

Best Practice Monitoring Form (adaptable for services) (ONLINE/DIGITAL COLLECTION).

The Council is committed to the principle of equal opportunities and having a clear picture of the equality profile of our employees can help monitor the effectiveness of our equal opportunities policies and procedures. We conduct monitoring in order to identify gaps in access to our services, and make targeted changes where gaps are identified. Data is only used to improve services, and in reporting. You are entirely free to decide whether or not to complete this form and there are no consequences of failing to do so. We do not intend on capturing any personal identifiable information through this form. Please be mindful of this in the responses you provide within the free text areas. In the instance where you do provide us with information about yourself or others, the Council will ensure it will be processed in line with the requirements of the Data Protection Act 2018 and only used for monitoring and reporting purposes.

[IMPORTANT: You must place your service area's short privacy notice here, and signpost to the longer privacy notice listed on the Council's website. For more information, please contact the Information Management Team.]

Age

- 16-24
- 25-34
- 35-44
- 45-54
- 55-64
- 65-74
- 75+
- Prefer not to say

Sex

Are you:

- Female
- Male
- Prefer not to say

If you prefer your own term, please provide this here: _____

A question on Gender Identity will be asked later.

Gender Identity

Do you identify as:

- Non-binary
- Trans
- Prefer not to say

If you prefer your own term, please provide this here:

(Trans is an umbrella term to describe people whose gender is not the same as, or does not sit comfortably with, the sex they were assigned at birth.)

Sexual Orientation

Which of the follow best describes your sexual orientation?

- Bisexual
- Gay man
- Gay woman/Lesbian
- Heterosexual/Straight
- Prefer not to say

If you prefer to use your own term, please provide this here: _____

National Identity

How would you describe your national identity?

- British
- Cornish
- English
- Irish
- Northern Irish
- Scottish
- Welsh
- Other (please describe): _____
- Prefer not to say

Ethnicity

How would you describe your ethnic origin?

- Arab

- Asian: British
- Asian or Asian British: Bangladeshi
- Asian or Asian British: Chinese
- Asian: Cornish
- Asian: English
- Asian or Asian British: Indian
- Asian: Irish
- Asian: Northern Irish
- Asian or Asian British: Pakistani
- Asian: Scottish
- Asian or Asian British: Other East Asian
- Asian or Asian British: Other South Asian
- Asian: Welsh
- Asian or Asian British: Other (please describe): _____

- Black: British
- Black or Black British: African
- Black or Black British: Caribbean
- Black: Cornish
- Black: English
- Black: Irish
- Black: Northern Irish
- Black: Scottish
- Black: Welsh
- Black, Black British or Black African: Other (please describe):

- English Gypsy
- Irish Gypsy
- Irish Traveller
- Scottish Gypsy
- Scottish Traveller
- Welsh Gypsy

- Mixed/Multiple: African & Caribbean
- Mixed/Multiple: Black British and White
- Mixed/Multiple: Black African & White
- Mixed/Multiple: Black Caribbean & White
- Mixed/Multiple: East Asian & White
- Mixed/Multiple: South Asian & White
- Mixed/Multiple: Other (please describe): _____

- Roma
- Sinti

- White: British
- White: Cornish
- White: English
- White: Gypsy
- White: Irish
- White: Irish Traveller
- White: Northern Irish
- White: Scottish
- White: Welsh
- White: Other (please describe): _____

- Prefer not to say

If other Ethnic Group or if you would prefer to use your own definition, please specify: _____

Disability

Do you consider yourself to be disabled?

'The definition of disability as defined under the Equality Act (2010) is 'a physical or mental impairment which has a substantial or long-term adverse effect on the ability to carry out day-to-day activities'.

- Yes
- No
- Prefer not to say

Religion or belief

What is your religion or belief?

- Buddhist
- Christian (including Church of Wales, Catholic, Protestant and all other denominations)
- Hindu
- Jewish
- Muslim
- Non-religious (e.g., Atheist, Humanist etc.)
- Sikh
- Prefer not to say

If other Religion or Belief, or if you prefer to use your own definition, please provide this here: _____

Caring Responsibilities

Do you look after, or support family members, friends, neighbours or others because of either: a long term physical or mental condition/disability or problems related to old age?

- No
- Yes, 1-19 hours a week
- Yes, 20-49 hours a week
- Yes, 50 or more hours a week
- Prefer not to say

Pregnancy and maternity

Are you currently pregnant, or have you been pregnant within the last 12 months?

- Yes
- No
- Prefer not to say

Have you taken (or are you currently taking) maternity leave in the last 12 months?

- Yes
- No
- Prefer not to say

Veterans and Armed Forces

Have you ever, or are you currently, serving in the Armed Forces?

- Yes
- No
- Prefer not to say

I do not wish to provide any of the information requested on this form