

## Equality Impact Assessment / Equality Analysis

<b>Title of service or policy</b>	Supplementary Planning Document on HMOs (including a threshold approach)
<b>Name of directorate and service</b>	Directorate: Service Delivery Service: Planning and Accommodation Services
<b>Name and role of officers completing the EIA</b>	Planning consultants (Arup) on behalf of Cleo Newcombe-Jones, Planning Policy Officer
<b>Date of assessment</b>	13 <sup>th</sup> August 2012

Equality Impact Assessment (or ‘Equality Analysis’) is a process of systematically analysing a new or existing policy or service to identify what impact or likely impact it will have on different groups within the community. The primary concern is to identify any discriminatory or negative consequences for a particular group or sector of the community. Equality impact Assessments (EIAs) can be carried out in relation to service delivery as well as employment policies and strategies.

This toolkit has been developed to use as a framework when carrying out an Equality Impact Assessment (EIA) or Equality Analysis on a policy, service or function. It is intended that this is used as a working document throughout the process, with a final version including the action plan section being published on the Council’s and NHS Bath and North East Somerset’s websites.

<b>1. Identify the aims of the policy or service and how it is implemented.</b>		
	<b>Key questions</b>	<b>Answers / Notes</b>
<b>1.1</b>	<p>Briefly describe purpose of the service/policy including</p> <ul style="list-style-type: none"> <li>• How the service/policy is delivered and by whom</li> <li>• If responsibility for its implementation is shared with other departments or organisations</li> <li>• Intended outcomes</li> </ul>	<p>Implementation of the following:</p> <p>Preparation, consultation and adoption of a Supplementary Planning Document (SPD) setting out the Council’s approach to the distribution and dispersal of Houses of Multiple Occupation across the City. The SPD does this by setting out criteria for assessing planning applications required by an Article 4 Direction for the conversion from Family Homes (Use Class C3) to Houses of Multiple Occupation (Use Classes C4 of Sui generis). This policy accompanies saved policy HG12 from the Local Plan.</p> <p>The responsibility for implementing the SPD is with the Planning Policy team.</p> <p>The Development Management team will be responsible for using the SPD to determine planning applications made.</p> <p>The intended outcomes include:</p> <ul style="list-style-type: none"> <li>• Response to local residents’ concerns regarding over-concentration of HMOs in some areas of the City, both in terms of existing and potential future problems.</li> </ul>

		<ul style="list-style-type: none"> <li>• Dispersal of HMOs rather than concentration in certain areas of the City leading to more choice in areas to rent privately across Bath</li> <li>• Should lead to more balanced communities, meaning a wider mix of residents in many areas.</li> <li>• A dispersal of HMOs across the city may lead to more affordable private rented sector accommodation in some areas. This combination may make it easier to attract new employees to the area.</li> </ul>
1.2	<p>Provide brief details of the scope of the policy or service being reviewed, for example:</p> <ul style="list-style-type: none"> <li>• Is it a new service/policy or review of an existing one?</li> <li>• Is it a national requirement?).</li> <li>• How much room for review is there?</li> </ul>	<p>Houses of Multiple Occupation (HMOs) can be defined as houses with 3 or more people not from the same family living together. High densities of HMOs are often associated with issues such as noise disturbances, litter and parking difficulties.</p> <p>This is being taken forward alongside additional licensing requirements for HMOs that are due to be implemented in the Oldfield Park, Westmoreland and Widcombe wards.</p> <p>A change in the law in 1st October 2010, which stated that all change of use from a C3 dwelling (a family home) to a C4 HMO is classed as permitted development and will not require planning permission. The introduction of an Article 4 Direction would mean that express planning permission would be required for a material change of use.</p> <p>Arup have conducted a feasibility study to consider, in particular, whether an Article 4 Direction and an accompanying Supplementary Planning Document would be suitable tools to assist in the control of conversion of dwelling houses (i.e. family homes) to HMOs in the City of Bath. Other measures that could be implemented to help create sustainable, balanced communities, including the use of licensing, were also reviewed in this feasibility study.</p> <p>The Council gave notice of its intention to implement an Article 4 Direction in May 2012, and carried out a six week consultation. Feedback has been generally very supportive of the approach.</p>

