

## Equality Impact Assessment Screening Tool

To be completed for all policy/strategy or service delivery proposals, and where there are potential equalities implications, to determine whether a full impact assessment is required. **Please complete the final box on page 2.**

<b>Document/policy title</b>		<b>Individual Cases Policy</b>		
<b>Document Author</b>		<b>Assistant Director- Schedule Care</b>	<b>Date</b>	<b>September 30, 2009</b>
<b>1.</b>	<b>Does the policy/proposal have any negative effect on the basis of:</b>			
		<b>Yes/No</b>	<b>Reason</b>	
	• Race	No		
	• Ethnic origins (including gypsies and travellers)	No		
	• Nationality	No		
	• Gender	No		
	• Culture	No		
	• Disability	No		
	• Religion or belief	No		
	• Sexual orientation including lesbian, gay and bisexual people	No		
	• Age	No		

If all responses to Section 1 are No, a full Impact Assessment is not required. If you have answered Yes to any question, proceed to Section 2.

<b>2.</b>	<b>In respect of any particular group, is the negative effect:</b>	<b>Unintentional?</b>	<b>High impact?</b>	
		<b>Yes/No</b>	<b>Yes/No</b>	<b>Reason</b>
	• Race			
	• Ethnic origins (including gypsies and travellers)			
	• Nationality			
	• Gender			
	• Culture			
	• Disability			
	• Religion or belief			
	• Sexual orientation including lesbian, gay and bisexual people			
	• Age			

## Equality Impact Rapid Assessment Tool

If all responses to Section 2 are No, a full Impact Assessment is not required. If you have answered Yes to any question in Section 2, proceed to Section 3.

3.	Are any negative effects listed in Section 2 illegal or potentially illegal?*	*i.e. contrary to anti-discriminatory legislation	
		Yes/No	Reason
	• Race		
	• Ethnic origins (including gypsies and travellers)		
	• Nationality		
	• Gender		
	• Culture		
	• Disability		
	• Religion or belief		
	• Sexual orientation including lesbian, gay and bisexual people		
	• Age		

If all responses to Sections 1, 2 and 3 are No, a full Impact Assessment is not required.

If you have answered Yes to any question in Section 3, or if any negative effect has a high impact on a particular equalities group, consider the following:

4.	Can any negative effect be avoided?	Yes/No	How?
5.	Can we reduce the impact by taking different action?	Yes/No	How?

Now repeat this rapid assessment in the light of any new information.

If the outcome is the same, then you have identified a potential discriminatory impact of this policy/proposal, and you will need to complete a full Equalities Impact Assessment before it can be submitted for approval to the relevant committee.

<b>Lead Director</b>	<i>Colin Thompson</i>	<b>Date reviewed by Lead Director</b>	<i>August 2009</i>
<b>Where Approved</b>	<i>To be completed by Head of Corporate Affairs</i>	<b>Date of Approval</b>	<i>To be completed by Head of Corporate Affairs</i>

For advice about answering the above questions, please contact the Workforce Projects and Diversity Facilitator, on 01296 318646 or by email: [denise.peett@buckspt.nhs.uk](mailto:denise.peett@buckspt.nhs.uk)

**Please submit this completed form to Corporate Affairs along with your Board or Committee papers for formal approval.**