# **Equality Impact Assessment**

## **Introductory Information**

### Budget/Project name

Advance Digital

#### Proposal type

- $\bigcirc$  Budget
- Project

#### **Decision Type**

- $\bigcirc$  Cabinet
- Cabinet Committee (e.g. Cabinet Highways Committee)
- $\bigcirc$  Leader
- Individual Cabinet Member
- Executive Director/Director
- Officer Decisions (Non-Key)

• No

- Council (e.g. Budget and Housing Revenue Account)
- Regulatory Committees (e.g. Licensing Committee)

#### Lead Cabinet Member Cllr Abtisam Mohamed

#### **Entered on Q Tier**

○ Yes

#### Year(s)

ieai(s)							
0	0	0	0	0	0		
14/15	15/16	16/17	17/18	18/19	19/20	20/21	21/22

EIA date

DD/MM/YYYY

EIA Lead	
O Adele Robinson	○ Ed Sexton
<ul> <li>Annemarie Johnston</li> </ul>	O Louise Nunn
<ul> <li>Bashir Khan</li> </ul>	<ul> <li>Michael Bowles</li> </ul>
○ Beth Storm	<ul> <li>Michelle Hawley</li> </ul>
<ul> <li>Diane Owens</li> </ul>	○ Rosie May
Person filling in this EIA form	Lead officer

#### Lead Corporate Plan priority

<ul> <li>An In-Touch</li> <li>Organisation</li> </ul>	<ul> <li>Strong</li> <li>Economy</li> </ul>	<ul> <li>Thriving Neighbourhoods</li> <li>and Communities</li> </ul>	<ul> <li>Better</li> <li>Health and</li> <li>Wellbeing</li> </ul>	<ul> <li>Tackling Inequalities</li> </ul>
		and Communities Page 94	wenbeing	

## Portfolio, Service and Team

#### **Cross-Portfolio**

○ Yes ● No

Portfolio People

Is the EIA joint with another organisation (eg NHS)?

○ Yes ● No

### Brief aim(s) of the proposal and the outcome(s) you want to achieve

1) increase the skill levels of Sheffield's residents and so seek to improve the productivity and sustainability of local businesses.

2) improve the unemployed indicators within the City, moving long term unemployed residents to the "in demand" labour market and/or enhancing skill levels.

3) create increased revenue for the Council.

4) attract inward investment through co-ordinated pipeline offer of workforce skills within key sectors.

## Impact

Under the <u>Public Sector Equality Duty</u> we have to pay due regard to the need to:

- eliminate discrimination, harassment and victimisation
- advance equality of opportunity
- foster good relations

More information is available on the <u>Council website</u> including the <u>Community Knowledge</u> <u>Profiles</u>.

Note the EIA should describe impact before any action/mitigation. If there are both negatives and positives, please outline these – positives will be part of any mitigation. The action plan should detail any mitigation.

#### Overview

Briefly describe how the proposal helps to meet the Public Sector Duty outlined above

## Impacts

### Proposal has an impact on

○ Transgender
○ Carers
O Voluntary/Community & Faith Sectors
O Cohesion
O Partners
<ul> <li>Poverty &amp; Financial Inclusion</li> </ul>
O Armed Forces
○ Other

Give details in sections below.

Health					
		e a significant he wider dete		ealth and well- lealth)?	being
O Yes	• No	if Yes, compl	ete section bel	ow	
Staff O Yes	○ No	<b>Impact</b> O Positive	O Neutral	○ Negative	
		Level O None	O Low	O Medium	⊖ High
Details of in	mpact				
Customers O Yes	○ No	Impact O Positive	O Neutral	○ Negative	
		Level O None	O Low	O Medium	⊖ High
Details of in	mpact				
<b>Compreher</b> O Yes	nsive Health ● No	Impact Asse	ssment being	completed	
				ig document belo	
		is signed off t	he health imp	oact(s) of this E	IA
O Yes ● N	No				
Health Lead	d				

Age					
<b>Staff</b> O Yes	● No	Impact O Positive	<ul> <li>Neutral</li> </ul>	<ul> <li>Negative</li> </ul>	
		<b>Level</b> O None	O Low	O Medium	⊖ High
Details of	impact				
<b>Customer</b> O Yes	s O No	Impact O Positive	<ul><li>Neutral</li></ul>	<ul> <li>Negative</li> </ul>	
		Level O None	○ Low	O Medium	O High
Details of	impact				

