

## Equalities Screening Record Form

<b>Date of Screening:</b> 26/09/17	<b>Directorate:</b> Resources	<b>Section:</b> Revenues
<b>1. Activity to be assessed</b>	Please give full details of the activity: <b>NNDR Discretionary Relief Scheme</b>	
<b>2. What is the activity?</b>	<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	
<b>3. Is it a new or existing activity?</b>	<input checked="" type="checkbox"/> New <input type="checkbox"/> Existing	
<b>4. Officer responsible for the screening</b>	David Evans	
<b>5. Who are the members of the EIA team?</b>		
<b>6. What is the purpose of the activity?</b>	To introduce a scheme to assist those small businesses that have been worst effected by the revaluation	
<b>7. Who is the activity designed to benefit/target?</b>	Small businesses owners	
<b>Protected Characteristics</b>	<b>Please tick yes or no</b>	<b>Is there an impact?</b> 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.
		<b>What evidence do you have to support this?</b> 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
<b>8. Disability Equality</b>	Y	N √
<b>9. Racial equality</b>	Y	N √
<b>10. Gender equality</b>	Y	N √
<b>11. Sexual orientation equality</b>	Y	N √
<b>12. Gender re-assignment</b>	Y	N √

13. Age equality	Y	N √	
14. Religion and belief equality	Y	N √	
15. Pregnancy and maternity equality	Y	N √	
16. Marriage and civil partnership equality	Y	N √	
17. Please give details of any other potential impacts on any other group (e.g. those on lower incomes/carers/ex-offenders) and on promoting good community relations.	Please explain N/A		
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?	Please explain 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?	Please explain N/A		
20. Could the impact constitute unlawful discrimination in relation to any of the Equality Duties?	Y	N √	Please explain for each equality group
21. What further information or data is required to better understand the impact? Where and how can that information be obtained?			
22. On the basis of sections 7 – 17 above is a full impact assessment required?	Y	N √	Please explain your decision. If you are not proceeding to a full equality impact assessment make sure you have the evidence to justify this decision should you be challenged. <b>If you are proceeding to a full equality impact assessment please contact Abby Thomas.</b>
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
24. Which service, business or work plan will these actions be included in?			
25. Please list the current actions undertaken to advance equality or examples of good practice identified as part of the screening?	Please list		
26. Chief Officers signature.	Signature:		Date:

When complete please send to [abby.thomas@bracknell-forest.gov.uk](mailto:abby.thomas@bracknell-forest.gov.uk) for publication on the Council's website.