

Agenda Item No: 6
Report To: Cabinet
Date of Meeting: 26th May 2022
Report Title: Repton – land acquisition in the HRA
Report Author & Job Title: Mark James – Development Partnership Manager
Sharon Williams – Head of Housing
Portfolio Holder Cllr. Paul Clokie – Portfolio Holder for Housing



Summary:

Housing services is pleased to report it has reached in principle an agreement with the development consortium on the Repton development in Ashford to buy a parcel of land. This land is earmarked in the section 106 (s106) agreement for the site to provide 'primary healthcare provision'. The Council's housing services team believes it can provide such a facility and deliver some affordable homes above that building.

This short report details to members the latest progress on this acquisition of the land parcel and discussions on bringing forward the healthcare element. Subject to planning permission, this purchase will have the potential benefit of the Borough Council delivering some affordable housing for those with either a particular healthcare need, as well as delivering in partnership with the health sector a meaningful healthcare premises for the locality.

Members will recall that the Council's ability to increase its affordable housing stock levels in the Housing Revenue Account (HRA) has been enhanced by the delegated authority to the Head of Housing (in consultation with the Head of Finance and IT and the portfolio holders for housing and finance and IT) to purchase land where openings arise. That authority was extended to include homes within s106 agreements in 2021, moves which see the Council perceived as forward-thinking among its peers and developers.

Fresh acquisitions are important when the Council has identified opportunities on all suitable land available to it.

Key Decision: No
Significantly Affected Wards: Repton alone at this time, though neighbouring wards may be involved once allocation criteria are agreed.
Recommendations: **The Cabinet is recommended to:-**

- I. **Note the acquisition being made under the delegated authority of the Assistant Director - Housing**
- II. **Note Exempt Appendix B and note the acquisition price of the land**
- III. **Agree that the funding of £146,000 (£65,000 of which is a sustainable loan to be repaid by 2024) secured from the One Public Estate (OPE) is used to support a feasibility study to identify the facilities that could provide most benefit to the local community, and note that a further report will be presented to members when this work has been completed**

Policy Overview: Building on solid foundations: delivering affordable homes in Ashford – our delivery plan for 2019-2023

Housing Strategy Framework Priority 1 – Improve the supply of affordable housing to meet local housing needs in urban and rural areas, and Housing Statement 2018-2023

Reform of Housing Revenue Account (HRA) – Cabinet endorsed five key priorities for further spend, as a result of greater freedom within the HRA.

National Housing Strategy 2011 – delivering new homes under the affordable rent model.

A Charter For Social Housing Residents – Social Housing White Paper 2020.

Financial Implications:

The Council's HRA Business Plan was agreed by Cabinet members in December 2021 and agreed to be a robust plan that enables the Council's housing service to increase its housing stock as well as move towards the Corporate Plan goal of achieving carbon neutrality and deliver a management service befitting the Caring Ashford objective. The viability of individual acquisitions is assessed by officers on a site-by-site basis and fed into the Business Plan as a whole. In this instance there are no adverse impacts from the acquisition and proposed costs of building out a scheme on this piece of land, therefore the decision has been taken to proceed with the acquisition.

Legal Implications:
*Text agreed by
 Principal Solicitors -
 Property & Projects
 and Strategic
 Development on
 18/5/22*

The Council has power to acquire land and housing for purposes under part II of the Housing Act 1985 (the Act). Under Section 17 of the Act, the Council may for the purposes under Part II:

- acquire land to erect houses;
- acquire houses, or buildings which may be made suitable as houses together with associated land;

- acquire land to be used to provide facilities connected with housing accommodation;
- acquire land to carry out works to alter, enlarge, repair or improve an adjoining house.

Following the acquisition, Housing Services must satisfy any outstanding s106 requirement that may exist to deliver a primary healthcare facility, as part of any proposals for development of the site (as no planning permission exists for development of the site at present, the proposals will also be subject to planning permission being applied for and granted in due course).

The terms of acquisition will also need to be adhered to, and to that end the proposed Heads of Terms for acquisition will be the subject of legal advice before signing, and the purchase documentation will be similarly advised upon and negotiated as part of the due diligence to be carried out.

