## **Equality Impact Assessment Screening Form**

Please ensure that you refer to the Screening Form Guidance while completing this form. If you would like further guidance please contact the Access to Services team (see guidance for details).									
Section 1									
Which service area and directorate are you from?									
Service Area: Group Leaders									
Directorate: N	I/A								
		CREENING F	OR RELEVA	ANCE?					
Service/ Function	Policy/ Procedure	Project	Strategy	Plan	Proposal				
(b) Please Notice of M		<u>escribe</u> here	<b>:</b>						
		Communities, orking curricul		s and cynefin: F group.	BAME				
This council welcomes the new Curriculum for Wales and is committed to its successful implementation and the improvement in teaching and learning it will bring.									
_	ır rich diversit	-	_	uires appropriate ments of the cur					
WillIams to c	hair the new c ng the learning	urriculum wo	king group,	ment of Professo to work with Es eaching of them	styn, reviewing				
The Council r	resolves to:								
1. Request the to the working		ite to Professo	or Williams t	o pledge this co	uncil's support				
	contribute to	•		ools, colleges an nent of resource					
	-	gan Archive So o support the		re its fantastic re up	esource of				
Direct	Q2(a) WHAT DOES Q1a RELATE TO?  Direct front line Indirect front line Indirect back room								
servic	e delivery	service of	delivery	service delive	ery				
	☐ (H)		(M)		(L)				

(b) DO YOUR CUSTOMERS/CLIENTS ACCESS THIS...?

## **Equality Impact Assessment Screening Form**

Because they need to	Because they want to		Becaus automatically		On an interna basis	
☐ (H)	☐ (M)		everyone in Swansea (M)		i.e. Staff ( <b>L)</b>	
Q3 WHAT IS	THE POTE	ENTIAL IMPA	CT ON THE	FOLLOWIN	IG	
	H	• .	Medium Impac			
Children/young peop Older people (50+) Any other age group Disability Race (including refuse Asylum seekers Gypsies & travellers Religion or (non-)bel Sex Sexual Orientation Gender reassignment Welsh Language Poverty/social excluse Carers (inc. young of Community cohesion Marriage & civil partice Pregnancy and mater	gees)  ief  ision arers) nership	(H)	(M)		(H)	
APPROA Please provide	CHES WIL details bel or not und	L YOU UNDE ow – either o lertaking en	ERTAKE? of your plan gagement			
Q5(a) HOW VIS High visi	1	Medium	YE TO THE Consistency (M)	Low <u>v</u>	UBLIC? ⁄isibility ☐ (L)	
( · · )	the following	ENTIAL RISK ng impacts –			EPUTATION? media, public	
High ri ☐ (	sk ( <b>H)</b>	Medium	risk ( <b>M)</b>	Low r	isk ] (L)	
Q6 Will this i		ave an impa	ct (however	minor) on a	ny other	
Q7 HOW DID YOU SCORE?  Please tick the relevant box						
MOSTLY H and	$\operatorname{for} M \longrightarrow$	HIGH PRIO	$RITY \longrightarrow$	<del></del>	e completed to Section 2	

## **Equality Impact Assessment Screening Form**

MOSTLY L 

LOW PRIORITY / 

NOT RELEVANT

Please go to Q8 
followed by Section 2

Q8 If you determine that this initiative is not relevant for an EIA report, you must provide a full explanation here. Please ensure that you cover all of the relevant protected groups.

The impact of this proposed notice of motion will be positive for Children and Young people and Race. This motions does not require a full EIA.

## Section 2

NB: Please email this completed form to the Access to Services Team for agreement before obtaining approval from your Head of Service. Head of Service approval is only required via email – no electronic signatures or paper copies are needed.

Screening completed by:		
Name: Rhian Millar		
Job title: Access to Services Manager		
Date: 13/8/2020		
Approval by Head of Service:		
Name: Tracey Meredith		
Position: Chief Legal Officer		
Date: 13.8.2020		

Please return the completed form to <a href="mailto:accesstoservices@swansea.gov.uk">accesstoservices@swansea.gov.uk</a>