



Creating a disability-smart
world together

Disability and workplace health in 2023: Key trends in employer workplace health strategy, OH practice, and Government policy

Society of Occupational Medicine

Angela Matthews, Head of Policy and Research, Business Disability Forum

A return to simplified strategies for supporting workplace health

- We are seeing policies and processes being reviewed with a craving for keeping things simple while not compromising on detail, quality, and a good employee ('customer') experience.
- Too many separate policies, poor experiences of getting adjustments, and needlessly 'awkward' conversations between managers and employees are causing our members to embed two key principles:
 - the **experience** of a procedure;
 - and **de-jargonising language** used by employers.
- The underlying principle: **communicating with each other is not complicated.**

Three key recurring themes that employers are designing into their workplace health support procedures

- Disabled employees don't like more admin as soon as an employer 'hears' the term "disability". Tailored Adjustments plans, disability passports, 'Be You' plans, adjustments agreements. "There's more work when you get a disability". **Remove the stress and the additional work.**
- Don't be process heavy. There needs to be a consistent way of everyone getting what they need, but employees should not feel they are part of a rigid, formal, official employment process just to indicate they have a disability or discuss adjustments. The process is the employers job, but it should not be the employee's experience. **Relax and just 'have a jargon-free chat'.**
- The crux of the process purpose and the wording of a conversation should centre around the underlying principle: **"What you find difficult at work and how can I make that easier for you?"**

Actions for ensuring an inclusive OH experience: Be proactive and explain what you do

The following are what employers should be requesting when they design OH tenders, and they are also what OHPs can do to be inclusive providers:

1. “If the law or practice in this area changes, we want our OHP to advise us of that”. Many employers are still automatically referring all news starters to OH for pre-employment health questionnaires – and OH are doing them. It is probably unlawful in most cases, and it also devalues the worth and expertise of OH. **Be proactive with your clients and ‘show off’ your expertise.**
2. Expect that the employer and employee don’t know what the appointment is for (or what you do). Most ‘complaints’ we get about OH are where there are inaccurate expectations and perceptions of what OH is there to do. When you have contact with an employer and employee, **tell them what you will do and what will happen during the assessment.** If nothing else, this will help the employee know if they need to ask you for adjustments to the assessment.

Actions for ensuring an inclusive OH experience: Accessible assessments

3. The appointment or assessment did not take place in an **accessible environment**. The environment includes the **online platform** you use as well as the **physical building**. Don't just think wheelchairs and buildings. Think walking distance from arriving at the location to the assessment room, car parking, building navigation, light and sound sensory experiences, and accessible rest facilities. For virtual environments, think about your background, the sound and light quality, and expect that you may have to use a different online meeting platform.

Actions for ensuring an inclusive OH experience: Inclusive communications

4. The communication was not accessible. All OHPs should expect to provide a report in a different format and make adjustments to the assessment or appointment. **Four things you can do differently today** include:

- Any e-platform you use should be accessible. This means easy to use, and it also means compatible with a wide range of assistive technologies.
- Know where to get a British Sign Language (BSL) interpreter so that you can respond quickly if an employee requests this. If you don't have a provider (in person and remote options) in your procedures, find one today.
- Every PDF you provide should be an accessible one.
- Ensure 'contact us' options provide – at the very least – a written and spoken way of getting in touch with you, not just a telephone number.

Five government policies to watch (but not wait for)

1. **Access to Work.** No longer a helpful recommendation in assessments. Employers are going private because it's cheaper than the alternative 9+ month wait and their employee going off sick while waiting. Adjustments processes and workplace health provisions are being revised – and they are leaving ATW out.
2. **Sick pay.** We are waiting to hear, but we have been clear reform must include sick pay during phased returns. Employers are already doing this wherever they can, so OH should be considering this too.
3. **Working flexibly.** A flexible working right from Day 1 is ok, but it definitely isn't due to become 'the default' as the Government consultation suggested. Be creative. If there's no reason why something cannot be done, it might be reasonable to do.
4. **Supporting carers.** Carer's leave is due to become a statutory right, but our research shows it falls far from what's needed. Our members are disappointed and many are inviting carers in their workforces to request adjustments too.
5. **Technology.** A huge gap in workplace productivity and also during rehabilitation before returning to work after an injury or ill-health. Businesses are good at tech and they are expecting their OH advice to make assistive tech related suggestions.

Get in touch

Angela Matthews

Head of Policy and Research, Business Disability Forum

Email: angelam@businessdisabilityforum.org.uk