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DRAFT Greater London Authority A new Workplace Adjustments Policy and Process

"London's diversity is its biggest asset and we try to make sure our workforce reflects this diversity at every level."

Introduction

Goss Consultancy Limited (GCL) was commissioned to review the reasonable adjustments policy and process at the Greater London Authority (GLA) in the summer of 2020.

The last formal internal review of the reasonable adjustments policy took place in 2016. However, the staff network for disability and business function leads have more recently discussed the efficacy of the current policy and process and identified areas of weakness and ideas for reform.

Functional managers and some line managers gave useful insight on adjustments from their perspective.

In particular, members of the Human Resources & Organisational Development Unit, which supports implementation of the policy and process, including by overseeing the occupational health referral process, were open and engaging about the strengths and flaws of the current process.

The staff network for disability was particularly helpful to this review in terms of highlighting the barriers and challenges associated with the current reasonable adjustments policy and process from their perspective of direct lived experience. This is crucial to acknowledge because, while co-production is vital to effective policy development, it is not formally the professional role of those entitled to adjustments to deliver corporate policy and process.

A key goal of the review has been to integrate different perspectives and requirements for a new policy and process – corporate, business function, management and individual – and to propose a new policy and process that works for everyone and supports corporate objectives in the area of equality, diversity and inclusion and corporate performance overall.

About Goss Consultancy Limited

GCL is an equality, diversity and inclusion consultancy. It has extensive experience of devising, developing and implementing organisation-wide workplace adjustment programmes for, among others, BT, Lloyds Banking Group and Royal Mail.

¹ Mayoral statement on 'Diversity and our values': https://www.london.gov.uk/about-us/jobs-and-working-city-hall/diversity-and-our-values

Many of GCL's associates are people with lived experience of disability. Agnes Fletcher, who conducted this review, has both lived and professional experience of disability.

Methodology

A mixed methodology was used for this review, combining analysis of data and documents with stakeholder interviews.

Documents reviewed

- Draft GLA Disability Equality Action Plan
- GLA 2019 Executive Presentation staff survey data
- Managing disabled staff manager's guidance
- Pre-placement medical questionnaire
- Proposed relocation of City Hall EqIA
- Recruitment & Selection Procedure: Management Guidance
- Sickness absence policy
- Sickness and absence referral to occupational health
- Smart working policy
- Smart working policy EqIA
- Special leave schemes
- Your occupational health assessment a guide

Stakeholders interviews

Staff with the following roles and from the following divisions were interviewed to inform this review:

Head of FM	Facilities Management
Support Services Manager	Facilities Management
Head of TG	Technology Group
Equality, Diversity and Inclusion Adviser	HR
Workforce Equality, Diversity and Inclusion Manager	HR
Senior HR Adviser	HR
HR Adviser	HR
HR Officer	HR
Chairs of Staff Network for Disability	Disability Network
Chairs of Staff Network for Disability	Disability Network
Research Support Officer	Trade Union
Policy Officer	Disability Network
Senior Area Manager, North East	Disability Network
Assistant Scrutiny Manager	Disability Network
Administrative Assistant	Disability Network
Senior Personal Assistant	Disability Network
Senior Policy and Projects Officer	Disability Network
Senior Policy Officer	Management
Assistant Facilities Officer	Management

Security and Operations Manager
Chief Accountant
Private Rented Sector Manager
CRM Officer

Management
Management
Management

In addition, several other employees with direct lived experience of the adjustments policy and process contributed their ideas and insights to the review.

Context

Experience of disability is prevalent within the UK population, with around one in five people estimated to meet the Equality Act definition. More than four-fifths of long-term impairments and health conditions are acquired, meaning that many people who meet the legal criteria for being 'disabled' will have become so while they are employed.

This review has taken place in the context of several national and world events affecting lived experience of disability and intersectional issues of inequity, including the pandemic, associated health and economic concerns, the upsurge in Black Lives Matter interventions and the events that stimulated them.

COVID-19 creates new challenges for the GLA and for disabled people. It has also opened up significant opportunities, through increased use of technologies and effective integration of home-workers, to recruit, retain and progress more disabled employees.

