

EQUALITY IMPACT ASSESSMENT

Stage 1: Title and aims of the activity ("activity" is an umbrella term covering policies, procedures, guidance and decisions).						
Service	Education & Children's Services					
Section	Lifelong Learning & Leisure					
Title of the activity etc. Re-align posts to Community Learning & Development Budget						
Aims of the activity A technical adjustment to budgets, to ensure CLD activities are charged to the CLD budget						
Author(s) & Title(s) Avril Nicol, Service Manager						

Stage 2: List the evidence that has been used in this assessment.				
Internal data (customer satisfaction surveys; equality monitoring data; customer complaints).	Financial reports			
Internal consultation with staff and other services affected.	Finance service, ECS Resources .			
External consultation (partner organisations, community groups, and councils.	N/a			
External data (census, available statistics).	N/a			
Other (general information as appropriate).	N/a			

Stage 3: Evidence Gaps.			
Are there any gaps in the information you currently hold?	No		

Stage 4: Measures to fill the evidence gaps.					
What measures will be taken to fill the information gaps before the activity is implemented? These should be included in the action plan at the back of this form.	Measures:	Timescale:			
	Not required				

Stage 5: Are there potential impacts on protected groups? Please complete for each protected group by inserting "yes" in the applicable box/boxes below.

	Positive	Negative	Neutral	Unknown
Age – Younger			Yes	
Age – Older			Yes	
Disability			Yes	
Race – (includes Gypsy Travellers)			Yes	
Religion or Belief			Yes	
Gender – male/female			Yes	
Pregnancy and maternity			Yes	
Sexual orientation – (includes Lesbian/ Gay/Bisexual)			Yes	
Gender reassignment – (includes Transgender)			Yes	
Marriage and Civil Partnership			Yes	

Stage 6: What are the positive and negative impacts?						
Impacts.		Positive (describe the impact for each of the protected characteristics affected)	Negative (describe the impact for each of the protected characteristics affected)			
Gen comment		No impact	No impact			
Stage 7: Have	e any of th	ne affected groups been consulted?				
If yes, please give details of how this was done and what the results were. If no, how have you ensured that you can make an informed decision about mitigating steps?		No				
Stage 8: Wha	t mitigatin	g steps will be taken to remove or red	duce negative impacts?			
	Mitigatin	g Steps	Timescale			
These should be						
included in any action						
plan at the back of this						
form.						
Stage 9: Wha	t steps ca	n be taken to promote good relations	between various groups?			
These should be included in the action plan.						

Stage 10: How does the policy/activity create opportunities for advancing equality of opportunity?

n/a			

Stage 11: What equality monitoring arrangements will be put in place?				
These should be included in any action plan (for example customer satisfaction questionnaires).	None			

Stage 12: What is the outcome of the Assessment?							
	1	1 No negative impacts have been identified –please explain.					
	No negative	impacts as this is a technical adjustment to budgets					
Places complete	Negative Impacts have been identified, these can be made please explain.						
Please complete the appropriate box/boxes							
	3	The activity will have negative impacts which cannot be mitigated fully – please explain.					

* Stage 13: Set out the justification that the activity can and should go ahead despite the negative impact.

Not applicable

Stage	Stage 14: Sign off and authorisation.						
	1)	Service and Team	ELL – Lifelong , Learning and Leisure team				
	2)	Title of Policy/Activity	Re-align բ	posts to Community Lear	ning & Develop	ment Budget	
			Name:	Avril Nicol	Name:		
	3)	Authors:	Position:	SM	Position:		
	,	I/We have	Date:	12/1/17	Date:		
		completed the equality	Signature	:	Signature:		
نے		impact assessment	Name:		Name:		
atior		for this policy/	Position:		Position:		
Orisa		activity.	Date:		Date:		
utho			Signature	:	Signature:		
Sign off and authorisation.	4)	Consultation with Service Manager	Name: Date:				
Sign	5)	Authorisation by Director or Head of Service	Name: Position: Date:	John Harding Head of LLL 13/1/17	Name: Position: Date:		
	6) If the EIA relates to a matter that has to go before a Committee, Committee report author sends the Committee Report and this form, and any supporting assessment documents, to the Officers responsible for monitoring and the Committee Officer of the relevant Committee. E.g. Social Work and Housing Committee.					Date:	
	7) EIA author sends a copy of the finalised form to: eia@abdnshire Date:						
	Equalities team to complete) Has the completed form been published on the website? YES/NO Date:						

Action Plan							
Action	Start	Complete	Lead Officer	Expected Outcome	Resource Implications		