## TEMPLATE 2

TEMPLATE 2

Full Equality Impact Assessment (EqIA) Template

In order to carry out this assessment, it is important that you have completed the EqIA E-learning Module and read the Corporate Guidelines on EqIAs. Please refer to these to assist you in completing this form and assessment.

| What are the proposals being assessed? ( <b>Note</b> : 'proposal' includes a policy, service, function, strategy, project, procedure, restructure) | Amending the existing Discretionary Rate Relief (DRR) policy to exclude 'Top Up' discretionary rate relief to charity shops from 1 <sup>st</sup> April 2013.  |
|--|---|
| Which Directorate / Service has the responsibility for this?   | Collections and Housing Benefits - Flnance  |
| Name and job title of lead officer   | Fern Silverio – Divisional Director Collections and Housing Benefit   |
| Name & contact details of the other person(s) involved in the EqIA:  | Lynn Allaker – Service Manager Revenues<br>Tel: 020 8424 1920 Email: Lynn.allaker@harrow.gov.uk   |
| Date of assessment:  | 27/9/2011 Initial Equality Implications Assessment  19 <sup>th</sup> January 2012 reviewed further to outcome of consultation  22 <sup>nd</sup> November 2012  16 <sup>th</sup> January 2013 reviewed further to feedback from St. Luke's Hospice |

### Stage 1: Overview

| 1. What are the aims, objectives, and desired outcomes of your proposals?                              | To further reduce the direct cost to the local authority as agreed through the commissioning process by a further £25,000 to cap the budget at £50,000 by excluding charity shops from the discretionary rate relief policy from 1 <sup>st</sup> April 2013.                         |
|--|--|
| (Also explain proposals e.g. reduction / removal of service, deletion of posts, changing criteria etc) | To support the strategy to minimise the potential impact of any increase in discretionary rate relief costs from the 1 <sup>st</sup> April 2013 as a result of the Localism Bill whereby Business Rates will be retained locally including payment of any discretionary rate relief. |
| 2. What factors / forces could prevent you from achieving these aims, objectives and outcomes?         | The lack of responses to consultation by the charities which are needed to provide a full picture of the impacts and would aid decision by members.  |
| 3. How does this contribute to your  | Implementing the agreed reduction in budget from 1 <sup>st</sup> April 2013 and to ensure that the maximum income is   |

| Directorates Service Plan?   | being retained locally from Business Rates.   |
|--|---|
| <b>4.</b> Who are the customers? Who will be affected by this proposal? For example who are the external/internal customers, communities, partners, stakeholders, the workforce etc.       | Charity shops occupying business premises in the borough. There are currently 15 shops in the borough receiving discretionary relief affecting 4 different organisations. The purposes of these shops are to raise funds to support the organisation. It should be noted that this decision only impacts on a maximum 20% of the rates bill there is no proposal to remove the 80% mandatory charity rate relief they are also in receipt of. |
| <ul> <li>5. Is the responsibility shared with another department, authority or organisation? If so:</li> <li>Who are the partners?</li> <li>Who has the overall responsibility?</li> </ul> | No but from 1 <sup>st</sup> April 2013 the risk of overspending on DRR are no longer paid in full to the Central pool and shared with both the Central Pool and the preceptors; 50% to the Central Pool, Harrow 30% and the preceptors (GLA, Fire, Police) 20%.   |
| <b>5A.</b> How are/will they be involved in this assessment?   | N/A   |

### Stage 2: Monitoring / Collecting Evidence / Data

**6.** What information is available to assess the impact of your proposals (*include the actual data, statistics and evidence*)? List the main sources of data, research and other sources of evidence (including full references) reviewed to determine impact on each equality group (protected characteristic). This can include results from consultations and the involvement tracker, customer satisfaction surveys, focus groups, research interviews, staff surveys, workforce profiles, service users profiles, local and national research, evaluations etc