A new policy and process could usefully build upon the GLA's agile and positive response to the pandemic, lockdown and employees continuing to be based exclusively or more frequently than previously at home. The immediate response of the Authority to the pandemic was welcomed by many employees who were interviewed for this review, who considered that it demonstrated the 'invest to save' approach of ensuring that each employee had what they required to work in an optimised way, including by supporting them to stay as well as possible.

A new workplace policy and process needs to demonstrate more of this agility – to respond swiftly to straightforward adjustments, such as those relating to workstations and technology, but also in a timely way to more complex situations, where medical advice may be required to determine a prognosis or advise on what may be reasonable to provide. It needs to be positioned as an investment of time, expertise and where necessary money in the productivity and potential of employees.

The relocation of City Hall functions to other buildings was underway before the pandemic, as was the transformation programme designed to lead to Smarter Working. Some issues arising from those changes are outside the scope of this report. However, a comprehensive approach to defining disability inclusion and access is important, going beyond the physical infrastructure of lifts, level access and digital technologies to consider the fundamentals of where, when and how work can be delivered and the broader management support required to maximise everyone's contribution.

The Mayor has made several high-profile commitments as a leader on diversity and inclusion that relate directly to the GLA. In addition, the GLA has a public sector equality duty to be proactive in promoting equity in employment. This means ensuring a fundamental understanding of the need to remove barriers to participation throughout the GLA, having effective policies and processes to deliver those commitments, and GLA staff having the practical knowledge and resource capacity to do so.

What is a workplace adjustment?

This review is titled 'A new workplace adjustments policy and process'. Currently, the GLA's documents mostly refer to "reasonable adjustments".

A workplace adjustment is a change or adjustment unique to a person's needs that will enable them to do their job or do it better. Adjustments operate alongside and in the context of continuous improvements that an employer may make to its policies, processes, facilities and culture to make them increasingly flexible, inclusive and responsive to individuals' requirements and preferences.

"Workplace adjustment" is a broader concept than the legal compliance concept of "reasonable adjustment". It relates potentially to a broader range of people than those who may be eligible for a "reasonable adjustment" because they meet the definition in the Equality Act of being "disabled" and face a "substantial" barrier to work.

A "reasonable" adjustment is an adjustment to the workplace or work practices that is effective for the employee without being too disruptive, costly or impractical for the employer to provide. Whilst there is a particular imperative for employers to provide "reasonable adjustments" for those legally defined as disabled, employers may choose to provide workplace adjustments for anyone to support their attendance or performance or to help them *maintain* their physical or mental health and well-being.

In other words, "workplace adjustments" is a useful concept to consider for any employee who may require particular provision to enable them to work safely and productively, whether or not they meet the legal definition of disability. It is also a useful concept for an inclusive employer who may choose to make adjustments for "disabled people" when the range of relevant factors mean that, in a strictly legal sense, these might not be "reasonable".

An enabling aspect of the Equality Act for the characteristic of disability, is that an employer can choose to make adjustments because it values the perspectives and insights of individuals facing disabling barriers and wishes to employ a diverse workforce in an inclusive way. It should be noted that this "positive discrimination" in the form of treating a disabled person more favourably (through the provision, for example, of altered objectives or hours) is legal, due to the non-binary construction of the relevant legislation.²

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² Unlike some of the protected characteristics, the Equality Act is not symmetrical on disability. It does not allow for a non-disabled person to claim they have been treated less favourably than a disabled person.

An inclusive employer with values such as those espoused by the GLA will be seeking to attract, recruit, retain and progress disabled people as part of its workforce. It will recognise the range of disabling barriers that individuals with impairments or long-term health conditions, and those who are "neurodiverse", may face in gaining and keeping employment.

To do this, such an employer will wish to encourage applications, use inclusive recruitment processes, manage adjustments efficiently and effectively, and provide a trusted and safe environment for disclosure and dialogue about requirements and preferences relating to significant health and disability issues. It will want to actively promote and effectively deliver workplace adjustments in ways that reduce the burden on disabled people, in particular, to negotiate for and to implement them. And it will consciously and explicitly view workplace adjustments as an investment in individual employees and in corporate diversity and inclusion.

That framework of values, the driver of legal compliance as a baseline, and the broader approach to considering what can be done to ensure that any employee is able to stay as well as possible and to work to their full potential, has been the standard against which the current reasonable adjustments policy and process at the GLA has been compared. It's the approach that many employers of all sizes increasingly take in relation to managing disability and health in the workplace.

As a matter either of duty or good practice employers need to:

- ensure that workplace adjustments are applied at every stage of employment, including recruitment, induction, training and development and return to work
- put the individual at the centre of agreeing adjustments in order to understand and meet their specific needs
- effectively use the advice and guidance of other professionals such as the individual's GP, occupational health advisors, HR or Access to Work.

Recommendations

The current reasonable adjustments policy and process at the GLA can be substantially reconfigured to ensure that it better exemplifies the GLA's values; contributes to corporate objectives by driving greater workforce diversity and inclusion; and consciously demonstrates an effective and proportionate investment in employee health, well-being and performance.

At present, implementation of adjustments for individuals is often a lengthy, resource-intensive process lacking clarity about roles, responsibility for decision-making and timescales. This net cost to the organisation in lost productivity, employee engagement and morale should create a compelling case for change. This requires a fundamental review of purpose, policy and process.

The following are specific recommendations of this review:

An inclusive and enabling policy framework for delivery of individual adjustments that works efficiently to generate and maintain a diverse workforce, drive productivity, and underpin employee health and well-being.

- 1. Using the employee journey from attraction, recruitment and onboarding onwards as a guide, a new policy, process and associated communications that reflect the purpose of effective workplace adjustments should be co-produced to demonstrate a commitment to tackling disabling barriers, driving workforce diversity and inclusion and enabling employees to reach their full potential, stay as healthy and well as possible and contribute to corporate performance.³
- 2. The GLA should adopt a disability leave policy. Disability leave is listed as an example of a reasonable adjustment in the Equality Act Code of Practice.⁴ Case law has established that employers are expected to consider paid disability leave for treatment, rehabilitation or assessment or where the member is waiting for other reasonable adjustments to be put in place.

While many adjustments can be reasonably addressed without the need for detailed medical evidence, a disability leave policy is one relevant place to make clear that adjustments sit within the context of the Equality Act's balance of employee rights and employer responsibilities and that the discretion to allow paid or unpaid disability leave is consequent on Equality Act eligibility.

The policy should encompass requests for additional days of paid and/or unpaid leave for requirements such as medical treatments associated with the impairment giving rise to Equality Act eligibility or for short-term challenges caused by changes to social security eligibility, support with personal care or equipment. Where eligibility/meeting the Equality Act definition is not clear, occupational/employee health advice should clarify this.

Under the disability leave provisions, absence as a direct result of an individual's impairment or long-term health condition (where this is deemed to mean that someone qualifies as disabled in the terms of the Equality Act) should be logged and counted separately to sick leave, ensuring that no disabled employee is threatened with disciplinary procedures. A policy of this nature would empower managers to exercise discretion about absences arising directly because of a substantial, long-term impairment or health condition.

3. The GLA should create and manage a single, centralised budget for workplace adjustments that positions the provision of adjustments as an investment in corporate diversity, individual performance and employee engagement. Discussion of adjustments should be on this basis, rather than solely through the lens of "cost". Line managers should have an active duty to oversee the identification and delivery of adjustments – but should be actively supported by dedicated and monitored resource in relevant business functions to deliver a smooth, timely and effective process. Line managers should not have to meet the cost of adjustments from their own budgets.

³ See Appendix for draft process.

⁴ Equality and Human Rights Commission Employment Statutory Code of Practice, 2015

4. Policies should differentiate between adjustments that are discretionary or designed to help someone maintain their health and avoid impairment and those that relate to someone who is likely, or definitely does, meet the Equality Act definition of being a disabled person.

