

School Name	Responsible Decision Maker	Completed by	Date and Version Number	Review
Highfield St Matthew's CE Primary	Mrs A. Barron	Mrs D. Wynne – School Business Manager Mrs A. Barron - Headteacher	15 th July 2020 Version 2.0	Based on full opening of school to all year groups from 1st September 2020. The effectiveness of this plan will be reviewed on March 2021

Title

Full opening of Highfield St Matthew's CE Primary (*whilst coronavirus is circulating when there is no known treatment or vaccine*) from 1st September 2020.

Description and Overview

Phase 1 – School has been open to children of critical workers and those who are classed as vulnerable since Monday, 26th March 2020.

Phase 2 – School reopened to specific year groups on 22nd June 2020. Plans included robust risk assessments, staff surveys, parent surveys, consultation, Health and Safety site visits and scientific guidance and advice.

Phase 3 - School to plan for full re-opening to all year groups from 1st September 2020 with robust risk assessments and reopening plans amended to reflect the changes required along with full consultation on all amended/updated documentation.

Overview

The Trust's response to COVID-19 has been to engage (internally and externally), prepare (readiness and resilience) and respond (to government guidance, scientific advice and local concerns). The Trust has also considered accessibility, community cohesion, delivery of contracts, Human Rights Act, positive action, procurement, reasonable adjustments, Health and Social Care Act 2012 and Carer Act 2014 (*this list is not intended to be exhaustive*). It has been important to evaluate the negative impact school closure as a result of COVID-19 has had on each of the protected characteristics – the disproportionate effect could be in terms of mental health, safeguarding, educational disadvantage ...; therefore those negatives become positives as schools re-open (eg removing educational disadvantage specifically relating to COVID-19 lockdown/school closure).

The Board of Directors has considered the full opening of schools to all year groups (Phase 3). The Trust has the safety of staff, pupils and wider school community at the forefront of any decision made. It must be satisfied that risks within schools have been mitigated and risk of COVID-19 locally is at a safer level as defined by scientific advice and guidance. This Equality Impact Assessment will be frequently reviewed to ensure it remains fit for purpose.

The Government announced on the 2nd July 2020 that in September 2020, all schools in England are expected to fully reopen and welcome back pupils in every year group. Schools are being asked to keep children in class or year group "bubbles" and encourage older children to keep their distance from each other and staff where possible.

The aim now is to reduce the number of transmission points by minimising contact and schools must consider the potential impact of this plan on each of the protected characteristics in relation to the general duty to:

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1. Eliminate discrimination, harassment and victimisation.
2. Advancing equality of opportunity between people who share protected characteristics and those who don't share it.
3. Foster good relations between people who share a protected characteristic and those who don't.

IMPACT / CONSULTATION

Does the proposal have a direct impact on people?	Yes – the plans to re-open schools fully in September 2020 will have a direct impact on people.			
Has the school conducted a consultation?	<p>The school has undertaken consultation relating to the wider re-opening of school (Phase 2) and full re-opening (Phase 3) and has taken on board comments and concerns received. Those consulted include staff, parents, governors, directors, unions and local authority. The school has sent letters to parents, surveyed staff, e-mailed the school's re-opening plans and risk assessments to governors, LDST and placed on website.</p> <p>This document has been initially completed on 15th July 2020 (V2.0) and will be sent for consultation. All comments and concerns will be reviewed and where appropriate the document will be amended. Information regarding consultation will be detailed below and, where appropriate, anonymised evidence will be embedded or included as a link in the "Evidence" box below.</p> <p><i>Note: should evidence of consultation contain personal information or the information when pieced together can identify an individual, the information will not form part of this publicly available document.</i></p>			
Equality Impact Assessment Consultation	Groups consulted	Extent of consultation	Feedback	Evidence
	<ul style="list-style-type: none"> • [Local Authority] • Unions] • Parents] • Staff] • Directors] • Governors] 	Placed on website	No feedback given	N/A

1. AGE

Is there any potential positive impact?	Is there any potential negative impact?	What evidence do you have?	What action will you take to mitigate negative impact?	How will you monitor and review the actions taken to mitigate negative impact?
YES	YES			
<p>Pupils</p> <p>Some young children may not see that they are at risk and may not keep themselves or others safe – returning to school will give them</p>	<p>Pupils</p> <p>Experiencing separation issues after being at home for a significant period.</p>	<p>Pupils</p> <p>AGE RANGE: 3-11</p> <p>Age ranges of pupils attending school during lockdown (Phase 1 and Phase 2): 3-11</p>	<p>Age appropriate literature and resources to support the mental health of pupils.</p> <p>Age appropriate literature (posters/guidance) positioned throughout school to help</p>	<p>Keep all documentation, process and procedures under review - SLT / Governors / CEO / Directors / H&S Consultants)</p> <p>Facilitate feedback from staff and parents and use the</p>

