Equality Impact Assessment Template

Before carrying out EqIA, you should familiarise yourself with the University’s EqIA Policy Statement and Guidance and Checklist Notes, and undertake our online training on Equality and Diversity and EqIA. These, along with further information and resources, are available at [www.ed.ac.uk/schools-departments/equality-diversity/impact-assessment](http://www.ed.ac.uk/schools-departments/equality-diversity/impact-assessment).

EqIA covers policies, provisions, criteria, functions, practices and activities, including decisions and the delivery of services, but will be referred to as ‘policy/practice’ hereinafter.

<table>
<thead>
<tr>
<th>A. Policy/Practice (name or brief description):</th>
<th>Change in operations of IASH to accommodate social distancing requirements due to COVID-19</th>
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</table>
| B. Reason for Equality Impact Assessment (Mark yes against the applicable reason): | • Proposed new policy/practice  
• Proposed change to an existing policy/practice yes  
• Undertaking a review of an existing policy/practice  
• Other (please state): |
| C. Person responsible for the policy area or practice: | Name: Prof. Steve Yearley  
Job title: IASH Director  
School/service/unit: Institute for Advanced Studies in the Humanities |
| D. An Impact Assessment should be carried out if any of the following apply to the policy/practice, if it: | • affects primary or high-level functions of the University yes  
• is relevant to the promotion of equality (in terms of the Public Sector Equality Duty ‘needs’ as set out in the Policy and Guidance)? yes  
• It is one which interested parties could reasonably expect the University to have carried out an EqIA? yes |
| E. Equality Groups | To which equality groups is the policy/practice relevant and why? (add notes against the following applicable equality group/s)  
• Age yes  
• Disability yes  
• race (including ethnicity and nationality) yes  
• religion or belief yes  
• sex yes  
• sexual orientation yes  
• gender reassignment yes |
• pregnancy and maternity yes
• marriage or civil partnership\(^1\) no

**Terms:** Clinically vulnerable and clinically extremely vulnerable have been used throughout and are important. The NHS definition of these terms can be found on the NHS website: [https://www.nhs.uk/conditions/coronavirus-COVID-19/people-at-higher-risk/whos-at-higher-risk-from-coronavirus/](https://www.nhs.uk/conditions/coronavirus-COVID-19/people-at-higher-risk/whos-at-higher-risk-from-coronavirus/)

- Managers should familiarise themselves with the meaning of these terms and the relationship to social distancing/shielding.
- Managers should find out, where staff are willing to share this, all staff that they manage that are in the clinically vulnerable categories for the purpose of effectively assessing social distancing risks. Personal health details should be kept confidential unless agreed to be shared by the individual.
- Individuals classed as [clinically extremely vulnerable](https://www.nhs.uk/conditions/coronavirus-COVID-19/people-at-higher-risk/whos-at-higher-risk-from-coronavirus/) will not be able to access the building and will be required to continue working from home.

**AGE**

Age and Clinical Vulnerability - There is evidence that the susceptibility of individuals to COVID-19 increases with age. Robust, consistent operating procedures will reduce this risk and provide reassurance to this group.

**Mitigation:** Any older individual that is also in the clinically vulnerable category will have a personal risk assessment.

Age without Clinical Vulnerability - Restricted access to the building and event management may occasionally require people to work longer hours on a particular day. This may be detrimental to some older individuals.

**Mitigation:** This will be mitigated through the communication of the clear expectation that staff and Fellows are not compelled to work excessive hours during the day, and that lengthy operations tasks can, where possible, be shared between team members. Additionally, out of hours work will be voluntary for all individuals.

Travel to and from work using public transport may be more difficult and risky for older individuals.

**Mitigation:** Line managers are encouraged to take a flexible approach to arrival and leaving times to allow individuals to avoid peak public transport times. Staggered start/end times may be adopted to reduce use of public transport at peak times. The use of other methods of transport where possible will be encouraged (e.g. walking, cycling, private car).

**DISABILITY**

Disability with Clinical Extreme Vulnerability - Individuals classed as [clinically extremely vulnerable](https://www.nhs.uk/conditions/coronavirus-COVID-19/people-at-higher-risk/whos-at-higher-risk-from-coronavirus/) will not be able to access the buildings and will be required to continue working from home.

**Mitigation:** Every effort should be made to ensure that the individual is not disadvantaged in their work. Where possible, IASH activity should be offered online as well as in-person.

Disability and Clinical Vulnerability – Risks to people that are clinically vulnerable and have a disability should be assessed on a case-by-case basis.

**Mitigation:** An individual risk assessment will be undertaken for clinically vulnerable people. The risk assessment will take into account: their job/research needs; use of public transport; social-distancing guidance on minimising contact and maintaining a 2m distance; guidance from their GP. (Note: this process may change depending on guidance from the Scottish Government).