Equalities Impact Assessment:

See attached at **Appendix A**. The assessment does not identify any adverse impacts on any client group.

Data Protection Impact Assessment:

The impact on Data Protection will be assessed at the appropriate time.

Risk Assessment (Risk Appetite Statement):

Risk associated with HRA new-build projects is assessed fortnightly by officers within the appropriate teams involved in the projects. These meetings identify any implications for the sites being progressed both individually and as a whole within the HRA Business Plan. Further risk assessments are made on each individual project at the appropriate time.

Sustainability Implications:

The HRA Business Plan includes assumptions regarding the Council's ambition for carbon neutrality and the programme of 'de-carbonisation' of HRA stock. In addition to this each project and acquisition is individually assessed to include the potential costs and benefits of carbon neutrality. Any scheme delivered here would be no different.

Other Material Implications:

Design and construction standards will comply with Ashford spatial standards (complying with Residential Space and Layout SPD), Lifetime Homes (a standard the Council has set out for Registered Social Landlords). Any scheme will comply with Homes England capital funding guidance – available on gov.uk – section 9 finance

Exempt from Publication:

Yes, Exempt Appendix B

This is not for publication by virtue of Paragraphs 2 and 3 of Part 1 of Schedule 12A of the Local Government Act 1972 and the public interest in maintaining the exemption outweighs the public interest in disclosing the information

Contact:

Mark.James@ashford.gov.uk – Tel: (01233) 330687

Sharon.williams@ashford.gov.uk – Tel: (01233) 330803

Report Title: Repton – Land acquisition in the HRA

Introduction and background

1. Further to previous cabinet reports, members will be aware that housing services is becoming adept at acquiring parcels of land that would be suitable for development. This is important as the Council has built or acquired (outside of its individual 'street purchase' acquisitions) around 500 homes since 2011 and therefore has either earmarked, utilised or ruled out the possibility of all land available to it within the Council's existing ownership. The Council retains its ambitions to continue to grow its HRA stock at pace.
2. The latest potential acquisition is a parcel of land within the popular Repton development that sits within an old s106 agreement and is assigned for 'healthcare provision'. The Council's proposed intervention promises to not only deliver some affordable homes in addition to a healthcare facility but will also unblock a stalled site.
3. Furthermore, this project will see strong collaboration between the local authority and partners in the healthcare sector that will deliver real benefits to residents in the borough. It is hoped that it may also set a precedent for future ways of working in partnership with healthcare colleagues and see Ashford leading the way.
4. Members may recall that the Council has previously delivered projects that have fused together the health and housing agendas, obtaining Care and Specialised Supported Housing (CASSH) funding and delivering projects to Housing our Ageing Population Panel for Innovation (HAPPI) standards, reflecting the design, lighting and central breakout areas that reduce the possibility of isolation and loneliness in those schemes. Farrow Court is the highest profile example of this, providing:
 - Dementia-friendly independent living accommodation
 - An Age UK day centre
 - Homes for adults with learning disabilities
 - Homes for those residents wanting to live independently into older age
 - Homebridge – temporary placements to avoid bed-blocking in hospitals through the provision of a room for those awaiting a care package or adaptations to their current property before returning home.
5. However, at Repton the healthcare provision has not been delivered and therefore Council officers have been meeting representatives of the development consortium who are building out Repton (Taylor Wimpey and Persimmon) for some time to discuss options for unblocking the stalled site. The ground work for this was overseen by the Assistant Director for Safety and Wellbeing but latterly this work has been under housing's stewardship.
6. It is worth pointing out that the linkages between local authorities and the healthcare sector are still very much in their infancy and it is probably fair to say that on both sides there is a degree of confusion as to who are the right

people to approach in order to progress specific parts of specific projects. This is a learning curve for all involved. However, it is a vitally important point as with work progressing on larger-scale developments – in the Ashford borough at Chilmington and in Folkestone and Hythe with Otterpool Park and with the proposed Garden City in Ebbsfleet – there will need to be much more co-ordination between the two sectors.

7. In this regard, Ashford is taking a central role. The Assistant Director for Safety and Wellbeing is representing not only Ashford Borough Council but local authorities across East Kent on the East Kent Estates Group (a Health and Care Partnership-led group, which has kindly taken the time to consider the Repton project in detail. It is also looking at how more effective working links can be forged between health and local government to better deliver important schemes.