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<p>greater support and pastoral care.</p> <p>Some children may not have access to accurate news and information and/or may become overwhelmed by false news – school has accurate information it can share in an age-appropriate manner.</p> <p>Online safety risks for children of all ages may increase as those that are isolated seek more interaction online – returning to school with their peers will provide the interaction some children crave.</p> <p>Children of all ages will benefit from a return to school – teachers teaching, routines re-established, mental health and pastoral support and social interaction with peers.</p> <p>Staff</p> <p>Returning to work and able to do the job they have been trained to do will have a positive impact on staff of all ages but particularly older staff who may have found working from home a difficult adjustment.</p>	<p>Worrying about not being able to follow or understand the control measures in place.</p> <p>School not being the same as it was before lockdown and the impact this may have (toys removed, different class teacher etc)</p> <p>Staff</p> <p>Disproportionate effect of coronavirus on people over 50 (health effects and more likely to be asked to shield).</p> <p>Staff concerned about lack of social distancing due to their role in school and the risk of catching the virus – impact on them and family members who may be extremely clinically vulnerable (this may be a bigger issue for older members of staff).</p> <p>Some staff may not be able to return to work and consequently feel even more isolated (a feeling of isolation may be exacerbated as their colleagues reconnect).</p>	<p>Total school capacity for considering staff availability: 488</p> <p>Staff</p> <p>AGE RANGE: 23-66</p> <p>Staff over 50: 23 Staff over 65: 1 Staff over 75: 0</p> <p>Internal Evidence</p> <p>Parent and staff surveys, staff meetings, consultation, scientific advice and guidance have all been used to inform next steps.</p> <p>External Evidence</p> <p>Current evidence that those aged over 55 of BAME ethnicity, particularly those with morbidities, may be associated with increased vulnerability.</p> <p>There is evidence that the risks from coronavirus increase as people age:</p> <ul style="list-style-type: none"> • According to the ONS the majority of deaths involving COVID-19 have been among people aged 65 years and over (39,025 out of 43,837), with 47% (18,263) of these occurring in the over-85 age group. 	<p>children understand what they are required to do (new rules).</p> <p>The school safeguarding and pastoral teams mobilised to regularly monitor and support all pupils identified as vulnerable, both in school and remotely.</p> <p>Policies amended to allow for a range of needs across school (reviewing current practice and adapting where necessary).</p> <p>Risk assessment for staff who are clinically vulnerable.</p> <p>Staff inset/training (re-induct staff who may have been isolating since March 2020).</p> <p>Staff who received a letter advising them to shield can return to work as long as they maintain social distancing. School will endeavour to allow these staff to work remotely where possible or in a role within the school where social distancing is possible.</p> <p>Ensure any staff and pupils still at home, do not feel excluded due to their peers/colleagues returning to school; ensure a support structure is in place as being at home when others are back may exacerbate mental health issues and loneliness.</p> <p>Use feedback from consultations to inform the school re-opening plan and risk</p>	<p>information to inform good practice (eg pulse surveys)</p> <p>Ongoing review based on scientific, H&S and government advice.</p> <p>Ensure all control measures are implemented and followed – frequent SLT learning walks to support staff and pupils.</p> <p>Consider good practice adopted by other trust schools via the Headteacher forum.</p> <p>Outcomes for protected groups are monitored according to risk and all actions documented for review.</p>
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<p>Not having the usual structure and familiarity may have been difficult particularly for older staff.</p> <p>Reconnecting with colleagues will have a positive impact on the wellbeing of staff particularly older staff who may live by themselves or providing care for others.</p> <p>Some older staff may have struggled adapting to new technology needed to enable them to work at home and communicate with others – returning to school will provide a more familiar environment albeit with control measures in place.</p>	<ul style="list-style-type: none"> According to the <u>Intensive Care National Audit and Research Centre (ICNARC)</u> 78% of patients admitted to ICU are over 50. 58% are between 50 and 69. The <u>Labour Force Survey</u> suggests that 87.2% of primary aged pupils live in households where no one is over the age of 50. Meanwhile, 7.3% of primary pupils live with someone aged 50 to 59 years and 1.7% live with someone aged 70 years and over. <p>National data: <u>Age UK</u>, <u>ONS</u>, <u>Equality and Human Rights Commission</u></p>	<p>assessments (opinions of all stakeholders considered).</p> <p>PPE for staff with clear guidelines in relation to how to put it on (staff may feel vulnerable in certain situations where social distancing is difficult, eg first aid).</p> <p>Raise awareness and promote test, track and trace.</p> <p>Behaviour policies adapted to reflect the new guidelines and communicated to pupils in an easy to understand manner (teachers to explain expectations regularly) – encouraging social distancing and good hygiene.</p> <p>Control measures implemented – social distancing, good hygiene, frequent cleaning.</p> <p>Plans in place to offer remote education to pupils who are self-isolating.</p>
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2. CARER'S STATUS

A carer is "somebody who provides support or who looks after a family member, partner or friend and who needs help because of their age, physical or mental illness or disability" (Care Act 2014).

