

The Great Big Workplace Adjustments Survey 2023

A survey of how far disabled employees get what they need, keep well, and can be themselves in today's workplaces

Full research report, June 2023



**The Great Big Workplace
Adjustments Survey 2023**



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Executive Summary

The Great Big Workplace Adjustments Survey was first developed by Business Disability Forum in 2018 and published in 2019. We did this because we could see that the experience of workplace adjustments was fundamental to how included or excluded employees felt at work, yet the volume of questions about the process from employers and reports of poor support from employees we receive continues today.

The Great Big Workplace Adjustments Survey 2023 project ran from October 2022 until June 2023. We designed a survey which repeated key questions with the same wording from the 2018/2019 survey to provide a direct comparison of views between 2019 and 2023.

In the 2018/2019 survey, we saw the beginnings of how disabled employees were not viewing workplace adjustments in isolation of their wider experience of their workplace. Therefore, for the 2022/2023 survey, we added the following topics:

- The barriers that remain in the workplace after adjustments have been made.
- Disabled employees' experiences of occupational health.
- The intersections and other person 'characteristics' that impact disabled employees' experience of inclusion or getting adjustments at work.
- What causes disabled employees work-related stress.
- Disabled employees' overall health and wellbeing and how their disability and working life interact and impact one another.

We received 1,480 responses from employees who have a disability or condition and who are in work, and we received 396 responses from managers.

Key statistics

- **78 per cent** of disabled employees told us they, rather than their employer, had to initiate the process of getting adjustments.
- **58 per cent** of employees said getting the adjustments they needed was due to how assertive and confident they are to ask for that support.
- **56 per cent** of disabled employees said there are still disability related barriers in the workplace after adjustments have been made.
- Only **37 per cent** of disabled employees feel their employer is genuine about removing all disability-related barriers and making the workplace inclusive for disabled employees.
- Only **18 per cent** of disabled employees said their adjustments have removed all barriers in the workplace.
- **10 per cent** of disabled employees said it was easy to get the adjustments they needed.

- The speed of getting adjustments has **improved by 4 per cent** since 2019. But **1 in 8** disabled employees are waiting over a year to get the adjustments they need.

Key findings

- **Managers' experiences of supporting employees and providing adjustments is made more difficult by over-complicated processes.** Many managers (64 per cent) were confident to have discussions with employees about their disability or condition. They were generally supportive of implementing flexibility into how their teams work, made efforts to 'check in' with their teams when they were all working remotely, and wanted to ensure disabled employees had everything they needed in place to do their job. However, frustrations from managers were mostly around different types of support being accessed in different ways and in different parts of the business, instead of having what one manager called **"one single entry point"** into all workplace health- and adjustments- related support that they could offer to employees.
- **Disability passports and adjustments plans did not improve the experience of disability inclusion or getting adjustments.** In fact, only **11 per cent** of employees who have a passport in place said they spoke to their managers more about their disability or adjustments since having the passport. In addition, **22 per cent** of employees with passports have never had their adjustments reviewed. Both employees and managers agreed that passports were not needed if workplace adjustments processes were effective and when colleagues, teams and managers had good conversations about how they all work together and embedded culture of flexibility with how everyone works.
- **Occupational health is currently not working compatibly with employers' workplace adjustments process.** Just **22 per cent** of disabled employees and **25 per cent of** managers said occupational health had helped support the employee to manage their disability or condition at work and understand the adjustment that would help. Both employees and managers also regularly referred to inaccessibility as well as the poor quality of both assessments and reports. Occupational health was said to be effective in a small number of cases. These cases included ongoing good communication and relationship between the employee, manager, and occupational health service, and where the occupational health provider understood the difficulties the employee was experiencing at work and understood the types of adjustments that would and would not work in that employee's specific work environment. Not many managers were involved in the occupational health process, even when they had made referrals. However, when they were involved, feedback from both employees and managers about the process and its outcome was almost always better than when managers were not involved.