Latest position

8. After a considerable hiatus the Repton project is beginning to move forward. An agreement has been reached to acquire the land from the development consortium at a price agreeable to all parties and reflecting significant compromise on all sides. This took a little negotiation as valuations for the land with purely a healthcare concern were at odds with the basic land valuation by the consortium. However, **exempt Appendix B** details the price reached. Heads of terms are now being agreed and the key detail of this is also included in the exempt appendix.
9. The Council thanks the development consortium for its time in the negotiations and for agreeing to 'dispose' of the land to enable the community aspects of this project to come forward.
10. In terms of the healthcare facility specifically, the 2007 s106 agreement is not overly prescriptive in terms of what must be brought forward. Several options could therefore be possible. Schedule 2, paragraph 4 of the Principal Agreement includes obligations to enable the delivery of a primary healthcare facility comprising "a building of 723 square metres (or such lesser area as may be agreed in writing by ABC) of gross internal floor space plus associated parking and landscaping such building being intended and designed for the provision of a range of medical consulting and healthcare facilities".
11. Additionally, the Council's housing services team believes that it will be possible to build around 15 flatted homes (subject to planning permission) above any healthcare facility.
12. It is important to state as housing service has done on occasions with other reports, that the purpose of this report is to purely update members and that it does not seek to utilise this report as a lobbying tool for any future planning application. The planning process is separate to this reporting structure and full consultation with planning through the pre-application process and any future application will be undertaken.
13. There are therefore two strands to progressing this project in the immediate term and a third which has already established its ground rules. Work needs to be undertaken to establish the feasibility of any healthcare facility and work

needs to be undertaken to establish the cohort of residents who may occupy any flats that are built for affordable rent on the site. The logistics of the finances delivering the site have also been considered but will be reassessed as work progresses to ensure the affordability of plans as they are scoped out. This work will reflect on the inclusion of include carbon neutrality measures and more in-depth detail about the building.

Healthcare strand

14. In terms of the healthcare facility the Council's housing services team has established a working group to discuss and deliver something meaningful. It is pleasing that so many colleagues from the healthcare sector and Kent County Council have taken an interest in looking at this aspect of the project.
15. Requirements for General Practice premises will continue to be assessed and defined as part of an overarching General Practice Strategy, this will consider areas of growth, service and workforce models and identify any commissioning requirements
16. However, despite the new homes that will be built within the borough there is not the projected need for a new practice based on the numbers of patients and appointments, given the level that existing practices are resourced at. Furthermore, the options for the utilisation of the space are being considered by healthcare partners, in the context of wider service planning.
17. The Council has One Public Estate (OPE) funding (£146,000, £65,000 of which is a sustainable loan to be paid back in 2024) available to look into the feasibility of delivery of various facets of the project – surveys assisting any building, or ascertaining the type of healthcare provision that is ultimately to be supplied. The benefits expected by One Public Estate are the new homes and the possibility of the delivery of new jobs – be they through the construction of the site, or that the facility results in new employment opportunities once it is established.
18. In addition to paragraphs **16 and 17**, doubt also exists as to whether the site is large enough to be a clinical diagnostic centre (known as a CDC). Furthermore, there are no plans for a full diagnostic hub service in the Ashford area currently, however there may be some diagnostic services that could form part of the model. While it is not helpful to speculate, nor raise expectations, many options are being considered for this possible brand new space and members should be reassured that all avenues are being investigated, including flexible use by primary and community health services, mental health services for people of different ages, a social prescribing model, a dentistry and other possibilities that would contribute towards the wellbeing of local residents. An options appraisal will need to be undertaken to evaluate the best use.
19. Social prescribing exists in Tenterden and the Council's housing services team has made contact with the service to investigate its benefits and reach. It is a mechanism for local organisations to refer people to link workers, who will offer a holistic approach to people's health and wellbeing. They connect people who may have multiple medical conditions, who may need mental health support, who may be isolated or lonely, or who may have complicated needs that affect their wellbeing to community groups and statutory services for practical and emotional support.