		<p>The proposed policy approach for the SPD is set out as follows:</p> <ul style="list-style-type: none"> <li>• <b>Stage 1: Neighbourhood Assessment</b> <i>An area based approach looking at HMO density at the Census Output Area level with a threshold of over 25%. This Stage 1 assessment would allow many areas to be screened out and not require a second stage assessment, in the “non-red” areas shown on the map, although the Article 4 Direction would apply, planning permission would almost certainly be granted for a change of use from a family house to a small HMO.</i></li> <li>• <b>Stage 2: Local Assessment</b> <i>A 25% threshold within a 100m buffer around an individual application property. Where the property is in a red area the Stage 1 assessment would flag up that planning permission is unlikely to be granted for a change of use from a family house to a small HMO. A more sensitive Stage 2 assessment would then be triggered, in some cases where there was not a local concentration of HMOs (under 25% within 100m buffer) permission may still be granted, but in most cases permission would not be granted.</i></li> </ul> <p>It is proposed that that maps showing HMO density would be updated automatically on a quarterly basis to reflect any change in density. It is proposed to use the housing database (i.e. licensed HMOs and any others that the Council had been made aware of).</p> <p>Following consultation in July 2012, it is proposed that a higher 25% threshold be proposed, rather than 20%,originally suggested. This reflects the housing stock and existing infrastructure in Bath, and allows some limited room for growth of HMO numbers in areas currently not adversely affected.</p> <p>There is room for review with further consultation planned and monitoring of the implementation of the A4D and SPD.</p>
1.3	Do the aims of this policy link to or conflict with any other policies of the Council?	The proposed SPD fits with the saved Local Plan Policy HG12 which regulates larger HMO conversions. It also fits with the overarching objective for balanced communities as detailed in the emerging Core Strategy and the Housing and Well Being Strategy.

**Comment [ac1]:** Insert policy wording once agreed

		<p>The benefits of this option are highlighted in Section 1.1. Several challenges have been identified including that it:</p> <ul style="list-style-type: none"> <li>• May push rental prices up in some areas (particularly Oldfield Park, Westmoreland and Widcombe areas), potentially leading to inequality in terms of where HMO residents can afford to live.</li> <li>• May mean HMO residents in new areas feel isolated if there is a lack of public transport and they lack personal transport.</li> <li>• Students living over a wider area may mean that some areas, at least initially, are not well served by public transport. This may lead to an increase in those wanting to use private modes to access University campuses.</li> <li>• There may be an increase in students seeking welfare advice if students have problems with affording their rent in their preferred area / a social divide in new or existing areas</li> <li>• May lead to “de-studentification”, and not return to family housing as local residents might hope. This may lead to local owner-occupier residents seeing a drop in value of their homes in areas where high concentrations of HMOs already exist. Where existing densities are really high, it may also become difficult to sell homes if they want to move.</li> <li>• If the SPD leads to a perception that HMOs are not welcome in Bath, then this may lead to a shortage in affordable private rented property. This may make it harder for employers to attract lower paid employees, particularly those at the start of their careers, including new graduates.</li> </ul>
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**2. Consideration of available data, research and information**

Monitoring data and other information should be used to help you analyse whether you are delivering a fair and equal service. Please consider the availability of the following as potential sources:

- **Demographic** data and other statistics, including census findings
- Recent **research** findings (local and national)
- Results from **consultation or engagement** you have undertaken
- Service user **monitoring data** (including ethnicity, gender, disability, religion/belief, sexual orientation and age)
- Information from **relevant groups** or agencies, for example trade unions and voluntary/community organisations
- Analysis of records of enquiries about your service, or **complaints** or **compliments** about them
- Recommendations of **external inspections** or audit reports