(Where possible include data on the nine protected characteristics. Where you have gaps, you may need to include this as an action to address in the action plan)

| Age (including carers of young/older people) | Feedback from consultation, comments from Citizen Advice Bureau, and representation from voluntary sector and information from the grants section |
|--|---|
| Disability (including carers of disabled     | As above  |
| people)                                      |   |
| Gender Reassignment                          | Not Known   |

| Marriage / Civil Partnership   | Not Known   | Not Known   |   |        |     |     |          |  |
|--|---|---|---|--------|-----|-----|----------|--|
| Pregnancy and Maternity  | Not Known   | Not Known   |   |        |     |     |          |  |
| Race   | Not Known   | Not Known   |   |        |     |     |          |  |
| Religion and Belief  | Not Known   |   |   |        |     |     |          |  |
| Sex / Gender   | Not Known   |   |   |        |     |     |          |  |
| Sexual Orientation   | Not Known   |   |   |        |     |     |          |  |
| 7. Do you need to collect any addition monitor the impact on different grounds.                      |   | Unlikely that charity shops are able to provide any data on users of the charity shops but have already had the opportunity to provide information as part of previous consultation on impact on their direct users. A presumption has to be made that the profit gained by running these shops is fed into the overall income of the organisation not benchmarked for specific costs. Letters issued 19/12/12 to the charity organisations affected by proposal asking for their specific comments on proposed removal of DR for charity shops |   |        |     |     |          |  |
| <b>8.</b> Are there any other local/regiona can inform this assessment if you hof the groups?        |   | Cons  | ideration to other local authority polic  | cies   |     |     |          |  |
| 9. Have you undertaken any consul unions, community / voluntary group                                |   |   | include consultation with staff, memice users)  | nbers, | Yes | Yes | No       |  |
| Who was consulted?   | What consultation methods used?   | What did you learn from your consultation?  What do the results show about the impact on different equality groups (protected characteristics)?   |   |        |     |     |          |  |
| Previous consultation covered all current recipients of DRR were invited to participate in an online | Pre Consultation a letter was in September to each curren recipient advising them that tourrent level of relief was go end on 31st March 2012 and | it<br>the<br>ing to   | where relevant to the options considered in the consultation process this year:  1) That organisations do not want St Luke's treated any differently from |        |     |     | ess this |  |

| Representatives from CAB and other voluntary organisations represented by Julie Browne and Steve Porter. | a consultation would be taking place.  An additional letter was then issued to each organisation advising them that an online Consultation would be taking place and would end on 9 <sup>th</sup> January 2012  The matter was discussed at the meeting on 8 <sup>th</sup> March 2012 between representatives of the Voluntary & Community Sector and the Leader of the Council and Chief Executive and it was agreed that Julie Browne would represent the Voluntary sector. Meetings took place on the 24 <sup>th</sup> April 2012 and 29 <sup>th</sup> August 2012 | 2) Majority agree removing DRR if there is an alternative mandatory relief with no direct cost to the council 3) The majority disagree with a rateable value ceiling as this disincentives shared working opportunities to achieve efficiencies and central place for users. 4) The majority agree that at least 75% of the users should be residents and that DRR should be given for Harrow Specific organisations only but there was a caveat that organisations based near the boundary should not be held to this limit.  Issues considered at the meetings included linking the review to the commissioning process, likely reduction in budget required from 2013-14, setting a rateable value ceiling but similar reservations as above voiced, removing relief from charity shops, removing relief from any organisation able to make a profit.  That a current list of organisations be circulated so that any potential impact on charity shops could be considered by the Voluntary Sector and sources for EQIA information that may be available.  An email was sent to various parties within LBH asking for any characteristic information held, mainly in grants and also Equalities Centre and a response from grants was received which gave details of the two top characteristics the organisations were targeting with their projects of which only St Luke's is specifically mentioned and stated 'Age older people' and 'disabled' as their two characteristics.  Following the 2 <sup>nd</sup> meeting a further update on current cases was circulated to CAB, Julie Browne and Steve Porter of Capable communities stating that the recommendations would be removal of relief to charity shops. |
|--|---|--|
| Charity Shops affected by the  | Letter sent advising the affected   | Reply received from St. Luke's Hospice which raised the following  |

