

Tameside Metropolitan Borough Council Equality Impact Assessment Form



Subject / Title	Section 13A Policy
Project Lead Officer (Name and Job Title)	Christopher Stuart
Assistant Director / Director	Julie Smethurst
Department	Revenues and Benefits
Directorate	Finance

EIA Start Date	EIA Completion Date
January 2026	January 2026

This Equality Impact Assessment template contains collapsible advice and instructions. **Whenever you see a triangle pictured here, ► click on it to reveal or collapse advice and instructions.**

PURPOSE OF THE EQUALITY IMPACT ASSESSMENT

An Equality Impact Assessment (EIA) aims to examine whether a proposal will contribute to or alleviate inequalities in Tameside through assessing the potential impacts the proposal may have on people with 'protected characteristics'. (A 'proposal' here includes any strategy, policy, service change, or project).

'Protected characteristics' are attributes that people have or experiences that people may go through which can result in marginalisation or disadvantage. Under the Equality Act 2010, there are nine legally mandated protected characteristics to consider:

- Age
- Sex
- Race (including colour, nationality, and ethnicity)
- Religion or belief
- Disability
- Sexual orientation
- Gender identity¹

¹ We have rearticulated 'gender reassignment' under the Equality Act 2010 as 'gender identity'. An explanation for this is given in the definitions of protected characteristics in STEP FIVE.

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- Pregnancy and maternity
- Being married or in a civil partnership

Tameside Council has classified further characteristics as protected, referred to as 'extra protected characteristics'. These are below:

- Carers
- Cared for Children and Care Leavers
- Ill Mental Health
- Neurodivergence
- Socio-Economic Disadvantage

Conducting an Equality Impact Assessment based on these protected characteristics will aid compliance with the Public Sector Equality Duty (Equality Act 2010, section 149), which requires that all public bodies pay 'due regard' to the three general aims of the Public Sector Equality Duty:

- i. Eliminate unlawful discrimination, harassment, and victimisation
- ii. Advance equality of opportunity between people who share a protected characteristic and those who do not
- iii. Foster good relations between people who share a protected characteristic and those who do not

Having 'due regard' involves:

- Removing or minimising disadvantages suffered by people due to their protected characteristics
- Taking steps to meet the needs of people from protected groups where these are different from the needs of other people
- Encouraging people from protected groups to participate in public life or in other activities where their participation is disproportionately low

EQUALITY IMPACT ASSESSMENT CORPORATE STANDARDS

Due to the important ethical and legal aims of the Equality Impact Assessment (EIA), there are several corporately agreed criteria which should be fulfilled when completing EIAs:

- An EIA is required for all formal decisions that involve changes to service delivery. For all other proposals, an EIA must be considered.
- The decision as to whether an EIA is undertaken rests with the Project Lead Officer in consultation with the appropriate Assistant Director / Director where necessary. Where an EIA is not completed, the reason(s) for this must be detailed within the appropriate report.

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- EIAs must be timely and completed alongside the development of any proposal. The findings of any potential detrimental or inequitable impact that may occur through the implementation of the proposal on residents, service users, or staff must be brought to the attention of the decision maker in the accompanying report. Appropriate mitigations must be integrated into the development of the proposal.
- EIAs should be carried out by at least two people. Guidance from case law indicates that judgements arrived at in isolation are not consistent with showing ‘due regard’ to the necessary equality duties.

INITIAL SCREENING

Purpose:	To identify which proposals need to proceed to Part II of the EIA Process – the full EIA.
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Step 1: Summarise the proposal

1a.	Proposal Title:	Section 13A Policy
1b.	Proposal Aims:	To set out how the Council uses its discretionary powers under Section 13A of the Local Government Finance Act 1992 to reduce Council Tax liability in individual cases or by classes, including care leavers, hardship cases and any central government schemes; and to describe how to apply, evidence requirements, decision-making and appeal routes.
1c.	Context:	Section 13A permits reductions in Council Tax for individuals or classes, separate from the Council Tax Support (CTS) scheme. Awards are discretionary, funded by the Borough’s Council Tax payers, and determined based on individual circumstances and criteria set out in the policy. Tameside operates three current classes of reduction: Care Leavers, Hardship Payments, and Central Government Schemes (e.g., disaster response). Applications can be made online or in