Is there any potential positive impact?	Is there any potential negative Impact?	What evidence do you have?	What action will you take to mitigate negative impact?	How will you monitor and review actions taken to mitigate negative impact?
YES	YES			
<p>Pupils who are carers will resume education and receive pastoral support from school as well as having a degree</p>	<p>Pupils and staff who are carers may feel anxious about separating from those they care for and worry</p>	<p>Pupils Number of pupils in school who are young carers: 1</p> <p>Staff</p>	<p>The school safeguarding and pastoral teams mobilised to regularly monitor and support all pupils, both in school and remotely.</p>	<p>Liaise with organisations and agencies (incl LA) that support carers in the local community to ensure action taken by school is adequate and</p>

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<p>of respite from their caring role.</p> <p>Staff who are carers have an opportunity to return to work and continue undertaking the work they enjoy (some staff may have felt isolated)</p>	<p>about exposing them to the virus.</p> <p>Pupils and staff who are carers may have taken on extra responsibilities during lockdown and the person they were caring for may not have access to their usual support.</p> <p>Pupils and staff who are carers may have increased mental health concerns.</p> <p>Pupils and staff who are carers may be more likely to have suffered bereavement or increased trauma during lockdown.</p> <p>Staff who are carers may have moved further away to take care of family members and therefore may find it more difficult to get to work (particularly if they rely on public transport).</p> <p>Staff may have moved family members into their own homes prior to lockdown to provide care. The "cared for" may no longer be near their usual support network once the carer returns to work.</p>	<p>How many staff who are returning to work are carers? 0</p> <p>Internal Evidence Parent and staff surveys, staff meetings, consultation, scientific advice and guidance have all been used to inform next steps. See COVID-19 file.</p> <p>Consideration Some local authorities in the North West of England have a high propensity of people who are "carers" and in turn schools must also consider those who are "cared for" when making decisions.</p> <p>Useful links</p> <p>Carers UK NHS Social Care and Support Guide</p> <p>Knowsley Carers Centre Liverpool Carers Centre Sefton Carers Centre St Helens Carers Centre Warrington Carers Centre Wigan Carers Centre</p> <p>Young Carers – Knowsley Young carers - Sefton Young careers – St Helens Young carers – Warrington Young carers – Wigan Young carers - Liverpool</p> <p>Research (Carers Week)</p> <p>4.5 million additional people caring for older, disabled or</p>	<p>School will allow a young carer to use a mobile phone to contact home during lunch/break time giving peace of mind for the carer and cared for.</p> <p>Control measures implemented including PPE (including training), social distancing protocols, increased hand washing/sanitising and more regular cleaning.</p> <p>Provide all contact information for local groups that can support carers and their families (many included within this impact assessment).</p> <p>Staggered start and finish times.</p> <p>Plans in place to offer remote education to pupils who are self-isolating.</p> <p>Discuss with staff any work from home options whilst ensuring they still feel connected with school.</p> <p>Remind staff of the services school provides to support them i.e SAS insurance, SLT support, professional Union helplines</p> <p>Ensure home learning packs and online resources (including providing equipment where necessary) are available to</p>	<p>supportive – Headteacher to review.</p> <p>Keep all documentation, processes and procedures under review - SLT, Governors, CEO, Directors, H&S Consultants.</p> <p>Facilitate feedback from staff and parents and use the information to inform good practice (eg pulse surveys)</p> <p>Ongoing review based on current scientific and government advice.</p> <p>Ensure all control measures are implemented and followed – frequent SLT learning walks to support staff and pupils.</p> <p>Consider good practice adopted by other trust schools via the Headteacher forum.</p> <p>Outcomes for protected groups are monitored according to risk and all actions documented for review.</p>
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		seriously ill relatives or friends since the COVID-19 pandemic.	those pupils unable to return from 1 st September 2020.	
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3. DISABILITY