### proposed changes:

- St. Luke's Hospice
- Barnardo's
- Harrow Mencap
- Harrow Samaritans

Charities of the changes and requesting comments on the impacts

### issues:

- Their 11 charity shops within the borough are a major source of revenue for the Hospice. For the year 2011 the shops produced 16.7% of St. Luke's income, second most significant to the commissioning of their services by the NHS.
- St. Luke's have stated that the shops income will become even more important towards the sustainability of their services to the residents in Harrow because of the future of NHS commissioning remaining uncertain and further reductions mooted.
- In real terms the reduction of £14,848.36 reduction in discretionary rate relief represents 50% of the salary of a nurse. Staff costs being over 80% of the Hospice's budget and any reduction in income will adversely affect the provision of local services for the residents of Harrow
- 300 local people volunteer by working in St. Luke's shops. Whilst the prime aim of the shops is to contribute towards the running costs of St. Luke's, the shops also are a major provider of volunteering opportunities in Harrow.
- Removal of discretionary relief will adversely affect the delivery of care for the terminally ill residents of Harrow and their families and carers.

**NOTE:** If you have not undertaken any consultation as yet, you need to consider if you need to carry out any consultation. For example, if you have insufficient data/information for any equality group and you are **unable** to assess the potential impact, you may want to consult with them on your proposals as how they will affect them. Any proposed consultation needs to be **completed before** progressing with the rest of the EqIA. **Guidance on consultation/community involvement toolkit can be accessed via the link below**<a href="http://harrowhub/info/200195/consultation/169/community">http://harrowhub/info/200195/consultation/169/community</a> involvement toolkit

# **10**. If you have not undertaken any consultation, explain why?

A short consultation has been carried out with the voluntary sector which followed on from the earlier consultation in the year. However the charities affected have been specifically sent letters to inform them of the proposed further changes and in order to obtain their views on the proposals. We are however still awaiting their responses as of the 9/1/2013.

### Stage 3: Assessing Impact and Analysis

**11.** What does your information tell you about the impact on different groups? Consider whether the evidence shows potential for differential impact, if so state whether this is an adverse or positive impact? How likely is this to happen? How you will mitigate/remove any adverse impact?

How likely is this to happen? How will you mitigate/remove any adverse impact?

| TIOW likely is tills to | How likely is this to happen? How will you mitigate/remove any adverse impact? |          |   |   |  |  |  |  |
|-------------------------|--|----------|---|---|--|--|--|--|
| Protected               | Positive   | Adverse  | Explain what this impact is, how likely it is to      | What measures can you take to eliminate or reduce   |  |  |  |  |
| Characteristic          |  |          | happen and the extent of impact if it was to occur.   | the adverse impact(s)? E.g. consultation, research, |  |  |  |  |
|                         |  |          |   | implement equality monitoring etc (Also Include     |  |  |  |  |
|                         |  |          |   | these in the Improvement Action Plan at Stage 5)    |  |  |  |  |
|                         |  |          |   | The proposal relates to 20% top up relief only.     |  |  |  |  |
|                         |  |          |   | Depending on the overall running costs of the       |  |  |  |  |
|                         |  |          |   | organisation, this could be a small percentage of   |  |  |  |  |
|                         |  |          |   | their overall running costs. Based on the latest    |  |  |  |  |
|                         |  |          |   | accounts on the charity commission website          |  |  |  |  |
|                         |  |          | All 4 organisations provide support to residents of   |   |  |  |  |  |
|                         |  |          | all ages  | 1) St Lukes Hospice - the summary shows that        |  |  |  |  |
| Age (including          |  |          | St Luke's is likely to provide a higher proportion of | £2.69m was raised as income via trading and         |  |  |  |  |
| carers of               |  | X        | services to older people, although it does provide    | there was expenditure of £1.67m so                  |  |  |  |  |
| young/older             |  | ^        | services to all ages.                                 | increasing their expenditure by £15K                |  |  |  |  |
| people)                 |  |          | Barnardo's is likely to provide a higher proportion   | represents less than 1% increase.                   |  |  |  |  |
|                         |  |          | of services to younger people, in particular          | 2) Barnado's – the summary shows that               |  |  |  |  |
|                         |  |          | children.   | £38.95m was raised as income via trading            |  |  |  |  |
|                         |  |          |   | and expenditure of £31.97m so increasing            |  |  |  |  |
|                         |  |          |   | their expenditure by just over £1k would be         |  |  |  |  |
|                         |  |          |   | negligible. There is no information to show         |  |  |  |  |
|                         |  |          |   | the income and expenditure of the Harrow            |  |  |  |  |
|                         |  |          |   | shop.   |  |  |  |  |
|                         | <u> </u>   | <u> </u> |   |   |  |  |  |  |