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		writing; the policy details the information and evidence typically required. Decisions, notification, reviews and formal appeal routes (Valuation Tribunal) are specified
1d.	Stakeholders:	Residents / Council Tax payers who may need reductions due to hardship, life events, or protected circumstances (including care leavers). Wider Council Tax payers (as awards are locally funded except where fully funded by Central Government schemes). External partners (e.g., Leaving Care, Housing, Adult Social Care, VCSE advice agencies) who may support applications/evidence. (Inferred from application process and hardship factors.)

Step 2: Impact Analysis – identify the impacts

Purpose:	To identify potential impacts the proposal may have on people with protected characteristics.
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SEE INSTRUCTION:

Each potential impact can be classified as ‘direct’ or ‘indirect’.

A **direct impact** occurs when the proposal is targeted at a particular group. For example, if libraries closed down children’s areas, this would directly impact children under ‘Age’.

An **indirect impact** occurs when the proposal is more general or universal, but it has a knock-on effect on people with particular protected characteristics. For example, if a pelican crossing is removed due to construction or highway changes, this would indirectly impact people with disabilities (‘Disability’), the elderly (‘Age’), people with children or who are pregnant (‘Pregnancy/Maternity’).

If a detrimental direct or indirect impact is identified, an appropriate **mitigating action** should be integrated into the development of the proposal. A mitigating action is an adjustment to the proposal that will reduce or minimise the impact. This is covered in STEP SIX of the EIA Process.

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The Impact Analysis is separated between two steps: STEP TWO (here) and STEP FIVE (below). In this step:

- State whether any direct or indirect impacts have been identified under each protected characteristic.
- List the impacts identified under each protected characteristic.
- Identify whether a mitigation action is required.

There is **no requirement** at this stage to provide the detailed evidence about each impact or identify specific mitigating actions.

When identifying impacts, think about:

- Information and intelligence you have access to (e.g. data that is publicly available)
- Experiences and knowledge of residents and service users
- Experiences and knowledge of colleagues, including frontline staff
- Experiences in other local boroughs, particularly Greater Manchester and statistical neighbours
- Research reports from think tanks, academia, government organisations, and charities
- **‘Multiple marginalisation’** – how the proposal may impact people with combinations of protected characteristics (e.g. Age and Race/Ethnicity) rather than consider each protected characteristic singularly. A proposal may impact people with one combination of protected characteristics more than another combination of protected characteristics. For example, moving a service from physical to digital provision may detrimentally affect elderly people of Bangladeshi backgrounds more than elderly people of a White British background.

Protected Characteristic	Direct Impact	Indirect Impact	Mitigation Required
<i>Select yes or no from the drop-down list in each box to identify whether any direct or indirect have been identified under each protected characteristic, and also select yes or no to determine whether a mitigating action is required. Subsequently, list these impacts in the grey box under each protected characteristic.</i>			
Age	Yes	Yes	Yes
	Care leavers up to 25 directly benefit. Older residents may face digital exclusion or paperwork challenges.		
Sex	No	Yes	Yes
	Some hardship factors (e.g., lone parenthood, domestic abuse) disproportionately affect women.		
Race (including colour, nationality, and ethnicity)	No	Yes	Yes
	Potential barriers: language, proof requirements, and digital access.		
Religion or Belief	No	No	No
	No impact identified		