Is there any potential positive impact?	Is there any potential negative Impact?	What evidence do you have?	What action will you take to mitigate negative impact?	How will you monitor and review actions taken to mitigate negative impact?
YES	YES			
<p>Pupils</p> <p>Being in school with qualified staff will be more beneficial for pupils who require additional support or have an EHCP.</p> <p>Many children require structure and a return to school will provide that - the longer they are without it the harder it will be for them to readjust when they eventually return.</p> <p>There will be an increase in appropriate activities that will further develop their understanding.</p> <p>A number of children have already accessed school provision throughout lockdown but it is expected that this number will increase and there positive benefits shared</p>	<p>Staff are likely to be concerned about the disproportionate effect of coronavirus on individuals with certain existing health conditions such as diabetes and COPD.</p> <p>This will be a concern to some pupils too but it is understood that children are less affected.</p> <p>Pupils and staff may worry about those they live with that have a disability/classified as vulnerable and the potential of them spreading the virus to these individuals when they return home.</p> <p>Staff who have been isolating are likely to be apprehensive about coming back to work and concerned about control measures being robust enough. For those that continue to</p>	<p>Pupils – Disability There are 1 pupils in school with a disability 0 having attended school during lockdown (Phase 1 and Phase 2)</p> <p>Pupils – EHCP There are 5 pupils in school with an EHCP with 3 having attended school during lockdown (Phase 1 and Phase 2)</p> <p><i>Note: School has been in regular contact with pupils and parents/carers during lockdown and will continue to do so for those unable to return to school.</i></p> <p>Staff School has had 1 staff declare themselves as having a disability.</p> <p>The number of staff with a disability that makes them more vulnerable to the effects of COVID-19 is 1</p> <p>School has 1 members of staff shielding.</p>	<p>School will provide priority support to those with a disability and will ensure that all reasonable adjustments to enable staff and pupils to return to school has taken place.</p> <p>The measures will need to be sustainable with regular feedback to see whether the interventions are working.</p> <p>This will include:</p> <ul style="list-style-type: none"> • Adapting policies and providing reassurance • Accessing new public health measures including but not limited to PPE (including training), protocols for social distancing and hand washing • Increased cleaning of frequently touched surfaces • Assessing suitability of important information and making sure they are appropriately worded (<i>eg for those who may have difficulty understanding</i>) • Ensuring documentation and information is accessible to all (eg Braille) 	<p>Monitor for new medical conditions - eg anxiety, mental health issues, that have developed during lockdown. School to frequently survey staff and parents/pupils.</p> <p>Keep all documentation, processes and procedures under review - SLT, Governors, CEO, Directors, H&S Consultants</p> <p>Facilitate feedback from staff and parents and use the information to inform good practice (eg pulse surveys)</p> <p>Ongoing review based on scientific, H&S and government advice.</p> <p>Ensure all control measures are implemented and followed – frequent SLT learning walks to support staff and pupils.</p> <p>Consider good practice adopted by other trust schools via the Headteacher forum.</p>

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<p>Staff who may have struggled with isolation, exacerbating anxiety and other mental health issues, may benefit from a return to work with the structure and distractions it affords (<i>subject to control measures in place</i>)</p>	<p>work from home a feeling of isolation may be exacerbated as others reconnect.</p> <p>Pupils that require intimate/personal care may be concerned about lack of social distancing and may be frightened if staff wear PPE.</p>	<p>Internal Evidence Parent and staff surveys, staff meetings, consultation, scientific advice and guidance have all been used to inform next steps. See COVID-19 file.</p> <p>External Evidence According to the ONS at the end of April 2020, 90% of people who died with Covid-19 had at least one underlying health condition. 10% of people who died with Covid 19 also had Ischaemic heart diseases, diabetes and respiratory conditions such as asthma and COPD which are also listed as high co-morbidity factors.</p> <p>Disability Rights UK</p>	<ul style="list-style-type: none"> Staggered school start and finish times <p>Raise awareness and promote test, track and trace.</p> <p>Staff who received a letter advising them to shield can return to work as long as they maintain social distancing. School will endeavour to allow these staff to work remotely where possible or in a role within the school where social distancing is possible.</p> <p>Plans in place to offer remote education to pupils who are self-isolating.</p> <p>Ensure home learning packs and online resources (including providing equipment where necessary) are available to those pupils unable to return from 1st September 2020.</p>	<p>Outcomes for protected groups are monitored according to risk and all actions documented for review.</p>
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4. GENDER