20. It is felt that the type of provision needs to be identified before the local community is consulted fully on the proposal and planning will also need to be reassured that the proposals that are put forward satisfy the requirements of the section 106 agreement so far as they are still extant.

Residential strand

21. The Council also needs to consider what the options are likely to be around the residential flats that will be provided on the site – and to be clear the housing element cannot be provided if the healthcare element is not delivered. Early viability work has focused on delivering 15 flats above the healthcare facility and that these could be used to house those with, for example, learning disabilities, or a cognitive impairment. Colleagues at Kent County Council have been willing participants in the established working group and continue to work with the Borough Council on identifying a suitable option that would be of benefit.

Finance strand

22. A third consideration is the financing of such a project and where it would 'sit' in the Council's financing structure. Legal advice obtained has stated that the acquisition can take place within the Council's HRA, and that the project can actually sit in the HRA or in the General Fund – as commercial rents can be charged in the HRA for elements other than the affordable homes. If the project sits in the HRA then there may need to be some correlation between those housed having the ability to benefit from the healthcare facility below. However, this is not thought to be restrictive in the search for a meaningful solution as ultimately the Council will be able to state that without the flats there would be no healthcare centre, and vice versa.
23. Viability work undertaken to date suggests that the project would cost in the region of £3.2m and while a commercial rent can be charged in the HRA, the healthcare part of this project is not one that the Council is seeking to reap vast financial reward from, indeed a minimal rent is necessary to entice any service provider potentially to the facility, perhaps out of existing premises. The viability work has sought to look at sensible payback periods based on the rental income from the residential properties. While it is obviously far too early to say what any provider may be charged for use of the healthcare facility, the rents charged are anticipated to be minimal but sufficient, ensuring that they are not subsidised by the remainder of the HRA.
24. The financial feasibility was completed early on in the project and will need to be reassessed in the light of the changes in the economic landscape.

Next steps

25. The next steps therefore are to:
 - Conclude the land acquisition with the development consortium
 - Identify the right healthcare provision by appropriately allocating the OPE funding to aid the relevant feasibility work.

- Continue to work with the relevant healthcare colleagues. The Development Partnership Manager and Assistant Director of Housing are leading on this project and, with the help of colleagues who sit on the East Kent Estates Group and our own Repton working group, are working to ensure that not only are they speaking to influencers and decision makers, but also fully understanding the pathways involved to delivering the scheme.
- From a commissioning perspective, the East Kent Independent Care Commissioning (ICC) team have agreed to act as the first contact point within the Clinical Commissioning Group structure and signpost to relevant officers where this is not the ICC.
- Reassessing the financial aspects of delivering the project before it is included in the HRA Business Plan.

Authority to proceed

26. Delegated authority was agreed in 2019 by Cabinet to give the Head of Housing (in consultation with the Head of Finance and IT and the portfolio holders for housing and finance and IT) the ability to acquire land up to the value of £5m within the HRA.

Due diligence

27. While this update is felt important to members as the project has strategic importance with regards unblocking a stalled site, the growth of the borough's population and the adequate provision of services that as the lead authority in Ashford the Borough Council must take the lead on, it is important to not unduly raise expectations. Provision has been made in the HRA Business Plan for the purchase of the site and a projection of £3.2m for total project costs. Once there is certainty on the type of provision and the project has moved towards pre-application planning advice, then the anticipated costs will be revisited and confirmed. The intention of the report is to highlight the will from all organisations involved to deliver a significant project providing much needed resources for the local community that all organisations involved can be proud of.
28. The Council has prudently looked at the financial implications of this acquisition to ensure that the price of this piece of land does not have a detrimental impact on the HRA Business Plan (**Exempt Appendix B** illustrates this). As would be expected, all factors have been assessed, including the number of homes it is possible to build on the site, proposed rental income, probable maintenance and repair costs and the expected grant subsidy. With the relevant officers satisfied that this site is a sensible acquisition, delegated authority has been agreed as per the constitution and moves to complete the deal are ongoing.

Corporate plan considerations

29. The building would naturally seek to be as low carbon in its delivery and operation as possible. The Council's ambition to be a Green Pioneer

underpins the work of the housing team. Furthermore, it understands its responsibilities in terms of emphasising that Ashford is a caring borough, and through its major construction framework it seeks to identify opportunities for small and medium sized enterprises (SMEs) in the construction sector, who will have the opportunity to contribute to the project delivery of this and other schemes coming forward in the Council's affordable homes programme.

