

Gender Equality Plan

AI & TECH IP HOLDING, S.L. | Fiona Labs

Version 1.1 | 8 October 2026

1. Purpose, scope and responsibility

AI & TECH IP HOLDING, S.L. commits to equal opportunities, fair treatment and a professional environment free from sex- or gender-based discrimination, harassment and retaliation. This plan covers management and employees, and applies to contractors and other collaborators in work-related interactions within the company's authority. It includes remote work, meetings and professional events.

The plan is proportionate to a small company. Actions related to recruitment, promotion, research or teaching apply when the corresponding activity takes place. The company assesses its actual workforce and activities; directors and external collaborators are recorded separately from employees. Measures scale with the organisation's needs and applicable obligations.

The sole administrator holds overall responsibility and performs the GEP coordinator role. The administrator maintains the records, organises learning, checks progress and provides the necessary resources. Operational tasks may be delegated with a clear written assignment; accountability remains with management. A person involved in a complaint cannot investigate or decide that complaint.

Management commitment

By signing this plan, the sole administrator adopts its measures, assigns the dedicated time described in section 2 and commits to its implementation and publication. The effective date, referred to as T0, is the date of management signature. The plan remains in force until replaced, with a brief annual review and an indicator-based report at least every 24 months.

The company will publish the signed plan on <https://fiona-labs.com/> with a clear reference to AI & TECH IP HOLDING, S.L., and make it available without login. The coordinator retains the signed original, the publication date and the public link, checks access annually, and communicates the plan to everyone in scope within 10 working days of T0 or joining the company.

The plan sets organisational commitments. Applicable employment rights, consultation requirements, collective agreements and data-protection obligations remain fully applicable. Its adoption does not itself certify eligibility for a particular funding call.

Approval

For AI & TECH IP HOLDING, S.L.

Approving authority and GEP coordinator: Sole Administrator

Management signature and date:

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2. Resources, information and learning

P1. Public document and management accountability

The signed plan is the company's public policy. Management ensures its availability on the company website, communicates material changes and keeps a version history. A short annual check records whether the public link works, responsibilities remain clear and any measures require adjustment.

Indicator and evidence: signed plan, freely accessible public link and a dated communication record. Owner: sole administrator. Timing: publication following signature; communication within 10 working days; access check annually.

P2. Dedicated resources and equality competence

The company allocates 4 hours to initial setup, 6 coordinator hours per year for implementation, monitoring and review, and 2 learning hours per year for each employee and decision-maker, including the administrator. These allocations are a starting minimum; management provides additional time or support when justified by staffing, activities, identified gaps or incidents. Actual use and outstanding needs are recorded in a simple annual log.

The coordinator develops and maintains equality competence through structured learning based on European Commission and other authoritative equality resources. Within 30 days of T0, the coordinator records the learning route, relevant existing experience and any gaps requiring specialist input. Within 90 days, the initial learning is completed. Where an issue exceeds this competence, management arranges appropriate qualified advice, for example on equality, employment law or harassment. The arrangement, availability and scope are documented when made; public guidance is not treated as personalised expert advice.

The plan does not require a standing committee or a permanent external consultancy. Necessary expenditure is assessed and authorised through the company's ordinary management process. Management must address any resource or competence gap that prevents delivery, rather than treating the allocation of hours alone as proof of adequate expertise.

Indicator and evidence: dedicated hours, actual use, completed learning, competence assessment and any specialist-support arrangements. Owner: sole administrator. Timing: initial assessment within 30 days; annual review and additional assessment when a specific need arises.

P3. Proportionate data collection and monitoring

Within 30 days of T0, the coordinator records the actual workforce and roles, distinguishing employees, management and external collaborators. Collect lawful and necessary sex/gender-disaggregated personnel data, with the variable and source clearly defined. Where applicable, track recruitment, progression, learning and access to flexible working. Student data are included only if relevant to actual activities. Optional gender self-description includes non-response; gender is never inferred from a person's name or appearance.

Use a compact register: reporting period, indicator, numerator, denominator, data source, missing information and action. No activity or a zero denominator is recorded as such, not as a successful outcome. Review the register annually and produce an indicator-based report at least every 24 months, with corrective actions, owners and deadlines. Detailed personnel information remains restricted; public progress information, if provided, contains no identifying data.

Before collection, document purpose, lawful basis, access and retention. Keep complaint files separate. Do not collect intimate information or unnecessary personal attributes. For small groups, avoid published breakdowns or combinations that could identify individuals. Review retention annually and delete or anonymise data when no longer needed, subject to applicable legal requirements.

