

Equality Impact Screening (EMPLOYMENT)

| 1. SUMMARY INFORMATION | |
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| Name of policy / project: | Policy on Gambling Addiction in Employment |
| What is the aim or purpose of the policy / project? | The purpose of this document is to provide guidance to both line managers and employees in respect of employees who have a gambling problem which has an impact in the workplace and options available |
| Who is affected by this policy / project? | All employees |
| Who is responsible developing this policy or delivery of this project? | The Human Resources Section |

| 2. INITIAL SCREENING QUESTIONS – DOES THIS POLICY / PROJECT: | | |
|--|-----|----|
| Introduce a new policy or amends an existing policy affecting employees? | Yes | |
| Involve a change of departmental or Company structure? | | No |
| Involve a reduction or increase in workforce? | | No |
| Change employee's terms and conditions | | No |
| Change employee's working hours? | | No |
| Change employee's work location? | | No |
| Change aspect of employee's physical work environment? | | No |
| Introduces new or amends existing working practices for employees? | | No |

| 3. EQUALITY ACT 2010 SCREENING QUESTIONS | | |
|---|--|------------------|
| Question | Protected Characteristic | Potential Impact |
| 1. Will this policy or decision impact on each of the groups shown opposite in different or particular ways? If yes please provide detail in the end column. | Age | None |
| | Disability | None |
| | Gender Reassignment | None |
| | Pregnancy & Maternity | None |
| | Race | None |
| | Religion or Belief | None |
| | Sex (Gender) | None |
| | Sexual Orientation | None |
| | Employees with Caring Responsibilities | None |
| | Full Time Employees | None |
| Part Time Employees | None | |

| Question | Protected Characteristic | Potential Impact |
|---|--|----------------------|
| <p>2. Is there a risk that any part of this policy or decision could cause discrimination to any of the groups opposite?</p> <p>If yes please provide detail in the end column.</p> | Age | None |
| | Disability | None |
| | Gender Reassignment | None |
| | Pregnancy & Maternity | None |
| | Race | None |
| | Religion or Belief | None |
| | Sex (Gender) | None |
| | Sexual Orientation | None |
| | Employees with Caring Responsibilities | None |
| | Full Time Employees | None |
| | Part Time Employees | None |
| Question | Three needs of Equality Act 2010 | Potential Impact |
| <p>3. How can this policy or decision help us to:</p> | Eliminate unlawful discrimination, harassment and victimisation and other conduct that is prohibited by the Equality Act 2010? | This does not apply. |
| | Advance equality of opportunity between people who share a relevant protected characteristic and those who do not? | This does not apply. |
| | Foster good relations between people who share a protected characteristic and those who do not? | This does not apply. |

| 4. CONCLUSION | | |
|---|---|----|
| <p>4. Should you proceed to a full EEqIA for this policy or decision?</p> <p>Please provide a brief statement explaining why you have made this decision.</p> | | No |
| | The policy provides an overview of the employers/employees responsibility and identifies sources of assistance. | |
| <p>5. Did you identify anything in questions 1. 2 or 3 which you have</p> | No | |

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| <p>incorporated into the policy development or project plan?</p> <p>If yes, please provide a brief statement about this opposite.</p> | |
| <p>6. Have you identified anything which is likely to change during the implementation stages of the project or policy development which would result in your reviewing this screening?</p> <p>If yes, please provide a brief statement opposite.</p> | <p>No</p> |

| 5. SCREENING SIGN OFF | | | |
|--------------------------------|-------------------|-----------------------|------------------|
| Responsibility | Print Name | Signature | Date |
| Lead Officer | Mary Fitzpatrick | M Fitzpatrick | 12 December 2014 |
| Human Resources Manager | Paul McGaulley | <i>Paul McGaulley</i> | 16 December 2014 |