Is there any potential positive impact?	Is there any potential negative Impact?	What evidence do you have?	What action will you take to mitigate negative impact?	How will you monitor and review actions taken to mitigate negative impact?
YES	YES			
<p>Pupils</p> <p>All pupils will benefit from the positive impact associated with returning to school (structure, teachers teaching, reconnecting with friends).</p>	<p>Staff There is a disproportionate effect of coronavirus on adult males.</p> <p>Staff who are pregnant may not be able to return to work due to shielding and may feel</p>	<p>Pupils The school has 242 boys and 246 girls in school.</p> <p>Staff The school employs 5 male and 58 female members of staff.</p> <p>Internal Evidence</p>	<p>School will ensure that all reasonable adjustments have taken place.</p> <p>The measures will need to be sustainable with regular feedback to see whether the interventions are working.</p>	<p>Keep all documentation, processes and procedures under review - SLT, Governors, CEO, Directors, H&S Consultants</p> <p>Facilitate feedback from staff and parents and use the</p>

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<p>Boys will benefit from a return to school - education outcomes are different for boys and girls; the longer schools are closed the bigger the gap may become.</p> <p>Period poverty may be an issue for some girls. Returning to school will give them access to sanitary wear that may not have been available at home.</p> <p>A return to school may benefit girls who could be at increased risk of forced marriage, FGM and abuse during school closure.</p>	<p>separated and isolated as their colleagues return to work (a feeling of isolation may be exacerbated as others reconnect).</p> <p>Pupils – older girls who are pregnant may not be able to return to school due to shielding and may feel separated and isolated as their friends return to school. If they return to school, they may become anxious about social distancing measures.</p>	<p>Parent and staff surveys, staff meetings, consultation, scientific advice and guidance have all been used to inform next steps. See COVID-19 file.</p> <p>External Evidence It is still the case that women are more likely to be in caring roles, therefore if there is a negative impact for carers it will also affect women more.</p> <p>Women are more likely to be working in education settings, more likely to be heading single parent households and those more likely to be working part time and managing care for pupils.</p> <p>Pregnant mothers and those with young babies – who may be more limited in how they can work (staff) and how they access services and support children (parents).</p> <p>If there is a return to a reduced in-school timetable (Phase 1 or Phase 2), there will be an impact on families, parents and carers; working families, single-parent families and disadvantaged families in this context, recognising that females may feel this impact most.</p> <p>71% of patients hospitalised with covid-19 at the end of May were male (ICNARC); according</p>	<p>Policies will be adapted where required.</p> <p>Contractual concerns will be discussed with HR Consultants (<i>eg sickness absence, maternity leave</i>).</p> <p>Individual Risk Assessments will be conducted when required.</p> <p>Pregnant staff can return to school but will be offered the safest available on-site roles with a specific risk assessment. If none is available, then they should stay home and work from there.</p> <p>Public health measures including but not limited to PPE (including training), protocols for social distancing and hand washing as well as increased cleaning of frequently touched surfaces will be implemented.</p> <p>School will implement staggered school start and finish times where appropriate to do so for staff and pupils.</p> <p>Raise awareness and promote test, track and trace.</p> <p>Plans in place to offer remote education to pupils who are self-isolating.</p> <p>Ensure home learning packs and online resources (including</p>	<p>information to inform good practice (eg pulse surveys)</p> <p>Ongoing review based on scientific, H&S and government advice.</p> <p>Ensure all control measures are implemented and followed – frequent SLT learning walks to support staff and pupils.</p> <p>Consider good practice adopted by other trust schools via the Headteacher forum.</p> <p>Outcomes for protected groups are monitored according to risk and all actions documented for review.</p>
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		<p>to the ONS 56% of all coronavirus deaths are males. The government report "COVID-19: review of disparities in risks and outcomes" states that "risk of dying among those diagnosed with COVID-19 was also higher in males than females.</p>	<p>providing equipment where necessary) are available to those pupils unable to return from 1st September 2020.</p>
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5. GENDER IDENTITY

Is there any potential positive impact?	Is there any potential negative Impact?	What evidence do you have?	What action will you take to mitigate negative impact?	How will you monitor and review actions taken to mitigate negative impact?
YES	YES			
<p>Because of the lockdown, some pupils and staff who have declared their gender identity (but more particularly the young) may be confined in family situations where they are at risk of homophobia, homophobic abuse and violence which could have an impact on their mental health. There are benefit for pupils returning to school for whom school is their only safe space.</p>	<p>Consideration needs to be given to the potential negative impact of schools re-opening on both pupils and staff who identify as a gender different to the one they were assigned at birth. There is a disproportionate effect of coronavirus on adult males and it is not yet known if there are differences in health outcomes for female to male transition or male to female transitions.</p>	<p>There is no evidence, yet, that people who identify as having a different gender identity are disproportionality affected in terms of experiencing the coronavirus because of their gender identity.</p> <p>External Evidence Research focusing on LGBT+ youth by The Trevor Project, finds that the Coronavirus will have a "significant social impact on this already vulnerable community."</p>	<p>All staff and pupils will access new public health measures including but not limited to PPE, protocols of social distancing and hand washing.</p>	<p>Keep all documentation, processes and procedures under review - SLT, Governors, CEO, Directors, H&S Consultants</p> <p>Should any negative impact be identified that specifically relates to this protected group, the school will update and consider further mitigating steps required</p> <p>Outcomes for protected groups are monitored according to risk and all actions documented for review.</p>