	<b>Key questions</b>	<b>Data, research and information that you can refer to</b>
<b>2.1</b>	What is the equalities profile of the team delivering the service/policy?	Wide range of service deliverers including public, private and voluntary sectors and the Universities which mirrors the equality profile of Bath and North East Somerset.
<b>2.2</b>	What equalities training have staff received?	Planning policy team have received corporate equalities training and EQIA training. A number of the service deliverers within the Council will have received corporate equalities training.
<b>2.3</b>	What is the equalities profile of service users?	<p>Through equalities mapping and population profile analysis (BANES Equality Profile 2009) we now know more about the wider groups of user who will benefit from any improvements.</p> <p>Data is available from the Higher Education Statistics Agency, on the gender, age and socio-economic profile of students at the Higher Education Institutions in Bath  <a href="http://www.hesa.ac.uk/index.php?option=com_content&amp;task=view&amp;id=2060&amp;Itemid=141">http://www.hesa.ac.uk/index.php?option=com_content&amp;task=view&amp;id=2060&amp;Itemid=141</a></p> <p>The BANES Residential Review 2007 provides data across the BANES wards on items such as population age profile, tenure profile, affordable housing profile and location of accredited properties.</p>

2.4	What other data do you have in terms of service users or staff? (e.g results of customer satisfaction surveys, consultation findings). Are there any gaps?	<p>Surveys of tenants has provided some data</p> <p><b>Gaps</b></p> <ul style="list-style-type: none"> <li>• Concern that survey data from tenants reflects a small sample, but agreement at the consultation workshop that further data from tenants wouldn't provide new insights.</li> <li>• The total number of HMOs in the City based on existing data is considered to be an underestimate of the real level of provision.</li> <li>• Data on the profile of landlords/HMO developers is lacking.</li> <li>• Data on the profile of HMO residents other than students is lacking.</li> </ul>
2.5	<p>What engagement or consultation has been undertaken as part of this EIA and with whom? What were the results?</p>	<p>As part of the feasibility study a workshop was held on 24th October 2011 in the Guildhall, Bath to scope stakeholders views on the issues. The aims of the workshop were:</p> <ul style="list-style-type: none"> <li>• to bring stakeholders together to share and understand different perspectives related to HMOs in Bath;</li> <li>• to share the data related to both need for HMOs and impacts of HMOs; and</li> <li>• to test potential interventions that might help to create balance and sustainable communities</li> </ul> <p>The results included analysis of the benefits and challenges of implementing an Article 4 Direction. It was agreed that should an Article 4 Direction be implemented it should adopt a city wide approach and include a threshold approach.</p> <p>A second stakeholder workshop was held on 19th July 2012 with the following objectives:</p>

