**Equality Impact Screening Form**

**This Equality Impact Screening Form will help you to decide whether a full Equality Impact Assessment (EIA) is required for the development or review of a service / policy / strategy / practice / plan (referred to collectively as a ‘policy’ in this form). Before completing the screening form, please refer to our Guidance on Equality Impact Assessments.**

|  |  |
| --- | --- |
| 1 | Name of policy |
|  |  |
| 2 | What are the aims and objectives of the policy? Please use no more than 100 words. |
|  |  |
| 3 | Who will be affected by the policy? For example, students, staff, PGRs, lab staff, contractors, visitors. |
|  |  |

|  |  |  |
| --- | --- | --- |
| 4 | Is it a new or revised policy? |  |
|  | **REVISED**  **NEW** | Go to Q5  Go to Q7 |
| 5 | Was an EIA carried out on the previous version? |  |
|  | **YES**  **NO** | Go to Q6  Go to Q7 |
| 6 | Does the revised policy include any elements not considered in the original EIA?  **YES**  **NO** | **Carry out a new EIA**  **Revise the existing EIA** |

|  |  |  |  |
| --- | --- | --- | --- |
| 7 | Could the new or revised policy have a negative effect on people with any of the following protected characteristics? | YES | NO |
|  | Age |  |  |
|  | Caring Responsibilities |  |  |
|  | Disability |  |  |
|  | Gender Reassignment |  |  |
|  | Marriage or Civil Partnership |  |  |
|  | Part time working |  |  |
|  | Pregnancy and Maternity |  |  |
|  | Race |  |  |
|  | Religion or Belief |  |  |
|  | Sex |  |  |
|  | Sexual Orientation |  |  |
|  | Socio-Economic background |  |  |

If you have answered YES to any of the above, **carry out an EIA**

If you have answered NO, go to Q8

|  |  |  |  |
| --- | --- | --- | --- |
|  |  | YES | NO |
| 8 | Have there been, or are there likely to be, any concerns about the policy from staff, students, visitors, contractors or members of the public? |  |  |
|  | Could the policy affect how services are commissioned or procured? |  |  |
|  | Could the policy affect our workforce or employment practices? |  |  |

If you have answered YES to any of the above, **carry out an EIA**

If you have answered NO, go to Q9

|  |  |  |  |
| --- | --- | --- | --- |
| 9 | Public Sector Equality Duty  Will the proposed changes contribute to: | YES | NO |
|  | Eliminating unlawful discrimination, harassment and victimisation |  |  |
|  | Advancing equality of opportunity |  |  |
|  | Fostering good relations |  |  |

If you have answered YES to any of the above, **carry out an EIA**

If you have answered NO to all of questions 7, 8 and 9 you might not need to complete an EIA. If the decision is taken not to complete and EIA, please give a brief reason.

|  |
| --- |
|  |

Please sign and retain a copy of the completed Screening Form for your records.

|  |  |
| --- | --- |
| Name |  |
| Title |  |
| Department |  |
| Date |  |

If you have any queries about this form or the EIA process, please contact the Equality and Inclusion Unit at [equality@leeds.ac.uk](mailto:equality@leeds.ac.uk)