An example of the former would be providing an appropriate workstation to an employee whose height means that they risk muscular-skeletal problems because the standard workstation does not suit them.

Examples of the latter would be through making provision in a new disability leave policy for those meeting the Equality Act definition of disability to have leave connected with the relevant impairment discounted for the purposes of sickness absence; or providing additional flexibility about hours or objectives, where these would not be offered to someone who is not disabled in the terms of the Act.

A further example, underpinning the GLA's ambition to become an exemplar employer of disabled people, would be by being prepared to provide additional resource to teams who employ or retain those disabled people who face the biggest disability-related barriers to gaining or keeping a job.

- 5. A clear definition is needed of responsibility for initiating, delivering and monitoring the effectiveness of workplace adjustments, with the roles of the employee, their line manager, the HROD team, the Technology Group and Facilities Management teams clearly delineated.
- 6. The GLA should set clear expectations about timescales for delivering adjustments and monitor these. Failing to meet these should not be considered an individual failure but should prompt consideration of improved processes and resource allocation within key teams such as HROD, Technology Group and Facilities Management.
- 7. The GLA should develop a personalised "adjustment agreement" a live document to provide clarity and enable regular review. This can document the decision-making process, expected timescales for putting arrangements in place, the impact of adjustments, and specified points of review. It can act as a "passport" to speed up the process of agreeing (any) new adjustments as someone's condition changes or they move to a different work environment or role.
- 8. The GLA should consider 'Staying Well Plans' or 'Work, health and well-being promotion plans',⁵ particularly for employees who have symptoms such as pain, anxiety or distress that fluctuate. These are completed by an individual to guide dialogue about how to help people maintain optimum health and to outline measures that may be required at some times but not at others.

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⁵ See https://mentalhealthrecovery.com/wrap-is/ for further ideas.

Reconfigured purpose and operation of occupational health services to the GLA

- 9. The emphasis on "medical fitness" as a bar to employment at the GLA should be removed from all employee communications. Candidate assessment should include appropriate exploration of any relevant capabilities that touch on impairment or health issues. For example, assessment for roles that require a level of physical strength or manual dexterity as genuine occupational requirements should explore these issues during recruitment with an acknowledgement that any adjustments that are reasonable will be made. Otherwise, the emphasis should be on establishing what all candidates' requirements and preferences are for performing effectively and maintaining the maximum level of physical and mental health and well-being. Any concerns about whether elements of this are "reasonable" within the terms of the Equality Act or are likely to have a significant impact on individual performance should be dealt with sensitively, as exceptions.
- 10. The occupational health service provided to the GLA should explicitly be reconfigured from a social model or barriers-first approach to disability and explicitly set within the context of the GLA's equity, diversity and inclusion strategy and narrative.
- 11. The GLA should consider rebranding the service from 'occupational health' to 'employee health' to demonstrate a significant change of emphasis, and should encourage the current provider to review the way the service is communicated to applicants and employees.
- 12. Leaders and managers should be on the look-out for any tendency to regard disability and health issues solely via a deficit model that sees employees with these experiences predominantly as a "problem" in their role or for the GLA as a whole.
- 13. The onboarding process should focus on a welcome to new employees that conveys the value of diversity and inclusion and that the GLA will attempt to accommodate individual requirements and preferences wherever possible. This would help to overcome the strong association of adjustments with physical infrastructure and technical solutions workstations, software, etc and enable discussion of a broader range of adjustments and inclusive working practices.

Strategic management of disability inclusion, including strengthened inclusive management capacity

14. At induction and in the form of refresher training, all GLA colleagues should be briefed on inclusive working practices, including as this relates to disability. For many roles, this could include inclusive interactions such as running or participating in meetings that take account of those with sensory impairments, specific learning difficulties, fatigue, pain, anxiety or autism spectrum conditions. Given the current emphasis on virtual meetings, this should include practical tips to ensure inclusion virtually.