6. OFFENDING PAST

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Is there any potential positive impact?	Is there any potential negative Impact?	What evidence do you have?	What action will you take to mitigate negative impact?	How will you monitor and review actions taken to mitigate negative impact?
YES	NO			
<p>A positive benefit for pupils returning to school could be that school is their only safe space.</p> <p>The school has Safeguarding Policies and meetings with external agencies that can support those at risk.</p> <p>School does not have any pupils from an offending past.</p>		<p>Consideration Some local authorities have an above average number of offenders. Some LDST schools may be located within some of these areas and will need to ensure strategy and policy development does not unfairly/ adversely affect this section of the local demographic.</p>	<p>No action required – no negative impact currently identified.</p>	<p>Keep all documentation, processes and procedures under review - SLT, Governors, CEO, Directors, H&S Consultants</p> <p>Outcomes for protected groups are monitored according to risk and all actions documented for review.</p>

7. SEXUAL ORIENTATION

Is there any potential positive impact?	Is there any potential negative Impact?	What evidence do you have?	What action will you take to mitigate negative impact?	How will you monitor and review actions taken to mitigate negative impact?
YES	NO			
<p>Because of the lockdown, some LGBT+ pupils and staff (but more particularly the young) may be confined in family situations where they are at risk of homophobia, homophobic abuse and violence which could have an impact on their mental health. There are benefits for pupils returning to school for whom school is their only safe space.</p>		<p>There is no evidence, yet, that people who identify as Lesbian, Gay or Bisexual are disproportionality affected in terms of experiencing the coronavirus because of their sexual orientation.</p> <p>Research focusing on LGBT+ youth by The Trevor Project, finds that the Coronavirus will have a "significant social impact on this already vulnerable community."</p>	<p>No action required.</p>	<p>Keep all documentation, processes and procedures under review - SLT, Governors, CEO, Directors, H&S Consultants</p> <p>Should any negative impact be identified that specifically relates to this protected group, the school will update and consider further mitigating steps required.</p> <p>Outcomes for protected groups are monitored according to risk and all</p>

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				actions documented for review.
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8. RACE (including Gypsies and Travellers)

Is there any potential positive impact?	Is there any potential negative Impact?	What evidence do you have?	What action will you take to mitigate negative impact?	How will you monitor and review actions taken to mitigate negative impact?
YES	YES			
<p>Pupils BAME pupils will benefit from a return to school as education outcomes are different.</p> <p>Pupils who have English as an additional language will find it easier to access learning from school as additional resources will be available.</p> <p>Parents/Carers may have English as an additional language and have had trouble supporting their child's education at home.</p>	<p>Pupils/Staff There will be a negative impact including the disproportionate effect of COVID-19 on people from a BAME background.</p> <p>Parents/carers whose first language is not English may find it more difficult to access online learning and help pupils unable to return to school.</p> <p>There will be increased anxiety for people from a BAME background returning to work - the possibility of taking the virus home with them to family members who will also be at an increased risk of the</p>	<p>Pupils The school has 9 pupils from a BAME background.</p> <p>Staff The school employs 0 male and 1 female members of staff from a BAME background.</p> <p>External Research/Surveys: Early figures on the incidence of Covid-19 showed that <u>35% of almost 2,000 patients in intensive care units</u> were black or from another minority ethnic background, despite BAME people making up only 14% of the population, according to the last census.</p> <p>According to <u>(ICNARC)</u>: 33% of patients hospitalised with Covid-19 are from a BME background; this is compared</p>	<p>Risk assessments that specifically consider the physical and mental health of BAME staff and pupils.</p> <p>School will ensure that all reasonable adjustments have taken place.</p> <p>The measures will need to be sustainable with regular feedback to ensure the interventions are working.</p> <p>Consider the safest possible roles for BAME staff or, if none are available, alternative work that could be delivered from home.</p> <p>Raise awareness and promote test, track and trace.</p> <p>School acknowledges that there are very different outcomes for</p>	<p>Keep all documentation, processes and procedures under review - SLT, Governors, CEO, Directors, H&S Consultants</p> <p>Facilitate feedback from staff and parents and use the information to inform good practice (eg pulse surveys)</p> <p>Ongoing review based on scientific, H&S and government advice.</p> <p>Ensure all control measures are implemented and followed – frequent SLT learning walks to support staff and pupils.</p> <p>Consider good practice adopted by other trust schools via the Headteacher forum.</p>

