

# 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: Pay Equality
Name of responsible officer: Jeremy Ashdown
Group/Directorate: Place and Transformation
Service Area: Human Resources
Date: 19 April 2017

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

Service/ Function <input type="checkbox"/>	Policy/ Procedure <input checked="" type="checkbox"/>	Project <input type="checkbox"/>	Strategy <input type="checkbox"/>	Plan <input type="checkbox"/>	Proposal <input type="checkbox"/>	Information/ Position statement <input type="checkbox"/>
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**(b) Please name and describe below**

**As a result of austerity, the Council has been required to implement a number of efficiency programmes over the last ten years. The Section 188 letter to Trade Unions will require the Council to commence consultations on workforce implications arising from financial implications to consider ways of avoiding or reducing the number of any compulsory redundancies to positions across the authority.**

**(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?**

Trade Union Labour Relations ((Consolidation) Act 1992 (TULR(C ) A), S188(4),

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

Yes	<input checked="" type="checkbox"/>	Continue assessment
No	<input type="checkbox"/>	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	No impact at this stage
Disability	No impact.
Gender Reassignment	No impact.
Marriage & Civil Partnership	No impact.
	No impact.

## Equality Impact Assessment Form

Pregnancy and Maternity	
Race	No impact.
Religion or Belief	No impact.
Sex	No impact.
Sexual orientation	No impact.
Carers	No impact.
Welsh Language	No impact.

**If after completing the EqlA screening/relevance test you determine that this service/function/policy/project is not relevant for an EqlA you must provide adequate explanation below (Please use additional pages if necessary).**

**Are you happy that you have sufficient evidence to justify your decision?**

Yes .....X..... No .....

Signed \_\_\_J C Ashdown\_\_\_\_\_ Position\_\_Interim Head of HR and OD\_

**N.B. If the initial screening process has identified actual or potential high or medium negative impact on a particular group or groups then you MUST carry out a full EqlA.**

### **Full Equality Impact Assessment**

*You should use the information gathered at the screening stage to assist you in identifying possible negative/adverse impact, including positive impact, and clearly identify which protected groups are affected.*

In terms of any disproportionate / negative / adverse impact that the proposal may have on a protected group, what steps (if any) could be taken to reduce that impact for each group identified. Attach a separate action plan if necessary.
Not Applicable
If ways of reducing the impact have been identified but are not possible, please explain why they are not possible.
Not applicable.
Please highlight positive impacts and actions that have been identified as a result of the assessment process.
Not Applicable

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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.

Not Applicable

(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.

Not Applicable

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

Not Applicable

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

This is a continuation report following similar reports being considered by Council in 2014

## Review

**Date of Next Review:**

**This will be subject to continuous review and further reports where Equality Impact Assessments will be fully considered.**

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

**Approved by:**

**Signature:**

**Job Title:**

**Interim Head of Human Resources and Organisational Development**

**Approval date:**

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19 April 2018

**Date of Update:**

**Update recording**