- 15. Training should be rolled out to all line managers about the revised workplace adjustments policy and process, alongside refreshed training on the Equality Act, the concept of equity and differential treatment and inclusive management practices.
- 16. Performance development reviews should encourage dialogue about health and well-being. This should be one of several regular prompts to support employees who may develop a need for adjustments or specific support for health and disability related issues during their employment with the GLA.
- 17. The GLA should undertake a range of measures to generate greater accuracy and comprehensiveness of employee data on health/disability.
- 18. Additional support and resource should be given to enable the staff network for disability to have more impact. Again, this should be considered an investment in employee productivity, engagement and morale and therefore in corporate performance.

Detailed findings

About the current reasonable adjustments policy and process

With few exceptions, stakeholders find the current policy and process for workplace adjustments at the GLA unsatisfactory and have little or no confidence in the process.

Responses vary from confusion about its operation and uncertainty about roles and responsibilities, to frustration, anger and feeling anxious and humiliated by engaging with it.

The current process does not ensure that relevant functional teams (principally HR, Facilities Management and Technology Group) are working collaboratively and there is no clear articulation of roles and responsibilities for these functions and for line managers and employees themselves, in delivering workplace adjustments.

Negative experiences, and the fear of further distressing encounters that this generates, drive low levels of people identifying themselves as "disabled" within the GLA. This is also likely to have an impact on the number of employees who feel able to initiate conversations with managers about their health and adjustments they may need.

Line managers find the process for managing workplace adjustments opaque, with limited clarity on who does what and when.

While the GLA has goals, drawn from Mayoral objectives, relating to a more diverse workforce, including on disability, and to being an inclusive employer, communications on health and disability, particularly during the onboarding process, undermine this. Engagement with the occupational health service during the recruitment phase is described by some as "needlessly intrusive", "bruising" and

"traumatic". This actively works to counter the ambition of recruiting and retaining a diverse workforce.

The implicit message relating to discussions about disability and health at the recruitment stage is that this is a test of "fitness". The first of two offer letters makes clear that employment is conditional upon "receipt of medical clearance from our occupational health advisors declaring your fitness to undertake the role".

This positions information shared about health or disability at this stage as evidence to inform a process about whether or not to confirm employment.

Whether a candidate has *sufficient* physical and mental health to perform a role adequately, with adjustments where required, is an appropriate line of enquiry but the way this is communicated at present does not accord with the values of an employer that acknowledges that there are significant disability-related barriers to employment and that a diverse workforce brings enormous benefits.

This medicalised, negative and potentially adversarial message is there from the start and embedded throughout the recruitment process. For example, at the point of job offer, the 'Pre-Placement Medical Questionnaire' states in the introductory text: ". . . no decision to reject you on medical grounds will be made without referral to our Occupational Health Advisor . . ."

Communications about occupational health assessments speak of a "medical condition that may affect your ability to carry out the full duties of your role" and pose the idea that someone may not be "fit for the role". By talking of the occupational health professional giving "impartial and independent medical advice regarding occupational issues" and someone who "will not take sides", the relationship between the employer and potential employee is positioned as adversarial. The language used is not about accommodation and inclusion but includes many negative references, such as "Depending upon the nature of the problem . . . ", "tests" and a report "regarding your fitness to work". The emphasis is on the employer's right to reject candidates based on their health: "We have the right . . . your fitness to undertake your role and carry out your duties and responsibilities. You must attend . . ."

The questions are positioned as highly personal and about a range of areas where value judgements are implicit:

"Medical history (what illnesses, injuries or treatment you have had in the past)
Functional capacity (what you are currently able, and not able, to do)
Psychological and social factors (your feelings and attitudes; your lifestyle e.g. family situation)

Social history (e.g. diet, exercise levels, living situation, etc)
Work history (e.g. details of your occupation and your attitude towards it)."

While candidates rarely, if ever, have a job offer withdrawn because of information revealed during the occupational health assessment, the process is not operating as an integral part of an inclusive and positive welcome for all employees. This needs to shift from an audit of medical history towards generating an open dialogue about

relevant personal issues, positioned as overcoming disability and/or health related barriers to thriving at work in the context of an explicit, consciously inclusive celebration of diversity.

