

EIA Form About your EIA	
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	
Directorate Division & Service	Λιορ

Directorate, Division & Service Area	
Which directorate(s) are	
responsible for this EIA?	
Division	
Service area	
Budget Saving	





I	How will you mitigate against
	any negative impact to the
	sex characteristic?

I	Protected Characteristic - Gende	er Reassignment
	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?	

Protected Characteristic - Mai	riage and Civil Partnership
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 m	itigate against
any negative im	npact to the
pregnancy and	maternity
characteristic?	

Protected Characteristic - Ethnicity and Race Does this proposal impact people due to their race as

people due to their race as per the Equality Act 2010?

What ethnic groups would be impacted by this proposal?

Please describe the impact to the ethnicity and race characteristic

How will you mitigate against

How will you mitigate against any negative impact to the ethnicity and race characteristic?

Protected Characteristic - Religion or Beliefs

Does this proposal impact





How will you mitigate against any negative impact to the sexual orientation characteristic?