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Disability	Yes	Yes	Yes
	Explicit factors include disability and mental health within hardship; process/evidence and digital-by-default may disadvantage some.		
Sexual Orientation	No	No	No
	No impact identified		
Gender Identity	No	No	No
	No impact identified		
Pregnancy/Maternity	Yes	Yes	Yes
	Pregnancy/Maternity listed as a hardship factor.		
Marriage/Civil Partnership	No	Yes	No
	Joint liability/household assessments could indirectly affect outcomes, but all evidence based on household income and award based on this.		
Carers	No	Yes	Yes
	Caring responsibilities can limit ability to navigate application/evidence steps; risk of under-claiming		
Cared for Children and Care Leavers	Yes	Yes	No
	Care leavers up to 25 directly benefit and transition support needs highlighted.		
Ill Mental Health	Yes	Yes	Yes
	Explicitly recognised in hardship; process demands may be burdensome.		
Neurodivergence	Yes	Yes	Yes
	communication demands may disadvantage applicants without adjustments		
Socio-Economic Disadvantage	Yes	Yes	Yes
	Policy targets financial hardship and low income; substantial positive impact		
Multiple Marginalisation	Yes	Yes	Yes
	Multiple Marginalisation likely to see positive impact from policy but may have difficulty with access		

Step 3: Initial Screening Sign Off

Purpose:	To determine whether a proposal should proceed from the Initial Screening to the Full Equality Impact Assessment.
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SEE INSTRUCTION:

A full Equality Impact Assessment should be undertaken when:

- There is a formal decision relating to changes in service delivery
- A detrimental impact against a protected group has been identified, irrespective of whether the impact is direct or indirect
- There are substantial, important gaps in knowledge that prevent proper consideration of the proposal’s potential impacts

Sign off is only required if the Initial Screening does not proceed to the Full Equality Impact Assessment.

1e.	Does the proposal require a full EIA?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
1f.	If you are not undertaking a full EIA, please provide justification as to why not.		

This initial screening has been completed by the EIA Lead Officer:	Name:	Christopher Stuart
	Signature:	
	Department:	Revenues and Benefits
	Date:	09/01/2026
This Initial Screening has been checked by the Assistant Director / Director:	Name:	Julie Smethurst
	Signature:	

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Department:	Revenues and Benefits
Date:	13/01/2026

FULL EQUALITY IMPACT ASSESSMENT

Step 4: Issues to Consider

SEE INSTRUCTION:

Data and Intelligence

The following types of data can potentially be accessed:

- Publicly available national data (e.g. from the Local Authority Interactive Tool, ONS, NOMIS, NHS Digital, relevant government departments)
- Local data
- Service user information

It is also worth considering how this data can be used, for example:

- Benchmarking data for Tameside against other local authorities, e.g. local authorities in Greater Manchester, statistical neighbours
- Whether national or regional data can be applied to Tameside
- Whether data at a smaller geographical scale than Tameside is required, e.g. by ward, by MSOA/LSOA

Further intelligence can be gathered from the following:

- Research reports from think tanks, academia, government organisations, and charities
- Policy briefings
- Academic papers (which can be found through search engines, e.g. Google Scholar)

Data and Intelligence

4a.	Demographic profiles; Revenues and Benefits service key databases and recovery records; housing data; adult social care and safeguarding data; children’s services data; external sources for local area deprivation, socio-economic indicators, and health/disability prevalence. Debt advice sector reports, voluntary sector evidence
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SEE INSTRUCTION:

Consultation and Engagement

It is expected that you will engage with potential impacted groups on this proposal when undertaking the Equality Impact Assessment to better understand potential impacts on people with protected characteristics.

Engagement can occur through:

- A general consultation/engagement exercise on the proposal (e.g. a survey), where space is provided to discuss impacts on people with protected characteristics
- Regular channels of engagement or feedback e.g. a service user panel that you already operate
- Input from colleagues (particularly frontline staff) and partners (e.g. the VCSE sector)

Alternatively, insights can be retrieved from engagement or consultation exercises that have previously occurred.

Consultation and Engagement			
4b.	Has any consultation or engagement been conducted that is relevant to this Equality Impact Assessment?	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
		If YES, answer 4c-4e.	If NO, answer 4f.
4c.	Engagement Undertaken:		
4d.	Who has been engaged with?		

