

**PRO-FORMA FOR ASSESSING THE RELEVANCE OF FUNCTIONS/POLICIES TO THE GENERAL DUTIES UNDER THE EQUALITY ACT 2010**

This form is to be completed by all service to assess whether a function, policy and operation has the potential for a negative or positive impact in relation to the general duties as per the Equality Act 2010.

<b>Policy Name:</b>	Health and Safety Policy
<b>Brief Description/Aims:</b>	<p>This is an annual review of the Health and Safety Policy. The policy aims to ensure all employees, visitors, contractors, volunteers, members of the public and anyone that may be affected by the undertakings of the Company are protected so far as is reasonably practicable under Health and Safety legislation.</p> <p>Specifically this policy will ensure that:</p> <ul style="list-style-type: none"> <li>• The Company will comply with its legal obligations</li> <li>• All Managers/Supervisors understand their roles and responsibilities</li> <li>• All employees understand their role in Health and Safety</li> <li>• Anyone affected by the Company's undertakings are protected</li> <li>• There is clear communication to all involved with the Company</li> </ul>
<b>Date of Assessment:</b>	13/03/17
<b>Service:</b>	Corporate Services
<b>Assessment Officer:</b>	David Wilson

**SECTION (1) EQUALITY COMPLIANCE**

**1.1 Which of the parts of the general duty is relevant to the function or policy:**  
*(delivering equality between people who share a protected characteristic and those that do not)*

	Duty	Relevance (high, medium, low)	Details
1	Eliminate discrimination, harassment and victimisation	High	The policy will be implemented on behalf of the Board of Directors by the Managing Director and will include all employees, visitors, contractors, volunteers, members of the public and anyone that may be affected by the undertakings of the Company.
2	Advance equality of opportunity	Med	
3	Foster good relations	High	

**EQUALITY IMPACT ASSESSMENT  
SCREENING FORM**

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			as is reasonably practicable under Health and Safety legislation.
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**1.2 Is there any evidence or reason to believe that individuals/groups with protected characteristics could be affected?**

*(e.g. higher or lower uptake of services, barriers to equality in access ?)*

Protected Characteristic	Positive impact	Negative Impact
Age	Yes	
Religion & Belief	Yes	
Sexual Orientation	Yes	
Gender	Yes	
Disability	Yes	
Gender Reassignment	Yes	
Pregnancy & Maternity	Yes	
Any other information or group that may be affected?		

**SECTION (2)**

**EVIDENCE OF IMPACT**

**2.1 In coming to the above decision, with whom have you consulted and/or what information was gathered?** *(Sources include the Household Survey, consultation, research reports, equality monitoring, customer feedback forms, complaints)*

No.	Consulted with / Research	Details of when / how	Outcome from consultation/research

**2.2 How much evidence have you collected?**

None	A little	Some	(A lot)
x			

**2.3 Is there any public concern that functions/policies are being operated in a discriminatory manner?** *(e.g. expressed in the media, research reports, the Household Survey, customer feedback forms or complaints)*

None	A little	Some	(A lot)
x			

**Please specify:**

**EQUALITY IMPACT ASSESSMENT  
SCREENING FORM  
SECTION (3)**

**ANY OTHER INFORMATION**

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**SECTION (4)**

**ASSESSMENT**

Given the information above is a full EIA required?	No
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**SECTION (5)**

**AUTHORISATION OF EIA**

EIA Screening are to be completed by the service and forwarded to the Equality Team in Policy for assessment.

Responsibility	Name	Signature	Date
<b>Officer Carrying Out Assessment</b>	David Wilson		13/03/17
<b>Equality Officer Assisting</b>			
<b>Head of Service</b> <i>(Approved for publication)</i>			