



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	Resources & Performance
Title of the activity etc.	Re-align Posts to Available Funding
Aims of the activity	This can be described as a technical adjustment to reflect the fact the service is already investing in areas for which Government Grant is now available.
Author(s) & Title(s)	Head of Resources & Performance

Stage 2: List the evidence that has been used in this assessment.	
Internal data (customer satisfaction surveys; equality monitoring data; customer complaints).	Revenue Monitoring Spending Plans for Government funding
Internal consultation with staff and other services affected.	Budget holders
External consultation (partner organisations, community groups, and councils).	N/A
External data (census, available statistics).	Informal dialogue with colleagues in other Local Authorities

Other (general information as appropriate).	
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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:

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)
Please detail the potential positive and/or negative impacts on those with protected characteristics you have highlighted above. Detail the impacts and describe those affected.	None	None

Stage 7: Have any of the 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?	N/A
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	Mitigating Steps	Timescale
These should be included in any action plan at the back of this form.		

Stage 9: What steps can 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?

Stage 11: What equality monitoring arrangements will be put in place?

These should be included in any action plan (for example customer satisfaction questionnaires).

Stage 12: What is the outcome of the Assessment?

Please complete the appropriate box/boxes	1	No negative impacts have been identified –please explain.
	2	Negative Impacts have been identified, these can be mitigated - please explain. * Please fill in Stage 13 if this option is chosen.
	None	
	3	The activity will have negative impacts which cannot be mitigated fully – please explain. * Please fill in Stage 13 if this option is chosen

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

Stage 14: Sign off and authorisation.

Sign off and authorisation.	1) Service and Team	Resources & Performance		
	2) Title of Policy/Activity	Re-align Posts to Available Funding		
	3) Authors: I/We have completed the equality impact assessment for this policy/activity.	Name: Craig Clement Position: Head of Resources and Performance Date: January 2017 Signature:	Name: Position: Head of Service Date: Signature:	
		Name: Position: Date: Signature:	Name: Position: Date: Signature:	
	4) Consultation with Service Manager	Name: Date:		
	5) Authorisation by Director or Head of Service	Name: Maria Walker Position: Director (Education & Children's Services) Date:	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:	

