Appendix 1

EQUALITY IMPACT: SCREENING AND ASSESSMENT FORM

Section 4. Deligy/Eurotian/Decision (DED) Details

This form is to be used in conjunction with the Equality Impact Assessment Guidelines. Please refer to these before starting; if you require further guidance contact <u>equalities@west-dunbarton.gov.uk</u>

Name or	PFD:	Reduce payments to parent councils			
Lead Department & other		Education, Learning & Attainment			
departments/ partners involved:					
Responsible Officer		Laura Mason – Chief Education Officer			
Impact Assessment Team		Laura Mason – Chief Education Officer			
		Alan Munro – Quality & Performance Officer			
Is this a r	new or existing PFD?	New	lew		
Start date	e: 5 March 2018	End date: 5 March 2018	End date: 5 March 2018		
	the main target groups/	Parent Councils, mainstream and special needs schools			
who will be affected by the PFD ?					
discrimina	D Relevant to the General ation, promote equal oppo Please enter brief detail?		No – The PFD represents a recurring reduction in budget		
Yes:	If yes, complete all see	If yes, complete all sections, 2-9			
No:	If no, complete only sections 8-9				
	If don't know, complete sections 2 & 3 to help assess relevance				

Section 2: Evidence					
Please list the available e	Please list the available evidence used to assess the impact of this PFD, including the sources listed below. Please also				
identify any gaps in evidence and what will be done to address this.					
Available evidence:					
Consultation/					
Involvement with					
community, including					
individuals or groups or					
staff as relevant					
Research and relevant					
information					
Officer knowledge					
Equality Monitoring					
information – including					
service and employee					
monitoring					
Feedback from service					
users, partner or other					
organisation as relevant					
Other					
Are there any gaps in ev	vidence? Please indicate how these will be addressed				
Gaps identified					
Measure to address					
these					
Note: Link to Section 6 below Action Plan to address any gaps in evidence					

Section 3: Involvement and Consultation Include involvement and consultation relevant to this PFD, including what has already been done and what is required to be done, how this will be taken and results of the consultation. Please outline details of any involvement or consultation, including dates carried out, protected characteristics. Also include involvement or consultation to be carried out as part of the developing and implementing the policy. Details of consultations Dates Findings Characteristics Race Sex Gender Reassignment Disability Age **Religion/ Belief** Sexual Orientation Civil Partnership/Marriage Pregnancy/ Maternity Cross cutting Note: Link to Section 6 below Action Plan

Section 4: Analysis of positive and Negative Impacts			
Protected Characteristic	Positive Impact	Negative Impact	No impact
Race			
Sex			
Gender Re-assignment			
Disability			
Age			
Religion/ Belief			
Sexual Orientation			
Civil Partnership/ Marriage; this PC is not listed as relevant for Specific Duties; however under the General Duty we are required to eliminate any discrimination for this PC.			
Note: Link to Section 6 below Action Pla	n in terms of addressing impacts		

Section 5: Addressing im	pacts
	bly (use can choose more than one) and give a brief explanation – to be expanded in
Section 6: Action Plan	
1. No major change	
2. Continue the PFD	
3. Adjust the PFD	
4. Stop and remove the PFD	
Give reasons:	
Note: Link to Section 6 below Ac	ction Plan

Section 6: Action P	lan describe action	on which will be taken following t	the assessment in order	to; reduce or remove any	
Action	Responsible person	pacts, or gather further informat	Date	Protected Characteristic	
	•			Disability	
				Gender	
				Gender Reassignment	
				Race	
				Age	
				Religion/ Belief	
				Sexual Orientation	
				Civil Partnership/ Marriage	
				Pregnancy/ Maternity	
				Cross cutting	
Are there any negative impacts which cannot be reduced or removed? please outline the reasons for continuing the PFD					

Section 7: Monitoring and review Please detail the arrangements for review How will the PFD be monitored? What equalities monitoring will be put in pl When will the PFD be reviewed?	ace?	nitoring of the policy			
Is there any procurement involved in this PFD? If yes please confirm that you have read the WDC					
	Equality and Diversity guidance on procurement				
Section 8: Signatures					
The following signatures are required:					
Lead/ Responsible Officer:	Signature: Laura Mason – Chief Education Officer		Date: 8/2/18		
EIA Trained Officer:	Signature: Alan Munro – Quality & Performance Officer		Date: 8/2/18		
Section 9: Follow up action	Section 9: Follow up action				
Publishing: Forward to community Planning and Policy for inclusion on intranet/internet pages	Signature:		Date:		
Service planning: Link to service planning/ covalent – update your service plan/ covalent actions accordingly	Signature: e		Date:		
Give details, insert name and number of covalent action and or related PI:					
Committee Reporting: complete relevant paragraph on committee report and provide further information as necessary	Signature:		Date:		
Completed form: completed forms retained within department and copy passed to Policy Development Officer (Equality) within the CPP team	Signatu	ire:	Date:		