

**Working together to create a borough of opportunity  
Predictive Equality Impact Assessment (PEIA)  
FOR ALL COUNCIL DECISIONS ONLY**



**Title of report or proposal:**

**Procurement and Implementation of Replacement Electoral Management System**

Describe in full the aims, objectives and purpose of the proposal, including desired outcomes:

**The current electoral management system is being de-supported on 1 December 2009. The report provides proposals for a replacement system.**

Department:

**Finance & Corporate Services**

Officer Responsible: *(to be completed by the report author)*

**Steve Miller, Electoral Services Manager, x2175 [steve.miller@lbhf.gov.uk](mailto:steve.miller@lbhf.gov.uk)**

(Signature, Print Name, Contact Number and Email Address)

Principal Policy Officer: *(to be completed by the Corporate Principal Officer)*

Signed off by Jane Hill on **19/03/09** Email [PEIA@lbhf.gov.uk](mailto:PEIA@lbhf.gov.uk) Tel 020 8753 3533

PLEASE ANSWER THE FOLLOWING QUESTIONS:

1. Who are the main people that this decision will affect?

**All borough residents, elected representatives, and recipients for registers of electors**

2. Identify the risks that could prevent the planned outcomes

**Installing a new EMS has to fit within the electoral cycle. The only risk is not meeting the implementation date of July 2009**

3. Could the proposal have a positive impact on **a) race b) disability c) gender d) sexual orientation e) age f) belief system groups?** (Please provide evidence e.g. user feedback, complaints, monitoring?)

**a) b) c) d) e) f) The replacement aims to improve office efficiencies and increase proactive management of electoral registration for residents and representatives. Proposals for development include a field on elector records for other formats such as: requests for large print, Braille, audio, easy read and other languages. We hope to be able to share this with other council services.**

4. Could the proposal have a differential negative impact on **a) race b) disability c) gender d) sexual orientation e) age f) belief system groups?** (Please provide evidence e.g. user feedback, complaints, monitoring,?)

**a) b) c) d) e) f) No**

5. Could the proposal have any differential impact (either positive, negative or neutral) on the health outcomes of the local population? Please provide details.

**N/A**

6. Can any differential negative impact of the decision be justified?

**N/A**

7. If you have undertaken any internal/ external research or consultation(s) please list these below:

**Forum meetings have taken place with disabled residents and their representatives about this change, and future meetings are planned.**

8. Do you need to undertake any further consultation? If so, what and with whom?

**As above**

9. If any differential negative impact is predicted, what actions are you planning to implement which would help lessen any adverse impact? Please give details.

**N/A**

**PLEASE EMAIL COMPLETED FORM TO [PEIA@lbhf.gov.uk](mailto:PEIA@lbhf.gov.uk)**

**Contact: Equalities & Diversity Officer, 020 8753 3533  
London Borough of Hammersmith & Fulham**