

# Equality Impact Assessment (EIA) Form

*Please read EIA guidelines when completing this form*

## 1. Name of Service Area/Directorate

Name of Head of Service for area being assessed: .....

Directorate: .....

Individual(s) completing this assessment: .....

Date assessment completed: .....

## 2. What is being assessed

Activity being assessed (eg. policy, procedure, document, service redesign, strategy etc.)

What is the aim, purpose and/or intended outcomes of this activity?

Name of lead for activity

Who will be affected by the development and implementation of this activity?

- Service users
- Patients
- Carers
- Visitors
- Staff
- Communities
- Other:

Is this:

- Review of an existing activity/policy
- New activity/policy
- Planning to withdraw or reduce a service, activity or presence?

What information and evidence have you reviewed to help inform this assessment? (name your sources, eg. demographic information for services/staff groups affected, complaints etc.)

Summary of engagement or consultation undertaken (eg. who and how have you engaged with, or why do you believe this is not required)

Summary of relevant findings

### 3. The impact of this activity

Please consider the potential impact of this activity (during development and implementation) on each of the equality groups outlined below. **Please tick one or more impact box below for each Equality Group and explain your rationale.** Please note it is possible for the potential impact to be both positive and negative within the same equality group and this should be recorded. Remember to consider the impact on staff, public, patients, carers, partner organisations, etc. in these equality groups.

<b>Equality Group</b>	<b>Potential <u>positive</u> impact</b>	<b>Potential <u>neutral</u> impact</b>	<b>Potential <u>negative</u> impact</b>	<b>Please explain your reasons for any potential positive, neutral or negative impact identified</b>
<b>Age</b>		✓		
<b>Disability</b>				
<b>Gender Reassignment</b>				
<b>Marriage &amp; Civil Partnerships</b>				
<b>Pregnancy &amp; Maternity</b>				
<b>Race</b> (including Travelling Communities and people of other nationalities)				
<b>Religion &amp; Belief</b>				
<b>Sex</b> (including issues of safety and sexual violence)				
<b>Sexual Orientation</b>				
<b>Other Vulnerable and Disadvantaged Groups</b> (eg. carers, care leavers, homeless, social/ economic deprivation, etc)				
<b>Health Inequalities</b> (any preventable, unfair & unjust differences in health status between groups, populations or individuals that arise from the unequal distribution of social, environmental & economic conditions within societies)				

## What actions will you take to mitigate any potential negative impacts?

Potential negative impact	Actions required to reduce/eliminate negative impact	Who will lead on action?	Timeframe

Where an impact on any of the Equality Groups is realised after the implementation of the project/service/policy, the commissioners and/or providers of the project/service/policy will seek to minimise the impact and carry out a full review of this EIA.

## 4. Monitoring and review

How will you monitor these actions?

When will you review this EIA? (eg in a service redesign, this EIA should be revisited regularly throughout the design & implementation)

## 5. Equality Statement

- All public bodies have a statutory duty under the Equality Act 2010 to set out arrangements to assess and consult on how their policies and functions impact on the 9 protected characteristics.
- Herefordshire Council will challenge discrimination, promote equality, respect human rights, and design and implement services, policies and measures that meet the diverse needs of our service, and population, ensuring that none are placed at a disadvantage over others.
- All staff are expected to deliver services and provide services and care in a manner which respects the individuality of service users, patients, carers etc, and as such treat them and members of the workforce respectfully, paying due regard to the 9 protected characteristics.

Signature of person completing EIA

Date signed