

Assessing Equality – The Equality Act 2010

Customer Impact Assessment

	Name and brief	description	of policy	being	analy	sed
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Dignity at Work

All employees have the right to work in an environment that is safe, and to be protected from all forms of abuse, violence and harassment (see definitions). Fenland District Council is committed to ensuring all employees are treated with dignity and respect at work, and this policy sets the responsibilities out for everyone.

Information used for customer analysis

The policy itself, best practice, ACAS guidelines, XpertHR, appropriate legislation, consultation with MTSP, CMT, colleagues and HR team. Where appropriate Staff Committee.

	Could particularly benefit	Neutral	May adversely impact	Explanations	Is action possible or required?	Details of actions or explanations if actions are not possible Please note details of any actions to be placed in your Service Plan
Race				This policy outlines how people should be treated while at work. The policy mentions	N	
Sex				the protected characteristics and how they must not be discriminated against	N	
Gender reassignment				,	N	
Disability					N	
Age					N	
Sexual orientation					N	
Religion or belief					N	
Pregnancy & maternity					N	
Marriage & civil partnership					N	





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Human Rights				No known impact	N		
Socio Economic				No known impact	N		
Multiple/ Cross Cutting				No known impact	N		
Outcome(s) of customer analy	sis						
a) Will the policy/ procedure impact on the whole population of Fenland and/ or identified groups within the population; negative neutral positive							
No major change needed ■ Adjust the policy □			Adverse impact but continue \square	Sto	p and remove / reconsider policy \Box		
Arrangements for future monitoring:							
Review with service managers as and when required for advice to ensure no negative impacts.							
Details of any data/ Research used (both FDC & Partners):							
Completed by:							
Name: Ross Potter							
Position: HR, Payroll & Learning Admin Apprentice							
Approved by (manager signature): Date published:							
Details of any Committee approved by (if applicable):				Date endorsed by Members if a	Date endorsed by Members if applicable:		