

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

Details

Name of Initiative to be assessed: Extended Absence of an Elected Member

Name of responsible officer: Carys Kennedy

Group/Directorate: Chief Executive's

Service Area: Legal and Democratic

Date: 28th December 2018

(a) WHAT ARE YOU ASSESSING FOR IMPACT ?

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

(b) Please name and describe below

Proposal for dispensation for a Cllr's non-attendance at committee due to ill health

(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 – Local Government Act 1972

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

Yes Continue assessment

No **X** No need to continue screening or carry out an EqIA