

To complete – press F11 to jump from field to field

Equality Impact Assessment

Name of the business case,
SOP, SIP, project, service

RESP 6.16 - Positive CRB Check

File ref:	EIA/Resp 6.16/023	Issue No:	1
Date of Issue:	30/06/09	Review date:	30/06/10
Risk assessment completed	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Environmental assessment completed	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

Approved by:



Part 5 Equality impact assessment improvement plan

The table below should be completed using the information from the equality impact assessment to produce an action plan for the implementation of the proposals to:

1. Lower the negative impact, and/or
2. Ensure that the negative impact is legal under anti-discriminatory law, and/or
3. Provide an opportunity to promote equality, equal opportunity and improve relations within equality target groups, ie increase the positive impact
4. If no actions [go to Part 7](#)

Please ensure that you update your service/business plan within the equality objectives/targets and actions identified below:

Area of concern	Action required	Person responsible	Timescale	Resource implications	Comments
Monitoring systems in place	To continually monitor and review this SOP to ensure compliance with CRB and SCC guidance	Lindsey Shaw	Annual review		

Part 6 Equality impact assessment summary report

The results of equality impact assessments must be published. Please complete this summary, which will be used to publish the results of your impact assessment on the Service’s website, and return it to Business Support.

Date of assessment: 24.02.09

Manager(s) name: Lindsey Shaw

Role: HR Consultant

Business case, SOP, SIP, project or service, procedure, strategy or Service, that was impact assessed:

RESP 6.16 – Positive CRB Check

Summary of findings:

No significant findings

Summary of recommendations and key points of action plan:

To continually monitor and review this SOP to ensure compliance with CRB and SCC guidance.

Groups that this business case, SOP, SIP, projector service will impact upon *															
Race		Gender		Sexual Orientation		Age		Disability		Religion/ Belief		Other		All	
+	-	+	-	+	-	+	-	+	-	+	-	+	-	+	-
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

- This information should be transposed to the front page of the Business case, SOP, SIP, project or service/Procedural document

Date completed:	19/06/09	Signed by CFO	
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