- **Working life during the pandemic greatly impacted disabled people's inclusion in their workplace, some for the better and some for the poorer.** The move to home working was positive for many disabled people; **72 per cent** of disabled employees told us that it was easier to manage their disability when working from home and **52 per cent** said the pandemic was the first time they could work in the way that best suited them. That said, online meetings presented significant barriers for some people while workplaces took a relatively long amount of time to become familiar with accessibility features of online meeting platforms. For others, the online meeting platforms with inbuilt captions enabled the easiest way of doing meetings they had experienced in a while. Home working did not work for everyone, though; some employees were allowed back into the office as an adjustment. Overall, managers and employees said there were very little instructions or advice from senior managers about what would change in terms of getting adjustments at home and also how the remit of what is 'reasonable' should change, and therefore how managers should change their decision making about adjustments as a result. Some managers said the pandemic took a lot from them in terms of their mental health and well-being, they felt burnt out, and received little recognition from senior leaders.
- **Disabled employees experienced bullying and harassment often in both stark and subtle ways.** For example, **38 per cent** of disabled employees told us they have been bullied or harassed in their workplace because of their disability or condition and **40 per cent** said they had felt patronised or put down by other people at work because of their disability or condition. Disabled employees told us that some people in their workplace had told them that they were only here because they “ticked the disability box” on their application form which guaranteed an interview. Some employees were told, “we have made adjustments for you so why can't you do everything now?” or they were compared to someone else with the same condition as them – i.e., “X has your condition and they can do it, so why can't you?”. Employees had also experienced subtle but regular comments such as being “spectrummy”. It was also clear that a complicated, ‘clinical’, and lengthy process of getting adjustments and support also felt like harassment. Even where employees did not feel they could definitively say they had been ‘bullied’ or ‘harassed’ *per se*, some said the general environment for them as a disabled employee in their organisation felt “hostile” or “uncomfortable”.
- **Disabled employees experienced similar mental health and wellbeing issues as their colleagues, but they recognise managing a disability and condition all of the time added an additional type of stress and pressure.** Only **5 per cent** of disabled employees said their mental well-being is generally very good. Key to improving disabled employees' mental health and wellbeing was connecting with people outside of work, having the space to take breaks during the day, not having to work at the weekend, having somewhere quiet to sit during a break at work, and getting positive feedback from colleagues and managers.

- **Health and well being initiatives at work were often inaccessible and not inclusive to disabled employees.** Less than half of disabled employees said their employer's employee assistive programme was accessible and inclusive to them. In addition, signs on lifts telling employees to use the stairs instead, promotion of mindfulness techniques, and diet-related advice were all examples of initiatives that had not considered that peoples' bodies are different and that these activities may feel insensitive or, in the case of mental health related advice and apps, even triggering for some. Although disabled employees said they did not feel their employer was intentionally excluding them, it did however cause them to feel "left out".
- **Disabled employees think a lot about what they want in their current job and in their future career.** This almost always includes thinking about the nature of their disability or condition and how it might progress in the future, alongside what they do or do not see their future selves doing or being at work. Some told us they were looking to be promoted to a more senior role with higher pay within the next two years (**62 per cent**). Others enjoyed their job and wanted to stay in it, but they wanted to reduce their hours to help them get a good work-life balance while managing their disability or condition (**55 per cent**). However, some **28 per cent** told us they wanted to leave their current employer because they did not feel they had been treated well. Some employees said they felt "stuck" in their current organisation; they wanted to do more but they did not know what options are available to them, their disability or condition is hard enough to manage while working, and/or getting adjustments took them so long that they did not want to change anything for fear of having to go through the whole process again. Some employees felt underutilised and "bored". It was clear from this section that everyone has different goals for their lives for many different reasons and, to some people, success is not about progressing to full-time senior roles; it is instead about reducing hours and responsibilities to reduce stress and achieve a better work-life balance.

Recurring themes

We identified themes that ran through each section of the survey. They were as follows:

- **Disabled employees' experiences of feeling included and having adjustments at work are complex** and often filled with mixed emotions, whereas for their managers and wider support teams, adjustments are generally often seen as a 'process to be fulfilled'. There was often a feeling from employees that the emotions that come with having disability- and adjustments-related conversations were intensely personal, and that the experience of their disability or condition in work and outside of work have an impact on one another. This was not always recognised by employers and their processes, although there was evidence that managers see the barriers for disabled employees in their workplaces and want to remove them.

The most difficult conversations and tensions in employee and manager relationships often came when adjustments needed to change or when a 'first choice' of adjustments could not be fulfilled. From the employee's perspective they were being let down while, from the manager's perspective, they were properly following workplace decision-making processes. This is the distance between employees and managers that needs the greatest attention.

- **Managers' confidence in making adjustments has improved** – but workplace health and adjustments-related support services are often disorganised and not streamlined within organisations. This leads to employees not getting the adjustments they need. In the 2018/2019 survey, managers not being confident in the adjustments process or how to fulfil requests for disabled employees' support was the main reason for many delays, and for employees not getting adjustments.

However, this time round, we found the knowledge, skills, and understanding of managers had improved; it was now about complicated and multiple ways 'in' to a workplace adjustments process that was confusing for managers and that needed a lot of managers' time and energy to figure out. Multiple contracts and different types of support appeared to be accessed through, and across, different departments in organisations and it was rarely brought together behind one internal centralised service where managers could contact one person as their way into all of the support they could offer to their employees. The results were, firstly, stressed managers who were trying to do the right thing for their team members and, secondly, upset employees who just wanted to do their job but didn't have what they needed in terms of adjustments to do it.