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\(^1\) Note: only the duty to eliminate discrimination applies to marriage and civil partnership. There is no need to have regard to advancing equality or opportunity or fostering good relations in this respect.
Those living with someone that is shielding (clinically extremely high risk) – Though this person themselves does not need to shield, efforts should be made to ease anxieties via conversation about any practical work adjustments that can be made (e.g. working in a room alone, etc.), wherever possible.

Impaired mobility - The one-way circulation system implemented to maintain social distancing will create longer walking routes around the building. This could impact negatively on those people with impaired mobility. Several areas of the building are currently inaccessible for individuals with reduced mobility. Depending upon changes to the building, there may be impacts to evacuation plans.

**Mitigation:** Individuals with reduced mobility will be allowed to employ the shortest possible route to their destination even when this goes against a one-way system, and will have priority access to ground-floor offices. Administrative Manager should discuss mobility issues in relation to building plans and agree a new Personal Emergency Evacuation Plan (PEEP) if required.

The same number of toilets will be available in unchanged locations. However, for some locations, longer walking routes to and from toilets will be required as a consequence of the one-way system.

Conditions requiring urgent access to toilet facilities – For example, Irritable Bowel Syndrome, Crohn’s disease, those experiencing severe menopause symptoms, etc.

**Mitigation:** Individuals in this group will not need to abide by one-way systems to access the toilets and may take the most direct route. Staff may not wish to (and are not obliged to) disclose this information to managers, but managers should make clear to all staff that this is a policy.

Visual Impairments - Approved signage has been produced in consultation with the University’s Disability Service and senior university management. The national body – Colour Blind Awareness – has reviewed the signage and approved the visual contrast that addresses all combinations of colour blindness.

**Mitigation:** Those with visual impairments should be offered an individual risk assessment and a revised Personal Emergency Evacuation Plan (PEEP) if required.

Hearing Impairments – The University is currently “strongly recommending” the use of face masks for students and staff. Whilst this has significant benefits in reducing the potential for virus transmission, it has a negative impact on the ability of people with hearing impairments to lip read. It is likely that face masks will be in continued use for a significant period of time.

**Mitigation:** People with significant hearing impairments who find it difficult to communicate with others wearing facemasks should raise this with their manager in the first instance. A discussion should take place over whether it is more appropriate for the individual to continue to work from home.

Impact on mental health – COVID-19 has had a significant impact on people’s mental health. There are a number of contributing factors, but pertinent to this assessment are concerns about returning to the workplace and also having to work from home and the additional pressures that can bring.

**Mitigation:** Individuals are encouraged to discuss the impact on their mental health of returning to the workplace or working from home, with their manager. There are also a number of University resources to support individuals including the Staff Health and Wellbeing site, Staff Counselling Service and Occupational Health. The Administrative Manager will take this into account when assessing the need to work in the building where for essential work only.

**RACE**
Data are emerging that suggest BAME individuals can be more vulnerable to COVID-19, due to multiple factors, none, some or all of which may apply to any individual. The Institute will
continue to monitor evidence in this regard and modify our assessments as information arises.

**Mitigation:** BAME individuals who are concerned that they may be at increased risk can bring this up with their line manager in the first instance, though any line manager who they are comfortable with can be used. Line managers should engage with the individual, taking into account their particular circumstances, to ameliorate risk while at the same time ensuring that individuals are not excluded from undertaking research activities or other work that they are able and willing to do.

Harassment due to race or belief – There have been scenarios across the country where individuals have been verbally or physically abused due to the perceived origin of COVID-19. **Mitigation:** No form of harassment will be tolerated in the School. Any member of staff who is a victim of any kind of racial abuse should immediately make their manager or the Administrative Manager aware of the situation or report it to the College HR team in the first instance.

**RELIGION OR BELIEF**
There are no prayer rooms/ablution areas at IASH. **Mitigation:** The Seminar Room can be booked for use as a faith space/observance. Ablutions can be completed in the kitchen next door. The University Chaplaincy Centre, Edinburgh Central Mosque and Edinburgh Hebrew Congregation are all within 10 minutes’ walk.

**SEX**
Men – Evidence exists that men, especially those in older age categories, are more vulnerable to COVID-19

**Mitigation:** Men who are concerned that they may be at increased risk can bring this up with their line manager in the first instance. Line managers should engage with the individual, taking into account their particular circumstances, to ameliorate risk while at the same time ensuring that individuals are not excluded from undertaking research activities or other work that they are able and willing to do.

Women – More women occupy administrative roles that will be continuing to work from home over the longer term. This may disproportionately affect women in terms of isolation/mental health and in relation to remote working in unsuitable work spaces.

