

**SECTION 1: CIA SUMMARY**
**Community Impact Assessment: Summary**
**1. Name of service, policy, function or criteria being assessed:**

New enforcement powers for the Neighbourhood Enforcement Team.

**2. What are the main objectives or aims of the service/policy/function/criteria?**
**Service overview:**

- To provide staff with additional enforcement powers in relation to: flytipping, vehicle repair and maintenance on the road-side and micro-chipping of dogs.

**3. Name and Job Title of person completing assessment:**

Tanya Lyon, Community Safety Manager

**4. Have any impacts been Identified? (Yes/No)**

NO

**Community of Identity affected:**
**Summary of impact:**
**5. Date CIA completed: 27/5/16**
**6. Signed off by:**

7. I am satisfied that this service/policy/function has been successfully impact assessed.

**Name: Jane Mowat**

**Position: Head of Community Safety**

**Date:**

**8. Decision-making body:**
**Date:**
**Decision Details:**

Send the completed signed off document to [ciasubmission@york.gov.uk](mailto:ciasubmission@york.gov.uk) It will be published on the intranet, as well as on the council website.

Actions arising from the Assessments will be logged on Verto and progress updates will be required

## Community Impact Assessment (CIA)

**Community Impact Assessment Title:**

Repositioning of Service Provision Peasholme Centre.

What evidence is available **to suggest that the proposed service, policy, function or criteria could have a negative (N), positive (P) or no (None) effect** on quality of life outcomes? (Refer to guidance for further details)

Can negative impacts be justified? **For example: improving community cohesion; complying with other legislation or enforcement duties; taking positive action to address imbalances or under-representation; needing to target a particular community or group e.g. older people.** NB. Lack of financial resources alone is NOT justification!

### Community of Identity: Age

| Evidence                         |   | Quality of Life Indicators | Customer Impact<br>(N/P/None) | Staff Impact<br>(N/P/None) |
|----------------------------------|---|----------------------------|-------------------------------|----------------------------|
| Powers relate to Over 18's only. |   |                            | None                          | None                       |
| Details of Impact                | <i>Can negative impacts be justified?</i> | Reason/Action              | Lead Officer                  | Completion Date            |
|                                  |   |                            |                               |                            |

**Community of Identity: Carers of Older or Disabled People**

| Evidence          |   | Quality of Life Indicators | Customer Impact<br>(N/P/None) | Staff Impact<br>(N/P/None) |
|-------------------|---|----------------------------|-------------------------------|----------------------------|
|                   |   |                            | <b>None</b>                   | <b>None</b>                |
| Details of Impact | <i>Can negative impacts be justified?</i> | Reason/Action              | Lead Officer                  | Completion Date            |
|                   |   |                            |                               |                            |

**Community of Identity: Disability**

| Evidence          |   | Quality of Life Indicators | Customer Impact<br>(N/P/None) | Staff Impact<br>(N/P/None) |
|-------------------|---|----------------------------|-------------------------------|----------------------------|
|                   |   |                            | <b>None</b>                   | <b>None</b>                |
| Details of Impact | <i>Can negative impacts be justified?</i> | Reason/Action              | Lead Officer                  | Completion Date            |
|                   |   |                            |                               |                            |

**Community of Identity: Gender**

| Evidence          |   | Quality of Life Indicators | Customer Impact<br>(N/P/None) | Staff Impact<br>(N/P/None) |
|-------------------|---|----------------------------|-------------------------------|----------------------------|
| None              |   |                            | None                          | None                       |
| Details of Impact | <i>Can negative impacts be justified?</i> | Reason/Action              | Lead Officer                  | Completion Date            |
|                   |   |                            |                               |                            |

**Community of Identity: Gender Reassignment**

| Evidence          |   | Quality of Life Indicators | Customer Impact<br>(N/P/None) | Staff Impact<br>(N/P/None) |
|-------------------|---|----------------------------|-------------------------------|----------------------------|
| None              |   |                            | None                          | None                       |
| Details of Impact | <i>Can negative impacts be justified?</i> | Reason/Action              | Lead Officer                  | Completion Date            |
|                   |   |                            |                               |                            |

**Community of Identity: Marriage & Civil Partnership**

| Evidence          |   | Quality of Life Indicators | Customer Impact<br>(N/P/None) | Staff Impact<br>(N/P/None) |
|-------------------|---|----------------------------|-------------------------------|----------------------------|
| None              |   |                            | None                          | None                       |
| Details of Impact | <i>Can negative impacts be justified?</i> | Reason/Action              | Lead Officer                  | Completion Date            |
|                   |   |                            |                               |                            |

**Community of Identity: Pregnancy / Maternity**

| Evidence          |   | Quality of Life Indicators | Customer Impact<br>(N/P/None) | Staff Impact<br>(N/P/None) |
|-------------------|---|----------------------------|-------------------------------|----------------------------|
| None              |   |                            | None                          | None                       |
| Details of Impact | <i>Can negative impacts be justified?</i> | Reason/Action              | Lead Officer                  | Completion Date            |
|                   |   |                            |                               |                            |

**Community of Identity: Race**

| Evidence          |   | Quality of Life Indicators | Customer Impact<br>(N/P/None) | Staff Impact<br>(N/P/None) |
|-------------------|---|----------------------------|-------------------------------|----------------------------|
| None              |   |                            | None                          | None                       |
| Details of Impact | <i>Can negative impacts be justified?</i> | Reason/Action              | Lead Officer                  | Completion Date            |
|                   |   |                            |                               |                            |

**Community of Identity: Religion / Spirituality / Belief**

| Evidence          |   | Quality of Life Indicators | Customer Impact<br>(N/P/None) | Staff Impact<br>(N/P/None) |
|-------------------|---|----------------------------|-------------------------------|----------------------------|
| None              |   |                            | None                          | None                       |
| Details of Impact | <i>Can negative impacts be justified?</i> | Reason/Action              | Lead Officer                  | Completion Date            |
|                   |   |                            |                               |                            |

**Community of Identity: Sexual Orientation**

| Evidence          |   | Quality of Life Indicators | Customer Impact<br>(N/P/None) | Staff Impact<br>(N/P/None) |
|-------------------|---|----------------------------|-------------------------------|----------------------------|
| None              |   |                            | None                          | None                       |
| Details of Impact | <i>Can negative impacts be justified?</i> | Reason/Action              | Lead Officer                  | Completion Date            |
|                   |   |                            |                               |                            |