

To complete – press F11 to jump from field to field

## Equality Impact Assessment

Name of the business case, SOP, SIP, project, service			
Fire Investigation Policy and SOP's 2.1, 2.2, 2.3, 2.5, 2.6, 1.7			
File ref:	EIA/Gen/002	Issue No:	1
Date of Issue:	09/07/09	Review date:	09/07/10
Risk assessment completed	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Environmental assessment completed	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

Approved by:



## Part 7 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:** 12/01/09

**Manager(s) name:** B Strudwick **Role:** Fire Investigation Manager

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

Fire Investigation Policy and SOP’s 2.1, 2.2, 2.3, 2.4, 2.5, 2.6

**Summary of findings:**

Complies with equality impact requirements

**Summary of recommendations and key points of action plan:**

None required

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

<b>Date completed:</b>	19/06/09	<b>Signed by CFO</b>	
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