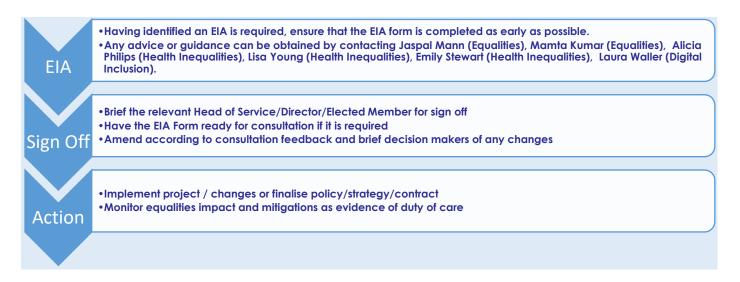


| Title of EIA | | HMO licensing consultation |
|-----------------|-----------------------|--|
| EIA Author | Name | Steven Chantler |
| Position | | Principal Environmental Health Officer |
| | Date of completion | 15/11/23 |
| Head of Service | Name | Davina Blackburn |
| | Position | Strategic Lead of Regulation |
| Cabinet Member | Name | David Welsh |
| | Portfolio | Cabinet Member for Housing and Communities |



PLEASE REFER TO EIA GUIDANCE FOR ADVICE ON COMPLETING THIS FORM

SECTION 1 – Context & Background

1.1 Please tick one of the following options:

This EIA is being carried out on:

□New policy / strategy

□New service

 \boxtimes Review of policy / strategy

□Review of service

□Commissioning

Other project (*please give details*)



1.2 In summary, what is the background to this EIA?

Coventry City Council implemented a city-wide HMO Additional Licensing scheme on 4 May 2020, which required all HMOs in the city to be licensed.

The Council has a duty to carry out a review of any discretionary licensing scheme it has implemented to determine if it is achieving the aim of improving management standards and property conditions for the tenants that live there. The scheme is now reaching its third year and as such this is an appropriate time to review it. The outcome of this review will help measure the effectiveness so far and will assist in informing a future decision on the renewal of any scheme designation.

The review is also intended to lead to service improvements within the remaining life of the existing scheme and for any future scheme and will provide a positive way of engaging with partners, both internal and external, landlords and tenants, and as such has the additional benefit of raising awareness of HMO licensing.

1.3 List organisations and people who are involved in this area of work?

Landlords Agents Tenants in the Private Rented Sector Residents living in the city

SECTION 2 – Consideration of Impact

Refer to guidance note for more detailed advice on completing this section.

In order to ensure that we do not discriminate in the way our activities are designed, developed and delivered, we must look at our duty to:

- Eliminate discrimination, harassment, victimisation and any other conflict that is prohibited by the Equality Act 2010
- Advance equality of opportunity between two persons who share a relevant protected characteristic and those who do not
- Foster good relations between persons who share a relevant protected characteristic and those who do not

2.1 Baseline data and information



- Please include an analysis of the equalities data your service holds. This could include surveys, complaints, compliments, management information and customer profiles. (*Please refer to Diversity Guide*)
- Where possible compare your data to local data using
 - Facts about Coventry
 - o Census 2011
 - o Census 2021
 - o JSNA

Coventry's population size has increased by 8.9%, from around 317,000 in 2011 to 345,300 in 2021. Historically, Coventry has been one of the youngest cities in the UK, with a fast-growing population of young adults aged 18-29 and a median age of 32 years compared to the UK average of 40. In the coming years, this is expected to change rapidly, with the 65+ age group expected to become the fastestgrowing demographic over the next 15 years. As of 2020, people aged 75+ represent just 6% of the city's population, compared to the UK average of 9%; but by 2043, the proportion of people aged 75+ is expected to grow to nearly 8%.

Affordability of home ownership has worsened in 2022, full-time employees could expect to spend around 8.3 times their annual earnings buying a home.

The Coventry Homefinder register for social housing has approximately 8,200 applicants at any one time and all of these households have a recognised housing need. Approx 1,500 of these are in Band 1 and have an urgent housing need as set out in the Homefinder policy however there are less than 1,000 social housing lettings per annum in Coventry across all Housing Associations working in the city.

The rate of social renting in Coventry remained at 17.0%, while the rate of home ownership decreased from 60.6% to 57.4%.

The Strategic Housing Market Assessment calculated a need for an additional 42,000 homes by 2031 to meet the growth needs of Coventry, including 12,000 additional affordable homes.

In Coventry, the percentage of private renting increased from 20.6% in 2011 to 24.7% in 2021 and the median monthly rent recorded in October 2023 was £641.60.

The English Indices of Deprivation 2019 were published by government department MHCLG on the 30th of September 2019. They rank all small areas in England according to different measures of deprivation and are the most widely used measure of deprivation. Seven domains of deprivation are combined to produce the overall Index of Multiple Deprivation. Each domain contains a number of component indicators including Income, Employment, Health and Disability, Education Skills and Training, Barriers to Housing and Other Services, Crime and Living Environment.

It puts the 326 Local Authority Districts into a rank order based on the population weighted average rank of all areas with a rank of 1 being the most deprived.



Overall, Coventry has improved notably between the IMD 2015 and the IMD 2019 relative to other local authority areas. This does not necessarily imply absolute improvement.

Depending on the way it is measured, Coventry ranks between 64th and 81st most deprived local authority area of 317 in England.

28 out of Coventry's 195 neighbourhoods (14%) are amongst the most deprived 10% in England, a reduction from 36 in the IMD 2015.

There was relative improvement across all domains apart from the living environment, the area in which Coventry fairs least well relatively. This measures the quality of housing, air quality and road traffic accidents.

The Crime domain and the Barriers to housing and services are areas in which Coventry is in the best position relatively; these domains also showed the biggest relative improvement since the IMD 2015.

There was not a strong pattern of improvement in the IMD by deprivation decile, the areas that were more deprived in 2015 improved to a similar degree to those that were less deprived originally.

We are now half way through the scheme and have collected a lot of data in relation to property improvements that have been made to the properties in terms of repair and maintenance, which will be baselined from the scheme's inception. The review and consultation process will seek to speak steakholders to guage their satisfaction of the scheme and what impact it has made to their lives.

2.2 On the basis of evidence, complete the table below to show what the potential impact is for each of the protected groups.

- Positive impact (P),
- Negative impact (N)
- Both positive and negative impacts (PN)
- No impact (NI)

*Any impact on the Council workforce should be included under question 5.0 – **not below**

| Protected Characteristic | Impact type P, N, PN, NI | Nature of impact and any mitigations required |
|-----------------------------|--------------------------------|--|
| Age 0-18 | Ρ | HMOs are aimed at those whose needs are not met by the market.Whilst those aged 0-18 would generally not be directly able to access HMO products, many will live in households where their parents and carers will not be able to afford open market homes and thus they will indirectly benefit from the policies. 22.5% of children live in low income families which is above the regional and national average (20.2% and 17% respectively)2 |



| Age 19-64 | Ρ | HMO housing is aimed at those whose needs are such thay they cannot or are unable to buy in the open market for a varity of social and economic reasons. The average gross disposable house hold income for Coventry is below the regional and national average(£15,353 per head per annum compared to £18,222 and £21,609 respectively in 2018), and the average house price was £185,000(October 2019 to September 2020 figures). Currently the claimant count stands at 15,320 (ONS July 2021) compared to 8,000 in March2020. HMO licensing improves the quality of HMOs. HMOs have the potential to benefit the wider local community by reducing social and environmental factors associated with high concentrations of HMOs relating to with noise, rubbish and general up keep. | |
|--|----|--|--|
| Age 65+ | Ρ | See above in terms of disposable household income and average house prices. The option of residing in an HMO applicable depending upon the individual / household circumstances. | |
| Disability | ID | Property licensing is intended to raise the standards of condition and management by landlords of rented properties. Therefore, tenants with a disability should benefit from the licensing regime as there are minimum standards set for amenities and licence conditions relating to the property which landlords must comply with There is no known impact on landlords who have a disability, except in as much as assistance is available by phone and email from council officers for those having difficulty using on line application and payment systems. | |
| Gender reassignment | ID | There is no known impact on landlords or tenants who have gender reassignment, except that one of the benefits of licensing schemes is to reduce the incidence of harassment of tenants by landlords or attempts by landlords to unlawfully evict tenants | |
| Marriage and Civil Partnership | ID | No direct impact although the option of residing in an HMO will be applicable depending upon the individual / household circumstances | |
| Pregnancy and maternity | ID | No direct impact although the option of residing in an HMO will be applicable depending upon the individual / household circumstances | |
| Race (Including: colour, nationality, citizenship ethnic or national origins) | ID | No direct impact although Coventry has a diverse population and affordable housing will be applicable depending upon the individual / household circumstances | |
| Religion and belief | ID | No direct impact although the option of residing in an HMO will be applicable depending upon the individual / household circumstances | |
| Sex | ID | No direct impact although the option of residing in an HMO will be applicable depending upon the individual / household circumstances | |