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	<p>disproportionate effect of COVID-19 but who may also have other vulnerabilities (including the elderly).</p> <p>There will be increased anxiety for people from a BAME background due to strict social distancing requirements being lifted. This will affect pupils, staff and their families.</p>	<p>to 22% of the population being from a BME background.</p> <p>According to the <u>ONS</u> "When taking into account age in the analysis, Black males are 4.2 times more likely to die from a COVID-19-related death and Black females are 4.3 times more likely than White ethnicity males and females."</p> <p>The government report "<u>COVID-19: review of disparities in risks and outcomes</u>" states that "risk of dying among those diagnosed with COVID-19 was higher in those in Black, Asian and Minority Ethnic (BAME) groups than in White ethnic groups. These inequalities largely replicate existing inequalities in mortality rates in previous years, except for BAME groups, as mortality was previously higher in White ethnic groups".</p> <p>A <u>Department for Education</u> spokesman said schools should be "especially sensitive to the needs and worries of BAME staff, parents and pupils", and consider if measures need to be put in place to address them.</p>	<p>BAME people with regards to COVID-19 and will work closely with BAME staff, parents/carers and pupils to ensure the correct safeguards are in place. This will include:</p> <ul style="list-style-type: none"> • Risk assessments that specifically consider the physical and mental health of BAME staff and pupils • Adapting policies and providing reassurance • Accessing new public health measures including but not limited to PPE (incl training), protocols for social distancing and hand washing • Increased cleaning of frequently touched surfaces • Assessing accessibility and suitability of important information and making sure they are appropriate (<i>eg translation</i>) • Staggered school start and finish times <p>Plans in place to offer remote education to pupils who are self-isolating.</p> <p>Ensure home learning packs and online resources (including providing equipment where necessary) are available to those pupils unable to return from 1st September 2020.</p>	<p>Outcomes for protected groups are monitored according to risk and all actions documented for review.</p> <p><i>Note: keep updated with latest developments including but not limited to the link between Vitamin D deficiency and COVID-19. Schools may need to urge BAME staff to have a Vitamin D test.</i></p>
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9. RELIGION AND BELIEF

Is there any potential positive impact?	Is there any potential negative Impact?	What evidence do you have?	What action will you take to mitigate negative impact?	How will you monitor and review actions taken to mitigate negative impact?
YES	NO			

<p>A positive impact will be schools re-opening to both pupils and staff mixing with those that have different religions, beliefs and culture – continuing to broaden knowledge and awareness of world religions giving support to those that may have suffered loss during the lockdown.</p> <p>In school pupils are taught and encouraged to develop an understanding of various religions and schools do their best to celebrate religious festivals which could be continued in a small way within each POD/Class.</p>		<p>There is no evidence, yet, that people with different religions or beliefs are disproportionality affected in terms of experiencing the coronavirus because of their religion or belief.</p>	<p>Not currently applicable.</p>	<p>Keep all documentation, processes and procedures under review - SLT, Governors, CEO, Directors, H&S Consultants</p> <p>Outcomes for protected groups are monitored according to risk and all actions documented for review.</p> <p><i>Note: when vaccines for COVID-19 are available, they may not comply with the requirements of some religions and therefore those pupils and staff may still remain vulnerable although could benefit from herding immunity.</i></p>
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10. SOCIAL ECONOMIC STATUS AND CHILD POVERTY

Is there any potential positive impact?	Is there any potential negative impact?	What evidence do you have?	What action will you take to mitigate negative impact?	How will you monitor and review actions taken to mitigate negative impact?
YES	YES			

