



# **St Nicholas CE VA School Equality Questionnaire (Disability)**

## **A. Disability Status - Disclosure**

1. A disabled person is defined in the Disability Discrimination Act as someone with a physical or mental impairment that has a substantial and long-term impact on their ability to carry out day-to-day activities.

The impairment is long-lasting, 12 months or more but may be hidden e.g. cancer, diabetes, epilepsy, asthma. People with severe disfigurements, people with learning disabilities, people living with HIV/AIDS and people with MS are also covered from the time the symptoms first appear. People who have had a disability within the definition are protected from discrimination even if they have since recovered e.g. from depression.

Having read this do you consider yourself or a member of your family to be covered by the definition?

Yes

☐

No (go to Q9)

☐

2. If you answered 'yes' to Q1, and would like to, please indicate (using the boxes below) the nature of your disability (tick as many as are applicable)

	Parent	Child		Parent	Child		Parent	Child
Dyslexia / Learning disability			Mobility difficulties			Unseen disability (e.g. diabetes, epilepsy, asthma)		
Blind / Partially sighted			Personal care			Multiple disabilities		
Deaf / Hearing impairment			Mental Health Difficulty			Autistic Spectrum Disorder (incl. Asperger's Syndrome)		

3. Did you declare a disability for you or your child when your child first joined the school?

Yes (go to Q7)

☐

No (go to Q4)

☐

Don't Know (go to Q8)

☐

4. If you answered 'No', what were your reasons for not disclosing?

I did not have a disability at the time		I feel this information is private		I do not remember being given the opportunity	
I did not consider it to be relevant to being a parent at the school		I was unaware of the benefits of doing so		I was concerned I might be discriminated against	

Another reason, please specify:

**5. Have you any suggestions to make it easier for families to disclose a disability?**

**B. Your Experience**

**6. How important do you feel the following are to the participation of families including someone with a disability?**

(Please rate on a scale of 1 to 5 where 1 = not at all important and 5 = very important)

	Not at all important important			Very	
	1	2	3	4	5
Application process and induction to school					
Physical environment					
Assistive technology (specific IT to support a disability)					
Policies and procedures					
Communication/information sharing					
Information technology					
Access to advice and support					
Facilities					

**7. From your experience so far how do you feel the following support the needs of families with someone who has a disability?**

	Very unsupportive	Unsupportive	Neither supportive nor unsupportive	Supportive	Very supportive
School policies and procedures					
Headteacher & senior management					
Teachers					
Other Staff					

8. If a member of your family have a disability what do you feel has been the biggest barrier to participation at pre-school environments and why?

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### C. Equality Scheme

9. In order to ensure that the school's Equality scheme meets the needs of disabled staff, children, parents and families, what do you feel are the key areas of school life that the scheme needs to focus on? (tick any that apply)

Academic areas (inc. learning and teaching)	<input type="checkbox"/>	IT Support	<input type="checkbox"/>
Communication	<input type="checkbox"/>	Services for disabled people	<input type="checkbox"/>
Staff development and training	<input type="checkbox"/>	Services for disabled families and children	<input type="checkbox"/>
Physical environment	<input type="checkbox"/>	Monitoring and impact assessment	<input type="checkbox"/>
Employment policies and Personnel advice	<input type="checkbox"/>	Consultation with disabled staff, families and children	<input type="checkbox"/>
Other (please give details below)	<input type="checkbox"/>		<input type="checkbox"/>

Which do you feel is the single most important area?

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10. Has this questionnaire missed any important issues or topics with regards to the experience and participation of disabled staff, children, parents and other members of the Schools community? If so what are they?

## FAMILY

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### D. About You

Are you...

Male

☐

Female

☐

**Thank you for your time and valuable contribution to the Equality Scheme.**

**Information from this questionnaire will be used anonymously. However, we would like to follow up this questionnaire with further consultation activities. If you would be willing to participate in such activities (e.g. further questionnaires or focus group) please provide your contact details below:**

Name		e-mail address	
Mobile number		Telephone number	