

Equality Impact Screening (EMPLOYMENT)

1. SUMMARY INFORMATION	
Name of policy / project:	Code of Practice on the Employment of Transgender & Transsexual Persons
What is the aim or purpose of the policy / project?	To promote equality, eliminate discrimination and ensure fairness and respect for transgender and transsexual employees
Who is affected by this policy / project?	Applicants who apply for employment with the Company and existing employees who disclose their transgender or transsexual status
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	No
Involve a change of departmental or Company structure?	Yes	No
Involve a reduction or increase in workforce?	Yes	No
Change employee's terms and conditions	Yes	No
Change employee's working hours?	Yes	No
Change employee's work location?	Yes	No
Change aspect of employee's physical work environment?	Yes	No
Introduces new or amends existing working practices for employees?	Yes	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	Yes – it will ensure that transgender and transsexual employees are treated with dignity and respect and are offered support during all stages of their employment. It will also provide guidance to Managers/Supervisors and employees in supporting transgender and transsexual colleagues.
	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	No – the purpose of this code is to promote equality, eliminate discrimination and ensure fairness and respect.
	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 code highlights the Company's zero tolerance approach to discrimination, victimisation and harassment towards employees who are, or are perceived to be, transgender and transsexual.
	Advance equality of opportunity between people who share a relevant protected characteristic and those who do not?	By ensuring procedures are in place which promote equality and prevent discrimination for applicants who apply for employment with the Company and for existing employees who disclose their transgender or transsexual status.
	Foster good relations between people who share a protected characteristic and those who do not?	By providing guidance to employees in supporting transgender and transsexual colleagues and dealing with transgender and transsexual people in a professional capacity.

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>	Yes	No
	No changes have been made to existing code arrangements.	
<p>5. Did you identify anything in questions 1. 2 or 3 which you have incorporated into the policy development or project plan?</p> <p>If yes, please provide a brief statement about this opposite.</p>	No.	
<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>	No.	

5. SCREENING SIGN OFF			
Responsibility	Print Name	Signature	Date
Lead Officer	Pamela Carruthers	P.Carruthers	21.10.2014
Human Resources Manager	Paul McGaulley	<i>Paul McGaulley</i>	21.10.2014