While occupational health services have been experienced in a largely negative way at onboarding and sometimes later by employees who are likely to meet the definition of disability in the Equality Act, some employees with conditions that have benefitted from treatment have been able to access helpful support sessions arranged through the occupational health team. This indicates where the focus and utility of an employee health service could be.

If the GLA is serious about equality, diversity and inclusion, it needs to clarify accountability for adjustments and for promoting equity for employees with long-term impairments and health conditions and ensure sufficient resource to deliver this. This should be considered not as a cost to the organisation but as an investment in staff and a proactive measure to underpin productivity, and employee engagement.

The approach taken by line managers varies considerably across the GLA and for some, there may be a fundamental lack of understanding about the concept of "reasonable adjustment" within the Equality Act and a tendency to regard disability and health issues solely via a deficit model that sees employees with these experiences predominantly as a "problem" in their role or for the GLA as a whole.

Most of those consulted felt that the organisation's agile response to COVID-19 and employees working from home was very positive. The workplace policy and process needs to demonstrate more of this agility – to respond swiftly to straightforward adjustments, such as those relating to workstations and technology, but also in a timely way to more complex situations, where medical advice may genuinely make a difference.

Concerns were expressed about risk assessments conducted for a return to GLA buildings following lockdown, with decisions about whether people could safely return queried. At the time of writing, office-based employees are once again being encouraged to work from home but the process for a return to, in some cases, new GLA buildings is crucial, in terms of a rounded approach involving new PEEPs, the implications of location, availability of lifts and the implications of SMART working on those who require adjustments.

At the moment, there are numerous links in the chain of assessing what is needed, whether it can be approved and whether Access to Work should be involved, before the time required to put adjustments in place. The impact of these delays, and the amount of time absorbed by individual employees and line managers chasing progress, should be recognised as a net loss to the GLA.

There is often a lengthy process of engaging and securing support and funding for adjustments, which is stressful and can prevent an employee from fulfilling their role effectively.

Currently, the HR group manage a corporate budget for major items of equipment but minor items down to line managers/budget holders. A best practice approach

would see any cost elements relating to adjustments coming from a central budget so that line managers are not penalised for recruiting/retaining disabled employees and to emphasise the fact that adjustments are an investment in employee performance, not simply a cost.

The staff network for disability is a core resource to help the GLA shape a new approach to disability equality and to implement a revised workplace adjustments policy and process.

The women's network, which has recently formulated a menopause policy, can also support a broader understanding of how some specific and common conditions, such as breast cancer or endometriosis, can be effectively acknowledged and managed. This is particularly important given the rapid growth in the percentage of the workforce that is made up of women over 50 and the association between ageing and having at least one impairment or health condition.

Associated policies and documents

The special leave scheme is largely predicated on the model of paid leave relating to relationships – bereavement of a close family member, challenge in support for a dependant, birth or parental leave. A social model approach, one that acknowledges disability-related barriers, would move beyond issues of leave needed for care for others to recognise that for some disabled people a breakdown in formal or informal support for personal care could generate the need for additional leave. In the sickness absence policy, there is reference to special leave being authorised for employees who are unable to perform their current role where there are no other suitable duties for them.

'Managing disabled staff – managers' guidance' makes a positive statement about diversity employment targets and promotes an understanding of the breadth of the definition of disability. It makes explicit reference to the social model of disability as the GLA's approach. The guidance discusses occupational health in the context of advice on reasonable adjustments. This is all positive, though not sufficiently reflected in other policies and communications.

The Appendix to the guidance has a more negative framing – it is not about overcoming barriers, about productivity, contribution, enabling recruitment or retention of employees, or the benefits of diversity of thought and experience. The Appendix provides a checklist of questions for a manager to consider to determine whether an adjustment is "reasonable" in the terms of the Act – but it is not clear how, without training or support, a manager would determine, for example, whether "the financial and other costs reasonable" nor is there much to support decisions that are about a proactive move beyond compliance towards promoting employment equality for disabled people.