**Mitigation:** Managers will be open to discussing concerns of women in relation to social distancing and returning, or not, to University buildings. The Institute will undertake a separate EqIA addressing remote working.

Carers – Many individuals have taken on increased caring responsibilities during the COVID-19 period e.g. childcare, home schooling, elderly care. There is evidence to show that during the COVID-19 pandemic, women in particular have taken on higher levels of caring responsibilities, e.g. childcare, home schooling, elderly care.

**Mitigation:** Line managers are required to take caring responsibilities into account when creating staff work plans. Fellows who have had caring responsibilities over the summer will have that situation acknowledged when their research productivity is assessed.

**SEXUAL ORIENTATION**
Some LGBTQ+ people may be hiding aspects of their lives from people that they are living with, or be forced to shelter in situations where their identity is not fully accepted. The requirement to continue to work from home may cause disproportionate feelings of isolation and mental health and wellbeing problems for LBGTQ+ people.

**Mitigation:** LGBTQ+ individuals who are concerned that they may be at increased risk can bring this up with their line manager in the first instance, though any line manager who they are comfortable with can be used. Additionally, concerns can be raised confidentially with members of the CAHSS Equality and Diversity Committee.
GENDER REASSIGNMENT
There is evidence that the lack of explicit gender-neutral facilities in higher education institutions causes indirect discrimination, and increases the risk of harassment for individuals who have undergone gender reassignment in addition to non-binary staff and Fellows.

Mitigation: There will be the same number of gender-neutral toilets available in unchanged locations. Individuals who are concerned about impacts to them arising from new social distancing plans that related to their gender reassignment can bring this up with their line manager in the first instance, though any line manager who they are comfortable with can be used. Additionally, concerns can be raised confidentially with the CAHSS Equality and Diversity team.

PREGNANCY & MATERNITY
Pregnant women have been included in the list of people at moderate risk (clinically vulnerable) as a precaution. The School will comply with health and safety and absence leave requirements for pregnancy and maternity.

Mitigation: A risk assessment will be undertaken for all pregnant staff/Fellows and new mothers, regardless of how many weeks’ gestation. The risk assessment will take into account: their job/research needs; any pre-existing health conditions; use of public transport; social-distancing guidance on minimising contact and maintaining a 2m distance.

Add notes against the following applicable statements:

- On any available information about the needs of relevant equality groups:
The threat posed by COVID-19 is without recent precedent, with all areas of the University affected. The College Office management team commit to working to ensure that emerging information about protected groups is incorporated into College Office plans.

Information available through the UK Government inquiry into the impacts of COVID-19 on people with protected characteristics has been consulted. The evidence for impacts on protected groups will change as new information becomes available. The College Office will keep up to date with information and incorporate new evidence of equality impacts as they arise.

We will be monitoring particularly the UK government inquiry findings: “Unequal impact: Coronavirus (Covid-19) and the impact on people with protected characteristics" which will look especially at impact relating to gender, disability and BAME individuals.

Information available through the UK government inquiry into the impacts of COVID-19 on people with protected characteristics has been consulted. The evidence for impacts on protected groups will change as new information becomes available. IASH will keep up-to-date with information and incorporate new evidence of equality impacts as they arise. We will be monitoring particularly the UK government inquiry findings: “Unequal impact: Coronavirus (COVID-19) and the impact on people with protected characteristics" which will look especially at impact relating to gender, disability and BAME individuals:


- Any gaps in evidence/insufficient information to properly assess the policy, and how this be will be addressed:
The gaps in evidence for assessment of this policy will be filled by consulting continuously with protected characteristic groups as this practice is implemented and changed in response to the Scottish government guidelines.
• If application of this policy/practice leads to discrimination (direct or indirect), harassment, victimisation, less favourable treatment for particular equality groups:
The implementation of this new practice has the potential on equality in a number of ways outlined in the document, and potential ways not identified, to impact indirectly on equality. These potential impacts are justified in achieving the aim of protecting staff and Fellows from COVID-19. The indirect risk is mitigated by measures aimed at allowing individuals in one or various groups to take a more flexible approach to their work. In addition, we encourage any individuals who notice that their circumstances have deteriorated and who are not included here to reach out to their line manager, or any line manager with which they feel comfortable.

• If the policy/practice contributes to advancing equality of opportunity
The new practice should enable researchers from all protected characteristic groups to resume research and other activities in support of research.

• If there is an opportunity in applying this policy/practice to foster good relations:
Applying this practice and ensuring its good communication will provide reassurance to all staff and Fellows that their health, safety, and well-being are being prioritised, and that issues of equality have been carefully considered. Continued support for staff to work from home and work flexibly can foster good relations with those for whom these flexible working practices allow them to maintain good work-life balance.

