

Equality Impact Assessment Form

Please ensure that you refer to the **'Equality Impact Assessment Guidance'** while completing this form. If you would like further guidance please contact the Equalities Officer or Equalities Team

Details
Name of Initiative to be assessed: High Street Rate Relief 2018/19
Name of responsible officer: Mike Parry
Group/Directorate: Customer Services (Place & Transformation).
Service Area: Revenues
Date: 29th May 2018

(a) WHAT ARE YOU ASSESSING FOR IMPACT ?

Service/ Function	Policy/ Procedure	Project	Strategy	Plan	Proposal	Information/ Position statement
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

(b) Please name and describe below

To implement Welsh Governments High Street Rate Relief Scheme 2018-19.

(c) IS THE DELIVERY OF THIS INITIATIVE AFFECTED BY LEGISLATION OR OTHER DRIVERS SUCH AS CODES OF PRACTICE?

If so, please identify what and how?

It is a Welsh Government initiative to offer rate relief to certain high street retail hereditaments. The relief is discretionary and is awarded under S47 of the Local Government Finance Act 1988

(d) Does the initiative directly affect service users, employees or the wider community?

Yes	<input checked="" type="checkbox"/>	Continue assessment
No	<input type="checkbox"/>	No need to continue screening or carry out an EqIA

Screening/Relevance Test: Is an equality impact assessment required?

Screening is used to decide whether the initiative you are responsible for has a high or medium negative impact on any of the protected groups and will require a full EqIA. Please highlight the positive impact the decision will have on the protected characteristics.

What will be the effect on :-

Protected Characteristic	Impact? <i>Include Positive and Negative</i>
Age	N/A
Disability	N/A
Gender Reassignment	N/A
Marriage & Civil Partnership	N/A
Pregnancy and Maternity	N/A
Race	N/A

Equality Impact Assessment Form

Religion or Belief	N/A
Sex	N/A
Sexual orientation	N/A
Carers	N/A
Welsh Language	N/A

If after completing the EqlA screening/relevance test you determine that this service/function/policy/project is not relevant for an EqlA you must provide adequate explanation below (Please use additional pages if necessary).

The policy relates specifically to Business Rates, none of the above mentioned protected characteristics are affected by the policy.

justify your decision?

Are you happy that you have sufficient evidence to justify your decision?

Yes No

Signed_



Position: Revenues & Benefits Manager

N.B. If the initial screening process has identified actual or potential high or medium negative impact on a particular group or groups then you MUST carry out a full EqlA.

Full Equality Impact Assessment

You should use the information gathered at the screening stage to assist you in identifying possible negative/adverse impact, including positive impact, and clearly identify which protected groups are affected.

In terms of any disproportionate / negative / adverse impact that the proposal may have on a protected group, what steps (if any) could be taken to reduce that impact for each group identified. Attach a separate action plan if necessary.

If ways of reducing the impact have been identified but are not possible, please explain why they are not possible.

Please highlight positive impacts and actions that have been identified as a result

Equality Impact Assessment Form

of the assessment process.

Evidence Sources

(i) Give details of any data or research that has led to your reasoning above, in particular, the sources used for establishing the demographics of service users.

(ii) Give details of how you have engaged with service users on the proposals and steps to avoid any disproportionate impact on a protected group and how you have used any feedback to influence your decision.

Are you satisfied that the engagement process complies with the requirements of the Statutory Equality duties?

Decision Log – (detail how Elected Members and Senior Managers have been involved in the decision process (give dates of key meetings and decisions made))

Review

Date of Next Review:

N/A

If review is not required, explain why.

No review required as the policy is time limited to one financial year

Approved by: M Parry

Signature:



Job Title:

Revenues & Benefits Manager

Approval date: 29/05/2018

Equality Impact Assessment Form

--

Date of Update:
Update recording