

To complete – press F11 to jump from field to field

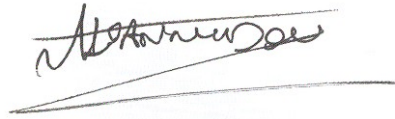
Equality Impact Assessment

Name of the business case,
SOP, SIP, project, service

ADC Appeals Process

File ref:	EIA/HR 3.11/020	Issue No:	1
Date of Issue:	15/06/09	Review date:	15/06/10
Risk assessment completed	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Environmental assessment completed	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

Approved by:



Part 6 Equality impact assessment improvement plan

The table below should be completed using the information from the equality impact assessment to produce an action plan for the implementation of the proposals to:

1. Lower the negative impact, and/or
2. Ensure that the negative impact is legal under anti-discriminatory law, and/or
3. Provide an opportunity to promote equality, equal opportunity and improve relations within equality target groups, ie increase the positive impact
4. If no actions [go to Part 7](#)

Please ensure that you update your service/business plan within the equality objectives/targets and actions identified below:

Area of concern	Actions required	Responsible person	Timescale	Resource implications	Comments
How effective the SOP is and monitoring systems in place	All appeals received to be logged and reviewed on an annual basis	Pauline Pellerito	Review in March 2010		

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Part 7 Equality impact assessment summary report

The results of equality impact assessments must be published. Please complete this summary, which will be used to publish the results of your impact assessment on the Service’s website, and return it to Business Support.

Date of assessment: 20.02.09

Manager(s) name: Pauline Pellerito **Role:** Senior HR Consultant

Business case, SOP, SIP, project or service, procedure, strategy or Service, that was impact assessed:

ADC Appeals Process

Summary of findings:

That applicants are treated fairly when appealing against personal outcomes through the ADC process in line with National Guidance.

Summary of recommendations and key points of action plan:

All appeals received to be logged and reviewed on an annual basis

Groups that this business case, SOP, SIP, project or service will impact upon *															
Race		Gender		Sexual Orientation		Age		Disability		Religion/ Belief		Other		All	
+	-	+	-	+	-	+	-	+	-	+	-	+	-	+	-
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	√	<input type="checkbox"/>

- This information should be transposed to the front page of the Business case, SOP, SIP, project or service/Procedural document

Date completed:	11/06/09	Signed by CFO	
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