Risks to the HRA Business Plan

30. The acquisition and proposed construction of this site in isolation does not pose any risk to the HRA Business Plan based on its individual feasibility. Though the project costs are estimated currently in the HRA Business Plan the project costs can be updated once more certainty is available on the type of provision.
31. With the acquisition not posing a threat to the viability of the Business plan, the acquisition will proceed as per the heads of terms, once agreed, with the input of colleagues in the healthcare sector, and stakeholders will be engaged at the appropriate points in the process.

Equalities Impact Assessment

32. Members are referred to the attached assessment at **Appendix A**. The assessment is undertaken considering the specific area the site sits in and the outcomes are listed in the report, which broadly cites no negative impacts.

Consultation Planned or Undertaken

33. A wide range of internal and external stakeholders will be consulted as plans are formulated and community consultation will begin once there is a firm proposal to put to residents and other interested groups. As always, housing services commits to undertaking this work ahead of any formal application being submitted to planning for consideration, upon which the community and other stakeholders have the opportunity to comment further. This process will take time but updates will be provided as matters progress.

Conclusion

34. The acquisition of this piece of land signifies not only the Council's ability to act quickly and decisively in the marketplace, but it shows that through the Council's HRA, solutions can be found to unblock stalled sites and deliver projects in partnership for the betterment of the community.
35. At the core of the project however, is the need to deliver the right homes in the right places and accelerate delivery in the HRA, increasing stock levels.
36. There are additional benefits of course to this project, working with colleagues in the health sector and also at the County Council, setting the tone for how

this work can continue in the borough on major strategic sites and any shared learning can be applied to other major projects in other borough of the county aiding delivery models here and further afield. This work will raise the bar when the Council considers how it has delivered on merging the health and housing agendas.

Portfolio Holder's Views

37. I am pleased to endorse this acquisition and for the Council to be working in partnership with other organisations to bring forward a suitable use for this stalled site. Though traditionally the sectors have not combined to deliver projects, it is refreshing to hear that all representatives of all organisations have indicated a will for the Repton project to come forward to provide a meaningful health resource for the local community.
38. Obviously as the borough grows, so do the needs of residents and we understand that there is a finite resource to deliver services from all organisations. However, working in partnership, sharing ideas, collaborating and talking will definitely help us link into the work of other sectors where appropriate and complete projects that have a real purpose. I am pleased that the HRA is looking at these types of opportunities and I look forward to seeing how plans progress.

Contact and Email

39. Mark James: Mark.James@ashford.gov.uk
40. Sharon Williams: Sharon.Williams@ashford.gov.uk

Equality Impact Assessment

Appendix A to May 2022 Cabinet report on Repton land acquisition

1. An Equality Impact Assessment (EIA) is a document that summarises how the council has had due regard to the public sector equality duty (Equality Act 2010) in its decision-making. Although there is no legal duty to produce an EIA, the Council must have **due regard** to the equality duty and an EIA is recognised as the best method of fulfilling that duty. It can assist the Council in making a judgment as to whether a policy or other decision will have unintended negative consequences for certain people and help maximise the positive impacts of policy change. An EIA can lead to one of four consequences:

- (a) No major change – the policy or other decision is robust with no potential for discrimination or adverse impact. Opportunities to promote equality have been taken;
- (b) Adjust the policy or decision to remove barriers or better promote equality as identified in the EIA;
- (c) Continue the policy – if the EIA identifies potential for adverse impact, set out compelling justification for continuing;
- (d) Stop and remove the policy where actual or potential unlawful discrimination is identified.

Public sector equality duty

2. The Equality Act 2010 places a duty on the council, when exercising public functions, to have due regard to the need to:
- (a) Eliminate discrimination, harassment and victimisation;
 - (b) Advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it;
 - (c) Foster good relations between persons who share a relevant protected characteristic and persons who do not share it (ie tackling prejudice and promoting understanding between people from different groups).

