Appendix 1

EQUALITY IMPACT: SCREENING AND ASSESSMENT FORM

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>

Section 1: Policy/Function/	Decision (PFD) Details sense including the full range of functions, activities and decisions the council is		
responsible for.	sense including the full range of functions, activities and decisions the council is		
Name of PFD:	Increase cost of food export certificates by £40 per certificate		
Lead Department & other departments/ partners involved:	Regulatory Services		
Responsible Officer	Graham Pollock		
Impact Assessment Team	Graham Pollock		
Is this a new or existing PFD?	New		
Start date of EIA 29/01/2018	End date of EIA: 29/01/2018		
Who are the main target groups/ who will be affected by the PFD ?	Any business within WDC who intends to export food outwith the European Union.		
	no		
If YES, complete all se	ections, 2-9		
If NO , complete only s	sections 8-9		
If don't know, complet	e sections 2 & 3 to help assess relevance		

Section 2: Evidence	
Please list the available e	vidence used to assess the impact of this PFD, including the sources listed below. Please also
identify any gaps in evide	nce 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 e	vidence? Please indicate how these will be addressed
Gaps identified	
Measure to address	
these	
Note: Link to Section 6 be	elow 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 Ad	ction Plan		

Section 6: Action Plan describe action which will be taken following the assessment in order to; reduce or remove any negative impacts, promote any positive impacts, or gather further information or evidence or further consultation				
Action	Responsible person	Intended outcome	Date	Protected Characteristic
	•			Disability
				Gender
				Gender Reassignment
				Race
				Age
				Religion/ Belief
				Sexual Orientation
				Civil Partnership/ Marriage
				Pregnancy/ Maternity
				Cross cutting
Are there any negative	e impacts which o	cannot be reduced or removed	? please outline the rea	sons for continuing the PFD

Section 7: Monitoring and review Please detail the arrangements for review and monitoring of the policy					
How will the PFD be monitored?		······································			
What equalities monitoring will be put in place?					
When will the PFD be reviewed?					
Is there any procurement involved in this PFD? If					
	yes please confirm that you have read the WDC				
Equality and Diversity guidance on procure	rement				
Section 8: Signatures					
The following signatures are required:					
Lead/ Responsible Officer:		2 0 0 0 0	Date:29/01/2018		
	Signature	e: Gwaham Jolluh			
EIA Trained Officer:	Signature	e:	Date:		
Section 9: Follow up action					
Publishing: Forward to community	Signature	e:	Date:		
Planning and Policy for inclusion on					
intranet/internet pages					
Service planning: Link to service	Signature	e:	Date:		
planning/ covalent – update your service					
plan/ covalent actions accordingly					
Give details, insert name and number of covalent action and or related PI:					
Committee Reporting: complete	Signature:		Date:		
relevant paragraph on committee report	5				
and provide further information as					
necessary					
Completed form: completed forms	Signature	e:	Date:		
retained within department and copy					
passed to Policy Development Officer	Development Officer				
(Equality) within the CPP team					