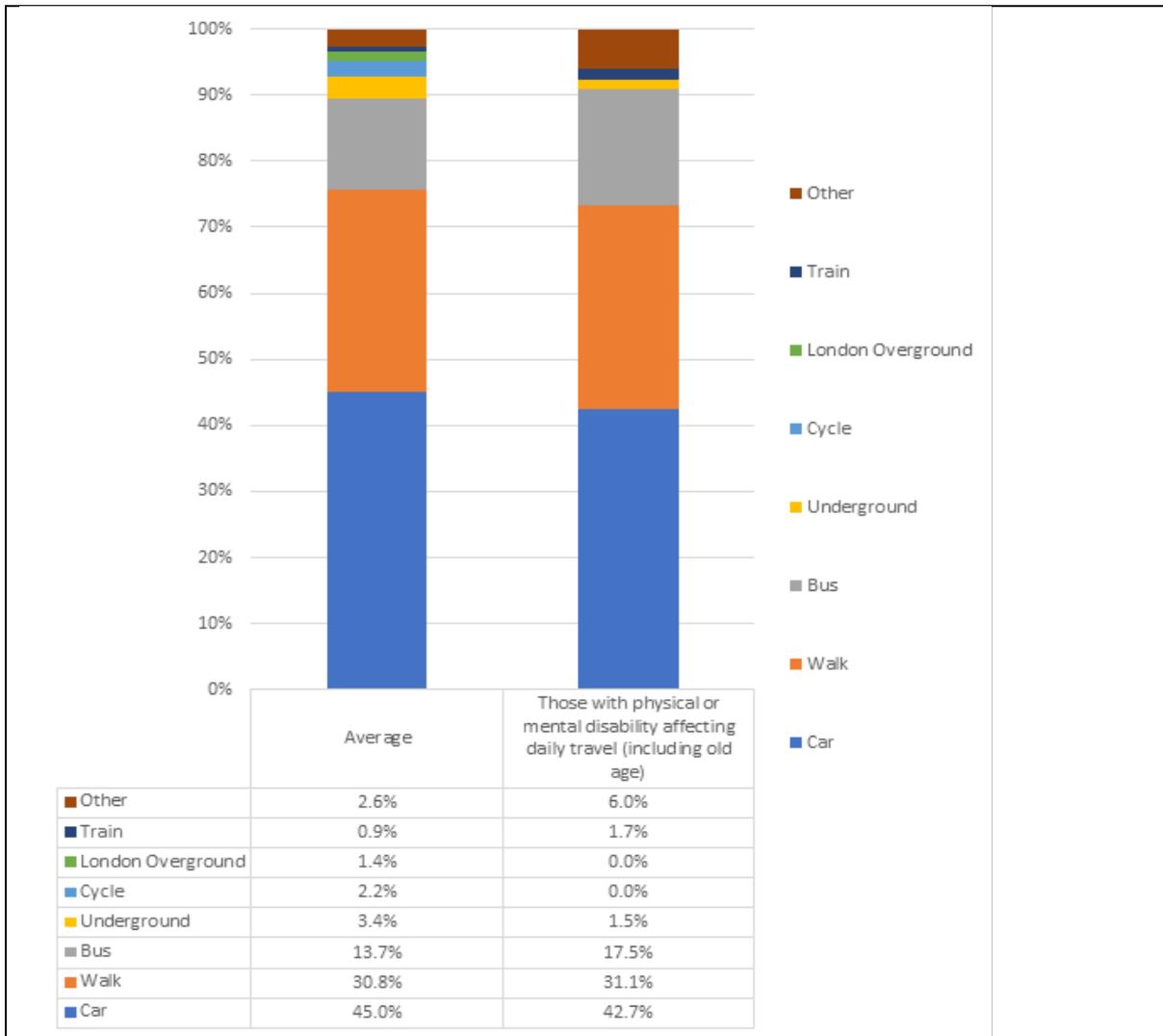
This could include: physical impairment, hearing impairment, visual impairment, learning difficulties, long-standing illness or health condition, mental illness, substance abuse or other impairments.