3. These are known as the three aims of the general equality duty.

Protected characteristics

4. The Equality Act 2010 sets out nine protected characteristics for the purpose of the equality duty:
- Age
 - Disability
 - Gender reassignment
 - Marriage and civil partnership*
 - Pregnancy and maternity
 - Race
 - Religion or belief
 - Sex
 - Sexual orientation

*For marriage and civil partnership, only the first aim of the duty applies in relation to employment.

Due regard

5. Having 'due regard' is about using good equality information and analysis at the right time as part of decision-making procedures.
6. To 'have due regard' means that in making decisions and in its other day-to-day activities the council must consciously consider the need to do the things set out in the general equality duty: eliminate discrimination, advance equality of opportunity and foster good relations. This can involve:
- removing or minimising disadvantages suffered by people due to their protected characteristics.
 - taking steps to meet the needs of people with certain protected characteristics when these are different from the needs of other people.
 - encouraging people with certain protected characteristics to participate

in public life or in other activities where it is disproportionately low.

7. How much regard is 'due' will depend on the circumstances. The greater the potential impact, the higher the regard required by the duty. Examples of functions and decisions likely to engage the duty include: policy decisions, budget decisions, public appointments, service provision, statutory discretion, decisions on individuals, employing staff and procurement of goods and services.
8. In terms of timing:
 - Having 'due regard' should be considered at the inception of any decision or proposed policy or service development or change.
 - Due regard should be considered throughout development of a decision. Notes shall be taken and kept on file as to how due regard has been had to the equality duty in research, meetings, project teams, consultations etc.
 - The completion of the EIA is a way of effectively summarising this and it should inform final decision-making.

Case law principles

9. A number of principles have been established by the courts in relation to the equality duty and due regard:
 - Decision-makers in public authorities must be aware of their duty to have 'due regard' to the equality duty and so EIA's must be attached to any relevant committee reports.
 - Due regard is fulfilled before and at the time a particular policy is under consideration as well as at the time a decision is taken. Due regard involves a conscious approach and state of mind.
- A public authority cannot satisfy the duty by justifying a decision after it has been taken.
- The duty must be exercised in substance, with rigour and with an open mind in such a way that it influences the final decision.

- The duty is a non-delegable one. The duty will always remain the responsibility of the public authority.
- The duty is a continuing one so that it needs to be considered not only when a policy, for example, is being developed and agreed but also when it is implemented.
- It is good practice for those exercising public functions to keep an accurate record showing that they have actually considered the general duty and pondered relevant questions. Proper record keeping encourages transparency and will discipline those carrying out the relevant function to undertake the duty conscientiously.
- A public authority will need to consider whether it has sufficient information to assess the effects of the policy, or the way a function is being carried out, on the aims set out in the general equality duty.
- A public authority cannot avoid complying with the duty by claiming that it does not have enough resources to do so.

The Equality and Human Rights Commission has produced helpful guidance on "Meeting the Equality Duty in Policy and Decision-Making" (October 2014). It is available on the following link and report authors should read and follow this when developing or reporting on proposals for policy or service development or change and other decisions likely to engage the equality duty. [Equality Duty in decision-making](#)

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| Lead officer: | Mark James |
| Decision maker: | Cabinet |
| Decision: <ul style="list-style-type: none"> • Policy, project, service, contract • Review, change, new, stop | Housing Development Note and endorse the acquisition being made under the delegated authority afforded to housing services under recommendation VII in the cabinet report agreed in December 2019 Note Exempt Appendix B and note the acquisition price of the land |
| Date of decision: The date when the final decision is made. The EIA must be complete before this point and inform the final decision. | 26 th May 2022 |
| Summary of the proposed decision: <ul style="list-style-type: none"> • Aims and objectives • Key actions • Expected outcomes • Who will be affected and how? • How many people will be affected? | Note and endorse the acquisition being made under the delegated authority afforded to housing services under recommendation VII in the cabinet report agreed in December 2019 Note Exempt Appendix B and note the acquisition price of the land |
| Information and research: <ul style="list-style-type: none"> • Outline the information and research that has informed the decision. • Include sources and key findings. | Building on solid foundations: delivering affordable homes in Ashford – our delivery plan for 2019-2023 Housing Strategy Framework Priority 1 – Improve the supply of affordable housing to meet local housing needs in urban and rural areas, and Housing Statement 2018-2023 Reform of Housing Revenue Account (HRA) – Cabinet endorsed five key priorities for further spend, as a result of greater freedom within the HRA. National Housing Strategy 2011 – delivering new homes under the affordable rent model. A Charter For Social Housing Residents – Social Housing White Paper 2020. A Guide to Developing Affordable Homes in Rural Communities (Kent Housing Group [KHG]) – February 2021 |
| Consultation: <ul style="list-style-type: none"> • What specific consultation has occurred on this decision? • What were the results of the consultation? • Did the consultation analysis reveal any difference in views across the protected characteristics? | A range of internal and external stakeholders will be consulted as plans develop and a formal community consultation will be held in an agreed format in due course ahead of any application being submitted to planning. This will take time, given the complex nature of developing the feasibility for the healthcare element within the project but care will be taken to include all relevant stakeholders at all part of the process. |

