

## Appendix 1      EQUALITY IMPACT ASSESSMENT FORM

This form is to be used in conjunction with the Equality Impact Assessment Guidelines. Please refer to these before starting; if you require further guidance contact [wdhscp@ggc.scot.nhs.uk](mailto:wdhscp@ggc.scot.nhs.uk) 01389 776 990

<b>Section 1: Policy/Function/Decision (PFD) Details</b>	
A <b>PFD</b> is understood in the broad sense including the full range of functions, activities and decisions the Health and Social Care Partnership is responsible for.	
Name of PFD:	West Dunbartonshire Interim Kinship Care Policy
Lead Team & other departments/sections/ partners involved:	Childrens' Health, Care and Criminal Justice Services
Responsible Officer	Jackie Irvine
Impact Assessment Team	Soumen Sengupta , Annie Ritchie , Ailsa King
Is this a new or existing PFD	New
Start date: (the assessment should be started prior to PFD development/drafting or at the early stages of review):  September 2015	
End date (this should allow for the assessment to inform decision-making): November 2015	
What are the main aims of the <b>PFD</b> ?	To set out processes for assessing, approving, reviewing and supporting Kinship carers
Who are the main target groups/ who will be affected by the <b>PFD</b> ?	Potential and actual formal kinship carers Potential and actual children and young people who are looked after by kinship carers
Relevance (of <b>PFD</b> to the general equality duties and equality groups, also record if there is no relevance giving reasons/ evidence)	

No as kinship carers are not a protected characteristic and the focus on proposing kinship care arrangements is the care and wellbeing of the child. Pending further guidance from Scottish Government, additional consideration will be made of future requirements.	
	If yes, complete all sections, 2-9
	If no, complete only sections 8-9
	If don't know, complete sections 2& 3 to help assess relevance
<b>Section 2: Evidence</b> Please list the available evidence used to assess the impact of this PFD, including the sources listed below. Please also identify any gaps in evidence and what will be done to address this.	
<b>Available evidence:</b>	
Consultation/ Involvement with community, including individuals or groups or staff as relevant	
Research and relevant information	
Officer knowledge	
Equality Monitoring information – including service and employee monitoring	
Feedback from service users, partner or other organisation as relevant	
Other	
<b>Are there any gaps in evidence?</b> Please indicate how these will be addressed	
Gaps identified	Nil

Measure to address these			
<i>Note: Link to Section 6 below Action Plan to address any gaps in evidence</i>			
<b>Section 3: Involvement and Consultation</b> Include involvement and consultation relevant to this PFD, including what has already been done and what is required to be done, how this will be taken and results of the consultation.			
Please outline details of any involvement or consultation, including dates carried out, protected characteristics. Also include involvement or consultation to be carried out as part of the developing and implementing the policy.			
Details of consultations	Dates	Findings	Characteristics
		.	Race
			Sex
		.	Gender Reassignment
			Disability
		.	Age
			Religion/ Belief

			Sexual Orientation
			Civil Partnership/ Marriage
			Pregnancy/ Maternity
			Other

*Note: Link to Section 6 below Action Plan*

#### Section 4: Analysis of positive and Negative Impacts

Protected Characteristic	Positive Impact	Negative Impact	No impact
Race			X
Sex			
Gender Re-assignment			
Disability			
Age			

Religion/ Belief			
Sexual Orientation			
Civil Partnership/ Marriage			
<p><i>Note: Link to Section 6 below Action Plan in terms of addressing impacts</i></p>			
<p><b>Section 5: Addressing impacts</b>  Select which of the following apply (use can choose more than one) and give a brief explanation – to be expanded in Section 6: Action Plan</p>			
1. No major change			
2. Continue the PFD			
3. Adjust the PFD			

4. Stop and remove the PFD	
Give reasons:	
<i>Note: Link to Section 6 below Action Plan</i>	

<b>Section 6: Action Plan</b> Please describe any action which will be taken following the assessment in order to; <ul style="list-style-type: none"> <li>• reduce or remove any negative impacts,</li> <li>• promote any positive impacts, or</li> <li>• gather further information or evidence or further consultation required</li> </ul>				
Action	Responsible person (s)	Intended outcome	Date for completion	Protected Characteristic
				Race
				Gender
				Gender Reassignment
				Disability
				Age
				Religion/ Belief
				Sexual Orientation
				Civil Partnership/ Marriage
				Pregnancy/ Maternity

				Other e.g. cross cutting
<b>Are there any negative impacts which cannot be reduced or removed?</b> please outline the reasons for continuing PFD				
<b>Section 7: Monitoring and review</b>				
Please detail the arrangements for review and monitoring of the policy				
How will the PFD be monitored? What equalities monitoring will be put in place?				
When will the PFD be reviewed?				
Is there any procurement involved in this PFD? Yes/No				
<b>Section 8: Signatures</b>				
The following signatures are required:				
Lead/ Responsible Officer:	Signature: J Irvine			Date: 2/11/2015
EQIA/EIA Trained Officer:	Signature: A King			Date:2/11/2015
<b>Board Reporting:</b> complete relevant paragraph on board report and provide further information as necessary	Signature:			Date: