EQUALITY IMPACT ASSESSMENT SCREENING FORM



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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.

Policy Name:	CSG Business Continuity Policy		
Brief Description/Aims:	In line with the Business Continuity Lifecycle followed by Community Safety Glasgow. This is an annual review of the Business Continuity Policy. It is vital that Community Safety Glasgow remains able to fulfil legal obligations and service level agreements even in extremely challenging situations. Business Continuity Management is a pro-active measure allowing CSG to anticipate, assess and plan the necessary actions to avoid or minimise disruption during or after an incident.		
Date of Assessment:	05/02/17		
Service:	Corporate Services		
Assessment Officer:	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	Community Safety Glasgow have adopted a standardised process of Business Continuity Management
2	Advance equality of opportunity	Med	designed to deal with incidents and occurrences in their initial stages before any escalation is required.
3	Foster good relations	High	The Company's Business Continuity Plans are designed to be invoked only when there is a disruption that cannot be handled through normal management routines.

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?)

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Characteristic		
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?		

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:		
SECTION (3)	ANY OTHER IN	FORMATION
SECTION (4)	ASSE	SSEMENT
Given the information above is a	No	
full EIA required?		



EQUALITY IMPACT ASSESSMENT SCREENING FORM SECTION (5)

Working AUTHORISATION OF ELA ow

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

Responsibility	Name	Signature	Date
Officer Carrying Out	David Wilson		05/02/17
Assessment			
Equality Officer			
Assisting			
Head of Service			
(Approved for publication)			