Assessment Details
ID 1433
Name Estates Management- Rationalisation Programme
Organization Care Inspectorate
Description
Approver Jacqui Duncan
Respondent Carole Kennedy
Template Equality Impact Screening Form v0_22
Workflows Deafult CI Workflow 2-Copy
Creator Jacqui Duncan
Date Created 2024/09/20 09:11
Deadline
Completed Date 2024/09/20 12:38
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Stage Completed
Approval Stage
Status Active
Very High Risks 0
High Risks 0
Medium Risks 0
Low Risks 0
Total Risks 0
Residual Risk Level None
Residual Risk Score 0.0
Result Auto-Approved
Result Comments Under Review (Jacqui Duncan - Not Reviewed) ;
Primary Record Id
Primary Record Name
Template Version 1
Open Risk Count 0
Open Info Request 0
Tags
Submission Progress (%) 100



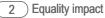
1.1 Is this new or existing work?

Response			
New			
Justification			

None

1.2 Please describe the work

Response Office closure.



2.1 For each of the questions in section 2, think about whether the work will impact on people differently based on the different characteristics For example, does it impact on people of different ages/sexes/sexual orientations differently? Does it impact on people with and without a disability differently?

2.2 Age

What kind of impact will this work have on people of different ages?

Respo	onse
(Not S	Sure

Justification None

2.3 Disability

What kind of impact will this work have on disabled people?

Not Sure

Justification

None

2.4 Race

What kind of impact will this work have on people of different races? This includes different ethnic and national origins, and Traveller community membership.

Response

Positive/no impact

Justification

None

2.5 Sex

What kind of impact will this work have on people of different sexes?

Response

(Positive/no impact)

Justification None

2.6 Gender reassignment

What kind of impact will this work have on people are transgender/have a trans history?

Response				
(Positive/No impact)			

Justification

None

2.7 Sexual orientation

What kind of impact is this work going to have on people of different sexual orientations?

Response

(Positive/no impact)

Justification

None

2.8 Religion or belief

What kind of impact is this work going to have on people of different religions and beliefs? Beliefs includes no belief, and environmentalism.

Response

Positive/no impact

Justification None

2.9 Pregnancy and maternity

What kind of impact is this work going to have on people who are pregnant or have given birth within the past 26 weeks?

Response

(Not Sure

Justification None

2.10 Marriage or civil partnership

What kind of impact is this work going to have on people of different marriage and civil partnership statuses? Please note this only applies to employees' marriage/civil partnership status.

Response Positive/no impact

Justification

None

2.11 Children and young people we have corporate parenting responsibility for

What kind of impact is this work going to have on children and young people we have a corporate parenting responsibility for?

We are corporate parents for every child who is looked after by a local authority, and every young person under the age of 26 who was looked after on their 16th birthday.

Response

(Positive/no impact)

Justification

None

2.12 Children's rights (up to age 18), in line with UNCRC

What kind of impact is this work going to have on children's rights, in line with the United Nation's Convention of the Rights of the Child? This section is likely to be most relevant to colleagues within Scrutiny & Assurance

Response	
Positive/no impact	
Justification	

None

2.13 Care Inspectorate employees with caring responsibilities

What kind of impact is this work going to have on Care Inspectorate employees who have caring responsibilities?

Response

Not Sure

Justification None

3 Island community impact

3.1 Does this work impact differently on island communities, compared to other communities?

Response
No
Justification
None

4 Feedback

4.1 Do you have any feedback (from engagement/consultation) or evidence that influences, affects, or shapes this work?

Response

Yes

Justification None

4.2 Please select what this feedback/evidence relates to

Response							
Age	Pregnancy & maternity	Disability					
<i>Justification</i> None							

4.3 Is any of the feedback/evidence negative or inconclusive?

Response	
Justification	
None	

5 Conclusion

5.1 The screening form is now complete. You have reached the organisational threshold for an EqIA to be completed. Thank you for your time in helping the Care Inspectorate and your Information Asset Owner understand equality impact associated with your work.

5.4 Do you wish to discuss any aspect of this form with the Equalities Team?

Response No

Justification None

-Assessment Notes