

Exeter City Council

Public Toilets Review Equalities Impact Assessment

Version 2 – March 2019

	Equality Impact Assessment Report Questions
1.	<p>Describe the piece of work you are assessing and the reason it is being carried out.</p> <p>This is a review of a non-statutory service in response to the need to make budget savings and enable a balanced budget to be set. The council operates 26 public toilets across the City Council area, with two of those currently closed due to anti-social behaviour. The proposal is to close 13 of the 26 in addition to the two already closed. This would leave 11 open across the City mainly near sports facilities, parks and tourist areas.</p> <p>A community toilet scheme has been proposed whereby local businesses sign up to an advertised scheme to allow their toilets to be used by the general public. Such a scheme is currently running in Bristol.</p>
2.	<p>Who is leading on the piece of work being assessed?</p> <p>Project Lead: Louise Harvey, Interim Public & Green Space Service Manager Senior Responsible Owner :David Bartram, Director</p>
3.	<p>What are the timescales for completing the work? Are there any committee deadlines you have to meet?</p> <p>The consultation exercise was approved by the Executive on 15 January 2019, and ran for three weeks. The paper with the full recommendations for closures is due to be considered by the Executive on 09 April 2019. Any approved changes to the service are planned to be in place by April 2019.</p>
4.	<p>What are the aims and objectives of the work? How do these link to wider council or strategic objectives.</p> <p>Non-statutory service reductions to help achieve budget savings to meet our legal duty to set a balanced budget meets the aim of Providing Value-For-Money Services.</p>
5.	<p>Who will be the main beneficiaries of the piece of work and in what way? All people in Exeter? Council staff? A specific stakeholder group? A combination of these?</p> <p>As the primary driver for the review is the aim to make budget savings, then the council is the main beneficiary. However the proposals contain recommendations for investment to improve two of the most heavily used facilities which will benefit the public at large and those groups identified who are in greater need of toilet provision.</p>
6.	<p>Do you have any data on how different groups would be affected by the work?</p> <p>All members of the community in Exeter would have the need for a public toilet at some point but the need is more prevalent amongst certain groups.</p> <p>Approximately 1 in 5 of the population has a longstanding illness or disability and has significant difficulty with day to day activities. These conditions often include problems with mobility or stamina and require access to adapted toilets. Conditions such as irritable</p>

bowel syndrome, ulcerative colitis, and Crohn's disease cause many people to reduce their outdoor activities and stay at home because of concerns about toilet facilities. It is estimated that over 1 in 20 women aged between 15 and 44 years and up to 1 in 7 women aged between 45 and 64 suffer with bladder problems. Over 1 in 33 men of working age have bladder problems. Faecal incontinence remains a greater taboo subject than urinary incontinence; it is quite prevalent, with an estimate that between 1 and 17% of adults live with this condition with the prevalence increasing as individuals age.

15.9% of the Exeter population are over the age of 65

7. Have any research studies or reports been carried out in other areas of the country or nationally that provide information about the likely impact of your work on equality groups?

The review of public toilets has been undertaken by numerous other local authorities across the UK. A recent BBC report noted;

- At least 1,782 facilities have closed across the UK in the last decade,
- Ten areas, including Newcastle, Merthyr Tydfil in south Wales and Wandsworth in south London, now have no council-run public toilets at all.

Other reports:

NHS Good Practice in continence services

(<https://www.nhs.uk/chq/Documents/2015%20uploads/DH%20-%20Good%20practice%20in%20continence%20services.pdf>)

Communities and Local Government Select Committee on Publicly Accessible Toilets

(<https://publications.parliament.uk/pa/cm200708/cmselect/cmcomloc/636/63602.htm>)

Publicly Accessible Toilets An Inclusive Design Guide by Gail Knight and Jo-Anne Bichard (http://www.hhc.rca.ac.uk/CMS/files/Toilet_LoRes.pdf)

Nowhere to Go, March 2007 ([http://www.ageuk.org.uk/documents/en-gb/for-professionals/research/nowhere%20to%20go%20public%20toilet%20provision%20\(2007\)_pro.pdf?dtrak=true](http://www.ageuk.org.uk/documents/en-gb/for-professionals/research/nowhere%20to%20go%20public%20toilet%20provision%20(2007)_pro.pdf?dtrak=true)) A survey of older people's views on public toilet provision in their local areas identified the practical, health and social issues that impact older people. The research findings included the following:

