


Initial Equalities Screening Record Form

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| Date of Screening: April 2016 | Directorate: Environment, Culture and Communities | Section: Planning and Transport: Planning | |
| 1. Activity to be assessed | SUITABLE ALTERNATIVE NATURAL GREENSPACES (SANGS) – CAPACITY ALLOCATION | | |
| 2. What is the activity? | <input checked="" type="checkbox"/> Policy/strategy <input type="checkbox"/> Function/procedure <input type="checkbox"/> Project <input type="checkbox"/> Review <input type="checkbox"/> Service <input type="checkbox"/> Organisational change | | |
| 3. Is it a new or existing activity? | <input checked="" type="checkbox"/> New <input type="checkbox"/> Existing | | |
| 4. Officer responsible for the screening | Simon Cridland – Team Manager Implementation and Infrastructure | | |
| 5. Who are the members of the screening team? | Max Baker, Head of Planning and Andrew Hunter, Chief Officer | | |
| 6. What is the purpose of the activity? | To authorise officers to not provide Strategic Suitable Alternative Natural Green (SANG) capacity for developments which collectively undermine the delivery of the Council's Thames Basin Heaths Special Protection Area avoidance and mitigation strategy and threaten the delivery of plan-led development set out in the Council's Development Plan. | | |
| 7. Who is the activity designed to benefit/target? | Developments of large Prior Approval Applications or other large unplanned developments in the countryside | | |
| Protected Characteristics | Please tick yes or no | Is there an impact? What kind of equality impact may there be? Is the impact positive or adverse or is there a potential for both? If the impact is neutral please give a reason. | What evidence do you have to support this? E.g. equality monitoring data, consultation results, customer satisfaction information etc Please add a narrative to justify your claims around impacts and describe the analysis and interpretation of evidence to support your conclusion as this will inform members decision making, include consultation results/satisfaction information/equality monitoring data |
| 8. Disability Equality – this can include physical, mental health, learning or sensory disabilities including conditions such as dementia. | N | No | N/A |
| 9. Racial equality | N | No | N/A |

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| 10. Gender equality | | N | No | N/A |
| 11. Sexual orientation equality | | N | No | N/A |
| 12. Gender re-assignment | | N | No | N/A |
| 13. Age equality | | N | No | N/A |
| 14. Religion and belief equality | | N | No | N/A |
| 15. Pregnancy and maternity equality | | N | No | N/A |
| 16. Marriage and civil partnership equality | | N | No | N/A |
| 17. Please give details of any other potential impacts on any other group (e.g. those on lower incomes/carers/ex-offenders, armed forces communities) and on promoting good community relations. | There are no equality impacts as a result of the decision because the decision does not prevent the developments going ahead but simply that they have to find their own SANG solution. | | | |
| 18. If an adverse/negative impact has been identified can it be justified on grounds of promoting equality of opportunity for one group or for any other reason? | N/A | | | |
| 19. If there is any difference in the impact of the activity when considered for each of the equality groups listed in 8 – 14 above; how significant is the difference in terms of its nature and the number of people likely to be affected? | No negative impacts have been identified in respect of any of the groups listed in 8 – 16 above. | | | |
| 20. Could the impact constitute unlawful discrimination in relation to any of the Equality Duties? | | N | No. | |

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| 21. What further information or data is required to better understand the impact? Where and how can that information be obtained? | None | | |
| 22. On the basis of sections 7 – 17 above is a full impact assessment required? | | N | Full assessment not required. |
| 23. If a full impact assessment is not required; what actions will you take to reduce or remove any potential differential/adverse impact, to further promote equality of opportunity through this activity or to obtain further information or data? Please complete the action plan in full, adding more rows as needed. | | | |
| Action | Timescale | Person Responsible | Milestone/Success Criteria |
| N/A | | | |
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| 24. Which service, business or work plan will these actions be included in? | Planning and Transport | | |
| 25. Please list the current actions undertaken to advance equality or examples of good practice identified as part of the screening? | None | | |
| 26. Chief Officers signature. | <div data-bbox="877 987 989 1016">Signature:</div> <div data-bbox="1010 922 1360 1008">  </div> <div data-bbox="1524 987 1709 1016">Date: 10.05.2017</div> | | |