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4e.	Outcomes of Engagement:	
4f.	If engagement has not been undertaken, please explain why.	Engagement not required

SEE INSTRUCTION:

Legislative Drivers

It is worth considering any legislative drivers that may influence the Equality Impact Assessment:

- Legal duties that services have to abide by, including the Public Sector Equality Duty
- Case law and judicial review, particularly instances where similar services have been provided and challenged, and as a result, have needed to change

Legislative Drivers	
4g.	Local Government Finance Act 1992, s13A(1)(a), s13A(1)(c) & s16 (discretionary reductions, CTS, and appeals to the Valuation Tribunal).

SEE INSTRUCTION:

Financial Considerations

It is worth considering any financial considerations that may influence the Equality Impact Assessment, e.g. budgeting, available resources, etc.

This is particularly in relation to mitigating actions that are identified in STEP SIX, which are needed to reduce potential impacts of the proposal at hand.

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It may be worth thinking about how mitigating actions can serve as opportunities for innovation.

Financial Considerations	
4g.	Awards (other than fully funded central schemes) are funded by local Council Tax payers; decisions must balance applicant need and the public purse.

Step 5: Impact Analysis – evidence the impacts

Purpose:	To provide evidence of the potential impacts identified under each protected characteristic.
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FOR DEFINITIONS OF PROTECTED CHARACTERISTICS, EXPAND THE INSTRUCTION BELOW.

SEE INSTRUCTION:

This step constitutes the second part of the Impact Analysis. In this step, under each protected characteristic, each potential impact should be listed and categorised (e.g. Direct or Indirect), and the evidence for each potential impacts should be provided. The potential impacts that have been identified will likely be the same as those that have been identified in STEP TWO. However, these may have changed or new impacts may be identified, due to the gathering of further evidence.

Evidence can be quantitative (numerical) or qualitative (non-numerical), addressing the ‘what’, ‘who’, ‘how’, and ‘why’ of potential impacts. Refer to the guidance on Data/Intelligence and Consultation/Engagement identified in Step 4 to assist with the evidence that can be included in the Impact Analysis.

When listing the impacts, it will help to number each impact. This will help navigate the form when identifying mitigating actions under STEP SIX.

Do not feel constrained by the space provided in the table. To add a new row, right click on the bottom row, then select ‘Insert Item After’ or click the + button. Also, each box will expand downward as the information is entered. However, when entering data tables, copy and paste as pictures; if entered as tables, it will alter the layout of the Impact Analysis form.

The definitions of protected characteristics are below:

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Age	A person's specific age or age group. An age group can be numerical (e.g. 18-30) or descriptive (e.g. 'the elderly', 'teenagers', etc.).
Sex	A person's biological sex, whether a person is male, female, or those who are differently sexed (e.g. intersex). This does not include sexual orientation and gender identity, which are analysed separately.
Race (including colour, ethnicity, and nationality)	How people identify themselves or are identified in society according to their skin colour, physical features, and national/cultural identity. This can cover: <ul style="list-style-type: none"> • Racial identities (e.g. White, Black, Asian) • Ethnic identities (e.g. Jamaican, Arab, Persian, Jewish, Irish, Gypsy/Roma) • Nationalities • Languages spoken – whether English is the first or additional language • Refugee and asylum status
Religion or Belief	Any religion or belief that a person follows or subscribes to. It includes the commonly recognised religions (such as Christianity, Islam, Hinduism, Judaism, Buddhism, and Sikhism) and the different groups within each religion (e.g. in Christianity, it can cover Catholicism, Protestantism, etc.; in Islam, it can cover Sunni Islam, Shia Islam, Sufism, etc.). It also applies to religions that are not necessarily well known (e.g. Jainism, Baha'i Faith) as well as people who do not have any religious belief (e.g. those ascribing to Humanism and Atheism).
Disability	Physical or mental conditions that have substantial and long-term adverse effects on people's abilities to carry out day-to-day activities. This covers a wide range of disabilities: <ul style="list-style-type: none"> • Physical and mobility impairments • Sensory impairments (e.g. sight, hearing) • Learning disabilities • Progressive conditions (e.g. neurodegenerative disorders, muscular dystrophies, dementia) • Fluctuating and recurring conditions (e.g. rheumatoid arthritis, epilepsy, myalgic encephalitis) • Organ-specific disorders (e.g. respiratory conditions, cardiovascular diseases) • Auto-immune conditions <p>Included within this definition is also those that considered to have Special Educational Needs due to a disability.</p>
Sexual Orientation	The orientation that a person has toward another person of any sex or gender. Common orientations are towards people of the opposite sex/gender (e.g. heterosexual/ straight), towards people of the same sex/gender (e.g. a gay man or lesbian), or towards multiple sexes/genders (e.g. bisexual or pansexual). There are other orientations that should be considered (e.g. asexual – a person who does not experience sexual attraction). A person's orientation can be sexual, romantic, or emotional.
Gender Identity	The gender that a person identifies with. People most commonly identify with the gender that matches their sex assigned at birth – i.e. as a man or woman. People who are trans identify with a gender that is different to their sex assigned at birth. Included amongst people with trans identities are people "proposing to undergo, undergoing, or having undergone a process to reassign sex". This is the legal definition for 'gender

