

| Reference number |
|---|
| Date Submitted |
| Subject of the EIA |
| Brief description of the policy, service or function covered by the EIA |
| Equality Assessment is in support of |
| How frequently will you review impact and mitigation measures identified in this EIA? |
| Due date of the first review |
| |

| Which directorate(s) are | |
|---------------------------|--|
| responsible for this EIA? | |
| Division | |

Service area



| Please describe the impact to the disability characteristic | |
|---|--|
| How will you mitigate against any negative impact to the disability characteristic? | |





| Does this proposal impact | |
|-------------------------------|--|
| people who are proposing to | |
| undergo, undergoing or have | |
| undergone a process to | |
| reassign one's sex as per the | |
| Equality Act 2010? | |
| Please describe the impact to | |
| the gender reassignment | |
| characteristic | |
| How will you mitigate against | |
| any negative impact to the | |
| gender reassignment | |
| characteristic? | |
| | |
| | |
| | |

| Does this proposal impact | |
|---------------------------------------|--|
| people who are married or in | |
| a civil partnership as per the | |
| Equality Act 2010? | |
| What legal marital or | |
| registered civil partnership | |
| status will be impacted by | |
| this proposal? | |
| Please describe the impact to | |
| the marriage and civil | |
| partnership characteristic | |
| How will you mitigate agai <u>nst</u> | |
| any negative impact to the | |
| marriage and civil partnership | |
| characteristic? | |

| Does this proposal impact | | |
|-------------------------------|--|--|
| people covered by the | | |
| Equality Act 2010 under the | | |
| protected characteristic of | | |
| pregnancy and maternity? | | |
| Please describe the impact to | | |
| the pregnancy and maternity | | |
| characteristic | | |
| | | |





Does this proposal impact



d layer II