Will the proposed change to service/policy/budget have a **differential impact [positive or negative]** on people with disabilities?

Please provide evidence to explain why this group may be particularly affected.

Mode split for people with a physical or mental disability is shown in in Figure 1. When compared to the London Travel Demand Survey mode split of trips made by all people, car use for those with disabilities is lower, bus use is greater and walking is marginally higher.

Figure 1: Mode split by those with a physical or mental disability affecting daily travel



Source: LTDS (2016/17, 2017/18 and 2018/19)

With regards to Blue Badge holders, there are approximately 250 Blue Badge holders within the Bowes QN area and approximately 200 within the Fox Lane QN area.

As a result of the consultation and Equalities Impact Assessment during the trial periods of the Bowes and Fox Lane QNs, it was recommended to consider measures to improve access for residents with disabilities and of those with caring responsibilities through potential exemptions.

The Council has now taken steps to exempt Dial-a-Ride vehicles from all camera enforced modal filters within the QNs, and to provide exemptions for permit holders. These changes were introduced to the Bowes QN in June 2022, and are now planned to be rolled out in the Fox Lane QN.

The current approach to permits allows Blue Badge holders residing within the QN area to apply for a permit to nominate one vehicle to be exempt from camera enforced filters within their 'home QN'. The permit could apply to the Blue Badge

holder's own vehicle or they could nominate someone else's vehicle where a user of that vehicle has a role in the care of a Blue Badge holder within a QN. This approach has been selected based on feedback received and is similar to the approach taken in several other London boroughs. It also considers the aim to maintain the low traffic environment of the QNs and the Council's current operational capabilities. Blue Badge holders living in the QN area will be able to benefit from quicker and more direct journeys to their home.

The proposed changes to convert some modal filters to a camera enforced filter and introduce permits are expected to have a positive impact on some disabled people, who will be able to pass through the filter into a low traffic area. This will improve journey times for those who need a motor vehicle to make shorter journeys in the immediate area on a frequent basis.

The Blue Badge scheme provides an administratively efficient mechanism for identifying those with disabilities residing in the QN area for whom an exemption is required, and for implementing the exemption. In person support is available via Enfield's Parking Shop for those who cannot apply using the accessible website. Persons residing within the QN area who are disabled but do not hold a Blue Badge will not experience a change, similarly those Blue Badge holders who do not live within the QN area. However, the wider approach to exemptions is being reviewed, and further categories may be added. Implementing the proposals now does not preclude the Council's ability to make changes in future.

Mitigating actions to be taken

None – but note that the wider approach to exemptions is being reviewed, and further categories may be added.

Gender Reassignment

This refers to people who are proposing to undergo, are undergoing, or have undergone a process (or part of a process) to reassign their sex by changing physiological or other attributes of sex.

Will this change to service/policy/budget have a **differential impact [positive or negative]** on transgender people?

Please provide evidence to explain why this group may be particularly affected.

It is considered that the proposed amendments to the Bowes and Fox Lane QNs are unlikely to have a disproportionate impact on grounds of gender reassignment.

Mitigating actions to be taken

N/A

Marriage and Civil Partnership

Marriage and civil partnerships are different ways of legally recognising relationships. The formation of a civil partnership must remain secular, where-as a marriage can be conducted through either religious or civil ceremonies. In the U.K both marriages and civil partnerships can be same sex or mixed sex. Civil partners must be treated the same as married couples on a wide range of legal matters.

Will this change to service/policy/budget have a **differential impact [positive or negative]** on people in a marriage or civil partnership?

Please provide evidence to explain why this group may be particularly affected.

It is considered that the proposed amendments to the Bowes and Fox Lane QNs are unlikely to have a disproportionate impact on grounds of gender reassignment.