• If the policy/practice create any barriers for any other groups?
No other protected groups will be affected, but there will be some inherent inequity imposed by the social distancing requirements. In particular, Fellows who are unable to travel to the UK or unable to take up an in-person Fellowship for any reason will not share the same Fellowship experience as those who attend in-person; this will affect those whose research has been deemed feasible to conduct remotely (those who do not require access to the Centre for Research Collections, for example). While this does introduce some inequity we believe that it is important to prioritize research that requires access to physical archives, which has been deemed an essential activity by IASH from the beginning.

Fellows near the end of their Fellowship period have been particularly negatively impacted by the closure of the buildings as they have been unable to complete their work. As such we have prioritised access for these individuals so they may complete their work, and extended Fellowships where possible.

Finally, members of staff will see the amount of at-home work to be increased well above pre-pandemic levels for the duration of the requirement of social distancing. While some individuals may find this advantageous, others will not.

• How the communication of the policy/practice is made accessible to all groups, if relevant?
This policy will be available on the CAHSS EDI website, with particularly important information communicated via email. Printed versions will also be available for those that require them.

• How equality groups or communities are involved in the development, review and/or monitoring of the policy or practice?

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2 This question does not apply to the protected characteristic of marriage or civil partnership
The following were directly involved in the development of this policy: IASH Director, IASH Administrative Manager, CAHSS College Estates Officer, CAHSS College Registrar, IASH Secretary.

This EqIA is regarded as a living document; further feedback will be sought and encouraged from individuals in affected groups in July and August 2020 in the first instance, and on an ongoing basis. The Administrative Manager will coordinate this work and feedback to senior Estates, technical, professional services and IASH management.

The policy will be monitored continually after implementation and factors re-evaluated as governmental and University policy is revised over time. Policy modification will be approved via the Administrative Manager (for local decisions), via College Estates Officer for College-wide modifications, or via Director for any change in policy affecting the Institute.

- Any potential or actual impact of applying the policy or practice, with regard to the need to eliminate discrimination, advance equality and promote good relations:
  Applying this practice and ensuring its good communication will provide reassurance to all staff and Fellows that their health, safety, and well-being are being prioritised, and that issues of equality have been carefully considered. The revised practice aims to provide opportunities for as many Fellows as possible to resume research.

F. Equality Impact Assessment Outcome

Select one of the four options below to indicate how the development/review of the policy/practice will be progressed and state the rationale for the decision

Option 1: No change required – the assessment is that the policy/practice is/will be robust.

Option 2: Adjust the policy or practice – this involves taking steps to remove any barriers, to better advance equality and/or to foster good relations.

Option 3: Continue the policy or practice despite the potential for adverse impact, and which can be mitigated/or justified. YES

Option 4: Stop the policy or practice as there are adverse effects cannot be prevented/mitigated/or justified.

G. Action and Monitoring

1. Specify the actions required for implementing findings of this EqIA and how the policy or practice will be monitored in relation to its equality impact (or note where this is specified above).
   The Administrative Manager will be required to go through the EqIA with all staff prior to IASH reopening. During this time, it must be made clear to staff that they should immediately contact their line manager should their circumstances change.
   Method: This assessment will be cascaded to staff.

   For Fellows, the Secretary will cascade the EqIA to all new Fellows one month prior to their arrival at IASH. The system for monitoring the impact of the policy has largely been described on the previous page in the section ‘How equality groups or communities are involved in the development, review and/or monitoring of the policy or practice?’ and will include inviting feedback from affected groups. Comments will be discussed at management meetings and changes made as needed.
2. **When will the policy/practice next be reviewed?**

   The policies will initially be reviewed one month after implementation. After that the policy will be re-visited as anticipated changes in policies at the government or University level are implemented, or as and when feedback necessitates a review of the policy.

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<th>H. <strong>Publication of EqIA</strong></th>
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**Can this EqIA be published in full, now?** Yes

**If No – please specify when it may be published or indicate restrictions that apply:**

The EqIA will be published in its draft form as soon as possible in order to provide guidance in tandem with anticipated changes that will come from Government. Changes to the EqIA are expected as more information regarding impact and feedback is received and IASH intends to act responsively.

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<th>I. <strong>Sign-off</strong></th>
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**EqIA undertaken by (name(s) and job title(s)):**

Professor Steve Yearley (IASH Director)  
Dr. Ben Fletcher-Watson (Administrative Manager)  
Helen Sang (CAHSS College Estates Officer)

Accepted by: Professor Dorothy Miell

**Date:** 20 August 2020

Retain a copy of this form for your own records and send a copy to equalitydiversity@ed.ac.uk