

Tollcross Housing Association Equality Impact Assessment



Name of the policy to be assessed	Whistleblowing Policy	Is this a new policy or a revision?	Revision
Person(s) responsible for the assessment Anne Fitzsimons			
1. Briefly describe the aims, objectives and purpose of the policy / proposal	This policy is designed to enable employees to raise concerns internally and at a high level to disclose information that the individual believes shows malpractice or impropriety.		
2. Who is intended to benefit from the policy / proposal? (e.g. applicants, tenants, staff, contractors)	Staff, Committee, Customers, Contractors		
3. What outcomes are wanted from this policy / proposal ? (e.g. the benefits to customers)	We expect those who have serious concerns about any aspect of Tollcross Housing Association's work to come forward and speak up without fear of reprisal. This should give confidence to staff, Committee, contractors and ultimately customers about how we operate.		
4. Which protected characteristics could be affected by the proposal? (tick all that apply)	<input type="checkbox"/> Age <input type="checkbox"/> Marriage & Civil Partnership <input type="checkbox"/> Disability <input type="checkbox"/> Race <input type="checkbox"/> Pregnancy/Maternity <input type="checkbox"/> Gender <input type="checkbox"/> Religion or Belief <input type="checkbox"/> Gender Reassignment <input type="checkbox"/> Sexual Orientation		
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. We do not see this policy as having any direct impact upon the protected characteristics contained within the Equality Act 2010.			
6. Describe the likely impact(s) the policy / proposal could have on the groups identified in part 4	NA		

Tollcross Housing Association Equality Impact Assessment



7. What actions are required to address the impacts arising from this assessment? (This might include; collecting additional data, putting monitoring in place, specific actions to mitigate negative impacts).

NA

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: 9th September 2020

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