

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: Tackling Poverty Service

Directorate: Social Services

Q1(a) WHAT ARE YOU SCREENING FOR RELEVANCE?

| | | | | | |
|--------------------------|--------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|
| Service/ Function | Policy/ Procedure | Project | Strategy | Plan | Proposal |
| <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

(b) Please name and describe here:

This is an EIA Screening of the For Information Report to Poverty Reduction Policy Development Committee regarding the newly established Swansea Food Poverty Network.

The report is to inform the PDC of why the Swansea Food Poverty Network has been established and the priorities that it has identified.

The report has no equality implications.

The Swansea Food Poverty Network will support collaborative working between organisations directly involved in the provision of emergency food for people in crisis.

Q2(a) WHAT DOES Q1a RELATE TO?

| | | |
|---------------------------------------|---|---|
| Direct front line service delivery | Indirect front line service delivery | Indirect back room service delivery |
| <input type="checkbox"/> (H) | <input type="checkbox"/> (M) | <input checked="" type="checkbox"/> (L) |

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

| | | | |
|------------------------------|---|---|---------------------------------------|
| Because they need to | Because they want to | Because it is automatically provided to everyone in Swansea | On an internal basis i.e. Staff |
| <input type="checkbox"/> (H) | <input checked="" type="checkbox"/> (M) | <input type="checkbox"/> (M) | <input type="checkbox"/> (L) |

Q3 WHAT IS THE POTENTIAL IMPACT ON THE FOLLOWING...

| | High Impact (H) | Medium Impact (M) | Low Impact (L) | Don't know (H) |
|--------------------------------|--------------------------|--------------------------|-------------------------------------|--------------------------|
| Children/young people (0-18) → | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Older people (50+) → | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Any other age group → | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Disability → | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Race (including refugees) → | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Asylum seekers → | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Gypsies & travellers → | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Religion or (non-)belief → | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Sex → | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Sexual Orientation → | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Gender reassignment → | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Welsh Language → | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Poverty/social exclusion → | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Carers (inc. young carers) → | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Community cohesion → | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Marriage & civil partnership → | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

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Pregnancy and maternity →

Q4 WHAT ENGAGEMENT / CONSULTATION / CO-PRODUCTIVE APPROACHES WILL YOU UNDERTAKE?

Please provide details below – either of your planned activities or your reasons for not undertaking engagement

N/A

Q5(a) HOW VISIBLE IS THIS INITIATIVE TO THE GENERAL PUBLIC?

| | | |
|---|---|---|
| High visibility <input type="checkbox"/> (H) | Medium visibility <input type="checkbox"/> (M) | Low visibility <input checked="" type="checkbox"/> (L) |
|---|---|---|

(b) WHAT IS THE POTENTIAL RISK TO THE COUNCIL'S REPUTATION? (Consider the following impacts – legal, financial, political, media, public perception etc...)

| | | |
|---|---|---|
| High risk <input type="checkbox"/> (H) | Medium risk <input type="checkbox"/> (M) | Low risk <input checked="" type="checkbox"/> (L) |
|---|---|---|

Q6 Will this initiative have an impact (however minor) on any other Council service?

Yes No If yes, please provide details below

Q7 HOW DID YOU SCORE?

Please tick the relevant box

MOSTLY H and/or M → HIGH PRIORITY → EIA to be completed
Please go to Section 2

MOSTLY L → LOW PRIORITY / NOT RELEVANT → Do not complete EIA
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.

This is an EIA Screening of the For Information Report to the Poverty Reduction Policy Development Committee. The report 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.

Equality Impact Assessment Screening Form

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| Screening completed by: |
| Name: Anthony Richards |
| Job title: Poverty and Prevention Strategy Development Manager |
| Date: 13/10/20 |
| Approval by Head of Service: |
| Name: Amy Hawkins |
| Position: Head of Adult Social Services |
| Date: 13/10/20 |

Please return the completed form to accesstoservices@swansea.gov.uk