

## Equality Impact Assessment Form

**Department/Section:** HR&OD **Date of Assessment:** 07/12/2022

**Review Due:** Dec 2024

**Author/Owner:** Ian Bow

**Signature:** Ian Bow

**Date:** 16/11/22

### Step 1

Aim of proposed activity/decision/new or revised policy or procedure: Review of QUAL 126 Health Surveillance Policy as per guidelines	<b>New</b>	<input type="checkbox"/>
	<b>Revised</b>	<input type="checkbox"/>
	<b>Existing</b>	<input checked="" type="checkbox"/>

Who will be affected? Staff, students, visitors, contractors, members of the public	Who will be consulted? Health and Safety Committee	Evidence available: Review by Policy and Procedures Group of the Health and Safety Committee
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### Step 2

Potential Positive/Negative/Neutral Impact Identified. <b>P, N, N/I</b>	Age	Disability	Gender Reassignment	Marriage/Civil Partnership*	Pregnancy and Maternity	Race	Religion or Belief	Sex	Sexual Orientation
Eliminating Discrimination.	P	P	N/I	N/I	N/I	N/I	N/I	N/I	N/I
Advancing Equality of Opportunity.	P	P	N/I	N/I	N/I	N/I	N/I	N/I	N/I
Promoting Good Relations.	P	P	N/I	N/I	N/I	N/I	N/I	N/I	N/I

**Step 3** Action to be taken.

Summary of EIA Outcome – please tick	
No further action to be carried out.	<input checked="" type="checkbox"/>
Amendments or changes to be made.	<input type="checkbox"/>
Proceed with awareness of adverse impact.	<input type="checkbox"/>
Abandon process – Stop and Rethink.	<input type="checkbox"/>

<b>Date EQIA Approved:</b>	07/12/22	<b>Approved by:</b>	Sarah Wood, OD & EDI Adviser
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Please forward completed EIA forms by e-mail to  
pc.equality.perth@uhi.ac.uk  
HR/0100/HL/DS  
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