

Tollcross Housing Association Equality Impact Assessment



Name of the policy to be assessed	Grievance Policy and Procedure	Is this a new policy or a revision?
Person(s) responsible for the assessment	Anne Fitzsimons, Corporate Services Director	Revised
<p>1. Briefly describe the aims, objectives and purpose of the policy / proposal</p>	<p>To provide a mechanism for addressing staff concerns in a fair and consistent manner. To make sure Tollcross Housing Association complies with its responsibilities within employment law and best practice.</p>	
<p>2. Who is intended to benefit from the policy / proposal? (e.g. applicants, tenants, staff, contractors)</p>	Staff	
<p>3. What outcomes are wanted from this policy / proposal? (e.g. the benefits to customers)</p>	<p>We want to make sure employees feel comfortable raising issues or disputes raised and know they will be looked at and resolved wherever possible.</p>	
<p>4. Which protected characteristics could be affected by the proposal? (tick all that apply)</p> <p><input type="checkbox"/> Age <input type="checkbox"/> Marriage & Civil Partnership <input type="checkbox"/> Disability <input type="checkbox"/> Race <input type="checkbox"/> Pregnancy/Maternity</p> <p><input type="checkbox"/> Gender <input type="checkbox"/> Religion or Belief <input type="checkbox"/> Gender Reassignment <input type="checkbox"/> Sexual Orientation</p>		
<p>5. If the policy / proposal is not relevant to any of the protected characteristics listed in part 4, state why and end the process here.</p> <p>We do not see this policy as having any direct impact upon the protected characteristics contained within the Equality Act 2010.</p>		

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<p>6. Describe the likely impact(s) the policy / proposal could have on the groups identified in part 4</p>	
<p>7. What actions are required to address the impacts arising from this assessment? (<i>This might include; collecting additional data, putting monitoring in place, specific actions to mitigate negative impacts.</i>)</p>	

Signed: _____
(Responsible for Policy Review)

(Job title): Corporate Services Director

Signed: _____
(Peer Review Confirmation)

(Job title): Chief Executive Officer

Date the Equality Impact Assessment was completed:

11th May 2020

Please attach the completed document as an appendix to your proposal report