|   |   |   | <ul> <li>3) Harrow Mencap – the summary shows that £320.5K was raised via trading and no expenditure so increasing the expenditure by just over £2K would be negligible. DRR for their offices would not be withdrawn as part of this policy review.</li> <li>4) Harrow Samaritans – the accounts show shop income in 2011/12 of £34K and expenditure of £10K so by increasing expenditure by just under £500.00 whilst it would have an impact, this would represent under 5% of their existing costs. DRR for their offices would not be withdrawn as part of this policy review.</li> <li>The only other options are to leave the DRR in place, reduce the DRR for charity shops to a rate less than 20% or delay implementation of the decision. All of these options will have financial implications for the Council.</li> </ul> |
|---|---|---|--|
| Disability<br>(including carers<br>of disabled<br>people) | X | All 4 organisations provide support with disabilities  St Luke's provides support to people with terminal illness, many of whom would be considered disabled. The feedback from St. Lukes has been provided in detail in Section 9 of this EqIA however states that the withdrawal of the discretionary rate relief would adversely affect the delivery of care for the terminally ill residents of Harrow and their families and carers as the sum to be withdrawn is a significant sum in relation to St. Luke's income.  Harrow Mencap provide services to individuals | See above  |

|                                | with mental illness and their families. |  |
|--------------------------------|---|--|
| Gender<br>Reassignment         | N/A                                     |  |
| Marriage and Civil Partnership | N/A                                     |  |
| Pregnancy and Maternity        | N/A                                     |  |
| Race                           | N/A                                     |  |
| Religion or Belief             | N/A                                     |  |
| Sex                            | N/A                                     |  |
| Sexual<br>Orientation          | N/A                                     |  |
| Other (please                  |   |  |
| state)                         |   |  |

**12. Cumulative impact –** Are you aware of any cumulative impact? For example, when conducting a major review of services. This would mean ensuring that you have sufficient relevant information to understand the cumulative effect of all of the decisions.

### **Example:**

A local authority is making changes to four different policies. These are funding and delivering social care, day care, respite for carers and community transport. Small changes in each of these policies may disadvantage disabled people, but the cumulative effect of changes to these areas could have a significant effect on disabled people's participation in public life. The actual and potential effect on equality of all these proposals, and appropriate mitigating measures, will need to be considered to ensure that inequalities between different equality groups, particularly in this instance for disabled people, have been identified and do not continue or widen. This may include making a decision to spread the effects of the policy elsewhere to lessen the

Last year there were other potential changes to the way existing Voluntary Grants were awarded and a review of subsidised commercial council premises which may also impact on the same target group. However analysis has been carried out through the 3<sup>rd</sup> sector Strategy Group so the cumulative impact on any one organisation is mapped and known so if those changes were implemented this would have taken the cumulative impact into account.

Some of the organisations are national charities and as such decisions by other local authorities to cut discretionary rate relief could have a cumulative impact on those organisations.

St. Luke's Hospice have provided feedback and advised that they could suffer cumulative impacts due to the future of NHS commissioning remaining uncertain and further reductions mooted.

concentration in any one area.

13. How do your proposals contribute towards the requirements of the Public Sector Equality Duty (PSED), which requires the Council to have due regard to eliminate discrimination, harassment and victimisation, advance equality of opportunity and promote good relations between different groups.