Disability	1				
<b>Staff</b> O Yes	● No	<b>Impact</b> O Positive	<ul> <li>Neutral</li> </ul>	<ul> <li>Negative</li> </ul>	
		<b>Level</b> O None	O Low	O Medium	⊖ High
Details of	impact				
Customers	s O No	<b>Impact</b> O Positive	<ul> <li>Neutral</li> </ul>	<ul> <li>Negative</li> </ul>	
		Level O None	○ Low	O Medium	⊖ High
Details of	impact				

Pregnanc	y/Materni	ty			
Staff O Yes	● No	Impact O Positive	<ul> <li>Neutral</li> </ul>	<ul> <li>Negative</li> </ul>	
		Level O None	O Low	O Medium	O High
Details of	impact				
<b>Customers</b> O Yes	o No	<b>Impact</b> O Positive	<ul> <li>Neutral</li> </ul>	<ul> <li>Negative</li> </ul>	
		<b>Level</b> O None	O Low	O Medium	O High
Details of	impact				

Race					
<b>Staff</b> O Yes	● No	<b>Impact</b> O Positive	O Neutral	<ul> <li>Negative</li> </ul>	
		Level O None	○ Low	O Medium	⊖ High
<b>Details of</b>	impact				
Customer	S	Impact			
$\circ$ Yes	○ No	<ul> <li>Positive</li> </ul>	<ul> <li>Neutral</li> </ul>	○ Negative	
		Level O None	○ Low	O Medium	⊖ High
Details of	impact				

Religion/	'Belief				
Staff O Yes	● No	Impact O Positive	<ul> <li>Neutral</li> </ul>	<ul> <li>Negative</li> </ul>	
		<b>Level</b> O None	O Low	O Medium	⊖ High
Details of	impact				
Customer O Yes	s O No	Impact O Positive	<ul> <li>Neutral</li> </ul>	<ul> <li>Negative</li> </ul>	
	-		<ul><li>Neutral</li><li>Low</li></ul>	<ul><li>Negative</li><li>Medium</li></ul>	⊖ High
	⊖ No	<ul> <li>Positive</li> <li>Level</li> </ul>		J	⊖ High
O Yes	⊖ No	<ul> <li>Positive</li> <li>Level</li> </ul>		J	O High
O Yes	⊖ No	<ul> <li>Positive</li> <li>Level</li> </ul>		J	O High

Sex					
<b>Staff</b> O Yes	● No	<b>Impact</b> O Positive	<ul> <li>Neutral</li> </ul>	<ul> <li>Negative</li> </ul>	
		Level O None	O Low	O Medium	⊖ High
Details of	impact				
Customers O Yes	s ○ No	<b>Impact</b> O Positive	O Neutral	<ul> <li>Negative</li> </ul>	
			<ul><li>Neutral</li><li>Low</li></ul>	<ul><li>Negative</li><li>Medium</li></ul>	⊖ High
	○ No	<ul> <li>Positive</li> <li>Level</li> </ul>		5	⊖ High
O Yes	○ No	<ul> <li>Positive</li> <li>Level</li> </ul>		5	O High
O Yes	○ No	<ul> <li>Positive</li> <li>Level</li> </ul>		5	O High

Sexual Or	ientation				
Staff O Yes	● No	Impact O Positive	<ul> <li>Neutral</li> </ul>	<ul> <li>Negative</li> </ul>	
		Level O None	O Low	O Medium	⊖ High
Details of i	mpact				
Customers O Yes	○ No	Impact O Positive	<ul> <li>Neutral</li> </ul>	<ul> <li>Negative</li> </ul>	
			<ul><li>Neutral</li><li>Low</li></ul>	<ul><li>Negative</li><li>Medium</li></ul>	⊖ High
	○ <b>No</b>	<ul> <li>Positive</li> </ul>		5	O High
O Yes	○ <b>No</b>	<ul> <li>Positive</li> </ul>		5	O High
O Yes	○ <b>No</b>	<ul> <li>Positive</li> </ul>		5	O High

Transgen	der				
Staff O Yes	● No	<b>Impact</b> O Positive	<ul> <li>Neutral</li> </ul>	<ul> <li>Negative</li> </ul>	
		Level O None	○ Low	O Medium	O High
Details of	impact				
<b>Customer</b> s O Yes	s O No	<b>Impact</b> O Positive	O Neutral	<ul> <li>Negative</li> </ul>	
		Level O None	O Low	O Medium	⊖ High
Details of	impact				