| Sexual orientation | 11) | No direct impact although the option of residing in an HMO will be applicable depending upon the individual / household circumstances |
|--------------------|-----|---|
|--------------------|-----|---|

2 https://www.gov.uk/government/statistics/children-in-low-income-families-local-area-statistics-201415-to-201819

SECTION 3 – HEALTH INEQUALITIES - See the health inequalities pre EIA guidance sheet for this section.

| 3 Further information on heath in | equalities is available on the Intranet |
|-----------------------------------|---|
|-----------------------------------|---|

3.1 Please tell us how the proposal you are submitting this EIA form will reduce health inequalities: *Please include which Marmot Principles this work covers.*

Coventry is a Marmot City. The Marmot approach of using 'Proportionate Universalism' shows how allocating resources across the social gradient, but proportionate to peoples need, can benefit everyone and help improve health equity. This also shifts resources from always being reactive to a more preventative way of working.

Benefits for you if you are a private tenant: Improved standards of property, security and decency, Increased safety in your own home through elimination of rogue landlords, and protection from illegal evictions, better information on your rights and expected standards in your home, better protection of vulnerable tenants

Improvements in partnerships between us and other agencies, such as the police and fire brigade. More effective tackling of issues, such as antisocial behaviour, crime and poor / dangerous housing conditions

The Marmot Review ["Fair Society, Healthy Lives", 2010] notes that 'The more deprived the neighbourhood, the more likely it is to have social and environmental characteristics presenting risks to health'.

Coventry's Headline Statistics

- 1. The population of Coventry is around 345,300.
- 2. The average (median) age of residents of Coventry is 35 years of age (compared with 40 nationally).
- 3. Life expectancy is 10.7 years higher for men and 8.3 years higher for women in the least deprived areas of Coventry than in the most deprived areas.
- 4. In the latest census, around 242,100 Coventry residents said they were born in England. This represented 70.1% of the local population.
- 5. 55.9% of Coventry's school children are from an ethnic minority group compared with 35.0% nationally.
- 6. Children living in poverty (financial year ending 2021) 22.9% compared with 18.5% nationally



- 7. In 2020 the percentage of households in fuel poverty in Coventry increased to 20.3% from 18.8% in 2019.
- 8. Depending on the way it is measured, Coventry ranks between 64th and 81st most deprived local authority area of 317 in England.
- 9. Coventry has an Income Deprivation Affecting Children Index (IDACI) score of 0.218 (2019). This measures the proportion of all children aged 0 to 15 living in income-deprived families. The average for West Midlands combined authority is 0.235.
- Coventry has an Income Deprivation Affecting Older People Index (IDAOPI) score of 0.190 (2019). This measures the proportion of all those aged 60 or over who experience income deprivation. The average for West Midlands combined authority is 0.203.

There is significant body of evidence (Marmot Review) which demonstrates that there is a strong link between a residents health and poor housing, By raising the standard of housing it will have a positive impact on a residents health and wellbeing

| Marr | not principles | |
|------|--|-------------|
| 1 | Give every child the best start in life | \boxtimes |
| 2 | Enable all children, young people, and adults to maximise their capabilities and have control over their lives | \boxtimes |
| 3 | Ensure a healthy standard of living for all | \boxtimes |
| 4 | Create fair employment and good work for all | |
| 5 | Create and develop healthy and sustainable places and communities | \boxtimes |
| 6 | Strengthen the role and impact of ill health prevention | \boxtimes |
| 7 | Tackle racism, discrimination and their outcomes | |
| 8 | Pursue environmental sustainability & health equity | \boxtimes |

3.2 What information do you have to show you are going to reduce health inequalities: Think:

Coventry has an estimated population of approximately 345,300. Census 2021 data suggests that Coventry's population has a much younger age profile than England in general; it is the younger population that is on the increase with a decline in the over 75's. The average age of Coventry's



residents is 33 years, notably lower than the England average of 40 years, and is falling. The student population means there is continually a large population aged 16-24, this age group makes up 13.7% of the population.