(Include all the positive actions of your proposals, for example literature will be available in large print, Braille and community languages, flexible

working hours for parents/carers, IT equipment will be DDA compliant etc)

|  | nts/carers, it equipment will be  | //   |  |   |
|--|---|--|--|---|
| Equality Group                                   | Eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Equality Act 2010 | Advance equality of opportunity between people from different groups | Foster good relations between people from different groups | What actions can you take to meet these requirements? (Also include these in the Improvement Action Plan at Stage 5)  |
| Age (including carers of young/older people)     | The organisations provide support to a variety of age groups.   |  |  | The initial proposals included a proposal to protect St Luke's hospice from any cuts. A number of respondents felt it was unfair to single out one organisation, when other organisations provided equally important services. It is proposed that any cut to discretionary rate relief should be applied equally to all charity shops regardless of the community they serve or the size of the charity. |
| Disability (including carers of disabled people) | The organisations provide support to a variety of disabilities and terminal illness                                   |  |  | See above   |
| Gender<br>Reassignment                           | Information not available   |  |  |   |
| Marriage and Civil                               | Information not available   |  |  |   |

| Partnership        |                           |  |  |
|--------------------|---------------------------|--|--|
| Pregnancy and      | Information not available |  |  |
| Maternity          |                           |  |  |
| Race               |                           |  |  |
| Religion or Belief |                           |  |  |
| Sex                | Information not available |  |  |
| Sexual Orientation | Information not available |  |  |

14. Is there any evidence or concern that direct or indirect discrimination may occur with reference to anti discrimination legislation?

**Direct discrimination -** occurs when a person is treated less favourably than others on the grounds of their age, disability, gender, race, religion or belief, or sexual orientation. Refer to main guidelines and toolkit for examples of direct discrimination.

**Indirect discrimination** - occurs when a rule, condition or requirement, which applies equally to everyone, has a disproportionately adverse effect on people from a particular equalities group when there is no objective justification for the rule. Refer to main guidelines and toolkit for examples of indirect discrimination.

|          |     | Age<br>(including<br>carers) | Disability<br>(including<br>carers) | Gender<br>Reassignme<br>nt | Marriage<br>and Civil<br>Partnership | Pregnancy<br>and<br>Maternity | Race | Religion and<br>Belief | Sex | Sexual<br>Orientation |
|----------|-----|------------------------------|-------------------------------------|----------------------------|--------------------------------------|-------------------------------|------|------------------------|-----|-----------------------|
| Direct   | Yes |                              |                                     |                            |                                      |                               |      |                        |     |                       |
| Direct   | No  | Х                            | Х                                   | Х                          | Х                                    | Х                             | Х    | Х                      | Х   | Х                     |
| Indirect | Yes |                              |                                     |                            |                                      |                               |      |                        |     |                       |
| mairect  | No  | Х                            | Х                                   | Х                          | Х                                    | Х                             | Х    | Х                      | Х   | Х                     |

If you have answered 'yes' to any of the above you need to stop and rethink and should not proceed with your proposals. (You are also encouraged to seek Legal Advice)

### Stage 4: Decision

**15.** Please indicate which of the following statements best describes the outcome of your EqIA ( tick one box only)

**Outcome 1 –** No change required: when the EqIA has not identified any potential for discrimination or adverse impact and all opportunities to promote equality are being addressed.

Outcome 2 – Adjustments to remove adverse impact identified by the EqIA or to better promote equality. List the actions you propose to take to address this in the Improvement Action Plan at Stage 5

Outcome 3 – Continue with proposals despite having identified some potential for adverse impact or missed opportunities to promote equality. In this case, the justification needs to be included in the EqIA and should be in line with the PSED to have 'due

| regard'. In some cases, compelling reasons will be needed. You s   |   |
|--|---|
| the negative impact and/or plans to monitor the impact. (explain t | ,   |
| Outcome 4 – Stop and rethink: when your EqIA shows actual or p     | ootential unlawful discrimination. (You are also encouraged to          |
| seek Legal Advice)   |   |
|  | The Council is required to reduce the funding gap and is reviewing all  |
|  | discretionary awards This proposal impacts on 4 organisations only. The |
|  | impact to other recipients of DRR have previously been assessed as      |
|  | having high impacts and not supporting them would have a detrimental    |
|  | impact on Harrow's residents e.g. organisations such as CAB, all scout  |

**15A.** If your EqIA is assessed as **outcome 3**, explain your justification with full reasoning to continue with your proposals?

