The Equality Impact Matrix

**Essential Information**

1. Name of function or policy:

2. Is this function or policy: □ New □ Reviewed

3. Name of Officers completing this form:

4. Designation(s):

5. Date:

6. Who are the main beneficiaries of the function or policy?

7. Is the function or policy intended to increase equality of opportunity by permitting positive action or action to redress disadvantage?

□ Yes □ No

Give brief overview of policy:

**Impacts**

Which, if any, groups with protected characteristics could be affected by this function or policy? Rate with 1=low 5=high

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Protected Characteristic** | **Positive Impact (1-5)** | **Neutral Impact (0)** | **Negative Impact (1-5)** | **Cross Cutting Issue** |
| Age |  |  |  |  |
| Race |  |  |  |  |
| Beliefs/Religion |  |  |  |  |
| Gender |  |  |  |  |
| Transgender |  |  |  |  |
| Sexual Orientation |  |  |  |  |
| Disability |  |  |  |  |
| Pregnancy/Maternity |  |  |  |  |
| Marriage |  |  |  |  |
| **TOTALS** |  |  |  |  |

If Positive Impact scores <9 review to see if more positives can be gained.

Negative Impact scores: Band One (no further action) 0-9, Band Two (Contact Equalities Lead) 9-13, Band Three (Full EIA required) > 13

Positive impacts (Describe how the groups will be affected)

Negative impacts (Describe how the groups will be affected)