## **DUNDEE CITY COUNCIL**

### **Equality and Diversity Rapid Impact Assessment Tool**

## <u>Part 1</u>

Date of assessment 29/09/10	Title of document being assessed  Care Commission Inspection Report for D.C.L
This is a new policy, procedure, strategy or practice being assessed (If yes please tick box) x	This is an existing policy, procedure, strategy or practice being assessed? (If yes please tick box)
2) Please give a brief description of the policy, procedure, strategy or practice being assessed.	Report to Social Work and Health Committee on the findings of the announced inspection carried out by the Care Commission for the Dundee Community Living Team.
3) What is the intended outcome of this policy, procedure, strategy or practice?	Relevant council committee note the content of the report.
4) Please list any existing documents which have been used to inform this Equality and Diversity Impact Assessment.	n/a
5) Has any consultation, involvement or research with protected characteristic communities informed this assessment? If yes please give details.	n/a
6) Please give details of council officer involvement in this assessment. (E.g. names of officers consulted, dates of meetings etc)	Arlene Hirons, Clare Garven.
7) Is there a need to collect further evidence or to involve or consult protected characteristics communities on the impact of the proposed policy?	n/a
(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?)	

#### 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.

	Positively	Negatively	No Impact	Not Known
Ethnic Minority Communities including Gypsies and Travellers			Х	
Gender			Х	
Gender Reassignment			Х	
Religion or Belief			Х	
People with a disability			Х	
Age			Х	
Lesbian, Gay and Bisexual			Х	
Socio-economic			Х	
Pregnancy & Maternity			Х	
Other (please state)				

### Part 3

If yes please give further details  None
If yes please give further details  None
Please give further details  n/a
If yes please give further details  n/a
If yes please give further details n/a
Please give details  Regular service monitoring will continue and evidence of this will be included in self evaluation evidence for next Care Commission Inspection in 2013.

# Part 4

# Name of Department or Partnership: Social Work Department

	Type of Document			
Human R	lesource Policy			
General Policy				
Strategy/Service				
Change Papers/Local Procedure				
Guidelines and Protocols				
Other				
Contact Information				
Manager	Responsible	Author Responsible		
Name	Clair Garven	Name Arlene Hirons		
Designati	on <b>Team Manager</b>	Designation Acting Resource Manager		
Base	Balmerino Rd	Base White Top Centre		
Telephon	e <b>01382 307582</b>	Telephone 01382 435203		
Email		Email		
karen.penman@dundeecity.gov.uk		arlene.hirons@dundeecity.gov.uk		
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;	Signature of author of the policy:	Date		
;	Signature of Director / Head of Service area: Date			
I	Name of Director / Head of Service:	Arlene Mitchell (Service Manager Alan Baird (Director of Social Work)		
I	Date of next policy review:	29/09/13		