Legal advice is that financial reasons can be used as a reason to make most policy decisions. In this case it is a discretionary decision of the council to offer rate relief, so the council can decide not to continue with this for proper policy reasons, eg financial or operational. However in making its decision, the council must take account of all relevant information and its overarching statutory duties; eg equalities, crime and disorder, child poverty etc. Consultation responses are relevant and must be taken into account by the decision makers. However the equality implications in this proposal are not so serious that they outweigh the financial drivers. Additionally this proposal does not affect statutory duties or contractual obligations where financial information could not be taken into account.

and guide groups, Age Concern and Relate.

| Stage 5: Making Adjustments (Improvement Action Plan)  |                 |                 |             |              |          |
|--|-----------------|-----------------|-------------|--------------|----------|
| <b>16</b> . List below any actions you plan to take as a result of this impact assessment. This should include any actions identified throughout the EqIA. |                 |                 |             |              |          |
| Area of potential adverse impact e.g. Race, Disability   | Action proposed | Desired Outcome | Target Date | Lead Officer | Progress |
|  |                 |                 |             |              |          |
|  |                 |                 |             |              |          |

### Stage 6 - Monitoring

The full impact of the decision may only be known after the proposals have been implemented, it is therefore important to ensure effective monitoring measures are in place to assess the impact.

| <b>17.</b> How will you monitor the impact of the proposals once they have been implemented? How often will you do this?                                    | Review if any organisations which no longer receive DRR have ceased to operate in Harrow after 6 months and 12 months.  Monitoring of DRR budget on a monthly basis   |
|---|---|
| 18. What monitoring measures need to be introduced to ensure effective monitoring of the policy? (Also Include in Improvement Action Plan at Stage 5)       | Introduce a formal review process which includes capturing information about the users to give monitoring information on the above characteristics to be carried out every other year.  Monitoring of DRR budget on a monthly basis |
| <b>19.</b> How will the results of any monitoring be analysed, reported and publicised?   | Budget Forecasting Report to Portfolio Holder & CSB   |
| <b>20.</b> Have you received any complaints or compliments about the policy, service, function, project or decision being assessed? If so, provide details. | No  |

### Stage 7 – Reporting outcomes

The completed EqIA must be attached to all committee reports and a summary of the key findings included in the relevant section within them.

EqIA's will also be published on the Council's website and made available to members of the public on request.

|   |   | ,  |             |  |
|---|---|--|-------------|--|
| 21. Summary of the assessment                                       |   | Enabling budget reduction  |             |  |
| NOTE: This section can also be used in your Cabinet reports etc but |   | Removing the 20% top up support from all charity shops                 |             |  |
| you must ALSO attach the full EqIA to th                            | e report  |  |             |  |
|   |   | The above will result in 4 organisations losing funding. The range of  |             |  |
| What are the key impacts – both adverse and positive?               |   | loss based on organisation ranges from just under £500.00 to just over |             |  |
| What course of action are you advising as a result of this EqIA?    |   | £15,000.   |             |  |
| Are there any particular groups affected more than others?          |   | As the funding amounts are small in comparison to the relevant         |             |  |
| Do you suggest to proceeding with your proposals although an        |   | organisations overall budgets, adverse impacts are minimal.            |             |  |
| adverse impact has been identified?                                 |   |  |             |  |
| 22. How will the impact assessment be                               |   |  |             |  |
| publicised? E.g. Council website,                                   |   |  |             |  |
| intranet, forums, groups etc  |   |  |             |  |
| Stage 8 - Organisational sign Off (to b                             |   |  |             |  |
|   | to the chair of your Department                   | al Equalities Task Group (DETG) to be                                  | signed off. |  |
| 23. Which group or committee  |   |  |             |  |
| considered, reviewed and agreed the                                 | Revenues Management Team, Portfolio Holder, Legal |  |             |  |
| EqIA and the Improvement Action                                     | incremental management rount, r                   |  |             |  |
| Plan?   |   |  |             |  |
| Signed: (Load officer completing Folly)                             |   | Signad: (Chair of DETC)  |             |  |
| Signed: (Lead officer completing EqIA)                              | 73/12   | Signed: (Chair of DETG)  |             |  |
|   |   |  |             |  |
| Date:   | 6/1/2013  |  |             |  |