## **Appendix A - Integrated Impact Assessment Screening Form**

Please ensure that you refer to the Screening Form Guidance while completing this form.

Servi	h service area and ce Area: Communic torate: Corporate S	ations and Ma	_			
Q1 (a	) What are you sci	eening for re	levance?			
	New and revised policing Service review, re-orgusers and/or staff Efficiency or saving proposals and strategic directive and Board, which impact of Medium to long term provement plans) Setting objectives (for Major procurement and Decisions that affect to services Other X	roposals ions for new finants affecting staff, condeptations to exist events of National Strate of Intent, including on a public bodies olans (for example example, well-beard commissioning	ce changes/reduction  acial year and strate communities or accesting buildings, move egy/Plans/Legislation those developed at functions e, corporate plans, of thing objectives, equal	gic financial pla ssibility to the bi ing to on-line se n Regional Partn development pla ality objectives,	nning uilt environment, e.g. ervices, changing local ership Boards and Plans, service delivery a	, new ation ublic Services and tegy)
(b)	Please name and					
Q2	An annual review  What is the poter (+) or negative (-)	ntial impact o	<u> </u>	: the impact		
Older p Any oth Future Disabil Race ( Asylun Gypsie Religio Sex Sexual Gende Welsh Povert Carers Comm Marriag Pregna	en/young people (0-18) beople (50+) her age group Generations (yet to be ity including refugees) n seekers es & travellers en or (non-)belief  Orientation r reassignment Language y/social exclusion (inc. young carers) unity cohesion ge & civil partnership ancy and maternity n Rights	born)		+ + + + + + + + +		

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Q3	engagement/	/consultation de details l			t
	•	•		ork undertaken by the CDC. All items their own IIA considerations and proce	∋ss.
Q4	Have you con		_	ture Generations Act (Wales) 2015 in	n the
a)	Overall does the together?	_	<u> </u>	lan's Well-being Objectives when considere	d
b)	Does the initiati Yes		_ •	on to each of the seven national well-being g	oals?
c)	Does the initiati		h of the five ways of wo	orking?	
d)	Does the initiati generations to r Yes	meet their ow	n needs?	ithout compromising the ability of future	
Q5		nic, environi		(Consider the following impacts – equal al, financial, political, media, public	ality,
	High risk		Medium risk	Low risk	
Q6	Will this initia	ative have	an impact (howeve	er minor) on any other Council servi	e?
[	Yes	☐ No X	If yes, please pro	ovide details below	
Q7	Will this initia	ative result	t in any changes ne	eeded to the external or internal web	site?
[	Yes	☐ No X	If yes, please pro	ovide details below	
decis	considering a ions affecting	all the impa similar gro	acts identified withioups/ service users	posal on people and/or communities in the screening and any other key s made by the organisation? r Cabinet Member to consider more widely	

proposal will affect certain groups/ communities more adversely because of other decisions the organisation is making. For example, financial impact/poverty, withdrawal of multiple services and

## **Appendix A - Integrated Impact Assessment Screening Form**

whether this is disadvantaging the same groups, e.g., disabled people, older people, single parents (who are mainly women), etc.)

None

## **Outcome of Screening**

- Q9 Please describe the outcome of your screening using the headings below:
  - Summary of impacts identified and mitigation needed (Q2)
  - Summary of involvement (Q3)
  - WFG considerations (Q4)
  - Any risks identified (Q5)
  - Cumulative impact (Q7)

N	0	n	е

(NB: This summary paragraph should be used in the section of corporate report)	'Integrated Assessment Implications
☐ Full IIA to be completed	
	the relevant information above to support this

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.

Screening completed by:
Name: Joanne Portwood
Job title: Policy and Strategy Officer
Date: 13/4/23
Approval by Head of Service:
Approval by Head of Service: Name: Lee Wenham

Please return the completed form to <u>accesstoservices@swansea.gov.uk</u>