

## Assessment Details

**ID** 630

**Name** Scrutiny and Assurance Plan EqIA screening

**Organization** Care Inspectorate

### Description

**Approver** Jacqui Duncan

**Respondent** Kirsteen.Maclennan@careinspectorate.gov.scot (External), helen.happer@careinspectorate.gov.scot (External), cath.agnew@careinspectorate.gov.scot (External), Marie.Paterson@careinspectorate.gov.scot (External)

**Template** Equality Impact Screening Form v0\_21

**Workflow** Deafult CI Workflow 2-Copy

**Creator** Hannah Lindsay

**Date Created** 2022/05/11 15:48

### Deadline

**Completed Date** 2022/05/13 10:28

**Submitted Date** 2022/05/11 16:30

**Last Updated** 2022/05/13 10:28

**Stage** Completed

### Approval Stage

**Status** Active

**Very High Risks** 0

**High Risks** 0

**Medium Risks** 0

**Low Risks** 0

**Total Risks** 0

**Residual Risk Level** None

**Residual Risk Score** 0.0

**Result** Approved

### Result Comments

**Under Review** (Jacqui Duncan - Approved) ;

**Primary Record Id**

**Primary Record Name**

**Template Version** 1

**Project Version** 1

**Open Risk Count** 0

**Open Info Request** 0

## Tags

Submission Progress (%) 100

## Assessment Questions

### 1 General information

#### 1.1 Is this new or existing work?

##### Response

Change to existing work

##### Justification

None

#### 1.2 Please describe the work

##### Response

The Scrutiny and Assurance Plan is the plan for carrying out scrutiny in line with best regulatory practice and the agreed budget. It sets out arrangements for scrutiny to be carried out (including inspections of those services subject to self-evaluation).

### 2 Equality impact

#### 2.1 For each of the questions in section 2, think about whether the work will impact on people differently based on the different characteristics

*For example, does it impact on people of different ages/sexes/sexual orientations differently? Does it impact on people with and without a disability differently?*

#### 2.2 Age

*What kind of impact will this work have on people of different ages?*

##### Response

Positive/no impact

##### Justification

None

#### 2.3 Disability

*What kind of impact will this work have on disabled people?*

##### Response

Positive/no impact

##### Justification

None

#### 2.4 Race

*What kind of impact will this work have on people of different ages? This includes different ethnic and national origins, and Traveller community membership.*

##### Response

Positive/no impact

##### Justification

None

#### 2.5 Sex

*What kind of impact will this work have on people of different sexes?*

## **Response**

Positive/no impact

## **Justification**

None

### 2.6 **Gender reassignment**

*What kind of impact will this work have on people are transgender/have a trans history?*

## **Response**

Positive/No impact

## **Justification**

None

### 2.7 **Sexual orientation**

*What kind of impact is this work going to have on people of different sexual orientations?*

## **Response**

Positive/no impact

## **Justification**

None

### 2.8 **Religion or belief**

*What kind of impact is this work going to have on people of different religions and beliefs? Beliefs includes no belief, and environmentalism.*

## **Response**

Positive/no impact

## **Justification**

None

### 2.9 **Pregnancy and maternity**

*What kind of impact is this work going to have on people who are pregnant or have given birth within the past 26 weeks?*

## **Response**

Positive/no impact

## **Justification**

None

### 2.10 **Marriage or civil partnership**

*What kind of impact is this work going to have on people of different marriage and civil partnership statuses? Please note this only applies to employees' marriage/civil partnership status.*

## **Response**

Positive/no impact

## **Justification**

None

### 2.11 **Children and young people we have corporate parenting responsibility for**

*What kind of impact is this work going to have on children and young people we have a corporate parenting responsibility for?*

*We are corporate parents for every child who is looked after by a local authority, and every young person under the age of 26 who was looked after on their 16th birthday.*

## **Response**

Positive/no impact

**Justification**

None

2.12 **Children's rights (up to age 18), in line with UNCRC**

*What kind of impact is this work going to have on children's rights, in line with the United Nation's Convention of the Rights of the Child?*

**Response**

Positive/no impact

**Justification**

None

2.13 **Care Inspectorate employees with caring responsibilities**

*What kind of impact is this work going to have on Care Inspectorate employees who have caring responsibilities?*

**Response**

Positive/no impact

**Justification**

None

### 3 Island community impact

3.1 **Does this work impact differently on island communities, compared to other communities?**

**Response**

Yes

**Justification**

None

### 4 Feedback

4.1 **Do you have any feedback (from engagement/consultation) or evidence that influences, affects, or shapes this work?**

**Response**

Yes

**Justification**

None

4.2 **Please select what this feedback/evidence relates to**

**Response**

Employees with caring responsibilities

Age

Children's rights (up to age 18) in line with the UNCRC

Children & young people we have corporate parenting responsibility for

Disability

Sexual orientation

Religion or belief

Sex

**Justification**

None

4.3 **Is any of the feedback/evidence negative or inconclusive?**

**Response**

No

**Justification**

None

## 5 Conclusion

- 5.2 **The screening form is now complete. Your answers have indicated that this activity does not reach the organisational threshold for an EqIA to be completed.**

*Thank you for your time in helping the Care Inspectorate and your Information Asset Owner understand the equality factors associated with your work.*

- 5.3 **Your answers indicate that you need to complete an Island Communities Impact Assessment.**

*Please contact the Equalities Professional Adviser.*

- 5.4 **Do you wish to discuss any aspect of this form with the Equalities Team?**

**Response**

No

**Justification**

None

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## Assessment Notes