## **EQUALITY IMPACT ASSESSMENT**

## **SCREENING DOCUMENT**

| Name of Pr  | oposal                          | Parks and Burial Grounds Plant and Equipment |
|---|---------------------------------|--|
| Lead Depar  | tment/Service                   | Communities – Parks Services                 |
| What is the aim of the proposal?  |                                 |  |
| The proposal is to replace obsolete plant and equipment   |                                 |  |
| Is this a new or a review of an existing policy, procedure, function or report?   |                                 |  |
| Review of existing procedure  |                                 |  |
| Screening Process   |                                 |  |
| 1. Has the proposal already been assessed for its impact on age; disability; gender; gender re-assignment; pregnancy/maternity; marriage and civil partnership; race; religion and belief; and sexual orientation? If yes, go to 1 a. If no, go to 1 b. |                                 |  |
| 1 a. Unless there have been significant changes, no further action is required. Please add your name, position and date below at 3.   |                                 |  |
| 1 b. Does the proposal involve or have consequences for the people the council serves or employs? If yes, go to 2. If no, go to 1 c.  |                                 |  |
| 1 c. Please state why not   |                                 |  |
|   |                                 |  |
| The proposal is not relevant and no further action is required. Sign and date below at 3.   |                                 |  |
| 2. Is the proposal relevant to one or more of the protected characteristics? If yes, go to 2 a. If no, go to 2 b.   |                                 |  |
| 2 a. Proceed to Step 1 of the Full Equality Impact Assessment on page 2.  |                                 |  |
| 2 b. Please state why not   |                                 |  |
|   |                                 |  |
| The proposal not relevant and no further action is required. Add your name, position and date below at 3.   |                                 |  |
| 3. Name:  | Kevin Robertson                 |  |
| Position:   | Manager, Environmental Services | Date: 27 June 2019                           |
|   |                                 |  |