- What conclusions can be drawn from the analysis on how the decision will affect people with different protected characteristics?

Assess the relevance of the decision to people with different protected characteristics and assess the impact of the decision on people with different protected characteristics.

When assessing relevance and impact, make it clear who the assessment applies to within the protected characteristic category. For example, a decision may have high relevance for young people but low relevance for older people; it may have a positive impact on women but a neutral impact on men.

| Protected characteristic | Relevance to Decision High/Medium/Low/None | Impact of Decision Positive (Major/Minor) Negative (Major/Minor) Neutral |
|-----------------------------------|---|---|
| <u>AGE</u> Elderly | High | Positive (major) |
| Middle age | High | Positive (major) |
| Young adult | High | Positive (major) |
| Children | High | Positive (major) |
| <u>DISABILITY</u> Physical | High | Positive (major) |
| Mental | High | Positive (major) |
| Sensory | None | Neutral |
| <u>GENDER RE-ASSIGNMENT</u> | None | Neutral |
| <u>MARRIAGE/CIVIL PARTNERSHIP</u> | None | Neutral |
| <u>PREGNANCY/MATERNITY</u> | None | Neutral |
| <u>RACE</u> | None | Neutral |
| <u>RELIGION OR BELIEF</u> | None | Neutral |
| <u>SEX</u> Men | None | Neutral |
| Women | None | Neutral |
| <u>SEXUAL ORIENTATION</u> | None | Neutral |

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| <p>Mitigating negative impact:</p> <p>Where any negative impact has been identified, outline the measures taken to mitigate against it.</p> | <p>Where the assessment has been carried out above it is on the basis of both aspects of the development and some perceived ideas around the possible healthcare options discussed in the report. Obviously, as these plans progress, other groups may benefit from the proposals too, however, at a general level, the provision of a healthcare facility on the site will be a positive addition to the locality. It is likely that the scope of any facilities may be broad for all age groups and protected characteristics.</p> |
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| <p>Is the decision relevant to the aims of the equality duty?</p> <p>Guidance on the aims can be found in the EHRC's Essential Guide, alongside fuller PSED Technical Guidance.</p> | |
|--|----------------|
| Aim | Yes / No / N/A |
| 1) Eliminate discrimination, harassment and victimisation | N/A |
| 2) Advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it | N/A |
| 3) Foster good relations between persons who share a relevant protected characteristic and persons who do not share it | N/A |

| | |
|---|--|
| <p>Conclusion:</p> <ul style="list-style-type: none"> Consider how due regard has been had to the equality duty, from start to finish. There should be no unlawful discrimination arising from the decision (see guidance above). Advise on whether the proposal meets the aims of the equality duty or whether adjustments have been made or need to be made or whether any residual impacts are justified. How will monitoring of the policy, procedure or decision and its implementation be undertaken and reported? | <p>Due regard has been considered throughout this proposal to each protected group.</p> <p>No unlawful discrimination has arisen from the decision.</p> <p>The effect on the community will be positive due to the aims of the programme delivery. No adjustments required.</p> <p>The programme will be monitored by the report authors, in consultation with the relevant organisations involved in the Repton working group and there will be regular updates provided to ward members, the Portfolio Holder for Housing and Cabinet.</p> |
| <p>EIA completion date:</p> | <p>28th April 2022</p> |

