

# 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 your directorate support officer or the Access to Services team (see guidance for details).

What service area and directorate are you from?
Service Area: Economic Regeneration and Planning Service
Directorate: Regeneration and Housing Department

**Q1(a) WHAT ARE YOU SCREENING FOR RELEVANCE?**

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

**(b) Please name and describe below**  
 Local Development Plan (LDP). The LDP will provide a long-term vision for land use planning in Swansea from 2015 onwards.

**Q2(a) WHAT DOES Q1a RELATE TO?**

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

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

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 checked="" type="checkbox"/> (H)	<input type="checkbox"/> (M)	<input type="checkbox"/> (M)	<input type="checkbox"/> (L)

**Q3 WHAT IS THE POTENTIAL IMPACT ON THE FOLLOWING GROUPS OF PEOPLE**

	High Impact (H)	Medium Impact (M)	Low Impact (L)	Don't know (H)
Different racial groups	→ <input type="checkbox"/>	→ <input checked="" type="checkbox"/>	→ <input type="checkbox"/>	→ <input type="checkbox"/>
Different age groups	→ <input type="checkbox"/>	→ <input checked="" type="checkbox"/>	→ <input type="checkbox"/>	→ <input type="checkbox"/>
Different genders	→ <input type="checkbox"/>	→ <input checked="" type="checkbox"/>	→ <input type="checkbox"/>	→ <input type="checkbox"/>
Welsh language speakers	→ <input type="checkbox"/>	→ <input checked="" type="checkbox"/>	→ <input type="checkbox"/>	→ <input type="checkbox"/>
People with disabilities	→ <input type="checkbox"/>	→ <input checked="" type="checkbox"/>	→ <input type="checkbox"/>	→ <input type="checkbox"/>
Different religions or beliefs	→ <input type="checkbox"/>	→ <input checked="" type="checkbox"/>	→ <input type="checkbox"/>	→ <input type="checkbox"/>
Different sexual orientations	→ <input type="checkbox"/>	→ <input checked="" type="checkbox"/>	→ <input type="checkbox"/>	→ <input type="checkbox"/>

**Q4(a) HOW VISIBLE IS THIS SERVICE/FUNCTION/POLICY/PROCEDURE/PROJECT/ STRATEGY TO THE GENERAL PUBLIC?**

High visibility to general public	Medium visibility to general public	Low visibility to general public
<input checked="" type="checkbox"/> (H)	<input type="checkbox"/> (M)	<input 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 to reputation	Medium risk to reputation	Low risk to reputation
<input checked="" type="checkbox"/> (H)	<input type="checkbox"/> (M)	<input type="checkbox"/> (L)

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## HOW DID YOU SCORE?

**MOSTLY H** and/or **M** → **HIGH PRIORITY** → EqlA to be completed

**MOSTLY L** → **LOW PRIORITY/  
NOT RELEVANT** → **Do not complete EqlA**

If after completing the EqlA screening process you determine that this service/function/policy/project is not relevant for an EqlA you must provide adequate explanation below (Please use additional pages if necessary).

Not applicable we should conduct a full EqlA of the LDP.

NB: Please send this completed form to the Access to Services Team for agreement and approval.

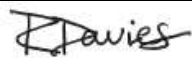
Screeener- This to be completed by the person responsible for completing this screening

Name: Rachel Davies

Location: Room 2.6.2, Civic Centre, Oystermouth Road, Swansea, SA1 3SN

Telephone Number: 01792 635183

Signature:



Date: 06/10/11

Approval by Head of Service

Name: Phil Holmes

Position: Head of Planning and Economic Regeneration

Signature:



Date: 13/10/11

Please return the completed form to:

The Access to Service Team  
Performance and Strategic Planning  
Room 3.1.15  
Civic Centre

Or return via email to  
[accesstoservices@swansea.gov.uk](mailto:accesstoservices@swansea.gov.uk)