PLEASE ASSESS THE POTENTIAL IMPACT OF YOUR PROPOSAL ON THE FOLLOWING PROTECTED CHARACTERISTICS

Age		

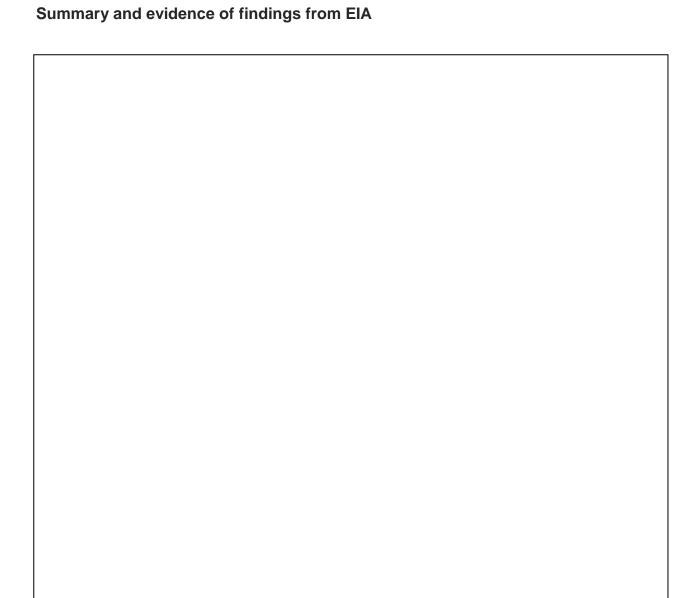
Gender Reassignment	
Marriage and Civil Partnership	
Pregnancy and Maternity	

Race			
	>	3 9 33	∜ V /

Religion or Beliefs

•	Sexual Orientation
	Please indicate any actions arising from completing this intial screening exercise
	1

Consulted people or groups
Informed people or groups



DATE: 11/10/2019