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	reassignment' under the Equality Act 2010. However, this legal definition does not include trans people who do not choose to undertake the medical transitioning process and people with other gender identities (e.g. those who identify as non-binary, gender fluid, etc.).
Pregnancy/Maternity	<p>'Pregnancy' refers to when a person is pregnant and expecting a baby. Any person who can become pregnant should be considered – e.g. women, trans men, and people with different gender identities. This should also cover all aspects of the pregnancy journey, including those who have been affected by miscarriage.</p> <p>'Maternity' refers to the period following the birth of the child. In employment, this is related to parental leave. In the non-work context, this is related to unfavourable treatment relating to being a mother or parent. Legally, for the latter, protection is applied for 26 weeks. An important aspect of maternal/parental discrimination is <i>breastfeeding</i>.</p>
Marriage/Civil Partnership	A person's marital status in law, whether a person is married or in a civil partnership to another person of the opposite sex or same sex.
Carers	Any person who provides unpaid care for a partner, family member, or friend due to illness, disability, frailty, a mental health problem, or an addiction. The person being provided care cannot cope or finds it difficult to cope without that person's care and support. A carer can have varying caring responsibilities, such as supporting people with everyday tasks (e.g. getting out of bed, bathing, etc.) or providing emotional support. This covers people who may not see themselves as 'carers', whom do not separate their caring responsibilities from the relationship that they have with the person for whom they provide care. Importantly, this covers young carers who provide care for their parents or other relatives and parents/carers of young people with Special Educational Needs and Disabilities.
Cared for Children/ Care Leavers	'Cared for Children' (sometimes known as 'looked after children') are children and young people in the care of the local authority due to their parents being unable to take care of them in a temporary or permanent capacity. 'Care Leavers' are any adult who have previously spent time in the care of the local authority.
Ill Mental Health	<p>A person with a condition related to their psychological or emotional wellbeing. This includes a wide variety of conditions:</p> <ul style="list-style-type: none"> • Common mental health problems, such as depression or anxiety disorders • Trauma (e.g. Post Traumatic Stress Disorder) • Severe mental illness (e.g. Psychosis/Schizophrenia or Bipolar Disorder) • Phobias (e.g. Agoraphobia)
Neurodivergence	A person whose mind works differently to neurocognitive styles that society regards as 'normal'. This includes a wide range of conditions and experiences: Autism, ADHD, Dyslexia, Dyscalculia, Dyspraxia, Dysgraphia, Epilepsy, Tourette's, Aphantasia/Synaesthesia, etc.
Socio-Economic Disadvantage	A wide range of experiences accruing from having a disadvantaged socio-economic status: having low or no income; living in absolute or relative poverty; unemployment or underemployment; living in substandard housing; being homeless or threatened with homelessness; food insecurity and poverty; fuel poverty; digital exclusion; etc.
Multiple Marginalisation	A wide variety of combinations of different protected characteristics that uniquely influence a person's experiences. Any combination of protected characteristics can be two or above (e.g. RACE/ETHNICITY and GENDER IDENTITY; CARE LEAVER, CARER, and SOCIO-ECONOMIC DISADVANTAGE).