1. "many older people suffer from incontinence or have incontinence issues, caused by muscle weakness. It is estimated that over 3-3.5 million people suffer from urinary incontinence in the UK." (page 2)
2. "a major barrier in preventing people from using public toilets is that they are often not located in places where older people need them such as on trains, bus and transport terminals and in parks" (page 3)
3. "older people need toilets to be clean, safe, accessible, staffed, open and located in the wide variety of places where they go" (page 4)
4. ".Lack of public toilets is a significant contributory factor in the isolation older people..." (page 5)
5. "84% of respondents to our survey felt that shops and businesses should make more effort to provide toilet facilities for the public to use" (page 10)

	<p>Bladder and Bowel Foundation. (http://www.bladderandbowelfoundation.org/)</p>
<p>8.</p>	<p>What consultation has taken place or is planned with customers (individuals and groups) from equality groups?</p> <p>A web based consultation was carried out over three weeks in February 2019, with hard copies available in our customer service centre. In addition key organisations in the city who support affected groups were contacted to alert them and their members to the consultation. 526 online and hard copy responses to the consultation were received.</p> <p>Not everyone chose to use the online survey or consultation form and some letters and emails were received separately and fed into the consultation. Separate letters came from individuals and organisations such as Public Health Devon, the Topsham Community Association and the Exeter Green Party.</p>
<p>9.</p>	<p>What does the consultation indicate about any differential positive or negative impact(s) of this piece of work?</p> <p>Rationalisation of our public toilets to a more manageable number will have negative consequences but some public toilets will remain. This is not a total service withdrawal. The proposal for a community toilet scheme should help address the loss of facilities and may increase the availability.</p> <p><u>Gender</u></p> <p>Urinary incontinence affects more women than men. An estimated 34% women aged over 19 are affected by urinary incontinence (NICE 2015).</p> <p>Women who are pregnant or at the menopause need to use the toilet more often, as do those with other conditions such as diabetes. At any one time, about a quarter of all women of childbearing age will be menstruating and require access to toilets.</p> <p>Women are still more often carers of older people or children and need toilets in accessible locations with facilities to accommodate the needs of those for whom they are caring as well as their own (11 of the current sites have baby changing facilities). Small children have less control over their bladders and outings can be abruptly shortened if a child needs to use a toilet.</p> <p><u>Gender reassignment</u></p> <p>Transgender people may be worried that they will be turned away due to, people's perception about their gender. This may be more of an issue within business premises if male and female toilets are located in different parts of the building or if they need to speak to a member of staff to access them.</p> <p><u>Disability</u></p> <p>Approximately 1 in 5 of the population has a longstanding illness or disability and who have significant difficulty with day to day activities. These conditions often include problems with mobility or stamina and require access to adapted toilets. Conditions such as irritable bowel syndrome, ulcerative colitis, and Crohn's disease cause many people to reduce their outdoor activities and stay at home because of concerns about toilet facilities. It is estimated that over 1 in 20 women aged between 15 and 44 years and up to 1 in 7 women aged between 45 and 64 suffer with bladder problems. Over 1 in 33 men of working age have bladder problems. Faecal incontinence remains a greater taboo subject than urinary incontinence; it is quite prevalent, with an estimate that between 1 and 17% of adults live with this condition with the prevalence increasing as individuals age (22 of the current</p>