Carers					
Staff O Yes	● No	<b>Impact</b> O Positive	○ Neutral	<ul> <li>Negative</li> </ul>	
		<b>Level</b> O None	O Low	O Medium	O High
Details of	impact				
Customers	s O No	Impact O Positive	<ul><li>Neutral</li></ul>	<ul> <li>Negative</li> </ul>	
			<ul><li>Neutral</li><li>Low</li></ul>	<ul><li>Negative</li><li>Medium</li></ul>	⊖ High
	○ <b>No</b>	<ul><li>Positive</li><li>Level</li></ul>		5	O High
O Yes	○ <b>No</b>	<ul><li>Positive</li><li>Level</li></ul>		5	O High
O Yes	○ <b>No</b>	<ul><li>Positive</li><li>Level</li></ul>		5	O High

Voluntary/Community & Faith Sectors					
<b>Staff</b> O Yes	● No	Impact O Positive	<ul> <li>Neutral</li> </ul>	<ul> <li>Negative</li> </ul>	
		<b>Level</b> O None	○ Low	O Medium	O High
Details of	impact				
Customer	s	Impact			
○ Yes	Ο Νο	<ul> <li>Positive</li> </ul>	○ Neutral	○ Negative	
		Level			
		O None	○ Low	<ul> <li>Medium</li> </ul>	O High
Details of	impact				

Cohesion					
Staff O Yes	● No	Impact O Positive	<ul> <li>Neutral</li> </ul>	<ul> <li>Negative</li> </ul>	
		Level O None	O Low	O Medium	O High
Details of i	mpact				
<b>Customers</b> O Yes	○ No	Impact O Positive	<ul> <li>Neutral</li> </ul>	<ul> <li>Negative</li> </ul>	
		<b>Level</b> O None	○ Low	O Medium	⊖ High
Details of i	mpact				

High
High
High

	гпапсіа	l Inclusion			
<b>Staff</b> ● Yes	O No	Impact ● Positive	<ul> <li>Neut</li> </ul>	ral O Negative	
		<b>Level</b> O None	O Low	O Medium	● High
Details of i	mpact				
businesses	-	_			
Customers ● Yes	○ No	Impact ● Positive	<ul> <li>Neut</li> </ul>	tral O Negative	
		Level O None	O Low	O Medium	● High
Details of i	mpact				
	1 · · · ·	husingson has	me more	productive and sust	ainablo

Armed Fo	orces				
Staff O Yes	● No	<b>Impact</b> O Positive	O Neutral	<ul> <li>Negative</li> </ul>	
		Level O None	O Low	O Medium	⊖ High
Details of	impact				
<b>Customer</b> O Yes	s ○ No	Impact O Positive	<ul><li>Neutral</li></ul>	<ul> <li>Negative</li> </ul>	
		Level O None	○ Low	O Medium	⊖ High
Details of	impact				

Other				
Staff ○ Yes ● No	Please specif	Γγ		
	<b>Impact</b> O Positive	O Neutral	<ul> <li>Negative</li> </ul>	
	Level O None	O Low	O Medium	O High
Details of impact				
Customers O Yes O No	Please speci	fy		
	<b>Impact</b> O Positive	O Neutral	<ul> <li>Negative</li> </ul>	
	Level O None	O Low	O Medium	⊖ High
Details of impact				

<b>Cumulative Imp</b>	act					
-	Proposal has a cumulative impact					
• Yes O No	0					
Year on Year	<ul> <li>Across a Community of Identity/Interest</li> </ul>					
<ul> <li>Geographical Area</li> </ul>	O Other					
If yes, details of impact						
We seek an improved sk	We seek an improved skills base for businesses within Sheffield.					
	Proposal has geographical impact across Sheffield O Yes O No					
If Yes, details of geograp	hical impact across Sheffield					
● All ○ Specific	(s) impacted					
If Specific, name of Local	Partnership Area(s) impacted					

## **Action Plan and Supporting Evidence**

**Action Plan** 

Latest iteration available here: Form 2 - Executive Report v.7 120421 RW amends (002).doc

Supporting Evidence (Please detail all your evidence used to support the EIA)

## Consultation

Consultation required ○ Yes ● No

If consultation is not required please state why

The Council is not required to carry out a consultation process in respect of these proposals.

Are Staff who may be affected by these proposals aware of them ● Yes ○ No

Are Customers who may be affected by these proposals aware of them
● Yes
○ No

If you have said no to either please say why

## **Summary of overall impact**

Summary of overall impact

Summary of evidence

Changes made as a result of the EIA

### **Escalation plan**

**Is there a high impact in any area?** ○ Yes ● No

**Overall risk rating after any mitigations have been put in place**  $\bigcirc$  High  $\bigcirc$  Medium  $\bigcirc$  Low  $\blacklozenge$  None

Review Date DD/MM/YYYY

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