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Impact No.	Protected Characteristic <i>Select a protected characteristic from the drop-down list</i>	Impact <i>Identify the potential impact of the proposal</i>	Impact Type (Direct/Indirect) <i>Select 'direct' or 'indirect' from the drop-down list</i>	Evidence <i>Provide evidence regarding the proposal's potential impact (e.g. data/intelligence, findings from consultation/engagement, research reports, etc.).</i>
1	Age	Older residents may face digital exclusion or paperwork challenges.	Direct	The population of Tameside is estimated at 231,071 based on the latest Census population statistics from the Office for National Statistics (ONS). Of the population 144,600 (62.94%) were of working age (16-64); 45,900 were aged between 0-15 years (19.85%); and 40,470 were aged 65 or over (17.561%).
2	Race (including colour, ethnicity, and nationality)	Potential barriers: language, proof requirements, and digital access	Indirect	In Tameside, the most recent census data from 2021 indicates that 85.5% of residents identify as White, while 9.2% identify as Asian, Asian British, or Asian Welsh. The "Black, Black British, Black Welsh, Caribbean or African" category saw a significant increase, rising from 0.8% in 2011 to 2.3% in 2021, largely driven by an increase in the Black African population. There was also a smaller increase in the "Mixed or Multiple" category, from 1.4% to 2.1%.
3	Disability	Explicit factors include disability and mental health within hardship; process/evidence and digital-by-default may disadvantage some	Direct	In Tameside, a significant portion of the population experiences disability. Data indicates that around 20% of residents in certain areas are registered as disabled, with a notable number not claiming disability benefits. This "hidden" disability population, those registered but not claiming benefits, highlights a potential disparity in support and access to resources.
4	Pregnancy/Maternity	Pregnancy/Maternity listed as a hardship factor.	Direct	The number of live births in Tameside in 2021 was 2,525.7 The crude birth rate for Tameside (10.9) was higher than the rate for England (10.5), indicating that Tameside has a slightly higher number of births per 1,000 people than the national average. Nationally, perinatal mental illness affects up to 27% of new and expectant mums and covers a wide range of 7 Live births in England and Wales : birth rates down to local authority areas.
5	Socio-Economic Disadvantage	Policy targets financial hardship and low income;	Direct	Tameside experiences significant levels of deprivation and low income, with 17.5% of the population considered income deprived in 2019. Many areas within Tameside are among the most deprived in England, and 17 out of 19 wards have income

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		substantial positive impact if accessible.		deprivation exceeding the national average. Furthermore, a substantial number of children in Tameside are living in low-income families.
6	Carers	Caring responsibilities can limit ability to navigate application/evidence steps; risk of under-claiming	Indirect	In Tameside, approximately one in ten residents were providing unpaid care as of the 2021 census. Additionally, there are 131 approved fostering households, with 86 mainstream and 45 connected carers. Tameside also has a significant number of young carers, with nearly three times the England average.
7	Multiple Marginalisation	Multiple Marginalisation likely to see positive impact from policy.	Direct	There are limited stats on this however Tameside has a diverse population, with a significant proportion of residents from minority ethnic groups, a significant number of disabled residents and a large number experience poverty.
8	Sex	Some hardship factors (e.g., lone parenthood, domestic abuse) disproportionately affect women.	Indirect	The Government's population estimates as of 2021 show that the total population of Tameside is now made up of 51% female and 49% male with less than 0.05% nonbinary. Data from May 2024 shows that 85% of single parent families in the UK were lone-mother families.
9	Neurodivergence	communication demands may disadvantage applicants without adjustments	Direct	In Tameside, approximately 1 in 7 people are neurodivergent, meaning their brains function differently from what is considered typical. This encompasses a range of conditions like autism, ADHD, and dyslexia. While not a specific Tameside statistic, it's estimated that 15% of the UK population, or roughly 1 in 7, are neurodivergent