	<p>sites have disabled access)</p> <p><u>Mental Health & Social Exclusion</u></p> <p>A potential knock-on effect of inadequate public toilet facilities is that people who cannot go out in their community could become inactive. This can impact on health and social care as, with inactive individuals likely to become more immobile, isolated, ill and depressed leading to a possible need further treatment. It could also have detrimental effects on people's mental health due to the isolation created by not leaving home.</p> <p><u>Faith</u></p> <p>The closure of public toilets in itself does not have a direct impact on those of faith, however it would be important to ensure that in the community toilet scheme there is provision suitable for people of different cultural or religious backgrounds. For example, if all the community provision was in licensed premises, this would not be appropriate for some members of the community.</p> <p>People of some faiths may not feel welcome in some premises and the consultation will seek to understand if this is an issue.</p> <p><u>Ethnic background</u></p> <p>People of some ethnic backgrounds may not feel welcome in some premises and the consultation will seek to understand if this is an issue.</p> <p><u>Age</u></p> <p>Elderly people are more likely to suffer with incontinence and may need to use the toilet more frequently and with greater urgency. 15.9% of the Exeter population are over the age of 65.</p> <p>For many older people, lack of toilet facilities can stop them going out which can increase physical and mental health problems.</p> <p><u>Rough sleepers</u></p> <p>There could be negative impacts to homeless individuals who use public toilets as somewhere to wash as well as a toileting facility. The needs of homeless people are seldom mentioned in connection with public toilets, but their toileting requirements do need to be addressed if street fouling is to be reduced. Homeless people may also suffer from stigma, and may not be or may not feel welcome in some establishments.</p>
<p>10.</p>	<p>If there are gaps in your previous or planned consultation and research are there any experts/relevant groups that can be contacted to get further views or evidence on the issues? If so please explain who they are and how you will obtain their views.</p> <p>In addition to the consultation the council is liaising with other authorities who have already undertaken this process such as Bristol City Council who closed 18 on street public toilets in early 2018.</p>
<p>11.</p>	<p>Could there be a positive or negative impact on community relations or equal opportunities?</p> <p>If the proposal results in an increase in on street fouling this could have a negative impact on community relations.</p>

	<p>A successful community toilet scheme could have a positive impact on community relations if people see businesses taking part in something which contributes to the public good. People going into businesses to use toilet facilities regularly may have conversations with and get to know staff.</p>
<p>12. If you have indicated there is a negative impact on any group, is that impact Legal; Intended; of high or low impact?</p>	<p>The impact is legal, unintended and of high impact.</p> <p>The provision of public toilets is not a statutory service and can be withdrawn at any time. There will be a negative impact on all groups but the provision of a community toilet scheme will mitigate the impact.</p>
<p>13. If you identified any negative impact that is of low significance, can you minimise or remove it? If so how?</p>	<p>See above</p>
<p>14. Could you improve the strategy/policy/project's positive impact and if so how?</p>	<p>No. The community toilet scheme aims to address the loss of public toilets by adding further publically accessible toilets.</p>
<p>15. How do you intend to continue monitoring the impact of this strategy/policy/project?</p>	<p>It will not be possible to rigorously monitor the impact of the proposal as there is little current baseline data to measure against. However the council will continue to liaise with businesses and residents to assess whether there is an impact and whether the community toilet scheme (if selected) has been successful. Our ward councillors will be key to our understanding of the success or otherwise of this proposal.</p>
<p>16. If there are gaps in your evidence base, do you need to carry out any further research about the likely impact of your work on equality groups?</p>	<p>No</p>
	<p>The following part of the report will be completed when the consultation results have been analysed.</p>
<p>17. As a result of this assessment and available evidence collected, including consultation, do you need to make any changes to the strategy/policy/project?</p>	<p>No, our proposal is to reduce the number of public toilets we run to enable a balanced budget to be set. This remains unchanged but we have changed our position to request capital investment in the two most popular remaining public toilets and stated that when looking at alternative uses for the current public toilet sites, preference will be given to uses which incorporate a publically accessible toilet.</p>
<p>18. Will the changes planned ensure that the negative impact is: Legal; Intended; of low impact?</p>	<p>No, the impact remains legal, unintended and of high impact.</p>

	<p>The provision of public toilets is not a statutory service and can be withdrawn at any time. There will be a negative impact on all groups but the provision of a community toilet scheme will mitigate the impact.</p>
19.	<p>Have you set up a monitoring/evaluation/review process to check the successful implementation of the strategy/policy/project?</p> <p>As stated in 15, It will not be possible to rigorously monitor the impact of the proposal as there is little current baseline data to measure against. However the council will continue to liaise with businesses and residents to assess whether there is an impact and whether the community toilet scheme (if selected) has been successful. Our ward councillors will be key to our understanding of the success or otherwise of this proposal.</p>
20.	<p>How will this monitoring/evaluation further assess the impact on the equality groups/ensure the strategy/policy/project is non-discriminatory?</p> <p>All feedback will be incorporated into the proposed 6 monthly review.</p>
21.	<p>Please provide an action plan showing any recommendations that have arisen from the assessment and how you plan to take them forward. Are your actions SMART (specific, measurable, achievable, relevant and time-based).</p> <p>There are no recommendations arising from the consultation.</p>
22.	<p>When will you next review this work and the impact assessment?</p> <p>We propose to review the impact assessment 6 months after any approved closures, this is proposed to be completed as part of Place Scrutiny.</p>