

# Equality Impact Assessment (EIA) Form 'Knowing your customers needs'

#### **Background**

An Equality Impact Assessment is an improvement tool. It will assist you in ensuring that you have thought about the needs and impacts of your service/policy/function in relation to the protected characteristics. It enables a systematic approach to identifying and recording gaps and actions.

#### **Legislation - Equality duty**

As a local authority who provides services to the public, Melton has a legal responsibility to ensure that we can demonstrate having paid due regard to the need to:

- Eliminate discrimination, harassment and victimisation
- Advance Equality of Opportunity
- Foster good relations

For the following protected characteristics:

- 1. Age
- 2. Disability
- 3. Gender reassignment
- 4. Marriage and civil partnership (when providing services)
- 5. Pregnancy and maternity (when providing services)
- 6. Race
- 7. Religion and belief
- 8. Sex
- 9. Sexual orientation

# What is prohibited?

- 1. Direct discrimination, including by association and perception.
- 2. Indirect discrimination now covers all characteristics.
- 3. Pregnancy and maternity discrimination.
- 4. Harassment.
- 5. Third party harassment.
- 6. Discrimination arising from disability.
- 7. Duty to make reasonable adjustments.

Title of the policy	Scale of Fees and Expenses for Returning Officer
Is it new or exiting?	Existing
Date	3 <sup>rd</sup> April 2012
Officer undertaking EIA	Sally A Renwick
Who else is involved in	
undertaking this	
assessment?	

### 1. Overview of policy/function being assessed

### A. Outline: What is the purpose of this policy? (specify aims and objectives)

To provide and sufficient funding and remuneration for running and carrying out Borough/Parish/County and Mayoral Referendums

#### B. What specific groups is the policy designed to affect/impact?

Community - Right to Vote

Authority – Correct setting of fees and payment of services

### C. Which groups have been consulted as part of the creation or review of the policy?

The Returning Officer

Leicestershire County Election Officers Group

Fees and Charges Order from Ministry of Justice for each National Election

#### 2. What we already know and where there are gaps

A. What existing information/data do you have/monitor about different diverse groups in relation to this policy? This could consist of previous EIA's, reports, consultation, surveys, demographic profiles etc.

Ethnicity: The Returning Officer employees both internal and external staff. The ethnic makeup of internal staff is monitored routinely.

Religion:

Disability:

Age: The age range of staff employed by the Returning Officer covers a wide spectrum ranging from 18 to 76.

Gender: The gender of the staff employed by the Returning Officer is monitored and there is a variation each time and election is held as to the number of male or female staff that are employed.

Transgender:

Other (Civil partnerships/marriage, pregnancy and maternity, offenders, priority neighbourhoods):

B. What does this information/data tell you about diverse groups? If you do not hold or have access to any data/information on certain/all diverse groups, what do you need to begin collating/monitoring? (please list)

Not all information is routinely collected for staff that are not employed by Melton Borough Council. It is planned to commence collection of data from staff that are not employed by

# 3. Do we need to seek the views of others and if so, who?

A. In light of the answers you have given in question 2, do you need to consult with specific groups? If not please explain why.

The monitoring and collection of data is routinely carried out with reference to the internal staff employed by Melton Borough Council. It is planned that this information with be collected and monitored regarding the external staff that the Returning Officer employs at Election time from October 2012.

# 4. Assessing the impacts

Diversity Crouns	In light of any data/consultation/information and your own knowledge and awareness, please identify whether the policy has a positive or negative on the groups specified and whether there is evidence of discrimination. Provide an explanation for your decisions. (please refer to the general duties on the front page)						
Diversity Groups	Positive impacts Intentional / Unintentional	Negative impacts Intentional / Unintentional	Is there evidence of direct/indirect discrimination?	Comments/explanation Use data to evidence			
Age	No	No	No	The Policy itself does not discriminate against any of the protected categories as it is applied equally to all those who take part in employment for the Returning Officer regardless			
Disability (physical, visual, hearing, learning disability, mental health)	No	No	No				
Gender / Sex	No	N	No				
Religious Belief	No	No	No				
Racial Group	No	No	No				
Sexual Orientation	No	No	No				
Transgender	No	No	No				
Other protected groups (pregnancy & maternity, marriage & civil partnership)	No	No	No				
Other socially excluded groups (low literacy, offenders, priority neighbourhoods, etc)	No	No	No				

All	No	No	No					
5. Action Pla	an							
Please incl	ude any identifie	d concerns/actions/iss	ues in this a	ction plan:				
The issues i	e issues identified should inform your Service Plan and, if appropriate, your Consultation Plan							
Number		Action		Responsible Officer	Target Date			
(Ref)								
					1			
		It the outcomes of this	assessment	and how they will t	hey			
be inforn	nea 	Who needs to know	lla.	they will be infer	a d			
		(Please tick)	(we	w they will be infor have a legal duty to publish				
Internally (de EIA Scrutin	employees &		Web Site					
Externally ( stakeholde	(service users, ers etc)		Web Site					
Others								
	ease of access, communication							
	cerns are there?							
7.0		4. 1 1						
7. Conclusio	on (to be comple	ted and signed by the l	Head of Servi	ice)				
Please dele	ete as appropriat	е						
I agree / dis	sagree with this a	assessment / action pla	ın					
		equired, reasons and de	etails of who	is to carry them ou	ıt with			
timescales	:							
Signed (He	ead of Service):							
Date:								
R. Internal S	crutiny (to be co	mpleted and signed by	an independ	lent member of the				
	nanager group)	inploted and signed by	an maepena	one moniber of the				
Please dele	ete as appropriat	e						
I agree / dis	sagree with this a	assessment						

If disagree, state action/s required, reasons and details of who is to carry them out with timescales:
Signed (third tier manager):
Date:

Please ensure that this EIA is publicised on the Internet