The sickness absence policy makes numerous specific references to considering reasonable adjustments as part of key sickness absence procedures, which is positive.

The policy uses the term "chronic ill-health" several times, including "Chronic ill-health and disability" and it might be helpful explicitly to make a connection between this concept of a long-term health condition and the definition in the Equality Act of what constitutes disability for the purposes of the Act, i.e. these are not mutually exclusive concepts. The phrase "long-term health condition" might be preferable to the use of "chronic". There is useful highlighting of the potential for redeployment, given that this may be a reasonable adjustment.

The policy references redeployment and discusses this as being sought first at the employee's existing grade and then at a lower grade without salary protection. It would be useful to get a legal opinion on whether it might in certain circumstances be reasonable to provide salary protection.

It should also be noted that Archibald v Fife Council⁶ established that redeployment at a higher grade can constitute a reasonable adjustment where the employee can perform that higher grade role to an acceptable standard.

More generally, the findings of that case that the positive duty to make reasonable adjustments may extend to positively discriminating in favour of disabled people needs to be understood throughout the GLA, including by being reflected in policy documents, training and broader communications of disability in the context of general narratives about equality, diversity and inclusion.

Appendix 2 of the sickness absence policy deals with referral by managers to occupational health. This sets out the role of occupational health on clarifying prognosis and recommended adjustments.

Profile for disability as a diversity issue

There needs to be greater understanding and profile for disability equity more broadly across the GLA, which can be helped by effective messaging during induction and effective and specific training for line managers on managing disability and health issues effectively. This should be linked to line manager performance to recognise this aspect of what line managers do, and to drive greater consistency between managers.

Access to Work

There is often a lengthy process of engaging and securing support and funding, which is stressful and prevents employees working. HR should always quickly signpost candidates or employees who are definitely or likely to be disabled in the terms of the Equality Act to Access to Work, as not everyone will know about it.

Resourcing

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The GLA will always have resource constraints but it is crucial to consider regularly where functions are under-resourced and to analyse the cost in money, time and productivity that results. Shifting resource or providing additional resource should be

⁶ https://www.hrlaw.co.uk/site/infobank/infobankarticle/archibald_v_fife_council.html

regarded in the same way as effective workplace adjustments – as corporate investment in both workplace productivity and in delivering a diverse workforce and an inclusive workplace.

Capacity

To be truly diverse, the GLA needs to consider flexible and agile working for all employees and to understand that for some disabled people perhaps up to 10 per cent of a role might need to be reallocated because adjustments are not possible to ensure an effective level of performance. However, this can often be balanced by the skills, experience and diversity of thought that individuals can bring to an organisation. Job carving, reallocation within teams of tasks on a temporary basis, outside of standard job descriptions can be meaningful tools to increase recruitment, retention and development of disabled and other employees. The managers' quidance lists this first as an RA -but in practice this has proved difficult.

Employee survey data

From the staff survey results for 2019, based on benchmarks set in 2017, the biggest decline was in attitudes towards the working environment. Fewer people in 2019 believed that they had the resources they needed to complete their work effectively or were satisfied with their physical working conditions. Perceptions of whether the GLA is an accessible place to work had declined by 10 per cent.

However, the GLA results compare very well regarding employee voice (having the opportunity to contribute views before changes are made that affect them). The implementation of the recommendations in this review, which reflects very strongly on the experiences of disabled employees, including those engaged with the staff network on disability, provides a concrete opportunity to demonstrate that that view is justified.

While the survey results can be disaggregated by length of service, management responsibility, gender, age and ethnic origin, there is less scope for this by disability identity. This means that it is not possible to disaggregate the overall scores for the question about being treated fairly and with respect by disability.

Of note, however, is that for the question about whether the GLA is an accessible place to work – one of the questions for which there had been the biggest decline in positive scores since 2017 - when comparing scores for BME staff and non-BME staff, this was the question with the biggest difference in perceptions between these two groups. Non-BME employees were 15 per cent more positive that the GLA is accessible than their BME counterparts. This is an important finding. However, intersectionality as it relates to health/disability cannot become a feature of the GLA's strategy and evaluation without richer data sources.

