



EQUALITY IMPACT ASSESSMENT

Stage 1: Title and aims of the activity (“activity” is an umbrella term covering policies, procedures, guidance and decisions).	
Service	Business Services
Section	Property & Facilities Management
Title of the activity etc.	Office & Operational Buildings
Aims of the activity	Provision of Office etc Accommodation for internal Services
Author(s) & Title(s)	Tom Buchan
Stage 2: List the evidence that has been used in this assessment.	
Internal data (customer satisfaction surveys; equality monitoring data; customer complaints).	Existing data concerning asset condition, suitability, utilisation and costs has been interrogated as part of the development of the overarching strategy
Internal consultation with staff and other services affected.	A range of Strategies, such as depot strategy, workspace etc, has been agreed by Council and/or SLT and service use
External consultation (partner organisations, community groups, and councils).	Consultation with external groups other than those currently affected by lease arrangements is not considered appropriate
External data (census, available statistics).	
Other (general information as appropriate).	There is over capacity above Council requirements in offices accommodation etc. Saving from part of overall management review, service review, vacancy management, the removal of long term vacancies from the structure

Stage 3: Evidence Gaps.	
Are there any gaps in the information you currently hold?	None identified

Stage 4: Measures to fill the evidence gaps.		
What measures will be taken to fill the information gaps before the activity is implemented? These should be included in the action plan at the back of this form.	Measures:	Timescale:
	n/a	

Stage 5: Are there potential impacts on protected groups? Please complete for each protected group by inserting "yes" in the applicable box/boxes below.				
	Positive	Negative	Neutral	Unknown
Age – Younger			Yes	
Age – Older			Yes	
Disability			Yes	
Race – (includes Gypsy Travellers)			Yes	
Religion or Belief			Yes	
Gender – male/female			Yes	
Pregnancy and maternity			Yes	
Sexual orientation – (includes Lesbian/ Gay/Bisexual)			Yes	
Gender reassignment – (includes Transgender)			Yes	
Marriage and Civil Partnership			Yes	

Stage 6: What are the positive and negative impacts?

Impacts.	Positive (describe the impact for each of the protected characteristics affected)	Negative (describe the impact for each of the protected characteristics affected)
Please detail the potential positive and/or negative impacts on those with protected characteristics you have highlighted above. Detail the impacts and describe those affected.		

Stage 7: Have any of the affected groups been consulted?

If yes, please give details of how this was done and what the results were. If no, how have you ensured that you can make an informed decision about mitigating steps?	
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Stage 8: What mitigating steps will be taken to remove or reduce negative impacts?

These should be included in any action plan at the back of this form.	Mitigating Steps	Timescale

Stage 9: What steps can be taken to promote good relations between various groups?

These should be included in the action plan.	
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Stage 10: How does the policy/activity create opportunities for advancing equality of opportunity?

n/a

Stage 11: What equality monitoring arrangements will be put in place?

These should be included in any action plan (for example customer satisfaction questionnaires).

n/a

Stage 12: What is the outcome of the Assessment?

Please complete the appropriate box/boxes	1	No negative impacts have been identified –please explain.
	2	Negative Impacts have been identified, these can be mitigated - please explain. * Please fill in Stage 13 if this option is chosen.
	3	The activity will have negative impacts which cannot be mitigated fully – please explain. * Please fill in Stage 13 if this option is chosen

* Stage 13: Set out the justification that the activity can and should go ahead despite the negative impact.

Stage 14: Sign off and authorisation.

Sign off and authorisation.	1) Service and Team	Property & Fac Man Service		
	2) Title of Policy/Activity	(if appropriate)		
	3) Authors: I/We have completed the equality impact assessment for this policy/activity.	Name: Allan Whyte Position: Head of Property & FM Date: 21/01/18 Signature:	Name: Tom Buchan Position: Fac Man Date: 21/01/18 Signature:	
		Name: Position: Date: Signature:	Name: Position: Date: Signature:	
	4) Consultation with Service Manager	Name: Date:		
	5) Authorisation by Director or Head of Service	Name: Position: Date:	Name: Position: Date:	
	6) If the EIA relates to a matter that has to go before a Committee, Committee report author sends the Committee Report and this form, and any supporting assessment documents, to the Officers responsible for monitoring and the Committee Officer of the relevant Committee. e.g. Social Work and Housing Committee.			Date:
	7) EIA author sends a copy of the finalised form to: eia@abdnshire			Date:
(Equalities team to complete) Has the completed form been published on the website? YES/NO			Date:	

