

**EQUALITY IMPACT ASSESSMENT (EIA)**

Before completing this form, please refer to the supporting guidance documents and consider the questions on page two. Where further guidance and/or support is needed, please do not hesitate to contact The EDI Centre – equality@imperial,ac.uk

The aim of an equality impact assessment (EIA) is to consider the equality implications of any change (e.g. new or revised policy, process, practice, project, function or service on different groups of staff, students, alumni and visitors). The EIA tool provides a simple framework that helps evaluate whether the change may inadvertently disadvantage protected characteristic and identify ways to proactively advance equality.

|  |  |
| --- | --- |
| Name of the change |  |
| Is this a new or existing policy/practice/project? |  |
| Project/policy/practice owner (person responsible for the change) |  |
| Person responsible for the EIA (maybe the same as above) |  |
| Faculty/Department/Division/Centre |  |
| Summary of aims and objectives of the change |  |
| Who is affected by the policy/decision/activity? |  |
| Date completed |  |

**Evidence & Engagement**

* What **evidence** has been used for this assessment? For example, national statistics or other benchmarking, Imperial statistics, staff survey, department lead surveys etc.
* Who, **across the protected characteristics,** have you **engaged and consulted with** as part of your assessment? How was the consultation carried out? How were the members selected?

**Questions to consider when evaluating the potential impact:**

Is it possible that the proposed change could discriminate or unfairly disadvantage people? The following questions may help you identify impact you could be thinking about:

Who gets to participate?

Who doesn’t get to participate?

Who is at an advantage?

Who is at a disadvantage?

Who will benefit?

Who won’t benefit?

Who can access?

Who can’t access?

| **Protected Characteristic** | **What degree of impact does the potential change have on the below characteristic (1-4 low) 5-6 (medium) 7-10 (high)** | | | | | | | | | | **What is a potential positive, neutral or negative impact?** | **Please explain and give examples of any evidence/data used** | **What action will be taken to address negative impact** | **By When and by Whom will this action be taken?** |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Age | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |  |  |  |  |
| Disability | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |  |  |  |  |
| Gender reassignment | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |  |  |  |  |
| Marriage or civil partnership | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |  |  |  |  |
| Pregnancy and maternity | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |  |  |  |  |
| Race | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |  |  |  |  |
| Religion or belief | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |  |  |  |  |
| Sex (gender) | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |  |  |  |  |
| Sexual orientation | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |  |  |  |  |
| Caring responsibilities | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |  |  |  |  |
| Socio-economic backgrounds | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |  |  |  |  |
| Intersectionality (include any other relevant information relating to the intersection of any of these protected groups) | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |  |  |  |  |

**Final Decision**

|  |  |  |
| --- | --- | --- |
| **Action** | **Tick box** | **Include any explanation/justification required** |
| 1. No barriers identified. **You decide to proceed with the change**. |  |  |
| 1. Data evidences bias towards one or more protected characteristics group(s). **You decide to stop the change at some point.** |  |  |
| 1. **You decide to adapt the change** in a way which you think will eliminate the bias |  |  |
| 1. Barriers and impact identified, however having considered all available options carefully, there appear to be no other proportionate ways to achieve the aim of the change (e.g. in extreme cases or where positive action is taken).   **You decide to proceed with caution** knowing that it may favour some people less than others, providing justification for this decision |  |  |

|  |  |  |
| --- | --- | --- |
| **Mitigation Action Planning** | | |
| **Issue Identified** | **Planned Action** | **Lead and Timeframe** |
|  |  |  |
|  |  |  |

If you have identified concerns in the final decision and you decide to adapt the change or proceed with caution please make a note of the issues identified and proposed mitigation actions to be taken, who will lead on the action and the proposed timeframe.

**Monitor & Review**

How will you monitor the impact of your policy/practice/project once it has been put into effect?

At which committee(s) have these considerations been discussed:

Will this EIA be published? If yes, where?

Review Date:

Sign off from owner of EIA:

Sign off from the Head of Department/Section/Service: