

DUNDEE CITY COUNCIL

Equality and Diversity Rapid Impact Assessment Tool

Part 1

Date of assessment <b>29/09/10</b>	Title of document being assessed <b>Care Commission Inspection Report for S.L.T.</b>
1) This is a new policy, procedure, strategy or practice being assessed (If yes please tick box) <b>x</b>	This is an existing policy, procedure, strategy or practice being assessed? (If yes please tick box) <input type="checkbox"/>
2) Please give a brief description of the policy, procedure, strategy or practice being assessed.	<b>Report to Social Work and Health Committee on the findings of the announced inspection carried out by the Care Commission for the Supported Living Team.</b>
3) What is the intended outcome of this policy, procedure, strategy or practice?	<b>Relevant council committee note the content of the report.</b>
4) Please list any existing documents which have been used to inform this Equality and Diversity Impact Assessment.	<b>n/a</b>
5) Has any consultation, involvement or research with protected characteristic communities informed this assessment? If yes please give details.	<b>n/a</b>
6) Please give details of council officer involvement in this assessment. (E.g. names of officers consulted, dates of meetings etc)	<b>Arlene Hiron, Karen Penman.</b>
7) Is there a need to collect further evidence or to involve or consult protected characteristics communities on the impact of the proposed policy?  (Example: if the impact on a community is not known what will you do to gather the information needed and when will you do this?)	<b>n/a</b>

## Part 2

Which protected characteristics communities will be positively or negatively affected by this policy, procedure or strategy?

NB Please place an X in the box which best describes the "overall" impact. It is possible for an assessment to identify that a positive policy can have some negative impacts and visa versa. When this is the case please identify both positive and negative impacts in Part 3 of this form.

If the impact on a protected characteristic communities are not known please state how you will gather evidence of any potential negative impacts in box Part 1 section 7 above.

	<b>Positively</b>	<b>Negatively</b>	<b>No Impact</b>	<b>Not Known</b>
Ethnic Minority Communities including Gypsies and Travellers	<input type="checkbox"/>	<input type="checkbox"/>	x	<input type="checkbox"/>
Gender	<input type="checkbox"/>	<input type="checkbox"/>	x	<input type="checkbox"/>
Gender Reassignment	<input type="checkbox"/>	<input type="checkbox"/>	x	<input type="checkbox"/>
Religion or Belief	<input type="checkbox"/>	<input type="checkbox"/>	x	<input type="checkbox"/>
People with a disability	<input type="checkbox"/>	<input type="checkbox"/>	x	<input type="checkbox"/>
Age	<input type="checkbox"/>	<input type="checkbox"/>	x	<input type="checkbox"/>
Lesbian, Gay and Bisexual	<input type="checkbox"/>	<input type="checkbox"/>	x	<input type="checkbox"/>
Socio-economic	<input type="checkbox"/>	<input type="checkbox"/>	x	<input type="checkbox"/>
Pregnancy & Maternity	<input type="checkbox"/>	<input type="checkbox"/>	x	<input type="checkbox"/>
Other (please state)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Part 3

<p>1) <b>Have any positive impacts been identified?</b> (We must ensure at this stage that we are not achieving equality for one strand of equality at the expense of another)</p>	<p>If yes please give further details <b>None</b></p>
<p>2) <b>Have any negative impacts been identified?</b> (Based on direct knowledge, published research, community involvement, customer feedback etc. If unsure seek advice from your departmental Equality Champion.)</p>	<p>If yes please give further details <b>None</b></p>
<p>3) <b>What action is proposed to overcome any negative impacts?</b> E.g. involving community groups in the development or delivery of the policy or practice, providing information in community languages etc. see Good Practice on DCC equalities web page</p>	<p>Please give further details <b>n/a</b></p>
<p>4) <b>Is there a justification for continuing with this policy even if it cannot be amended or changed to end or reduce inequality without compromising its intended outcome?</b> (If the policy that shows actual or potential unlawful discrimination you must stop and seek legal advice)</p>	<p>If yes please give further details <b>n/a</b></p>
<p>5) <b>Has a 'Full' Equality Impact Assessment been recommended?</b> (If the policy is a major one or is likely to have a major impact on protected characteristics communities a Full Equality Impact Assessment may be required) Seek advice from your departmental Equality Champion.</p>	<p>If yes please give further details <b>n/a</b></p>
<p>6) <b>How will the policy be monitored?</b> (How will you know it is doing what it is intended to do? e.g. data collection, customer survey etc.)</p>	<p>Please give details <b>Regular service monitoring will continue and evidence of this will be included in self evaluation evidence for next Care Commission Inspection in 2013.</b></p>

**Part 4**

**Name of Department or Partnership: Social Work Department**

**Type of Document**

Human Resource Policy	<input type="checkbox"/>
General Policy	<input type="checkbox"/>
Strategy/Service	<input checked="" type="checkbox"/>
Change Papers/Local Procedure	<input type="checkbox"/>
Guidelines and Protocols	<input type="checkbox"/>
Other	<input type="checkbox"/>

**Contact Information**

<b>Manager Responsible</b>		<b>Author Responsible</b>	
Name	<b>Karen Penman</b>	Name	<b>Arlene Hirons</b>
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Signature of author of the policy:	Date
Signature of Director / Head of Service area:	Date
Name of Director / Head of Service:	<b>Arlene Mitchell (Service Manager Alan Baird (Director of Social Work)</b>
Date of next policy review:	<b>29/09/13</b>