

# Equality Impact Assessment Form

**Please ensure that you refer to the 'Equality Impact Assessment Guidance' while completing this form. If you would like further guidance please contact the Equalities Officer or Equalities Team**

<b>Details</b>
Name of Initiative to be assessed: Recruitment Policy
Name of responsible officer: Lisa Jones
Group/Directorate: Corporate
Service Area: Human Resources
Date: 10 December 2015

**(a) WHAT ARE YOU ASSESSING FOR IMPACT ?**

Service/ Function	Policy/ Procedure	Project	Strategy	Plan	Proposal	Information/ Position statement
<input type="checkbox"/>	<input checked="" type="checkbox"/> x	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**(b) Please name and describe below**

As above, updated policy

**(c) IS THE DELIVERY OF THIS INITIATIVE AFFECTED BY LEGISLATION OR OTHER DRIVERS SUCH AS CODES OF PRACTICE?  
If so, please identify what and how?**

Yes, employment legislation. Employer needs to set out how a fair recruitment process is applied.

**(d) Does the initiative directly affect service users, employees or the wider community?**

Yes  x Continue assessment  
 No  No need to continue screening or carry out an EqIA

**Screening/Relevance Test: Is an equality impact assessment required?**

*Screening is used to decide whether the initiative you are responsible for has a high or medium negative impact on any of the protected groups and will require a full EqIA. Please highlight the positive impact the decision will have on the protected characteristics.*

What will be the effect on :-

Protected Characteristic	Impact? <i>Include Positive and Negative</i>
Age	Supports all employees equally and ensures fairness
Disability	As above
Gender Reassignment	As above
Marriage & Civil Partnership	As above
Pregnancy and Maternity	As above



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## Evidence Sources

(i) Give details of any data or research that has led to your reasoning above, in particular, the sources used for establishing the demographics of service users.

(ii) Give details of how you have engaged with service users on the proposals and steps to avoid any disproportionate impact on a protected group and how you have used any feedback to influence your decision.

Are you satisfied that the engagement process complies with the requirements of the Statutory Equality duties?

**Decision Log** – (detail how Elected Members and Senior Managers have been involved in the decision process (give dates of key meetings and decisions made)

## Review

**Date of Next Review:**

**If review is not required, explain why.**

**Approved by:**

**Signature:**

**Job Title:**

**Approval date:**

**Date of Update:**

**Update recording**

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