

# Community Impact Assessment

Part 1 – Details		
What Policy/ Procedure/ Strategy/Project/Service is being assessed?	Write Offs	
Date Conducted	08/11/24	
Name of Lead Officer and Service Area	Michael Buckland Head of Revenues and Benefits	
Commissioning Team (if applicable)		
Director Responsible for project/service area	Jo Goodfellow, ED Finance	
Who are the main stakeholders	Corporate Management Team (CMT) and Elected Members, Precepting Authorities, Residents	
Describe what consultation has been undertaken. Who was involved and what was the outcome	No consultation required	
Outline the wider research that has taken place (E.G. commissioners, partners, other providers etc)	N/A	
What are you assessing? Indicate with an 'x' which applies	A decision to review or change a service	<input type="checkbox"/>
	A Strategy/Policy/Procedure	X
	A function, service or project	<input type="checkbox"/>
What kind of assessment is it? Indicate with an 'x' which applies	New	X
	Existing	<input type="checkbox"/>
	Being reviewed	<input type="checkbox"/>
	Being reviewed as a result of budget constraints / End of	<input type="checkbox"/>

	Contract	
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## Part 2 – Summary of Assessment

Give a summary of your proposal and set out the aims/ objectives/ purposes/ and outcomes of the area you are impact assessing.

To seek endorsement from Cabinet to write off irrecoverable debt.

Who will be affected and how?

Residents, businesses, Preceptors, voluntary sector and partner organisations

Are there any other functions, policies or services linked to this impact assessment?

Yes  No

If you answered 'Yes', please indicate what they are?

Revenues & Benefits, Customer Services, Housing

## Part 3 – Impact on the Community

Thinking about each of the Areas below, does or could the Policy function, or service have a direct impact on them?

Impact Area	Yes	No	Reason (provide brief explanation )
Age	<input type="checkbox"/>	<input checked="" type="checkbox"/>	No impact as a direct result of this report
Disability	<input type="checkbox"/>	<input checked="" type="checkbox"/>	No impact as a direct result of this report
Gender Reassignment	<input type="checkbox"/>	<input checked="" type="checkbox"/>	No impact as a direct result of this report
Marriage and Civil Partnership	<input type="checkbox"/>	<input checked="" type="checkbox"/>	No impact as a direct result of this report
Pregnancy & Maternity	<input type="checkbox"/>	<input checked="" type="checkbox"/>	No impact as a direct result of this report
Race	<input type="checkbox"/>	<input checked="" type="checkbox"/>	No impact as a direct result of this report
Religion or belief	<input type="checkbox"/>	<input checked="" type="checkbox"/>	No impact as a direct result of this report
Sexual orientation	<input type="checkbox"/>	<input checked="" type="checkbox"/>	No impact as a direct result of this report
Sex	<input type="checkbox"/>	<input checked="" type="checkbox"/>	No impact as a direct result of this report
Gypsy/Travelling Community	<input type="checkbox"/>	<input checked="" type="checkbox"/>	No impact as a direct result of this report
Those with caring/dependent responsibilities	<input type="checkbox"/>	<input checked="" type="checkbox"/>	No impact as a direct result of this report
Those having an offending	<input type="checkbox"/>	<input checked="" type="checkbox"/>	No impact as a direct result of this report

past			
Children	<input type="checkbox"/>	<b>X</b>	No impact as a direct result of this report
Vulnerable Adults	<input type="checkbox"/>	<b>X</b>	No impact as a direct result of this report
Families	<input type="checkbox"/>	<b>X</b>	No impact as a direct result of this report
Those who are homeless	<input type="checkbox"/>	<b>X</b>	No impact as a direct result of this report
Those on low income	<input type="checkbox"/>	<b>X</b>	No impact as a direct result of this report
Those with drug or alcohol problems	<input type="checkbox"/>	<b>X</b>	No impact as a direct result of this report
Those with mental health issues	<input type="checkbox"/>	<b>X</b>	No impact as a direct result of this report
Those with physical health issues	<input type="checkbox"/>	<b>X</b>	No impact as a direct result of this report
Social inclusion Please include refugees and asylum seekers,	<input type="checkbox"/>	<b>X</b>	No impact as a direct result of this report
Social inclusion: Armed Forces The Armed Forces Covenant is a pledge that together we acknowledge and understand that those who have served in the armed forces, and their families, should be treated with fairness and respect and any impact should be considered	<input type="checkbox"/>	<b>X</b>	No impact as a direct result of this report
Health and Wellbeing	<input type="checkbox"/>	<b>X</b>	No impact as a direct result of this report
Climate Change	<input type="checkbox"/>	<b>X</b>	No impact as a direct result of this report

#### **Part 4 – Risk Assessment**

**From evidence given from previous question, please detail what measures or changes will be put in place to mitigate adverse implications. this includes climate change considerations**

**This is the section in which to please outline any actions to mitigate negative or enhance positive impacts in terms of economic, environmental or wider societal considerations, and actions to review and monitor the overall impact of the change accordingly.**

Impact Area	Details of the Impact	Action to reduce risk
N/A		

**Part 5 - Action Plan and Review**

Detail in the plan below, actions that you have identified in your Community Impact Assessment, which will eliminate discrimination, advance equality of opportunity and/or foster good relations.

If you are unable to eliminate or reduce negative impact on any of the impact areas, you should explain why

Impact (positive or negative) identified	Action	Person(s) responsible	Target date	Required outcome
N/A	Outcomes and Actions entered onto Pentana			

Date of Review (If applicable) .....

Guidance and form updated July 2023 following CMT approval.