Mitigating actions to be taken

N/A

Pregnancy and maternity

Pregnancy refers to the condition of being pregnant or expecting a baby. Maternity refers to the period after the birth and is linked to maternity leave in the employment context. In the non-work context, protection against maternity discrimination is for 26 weeks after giving birth, and this includes treating a woman unfavourably because she is breastfeeding.

Will this change to service/policy/budget have a **differential impact [positive or negative]** on pregnancy and maternity?

Please provide evidence to explain why this group may be particularly affected.

It is considered that the proposed amendments to the Bowes and Fox Lane QNs are unlikely to have a disproportionate impact on grounds of pregnancy and maternity.

Mitigating actions to be taken

N/A

Race

This refers to a group of people defined by their race, colour, and nationality (including citizenship), ethnic or national origins.
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Will this change to service/policy/budget have a differential impact [positive or negative] on people of a certain race?

Please provide evidence to explain why this group may be particularly affected.

It is considered that the proposed amendments to the Bowes and Fox Lane QNs are unlikely to have a disproportionate impact on grounds of race.
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Mitigating actions to be taken

N/A

Religion and belief

Religion refers to a person's faith (e.g. Buddhism, Islam, Christianity, Judaism, Sikhism, Hinduism). Belief includes religious and philosophical beliefs including lack of belief (e.g. Atheism). Generally, a belief should affect your life choices or the way you live.

Will this change to service/policy/budget have a differential impact [positive or negative] on people who follow a religion or belief, including lack of belief?

Please provide evidence to explain why this group may be particularly affected.

It is considered that the proposed amendments to the Bowes and Fox Lane QNs are unlikely to have a disproportionate impact on grounds of sex.

Mitigating actions to be taken

N/A

Sex

Sex refers to whether you are a female or male.

Will this change to service/policy/budget have a **differential impact [positive or negative]** on females or males?

Please provide evidence to explain why this group may be particularly affected.

It is considered that the proposed amendments to the Bowes and Fox Lane QNs are unlikely to have a disproportionate impact on grounds of sex.

Mitigating actions to be taken

N/A

Sexual Orientation

This refers to whether a person is sexually attracted to people of the same sex or a different sex to themselves. Please consider the impact on people who identify as heterosexual, bisexual, gay, lesbian, non-binary or asexual.

Will this change to service/policy/budget have a **differential impact [positive or negative]** on people with a particular sexual orientation?

Please provide evidence to explain why this group may be particularly affected.

It is considered that the proposed amendments to the Bowes and Fox Lane QNs are unlikely to have a disproportionate impact on grounds of sexual orientation.

Mitigating actions to be taken

N/A

Socio-economic deprivation

This refers to people who are disadvantaged due to socio-economic factors e.g. unemployment, low income, low academic qualifications or living in a deprived area, social housing or unstable housing.

Will this change to service/policy/budget have a **differential impact [positive or negative]** on people who are socio-economically disadvantaged?

Please provide evidence to explain why this group may be particularly affected.

It is considered that the proposed amendments to the Bowes and Fox Lane QNs are unlikely to have a disproportionate impact on grounds of socio-economic deprivation.

Mitigating actions to be taken.

N/A

Section 4 – Monitoring and review

How do you intend to monitor and review the effects of this proposal?

Who will be responsible for assessing the effects of this proposal?

The number of Blue Badge holders within the Bowes QN area is approximately 250 and within the Fox Lane area approximately 200. The number of applications made to Enfield Council for a permit can be reviewed periodically to review uptake of the permits.

Residents at any time can continue to email healthystreets@enfield.gov.uk to provide feedback about any Healthy Streets projects, including Quieter Neighbourhoods or via their local Ward Councillor. Engagement with emergency services continues on an ongoing basis. Feedback received by the Council will be reviewed.

Section 5 – Action plan for mitigating actions

Any actions that are already completed should be captured in the equality analysis section above. Any actions that will be implemented once the decision has been made should be captured here.

Identified Issue	Action Required	Lead officer	Timescale/By When	Costs	Review Date/Comments
N/A	N/A	N/A	N/A	N/A	N/A