

Title of proposed EIA *
 Please provide the title of your policy or service area.

Reference No
 Please do not amend. A reference number will automatically be applied once the form is saved.

EA is in support of *

Review Frequency *
 Please select how regularly you plan to review the assessment.

Date of first review *
 Based on the review frequency, please enter the date when your first review will take place.

Directorate *

Division

Service Area
 Please add if applicable

Responsible Officer(s) *
 This is the person responsible for completing, submitting and reviewing the assessment. If you get the message 'The user does not exist or is not unique'. Please enter the full email address.

Quality Control Officer(s) *
 This is the person responsible for checking the quality of the assessment. If you get the message 'The user does not exist or is not unique'. Please enter their full email address.

Accountable Officer(s) *
 This is the person responsible for making the final decision on the EIA and the policy, plan, procedure etc. If you get the message 'The user does not exist or is not unique'. Please enter their full email address.

Purpose of proposal *

Data sources
 Survey(s)
 Consultation Results
 Interviews
 relevant reports/strategies
 Statistical Database (please specify)
 relevant research
 Other (please specify)
 What sources of data have been used to produce the screening of this policy/proposal? (Please tick all that apply)

Please include any other sources of data

ASSESS THE POTENTIAL IMPACT AGAINST THE PROTECTED CHARACTERISTICS

Protected characteristic: Age *
 Service Users / Stakeholders
 Employees
 Wider Community
 Not Applicable
 Please select those directly impacted or affected.

Age details:

For the selected characteristics, please add further details. Describe the potential positive and negative impact of the policy or service and how any negative impacts will be mitigated. Describe who is affected, how they are affected and any additional comments.

Protected characteristic: Disability *

- Service Users / Stakeholders
- Employees
- Wider Community
- Not Applicable

Please select those directly impacted or affected.

Disability details:

For the selected characteristics, please add further details. Describe the potential positive and negative impact of the policy or service and how any negative impacts will be mitigated. Describe who is affected, how they are affected and any additional comments.

Protected characteristic: Gender *

- Service Users / Stakeholders
- Employees
- Wider Community
- Not Applicable

Please select those directly impacted or affected.

Gender details:

For the selected characteristics, please add further details. Describe the potential positive and negative impact of the policy or service and how any negative impacts will be mitigated. Describe who is affected, how they are affected and any additional comments.

Protected characteristics: Gender Reassignment *

- Service Users / Stakeholders
- Employees
- Wider Community
- Not Applicable

Please select those directly impacted or affected.

Gender reassignment details:

For the selected characteristics, please add further details. Describe the potential positive and negative impact of the policy or service and how any negative impacts will be mitigated. Describe who is affected, how they are affected and any additional comments.

Protected characteristics: Marriage and Civil Partnership *

- Service Users/ Stakeholders
- Employees
- Wider Community
- Not Applicable

Please select those directly impacted or affected.

Marriage and civil partnership details:

For the selected characteristics, please add further details. Describe the potential positive and negative impact of the policy or service and how any negative impacts will be mitigated.

Protected characteristics: Pregnancy and Maternity *

- Service Users / Stakeholders
- Employees
- Wider Community
- Not Applicable

Please select those directly impacted or affected.

Pregnancy and maternity details:

For the selected characteristics, please add further details. Describe the potential positive and negative impact of the policy or service and how any negative impacts will be mitigated. Describe who is affected, how they are affected and any additional comments.

Protected characteristics: Race *

- Service Users / Stakeholders
- Employees
- Wider Community
- Not Applicable

Please select those directly impacted or affected.

Race details:

For the selected characteristics, please add further details. Describe the potential positive and negative impact of the policy or service and how any negative impacts will be mitigated. Describe who is affected, how they are affected and any additional comments.

Protected characteristics: Religion or Beliefs *

- Service Users / Stakeholders
- Employees
- Wider Community
- Not Applicable

Please select those directly impacted or affected.

Religion or beliefs details:

For the selected characteristics, please add further details. Describe the potential positive and negative impact of the policy or service and how any negative impacts will be mitigated. Describe who is affected, how they are affected and any additional comments.

Protected characteristics: Sexual Orientation *

- Service Users / Stakeholders
- Employees
- Wider Community
- Not Applicable

Please select those directly impacted or affected.

Sexual orientation details:

For the selected characteristics, please add further details. Describe the potential positive and negative impact of the policy or service and how any negative impacts will be mitigated. Describe who is affected, how they are affected and any additional comments.

Please indicate any actions arising from completing this screening exercise.

Please indicate whether a full impact assessment is recommended

 NO

If yes, please continue to complete the remaining questions. If no, please go to the quality control section below.

What data has been collected to facilitate the assessment of this policy/proposal?

What are the main findings from the analysis of the data?

Consultation analysis

Who was consulted, what are the results of the consultation exercise?

Adverse impact on any people with protected characteristics.