In an area where disaggregated data is possible, those caring for an adult relative with a disability give a lower score of 72 per cent for the GLA being a fair place to work, compared to 83 per cent overall. And those with 'other' caring responsibilities responded the least positively towards the GLA being a truly accessible place to work (35% positive).

Those who answered yes to having a disability are 5 per cent less engaged than their colleagues who do not identify as having a disability. Those who said they have a disability were asked if they felt supported. Those who said no are 8 per cent less engaged than their colleagues. While there is a relatively low base size for those who said no for the questions on inclusivity, they are far less positive than those who do feel they have access to the support they need. The biggest difference between those who do and do not have access to support is towards whether people would recommend the GLA as an inclusive employer – a difference of 59 per cent.

The company presenting the survey data comment: "[This] stresses the importance of making sure that everyone has the support they need."

Providing the confidence, trust and rationale to ensure that more employees share personal information about their health/disability status is crucial to ensure that the GLA is an equitable, diverse and inclusive place to work.

There were some qualitative responses in the survey that are relevant to this review, notably on internal processes:

"...I was amazed by the lack of investment in the IT and desk facilities where most organisations have invested in proper hot desking facilities which can accommodate more staff with modern IT facilities. The proposed Transformation programme does not appear particularly transformative and is a missed opportunity. The internal procedures (HR and Finance) appear overly convoluted and add unnecessary time and bureaucracy to the most simple of tasks..."

"I used to be very proud to work for the GLA but I feel the way the Transformation project has been managed has made working conditions very difficult for some members of my team whose work is different to most other staff and I think the new Smart Working policy discriminates against staff with certain disabilities (as well as childcare commitments). These problems could have been avoided if the Executive Team had listened to concerns that were raised rather than dismissing them..."

"I think significant work has taken place to make improvements since the last survey. However, the major concern is about the physical working conditions. There aren't enough desks and if there are desks normally a keyboard or something else is broken. I don't believe enough thought has been given to the mental health impact of people not having desks, and the stress that comes with it."

A conclusion of the presentation on staff survey data is: "The working environment Is a pain point and is not seen as being conducive to productive work or wellbeing."

Goss Consultancy Limited October 2020

Appendix DRAFT Process for identifying and managing workplace adjustments

At recruitment stage

Workplace adjustments identified by line manager or HR during onboarding, if not before, in discussion with candidates and/or by referral to employee health service.

A note kept of whether the candidate/employee is likely to fall within the definition within the Equality Act of being disabled (to be kept under review) and to inform decisions about the range of adjustments required and/or possible to drive greater diversity/employment of those facing the greatest disability-related barriers to employment.

Where eligible, applicant/employee encouraged to approach Access to Work for additional support with assessing and/or funding adjustments.



Discussion between employee and line manager to:

- a) agree adjustments and begin implementation process; or
- engage employee health service and/or Access to Work (only "disabled" employees eligible) in assessing the individual, role and potential adjustments.

HR to be kept informed through shared access to an Adjustments Agreement and/or Staying Well Plan (the aim is to complete this part of the process within two weeks of a job offer).



Adjustments and review points agreed by line manager and employee.

Implementation of adjustments begins. Key functional leads are responsible for timely delivery. (From initiation, all adjustments should normally be in place before new employee begins work, unless these are to be activated because of change in symptoms for an employee).



Efficacy of adjustments from employee and from line manager perspective reviewed regularly.

During employment

Existing employee, line manager or employee health referral identifies a need for workplace adjustments to maintain or improve attendance, performance or health and well-being.



Where eligible, employee applies online for Access to Work funding.



Adjustments and funding are clarified – process driven by line manager, with support from HR.

HR to be kept informed through shared access to an Adjustments Agreement and/or Staying Well Plan (the aim is to complete this part of the process within two weeks of a job offer).



Implementation of adjustments begins. Key functional leads are responsible for timely delivery. (From initiation, all adjustments should normally be in place within two weeks.)



Efficacy of adjustments from employee and from line manager perspective reviewed regularly.