The growth and increase in the size of the Private Rented Sector (PRS) has been a significant change in the housing market in Coventry. In 2021 there were approximately 33,000 households living in the PRS. HMOs are a major concern for the Council with the Census 2021 suggesting that HMOs currently make up a quarter of the PRS.

The trend over many years has been for the HMO stock to grow steadily within the city. The Council has produced a Housing Strategy which recognises that, amongst other things, there is limited social affordable housing available in the city making it clear that the private rented sector will need to play a greater role in meeting housing needs in the city. Additional Licensing is part of a wider set of measures to enable landlords to provide good quality housing within their communities and will help alleviate the housing situation by setting and maintaining minimum standards across the city in the most vulnerable sector of Coventry's private rental market.

Support for people and communities - Some communities are experiencing the impact of an increasing proportion of housing that is converted to multiple occupation, especially (but not exclusively) for student housing. Where HMOs are well managed and maintained, they provide an important housing option. However, where there is poor management and poor standards, this can have a detrimental effect on the occupiers and adversely impact on the local community.

Improving the use of existing homes - It is important to increase the number of homes to meet the city's growth needs, but the majority of housing available in the city is already in existence. There are approximately 142,000 existing homes in the city, compared to 24,600 additional homes to be provided over the life of the Local Plan (to 2031). The condition of the existing housing stock is important to ensure that residents are living in decent, safe accommodation which is suited to their needs. Rented homes must be well managed by landlords who meet their responsibilities, and tenants should understand their rights and their own responsibilities too.

The Housing Strategy links into other key strategies, including, the One Coventry Plan, the Health and Wellbeing Strategy and the Climate Change Strategy by contributing to the delivery of the key corporate priorities.

Regulatory Services is responsible for regulating the housing sector and embraces a range of service areas used by people, businesses and organisations and through this work profile "seeks to ensure that the public, visitors, workers and residents of Coventry have a healthy and safe work and domestic environment." through education, persuasion and enforcement activities. The teams within the service are responsible for ensuring properties and landlords in the PRS meet minimum legal requirements.



The service has been working with landlords to improve conditions within the HMO stock of the city through the national mandatory HMO licensing scheme as well as statutory regulatory functions relating to maintaining minimum standards in properties in the sector. A variety of interventions have been used in Coventry to tackle problems in the HMO stock in the city. With the introduction of the Additional Licensing Scheme the service was structured in such a way as to concentrate on HMO applications with a dedicated team of Property Licensing Assistants supporting our team of Environmental Health Officers who are responsible for inspecting the HMOs and investigating non-compliance. There is a very close working relationship between the two teams. The service provided by the HMO Team is supported by a dedicated Tenancy Relations Officer who works alongside them, providing advice and assistance to landlords and agents about their rights and responsibilities.

Where serious breaches occur legal action has been taken which has led to convictions and, in some cases Banning Orders. In many cases the Tenancy Relations Officer prevents homelessness through their involvement with proactive casework.

3.3 Who/which groups of people might face the biggest health inequalities for your work and why: What can be done to improve health equity for the groups of people you have identified?

People from different ethnic groups

HMOs are occupied by a diverse population, and such communities can be particularly affected by overcrowding, illegal accommodation, substandard conversions and poor management.

Potential benefit: Additional Licensing brings improved quality and safety of accommodation for tenants living in HMOs and assist in the identification and removal of landlords who cause negative impact to vulnerable groups or new communities via substandard or illegal accommodation. This would also be a benefit to all compliant landlords as it would ensure all landlords are operating within the legislative framework.

Children and Vulnerable Adults – the licensing scheme will have a positive benefit on the safeguarding of children and vulnerable adults as the fit and proper test will prevent persons managing or being a licence holder who has convictions for sexual offences, drugs, fraud etc.