Based on the analysis of the data does the policy/proposal have any adverse impact?

Could the policy/proposal be modified to reduce or eliminate any adverse impact?

Can the policy/proposal be modified to reduce or eliminate any adverse impact? on any particular group(s)?

How will the effect(s) of this policy/proposal on equality be monitored?

What data is required in the future?

Please describe the data needed to ensure effective monitoring of this policy/proposal?

Are there any adverse impacts on any particular group(s)

If yes, please explain your reasons for going ahead.

Initial equality impact assessment of your proposal

Please give details on any initial assessment carried out. For a full assessment please complete the rest of the form. AS OF 29/11/2018 YOU ARE NO LONGER REQUIRED TO COMPLETE THIS BOX.

Consulted People or Groups

A presentation was due to be presented to the City Housing Liaison Board (CHLB) on 23rd January however this meeting was cancelled. All members of the CHLB were subsequently sent the proposals contained within the report on 30th January inviting any comments. The City Housing Liaison Board is made up of representatives from area Housing Liaison Boards which are groups of tenants who meet to discuss housing issues with housing officers. This is part of a formal tenant engagement network. It is not envisaged that there will be any objections to the proposals in the report.

In addition, members of the City Housing Liaison Board have been sent out a presentation on the HRA Business Plan 2020+. The presentation concentrates on the 2020/21 budget, including the proposals to increase rents on a citywide percentage, in line with the statutory limits on rent changes. This was also due to be presented at the meeting on 23rd January.

A copy of the City Housing Liaison Board agenda is attached

AS OF 29/11/2018 YOU ARE NO LONGER REQUIRED TO COMPLETE THIS BOX

Informed People or Groups

AS OF 29/11/2018 YOU ARE NO LONGER REQUIRED TO COMPLETE THIS BOX

Summary and evidence of findings from your EIA *

These proposals for 2020/21 do not propose to alter the ring-fenced HRA's core activity which is to provide and support the delivery of Council housing as part of an overall balanced budget.

These proposals for 2020/21 also do not propose to alter the core activity of the Housing Options Service.

The objectives are fully consistent with the housing priorities set out in the Council Business Plan and Budget 2020+ and the HRA Business Plan 2020+ to provide affordable and sustainable housing for residents, and to provide a Housing Options Service.

The rent and service charge income is the key component of the HRA

Budget and the revised income that will be generated for both 2020/21 and future years from these proposals, when taken alongside other budget proposals, will ensure that the HRA Self-Financing Settlement continues to be affordable.

The proposals are consistent with the revised National Rent Policy that was confirmed in July 2015 for implementation from April 2016.

Temporary Accommodation rent income is a key component of the Housing Options Service Budget and the revised income that will be generated for both 2020/21 and future years from these proposals, when taken alongside other budget proposals, will ensure that the Housing Options Service continues to be affordable.

The proposals will ensure that services to Council tenants can continue to be maintained at an appropriate level and also may provide potential regeneration opportunities. Proposals will ensure that the Housing Options Service can continue to be maintained at an appropriate level.

The Housing Rent Charges for 2020/21 will be applied, without exception, to all tenants of the Council. The other charges reviewed as a part of this report will be applied for all service users in receipt of the underlying services. Additionally, the Service Charges are subject to regular reviews to ensure they remain appropriate and that they offer value for money for all users of these services.

There will be no negative effect on people in respect of age, disability, gender, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or beliefs, and sexual orientation as a result of these proposals.

Please add any documents including any consultation or engagement findings. Attach any source data using the attachment button above. Please include how you will mitigate against any negative impacts.

QUALITY CONTROL SECTION

Submit to the Quality Control Officer for reviewing?

Please tick this box and 'Save' the document once you have finished. Your nominated Quality Control Officer will be notified to review the assessment and decide whether it can proceed for approval or reject it.

Quality Control Officer comments

Please identify the membership of the City Housing Liaison Board. ▲

This will ensure that your audience understands how broad your consultation group is. ■

Please state that you are tabling at the meeting on 23rd ▼

Please untick 'Submit to quality control officer box' before saving.

Decision by Quality Control Officer

Proceed for final approval ▼

IMPORTANT: Quality Control Officer - Please untick the above box 'Submit to the Quality Control Officer for reviewing?' before provide your decision.

Submit draft to Accountable Officer?

Quality Control Officers only - Please tick the box when you are happy for the assessment to be submitted for approval.

Decision by Accountable Officer

Approve

IMPORTANT: Accountable Officer - Please untick the above box 'Submit draft to Accountable Officer' before providing your final decision.


Date approved / rejected by the Accountable Officer

31/01/2020 


Reasons for approval or rejection


Please print and save a PDF copy for your records

Attachments

200123 City HLB Agenda.docx  Delete

Version: 207.0

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Last modified at 31/01/2020 01:38 PM by Workflow on behalf of  Karen Huxtable

Save

Cancel