**Comment [ac2]:** Anything in here on the A4D consultation, or should that be considered a separate policy?

		<ul style="list-style-type: none"> <li>• To inform stakeholders of research undertaken to date on options and proposals for HMO licensing and planning controls in Bath.</li> <li>• To share the emerging evidence base, approaches taken by other local authorities and gather feedback</li> <li>• To clarify aspects of licensing and planning policy formulation where stakeholders have the opportunity to influence, and gather feedback.</li> </ul> <p>There was a general consensus that the two staged assessment approach proposed for planning applications was helpful, as stage 1 provides landlords/developers/prospective property purchasers with some certainty as to the likelihood of planning approval. Many agreed with the 20% threshold, but there was some concern that this threshold may be too low. Most groups agreed that there should be very limited additional policy criteria, to keep the assessment as simple as possible.</p> <p>A wide range of stakeholders were represented at the workshops, including:</p> <ul style="list-style-type: none"> <li>• Ward Councillors from across Bath</li> <li>• Planning Officers, B&amp;NES Council</li> <li>• Housing, Transport, Research, Community and Economic Development Officers, B&amp;NES Council</li> <li>• University of Bath</li> <li>• Bath Spa University</li> <li>• Royal United Hospital</li> <li>• Bath Spa University Students' Union</li> <li>• University of Bath Students' Union</li> <li>• HMO Landlords</li> <li>• HMO Developers</li> <li>• Estate Agents</li> </ul>
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<b>2.6</b>	If you are planning to undertake any consultation in the future regarding this service or policy, how will you include equalities considerations within this?	A full consultation process is planned with respect to the SPD, over 6 weeks. It is proposed that this runs alongside the consultation on HMO licensing to provide clarity on the issues and overlaps. The consultation would target all groups of user who would be affected by the proposals. It is proposed that there will be a series of 5 drop-in sessions targeted t particular areas, as well as the online consultation.
<b>3. Assessment of impact: 'Equality analysis'</b>		
	Based upon any data you have considered, or the results of consultation or research, use the spaces below to demonstrate you have analysed how the service or policy: <ul style="list-style-type: none"> <li>• Meets any particular needs of equalities groups or helps promote equality in some way.</li> <li>• Could have a negative or adverse impact for any of the equalities groups</li> </ul>	
	<b>Examples of what the service has done to promote equality</b>	<b>Examples of actual or potential negative or adverse impact and what steps have been or could be taken to address this</b>
<b>3.1</b>	<b>Gender</b> – identify the impact/potential impact of the policy on women and men. (Are there any issues regarding pregnancy and maternity?)	<p>The SPD will potentially lead to a more dispersed pattern of HMOs in the City with students in particular living in a wider range of neighbourhoods than currently experienced. The intention of the SPD is to encourage and maintain balanced and mixed communities that support the needs of all groups in society It should also provide greater choice in terms of areas to live.</p> <p>Potential negative impacts of a more dispersed set of students or young professionals over a larger area could lead to feelings of isolation for young women who are forced to live further out and may feel unsafe travelling at night.</p>

		<p>Promoting a more balanced community, helping to make all feel welcome.</p> <p>NB this positive impacts will apply to all the groups considered below.</p>	<p>NB this will apply to all the groups considered below</p> <p><b>Action</b>  <i>Ensure the provision of good public transport and amenity in all areas where there is likely to be a high proportion of HMOs.</i></p>
<b>3.2</b>	<b>Transgender</b> – – identify the impact/potential impact of the policy on transgender people	<p>The proposals are very unlikely to create an impact on individuals because of their sexual orientation. However, should someone consider that this is in fact the case we will consider the points made</p>	
<b>3.3</b>	<b>Disability</b> - identify the impact/potential impact of the policy on disabled people (ensure consideration of a range of impairments including both physical and mental impairments)	<p>As in 3.1 above; and</p>	<p>The completion of licence application forms and planning applications can be difficult for those with certain impairments. There can also be communication difficulties if legal action is taken for noncompliance with the HMO licence provisions.</p> <p><b>Action</b>  <i>Guidance to be offered to applicants to complete the planning application process.</i></p>
<b>3.4</b>	<b>Age</b> – identify the impact/potential impact of the policy on different age groups	<p>As in 3.1 above and</p> <p>Current issues associated with HMOs include isolation/ feelings of vulnerability among the elderly, the proposal should lead to more balanced communities as there is a greater choice in areas to live.</p>	<p>May push up rental prices in some areas (particularly Oldfield Park, Westmoreland and Widcombe area) often affecting those on lower incomes, and students, who tender to be younger people.</p> <p><b>Action</b>  <i>Future provision of purpose built</i></p>