Landlords

In regulating hazards in privately rented properties, owners and agents who are regulated against may feel that they have been adversely impacted upon. However there are no other ways in which the service could be provided that would achieve these aims without adverse impact. Ultimately, when working within the legislative framework, people have a right to legal redress should they feel that a decision was unfairly/unlawfully taken; this can be via an appeal process or the Council's Complaints system

Tenants

Concern has been raised that licensing could cause an increase in rents as a result of the increased landlord expenditure on the licence fee and the costs of complying with licensing conditions being passed onto the tenant. Overall, the additional cost of the licence fee to landlords is considered to be small as a proportion of rental income, especially across the term of the licence it should not equate to more than a few pounds per week for compliant landlords.

A comparison was conducted to assess the movement of rental values for single rooms and, in particular if licensing of HMOs has had a direct impact on increasing rental values in areas which had licensing schemes and those which did not have licensing schemes. The study found that the rents are not dissimilar to increases experienced in other areas in the region and England where additional licensing schemes are not in operation.

From looking at this information, who/which groups of people might face the biggest health inequalities for your work and why

Property licensing is intended to raise the standards of condition and management by landlords of rented properties. Therefore, everybody should benefit from the licensing regime as there are minimum standards set for amenities and licence conditions relating to the property which landlords must comply with.

3.4 What can be done to improve health equity for the groups of people you have identified? To make advice and guidance available to landlords and tenants according to their needs, such as where English is not the first language. We ensure that when we take enforcement action it is in line with the Enforcement Policy, which means that action must be proportionate and reasonable.



SECTION 4 - DIGITAL EXCLUSION INEQUALITIES

Please consider the digital exclusion information in the supporting document prior to completing this section.

4.1 Starting point:

Thinking of the main aims of your work area that this EIA is for; does your work area impact digital inequalities or exacerbate? Y

• Assistance to be offered to all landlords to complete the application form and on-going help and advice will be given.

4.2 4.1 Reducing digital exclusion inequalities

Where are the opportunities for your area to reduce digital exclusion inequalities and embed supports/interventions as part of your work?

Again assistance to be offered to all landlords to complete the application form and on-going help and advice will be given.

5.0 Will there be any potential impacts on Council staff from protected groups?

No

You should only include the following data if this area of work will potentially have an impact on Council staff. This can be obtained from: Nicole.Powell@coventry.gov.uk

Headcount:

Sex:



| Female | |
|--------|--|
| Male | |

Disability:

| Disabled | |
|---------------------|--|
| Not Disabled | |
| Prefer not to state | |
| Unknown | |

Ethnicity:

| White | |
|------------------------|--|
| Black, Asian, Minority | |
| Ethnic | |
| Prefer not to state | |
| Unknown | |

Sexual Orientation:

| Heterosexual | |
|---------------------|--|
| LGBT+ | |
| Prefer not to state | |
| Unknown | |

| 16-24 | |
|-------|--|
| 25-34 | |
| 35-44 | |
| 45-54 | |
| 55-64 | |
| 65+ | |

Religion:

| Any other | |
|---------------------|--|
| Buddhist | |
| Christian | |
| Hindu | |
| Jewish | |
| Muslim | |
| No religion | |
| Sikh | |
| Prefer not to state | |
| Unknown | |

6.0 How will you monitor and evaluate the effect of this work?

| 6.1 | Action Planning | | | | |
|-------|-----------------|----------------|-----------|--|--|
| lssue | Identied | Planned Action | Timeframe | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |



7.0 Completion Statement

| As the appropriate Head of Service for this area, I confirm that the potential equality impact is as follows: | | |
|---|--|--|
| No impact has been identified for one or more protected groups \Box | | |
| Positive impact has been identified for one or more protected groups | | |
| Negative impact has been identified for one or more protected groups | | |
| Both positive and negative impact has been identified for one or more protected groups | | |

8.0 Approval

| Signed: Head of Service: | Date: |
|------------------------------|--------------------------|
| Davina Blackburn | 16/11/2023 |
| Name of Director: | Date sent to Director: |
| Julie Newman | 18/01/2024 |
| Name of Lead Elected Member: | Date sent to Councillor: |
| | 22/01/2024 |
| David Welst | |
| | |

Email completed EIA to equality@coventry.gov.uk