

## EQUALITY IMPACT ASSESSMENT

**Directorate/Service:** People – Community Meals Service

What is the proposed budget saving? (Use same wording as in RB6).

Delete a charge hand post from community meals service.

**Screening Process**

Does the proposed saving involve or have consequences for the people the council serves or employs?

Yes  No

**If yes, proceed to Step 1 of the Full Equality Impact Assessment on page 2.**

If No, please state why not.

**If no, the budget saving is not relevant and no further action is required.**

**Impact Assessment Carried Out By:** George Meechan

**Date:** 03/12/15

Please forward to Doreen Phillips ([PhillipsD@angus.gov.uk](mailto:PhillipsD@angus.gov.uk))

**EQUALITY IMPACT ASSESSMENT  
FULL ASSESSMENT**

**Step 1**

What data/research is available to assess the likely impact of the proposed saving?

The proposed saving will reduce the charge hand posts within the community meals service from 2 FTE to 1 FTE. This will impact on the 2 staff members but not on users of the service.

**Step 2**

Is there any reason to believe the proposal could affect people differently due to their protected characteristic ie age; disability; gender; gender re-assignment; pregnancy/maternity; marriage and civil partnership; race; religion and belief; and sexual orientation? Please **place a cross** in each box that applies, and give details alongside.

- Age  \_\_\_\_\_
- Disability  \_\_\_\_\_
- Gender  \_\_\_\_\_
- Gender Re-assignment  \_\_\_\_\_
- Pregnancy/maternity  \_\_\_\_\_
- Marriage and civil Partnership  \_\_\_\_\_
- Race  \_\_\_\_\_
- Religion and belief  \_\_\_\_\_
- Sexual orientation  \_\_\_\_\_

**Step 3**

Is there evidence to suggest that any part of the proposed saving could unlawfully discriminate against people?

Yes  No

If Yes, please give details.

**Step 4**

Can the proposed saving be seen to favour one section of the community?

Yes  No

or deny opportunities to another?

Yes  No

If Yes, please give details.

**Step 5**

Does the proposed saving advance equality?

Yes  No

Or restrict equality?

Yes  No

If Yes, please give details.

**Step 6**

Based on the work you have done, rate the level of impact for any of the equality groups of the proposed saving.

High  Medium  Low  Unknown

**Step 7**

If during **Steps 2 - 5** there has been an adverse impact identified, consider if any adverse impact can be justified.

Yes  No

Please give details.

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