3. Learning and fair working practices

P4. Awareness and training

All employees and decision-makers, including the sole administrator, receive 2 hours of equality learning within 90 days of T0 and annually thereafter. Newcomers receive an introduction to the plan and reporting routes within 30 days, and complete the learning within 90 days of joining. Sessions may use structured online learning or a facilitated discussion with authoritative materials and a practical case.

The programme covers equal treatment and unconscious bias; recruitment, progression and work-life balance; harassment, reporting and retaliation; and sex/gender relevance in research and innovation. The coordinator schedules the session within 30 days of T0, keeps its agenda and materials, records actual attendance and uses a short comprehension exercise. Missed sessions are rescheduled within 30 days of the original deadline.

Owner: sole administrator. Target: 100% of employees and decision-makers complete learning within the applicable deadline. Evidence: dated programme, materials, completion record and follow-up actions. Future sessions are recorded as scheduled until delivered.

T1. Work-life balance and organisational culture

Objective: make work predictable and compatible with care responsibilities while preserving fair access to opportunities. Within 30 days of T0, management records reasonable availability expectations and meeting arrangements appropriate to the work. Routine replies outside agreed working time are not expected. Applicable leave, rest and accommodation rights are respected.

Requests for flexibility or adjustments are considered on objective operational grounds, without gender stereotypes or disadvantage for exercising protected rights. The administrator gives a reasoned response within 10 working days, or explains any necessary extension. Remote and part-time workers receive comparable access to relevant information, learning and development.

Owner: sole administrator. Timing: ongoing, with annual review. Indicators: requests and responses within target; issues concerning availability and access to opportunities; corrective actions. Target: every request receives an objective, recorded response. If no request occurs, record no activity.

T2. Leadership and decision-making

Objective: remove unjustified barriers to leadership opportunities. The plan does not impose a change to the company's ownership or a numerical quota for its governance body. Whenever a new management, advisory or project-lead role is created, define relevant competence criteria, seek a suitably diverse candidate pool where feasible, and document the reasons for selection.

Give fair consideration to development responsibilities and access to professional feedback. Decisions follow objective requirements and applicable law. Assess actual representation by role without claiming that a one-person management structure is gender-balanced.

Owner: sole administrator. Timing: before each relevant appointment; annual review of opportunities arising. Target: 100% of relevant appointments have criteria and a reasoned decision. Evidence: a short role and decision record; privacy-protected composition data where meaningful.

4. Recruitment, progression and research

T3. Equal opportunities in recruitment and progression

Objective: apply comparable criteria to comparable decisions. Before recruitment, promotion or a substantial change in responsibility, management defines the role requirements and assessment criteria. Job descriptions use inclusive language and avoid unnecessary restrictions. Interviews use comparable core questions and exclude irrelevant questions about pregnancy or family plans.

Assess remuneration and progression using objective responsibilities, experience and work of equal value. Review unexplained differences and agree any necessary correction in line with applicable law. Offer annual development feedback to employees. Where a second competent reviewer is available, use that review; otherwise retain a clear, reasoned decision and disclose conflicts of interest.

Owner: sole administrator. Timing: each decision, plus annual review. Targets: 100% of relevant decisions assessed against defined criteria; all employees offered development feedback. Evidence: concise criteria and decision records, feedback offered and corrective actions. No recruitment or promotion is required solely to meet a plan indicator.

T4. Gender dimension in research and learning content

Objective: consider whether sex or gender matters to the substance of a project, rather than assuming all technical work is neutral. Before a new research or innovation proposal, study or material protocol change, the project lead records a short relevance assessment. The administrator performs this role where no separate lead has been assigned.

For AI and technology activities, examine whether data representation, proxies, error patterns, access barriers or downstream effects could differ by sex or gender. Where relevant, define a lawful and proportionate analysis, its limitations and any mitigation. Where not relevant, record a project-specific explanation. Gender balance in the team does not replace analysis of the research content.

Review learning materials produced by the company for stereotypes and relevant sex/gender content before use. The assessment can be included in existing project documentation; a separate committee or parallel research process is not required. Data collection and experiments remain subject to their ordinary permissions and safeguards.

Owner: project lead, with management oversight. Timing: before each applicable proposal or protocol approval; annual check. Target: 100% of applicable activities have a documented relevance assessment and, where necessary, an analysis plan. Evidence: project record and any resulting action. If no relevant activity occurs, record that fact.