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<p>Returning to school will have a substantial positive impact on families and children who are from deprived backgrounds.</p> <p>Many pupils will have limited access to technology at home and unable to participate in online education and resources – returning to school will allow for a greater equality in the education provided.</p> <p>Paper-based packs are limited in content and less likely to be completed than online learning – returning to school provides pupils with professional teaching and learning.</p> <p>A return to structure and routine will increase focus.</p> <p>Pupils will be guaranteed a meal.</p> <p>Period poverty will be alleviated as girls are given access to sanitary wear.</p> <p>When in school, pupils are less likely to be subject to exploitation.</p>	<p>There may be a negative impact because of the disproportionate effect of COVID-19 on people who are from deprived backgrounds.</p> <p>Adults (parents and carers) facing socio-economic disadvantage may be less able to access online support for home-learning if their child is unable to return to school.</p> <p>Pupils from a deprived background may have suffered additional trauma during lockdown and although returning to school will be a positive step, initially they may find it overwhelming.</p>	<p>60 pupils qualify for benefit-related free school meals.</p> <p>14% pupils are on the Pupil Premium register.</p> <p>30 pupils have been attending during lockdown (on average).</p> <p>There would be 2 pupils who would require 1:1 support for behaviour needs on return to school.</p> <p>No pupils with an EHCP need an emergency plan.</p> <p>If there is a return to a reduced in-school timetable (Phase 1 and Phase 2), there will be an impact on families, parents and carers; working families, single-parent families and disadvantaged families in particular in this context, recognising that females may feel this impact most.</p> <p>External Evidence According to the <u>ONS</u> people who live in deprived areas have higher diagnosis rates and death rates than those living in less deprived areas. The mortality rates from COVID-19 in the most deprived areas were more than double the least deprived areas, for both males and females. This is greater than the inequality seen in mortality rates in previous years, indicating</p>	<p>The school safeguarding and pastoral teams mobilised to regularly monitor and support all pupils (including those that may not be able to return to school).</p> <p>Videos, letters, texts, social media messages, use of school website have been utilised to explain control measures adopted by school to keep pupils safe.</p> <p>Control measures that have been put in place to protect pupils from deprived backgrounds include:</p> <ul style="list-style-type: none"> • Adapting policies and providing reassurance • Accessing new public health measures including but not limited to PPE (including training), protocols for social distancing and hand washing • Increased cleaning of frequently touched surfaces • Ensuring guidance, new school rules are age appropriate and understood • Staggered school start and finish times <p>Raise awareness and promote test, track and trace with parents/carers.</p> <p>Ensure home learning packs and online resources (including providing equipment where necessary) are available to those pupils unable to return from 1st September 2020.</p>	<p>Keep all documentation, processes and procedures under review - SLT, Governors, CEO, Directors, H&S Consultants.</p> <p>Staff encouraged to share concerns with SLT.</p> <p>Liaise where required with external agencies and organisations to ensure on-going support for pupils and families both in and out of school.</p> <p>Ongoing review of control measures required based on scientific, H&S and government advice.</p> <p>Ensure all control measures are implemented and followed – frequent SLT learning walks to support staff and pupils.</p> <p>Consider good practice adopted by other trust schools via the Headteacher forum.</p> <p>Outcomes for protected groups are monitored according to risk and all actions documented for review.</p>
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<p>Pupils from a deprived background may have suffered more trauma during lockdown and a return to school will give them access to pastoral care.</p>		<p>greater inequality in death rates from COVID-19.</p> <p>According to (ICNARC); 25% of patients in hospital with coronavirus are from the most deprived areas.</p> <p>Useful links: Joseph Rowntree Foundation. Child Poverty Action Group Barnardos</p>	<p>Plans in place to offer remote education to pupils who are self-isolating.</p>	
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11. ARMED FORCES PERSONNEL, VETERANS AND THEIR FAMILIES

Is there any potential positive impact?	Is there any potential negative impact?	What evidence do you have?	What action will you take to mitigate negative impact?	How will you monitor and review actions taken to mitigate negative impact?
YES	NO			
<p>There is a positive impact for all pupils and staff who are from Armed Forces Families to return to school as they reconnect with their peers and colleagues particularly if family members have not been at home – being in lockdown in the family home may have brought into greater focus the separation from loved ones.</p> <p>Some staff and pupils may live with ex-service personnel who have recently returned home and struggling to readjust - this could be exacerbated during</p>		<p>There are no pupils in school from Armed Forces Families.</p> <p>External Evidence</p> <p>There is no evidence, yet, that people with families who are or have been in the armed forces are disproportionality affected in terms of experiencing the coronavirus because of their family status.</p> <p>People meeting this category can be given priority support and their lack of local connection does not disqualify them from available opportunity.</p> <p>Veterans Hub</p>	<p>Not applicable.</p>	<p>Keep all documentation, processes and procedures under review - SLT, Governors, CEO, Directors, H&S Consultants</p> <p>Should any negative impact be identified that specifically relates to this protected group, the school will update and consider mitigating steps required.</p> <p>Outcomes for protected groups are monitored according to risk and all actions documented for review.</p>

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lockdown. A return to school could have a positive impact on the wellbeing of these individuals.				
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R-Race D-Disability G-Gender (including Pregnancy and Maternity) SO-Sexual Orientation RB-Religion & Belief A-Age CR-Caring Responsibility OP-Offending Past GI-Gender Identity SS-Socio Economic Status
AFV – Armed Forces, Veterans and their Families