		<p>Family housing in areas of high density of HMOs are likely to become more attractive, leading to more balanced communities</p> <p>More choice of high quality HMOs across the city will make it easier to attract young professionals/lower paid employees to Bath.</p>	<p><i>accommodation on transport corridors in site allocations plans such as the Placemaking Plan.</i></p> <p>May lead to students and young people living in peripheral areas of the City possibly leading to feelings of isolation for young people that are forced to live further out.</p> <p><b>Action</b> <i>Ensure the provision of good public transport and amenity in all areas where there is likely to be a high proportion of HMOs.</i></p>
3.5	<b>Race</b> – identify the impact/potential impact on different black and minority ethnic groups	As in 3.1 above	<p>Wards with highest proportion of BME populations Bathwick with 16% and Abbey with 15%, also have high proportions of HMOs, so these groups may be adversely affected by the potential inflated rental prices that arise out of the proposals.</p> <p><b>Action</b> <i>Ensure other areas where people may end up living have good levels of public transport and amenity.</i></p>
		<b>Examples of what the service has done to promote equality</b>	<b>Examples of potential negative or adverse impact and what steps have been or could be taken to address this</b>
3.6	<b>Sexual orientation</b> - identify the impact/potential impact of the policy on	The proposals are very unlikely to create an impact on individuals because of their sexual orientation. However, should someone consider that this is in fact the case we will consider the points made.	

	lesbians, gay, bisexual & heterosexual people		
<b>3.7</b>	<b>Religion/belief</b> – identify the impact/potential impact of the policy on people of different religious/faith groups and also upon those with no religion.	As in 3.1 above and	None identified
<b>3.8</b>	<b>Socio-economically disadvantaged</b> – identify the impact on people who are disadvantaged due to factors like family background, educational attainment, neighbourhood, employment status can influence life chances	As in 3.1 above  Family housing in areas of high density of HMOs are likely to become more affordable, meaning it could become easier for new entrants to the housing market	May push up rental prices in some areas (particularly Oldfield Park, Westmorel and Widcombe area) that will affect those with lower salaries.  <b>Action</b> <i>Ensure other areas where people may end up living, have good levels of public transport and amenity</i>
<b>3.9</b>	<b>Rural communities</b> – identify the impact / potential impact on people living in rural communities	Potentially increasing the choice in areas to live within the city, e.g. young people living at home in rural areas, may be able to move out, as HMOs are dispersed across the city	Potential for feeling that HMOs are unwelcome within the City and for greater numbers of HMOs to appear outside the city in more rural areas.  <b>Action</b> <i>On going monitoring of impact of SPD, as set out within the document.</i>

#### 4. Bath and North East Somerset Council & NHS B&NES Equality Impact Assessment Improvement Plan

Please list actions that you plan to take as a result of this assessment. These actions should be based upon the analysis of data and engagement, any gaps in the data you have identified, and any steps you will be taking to address any negative impacts or remove barriers. The actions need to be built into your service planning framework. Actions/targets should be measurable, achievable, realistic and time framed.

Issues identified	Actions required	Progress milestones	Officer responsible	By when
Ensure the consultation on the SPD is accompanied by appropriate guidance and that additional support is available for equalities groups.	Ensure equalities is included in the plan for the formal consultation on the SPD	Preparation of appropriate guidance in time for the consultation.	Planning Policy Team	In time for consultation
HMO occupants forced to live in other areas, due to rising prices in central locations.	Ensure good levels of amenity and public transport in the alternative areas where people may end up living	Review in conjunction with local transport policy and proposals.  Review accessibility of wards within Bath where HMO housing are likely to grow as a proportion of housing stock. Planning policy team to monitor	Planning Policy Team	Ongoing
Potential feelings of isolation for students and other HMO	Information provision, e.g. on transport access, local	Included within student information and housing packs	Student Community	To coincide with students

residents who live in less accessible areas	amenities, safety measures, and support helplines		Liaison Officer	arriving at University and during housing week
Potential for feeling that HMOs are unwelcome within the city and for greater numbers of HMOs to appear outside the city in more rural areas.	Monitoring of impacts of SPD and Article 4 Direction	Annual monitoring reports	Planning Policy Team	Post-implementation

## 5. Sign off and publishing

Once you have completed this form, it needs to be 'approved' by your Divisional Director or their nominated officer. Following this sign off, send a copy to the Equalities Team ([equality@bathnes.gov.uk](mailto:equality@bathnes.gov.uk)), who will publish it on the Council's and/or NHS B&NES' website. Keep a copy for your own records.

**Signed off by:**

(Divisional Director or nominated senior officer)

**Date:**