Recording and corrective action

Keep only the information necessary to explain decisions and assess the plan. Use existing business records where suitable, avoiding duplicate registers. Management considers feedback and any identified disparity, records a proportionate action and deadline, and checks its completion at the next review or sooner where the matter requires it.

5. Prevention, reporting and response

T5. Gender-based violence and sexual harassment

Objective: provide a respectful working environment and a fair response to concerns. Unwelcome sexual conduct, gender-based degrading behaviour, coercion, harassment and retaliation are prohibited in work-related settings, including online interactions. People may raise a concern without being required to resolve it informally first.

Primary route: contact the sole administrator privately, verbally or in writing, directly or through a representative of the person's choice. At induction, management communicates a direct professional contact and explains how to request a confidential meeting. Written correspondence may be addressed to the sole administrator at the company's registered office. Access to reports is limited to people who need the information to handle the matter fairly.

If the administrator is implicated, the person need not report to them. They may obtain independent legal or union assistance or contact the competent public authority directly. For matters within its remit, the Spanish Labour and Social Security Inspectorate provides a formal complaints route, linked in section 6. For immediate danger, use emergency services. These external routes remain available regardless of any company procedure.

For company fact-finding involving a conflict of interest, the company arranges an independent qualified person to handle the assessment. The implicated person must not investigate or determine the findings. Independent assistance is arranged for the case; no existing external appointment is implied by this plan. Applicable employment procedures and rights of representation are respected.

The recipient acknowledges a report within 3 working days, considers urgent protection promptly and explains the next steps within 10 working days. Where an inquiry continues, provide an update at least every 20 working days. These are company response targets and do not alter legal time limits. Record and explain delays.

Hear relevant parties fairly, protect evidence, avoid prejudging the outcome and do not require mediation. Consider proportionate interim protection without penalising the person reporting. Protect against retaliation and review for continuing concerns after closure. Communicate the reasoned outcome as appropriate, implement lawful corrective measures and explain available review or external routes. Confidentiality is need-to-know, not an absolute promise of secrecy.

Owner: sole administrator for prevention and resources; independent case handler for conflicted fact-finding. Targets: every report receives timely attention, conflict-free assessment and documented follow-up. Evidence: restricted case records, kept separately from ordinary GEP monitoring. The absence of reports is not used as proof that no harassment occurs.

6. Implementation and review

A compact implementation calendar

T0: management signs the plan, assumes coordination and commits the specified resources. Publish the signed document and record its public link and publication date. Within 10 working days: communicate the plan and reporting routes to personnel.

Within 30 days: establish the workforce baseline and privacy arrangements, assess coordinator competence, schedule the learning session and record working-practice expectations. Within 90 days: complete the first learning session. Apply the recruitment, leadership and research procedures whenever the corresponding activity arises.

Every 12 months: conduct a brief review of actions, personnel scope, resources, training, opportunities and any gaps. Every 24 months at the latest: complete a dated indicator-based report and review the plan as a whole. Review sooner following material organisational change, a serious concern or a new legal requirement.

Review record

The report records the period, actual organisational scope, indicator values and denominators, unavailable data, measures completed or overdue, time used, learning completed, relevant feedback and corrective actions with an owner and deadline. Management records its conclusions and the next review date. Cases and personal data remain in separate restricted records.

Where no recruitment, promotion or relevant research took place, record no activity and retain the procedure for future use. Where an action is overdue, explain and remedy the gap without rewriting the original deadline. Publication of personal statistics or an annual public report is not required by this plan.

References

European Commission: Gender equality in research and innovation, “Gender Equality Plans”. Four process requirements and five recommended thematic areas; reporting at least every two years. Consulted 8 October 2026.

https://research-and-innovation.ec.europa.eu/strategy/strategy-research-and-innovation/democracy-and-rights/gender-equality-research-and-innovation_en

Horizon Europe Programme Guide, v5.1, 15 September 2025, section 9, pp. 16-20. Institutional equality and the gender dimension of research content are distinct.

https://ec.europa.eu/info/funding-tenders/opportunities/docs/2021-2027/horizon/guidance/programme-guide_horizon_en.pdf

Spanish Labour and Social Security Inspectorate: official information on complaints and reporting routes. An informal mailbox communication is distinct from a formal complaint. Consulted 8 October 2026.

https://www.mites.gob.es/itss/web/en/Atencion_al_Ciudadano/DENUNCIA/