Step 6: Plan mitigating actions

Purpose:	To identify mitigating actions to minimise potential detrimental impacts of the proposal on people with protected characteristics.
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Impact No.	Impact	Mitigating Action and Rationale	Officer Responsible	Timescale	Completed (Yes/No)	Update
<i>Identify the impact number from Impact Analysis</i>	<i>Identify the impact being addressed</i>	<i>Describe the action required to reduce the detrimental impact identified in the Impact Analysis, and explain the rationale underneath and/or intended outcome.</i>	<i>Identify who is responsible for implementing the mitigating action (name and department).</i>	<i>Provide the timeframe for when the mitigating action should be implemented.</i>	<i>Has the mitigating action been implemented?</i>	<i>Provide any progress updates below.</i>

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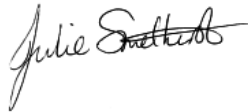
1	Care leavers (direct)	Automatic consideration of care leaver status where Council holds data; named liaison with Children Services; simplified evidence list.	Christopher Stuart, Revenues and Benefits Service & Children Services	Q1 2026	Yes – in place already	N/A
	Age	Offer assisted applications (phone/face-to-face), reasonable adjustments (extra time, third-party reps	Christopher Stuart, Revenues and Benefits Service	Q1 2026	Yes – in place already	N/A
	Disability / Ill mental health	Offer assisted applications (phone/face-to-face), reasonable adjustments (extra time, third-party reps), and plain-language letters.	Christopher Stuart, Revenues and Benefits Service	Q1 2026	Yes – in place already	N/A
	Pregnancy/Maternity	Flexible evidence windows around birth; prioritise urgent cases.	Christopher Stuart, Revenues and Benefits Service	Q1 2026	Yes – in place already	N/A
	Race	Provide translated summaries, interpreter access, and easy-read guidance; enable assisted digital and paper forms.	Christopher Stuart, Revenues and Benefits Service	Q1 2026	Yes – in place already	N/A
	Carers	Allow third-party representatives and flexible appointment times.	Christopher Stuart, Revenues and Benefits Service	Q1 2026	Yes – in place already	N/A
	Neurodivergence	Provide structured checklists, reminder prompts, and single-point case handler. Rationale: support executive function needs.	Christopher Stuart, Revenues and Benefits Service	Q1 2026	Yes – in place already	N/A
	Sex (women disproportionately affected by DA/lone parenthood)	Safe disclosure routes; redact sensitive info in decision letters; signpost to support	Christopher Stuart, Revenues and Benefits Service	Q1 2026	Yes – in place already	N/A

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Step 7: Sign-off

Purpose:	For the EIA Lead Officer to sign that the EIA is complete, and for the Assistant (Director) to counter-sign that they agree with the content of the EIA and that it is sufficiently robust.
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This Equality Impact Assessment has been completed by the EIA Lead Officer:	Name:	Christopher Stuart
	Signature:	
	Department:	Revenues and Benefits
	Date:	09/01/2026
This Equality Impact Assessment has been checked by the Assistant Director / Director, and signs that it is sufficiently robust and rigorous:	Name:	Julie Smethurst
	Signature:	
	Department:	Revenues and Benefits
	Date:	13/01/2026

POST-IMPLEMENTATION REVIEW

Step 8: Review EIA after implementation

Purpose:

To update the EIA with any new impacts and to provide a progress update on mitigating actions.

SEE INSTRUCTION:

This step should only be completed if the proposal has passed through the governance process where appropriate and has been implemented. It should be completed at two stages:

- Six months after implementation
- Twelve months after implementation

The evidence in the Impact Analysis should serve as the baseline against which change can be measured.

The Post-Implementation Review can find out whether:

- The proposal has had any positive impacts on people with protected characteristics
- Mitigating actions to minimise detrimental impacts have worked
- There are impacts that were not foreseen in the Impact Analysis that need to be accounted for

Six Months After Implementation

Twelve Months After Implementation

Describe and explain the effects of the proposal on people with protected characteristics, using evidence to compare against the Impact Analysis as a baseline.

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