- As per the last survey, **a significant number of barriers remain in the workplace after workplace adjustments have been provided for individuals**. The reasons employees gave for this was that adjustments were generally made for their specific situation, their specific job, and to their immediate direct working location and set-up. Workplace adjustments, however, did not address the barriers elsewhere in the organisation that disabled employees continued to experience. Examples of these given by disabled employees were bullying and harassment, regular hostile comments and microaggressions from colleagues and senior leaders, inaccessible shared spaces (such as eating areas, social areas, and walkways), transport to work, inaccessible development opportunities, potentially unfair promotion and internal recruitment processes, and getting around the whole workplace site.

Managers were generally equipped to make adjustments to a job so that they could support an individual's performance and hence direct job outputs, but they often did not have the scope of authority to make adjustments to the culture and wider physical and non-physical working environments and social relationships which existed at all levels of the organisation. This means that it continues to be the case that workplace adjustments address barriers in someone's immediate job, working location and team, but wider cultural barriers related to bullying and harassment, general workplace culture, and social interactions and behaviours, still need wider addressing.

“The adjustments help more than not having them, but they don't remove all of the barriers because the conditions are still there and still affected the working day. For example, they can't help when I have a bad day and am in so much pain.”

- **Disabled employees felt pressures and experienced poor mental wellbeing at work as all employees can do, but amplified** due to the experience of not getting the support they needed and by the very nature of living with a disability or condition all day, every day. Stressors included: workload, unclear communication and decisions, senior leaders leaving non-inclusive behaviours unchallenged, and anxieties unaddressed by lack of transparency and supportive communications during times of change. On top of these pressures that everyone experienced was the additional 'layer' of having a disability or condition and 'fighting' for adjustments or waiting for them for a long time.

The nature and experience of work-related stress was therefore multi-layered for many disabled employees. For those who could not do their job to the quality that they are skilled to do because they do not have adjustments, it often had the effect of making them feel 'vulnerable' in a workplace where support was not equal and not equitable for disabled employees.

- **Better understanding is still needed of the whole-life experience of having a disability or condition.** Even the most inclusive and accessible of teams and workplaces could not remove the wider impact of a disability or a condition itself; for example, no amount of adjustments or inclusive culture-shifting could take away side effects of medication, discomfort that comes from physical conditions or where chronic fatigue or chronic pain persist daily whether at work or at home.

A greater understanding is needed that disabled employees do not just experience their disability during working hours: it is there all the time, and that means they experience the emotional, physical and/or mental toll of having a managing disabilities and conditions both in work and outside of work. So, a lack of adjustments in the workplace does not just affect the employee in working hours but impacts on their whole day, their whole body and 'whole life' experience. Employees necessarily need to view workplace adjustments through this wider lens as a crucial piece in the 'whole life' experience.

Concluding thoughts

Disabled employees continue to struggle at work due to both individual barriers in their job and wider barriers in their workplace environment and working culture. Conversations about having a disability between employees and managers and with the wider team, and the difficulty in getting adjustments, remain huge barriers. In addition, both employees and managers said that senior leaders were not always calling out poor behaviours, microaggressions, and insensitive comments even when they witnessed these behaviours themselves.

These factors led to an impact in overall work-related stress and a detrimental effect on the level of employees' mental wellbeing that they said they experience each day. However, work-related situations and getting adjustments can only go so far when the experience of employees' disabilities or conditions are difficult every day, inside and outside of work. It is for this reason that **a better understanding of managers and wider workplaces about the whole experience of having a disability and being disabled is needed, and it is also why an improved and more mature approach to removing disability-related barriers for disabled employees at work is needed.**

Ultimately, disabled employees do not see their experience of workplace adjustments in isolation, but in the context of how they are treated by others in the organisation, the existing barriers that remain after adjustments are made, and the general culture of disability inclusion in their workplace. While managers and leaders often see workplace adjustments as 'one' process in an employee's experience, for the disabled employee, having adjustments and removing barriers underpins and exists within every single experience of the workplace. Disabled employees experience workplace adjustments as a whole work experience, not just as an isolated process.

Introduction

The Great Big Workplace Adjustments Survey was first developed by Business Disability Forum in 2019. We intended to repeat the survey two years later. However, in 2021 we were still in the midst of the COVID-19 pandemic and so we decided to wait because many workforces were yet to establish their new adjustments processes or adjustments and working arrangements. We issued the survey that informs this report in November 2022. We left it open until March 2023 and, during that time, we engaged with many of our members, disabled employees, and disability employee networks to get their feedback, talk about workplace adjustments, and encourage them to share their experiences in the survey themselves. We were thrilled with the response both in terms of the number of survey responses we received, and also in the comments and feedback from people during the promotion of the project. We received a total of 1,480 responses from employees with a disability or condition, and 396 responses from managers.

The last survey in 2019 concentrated on the workplace adjustments process only. This was the right thing to do at the time, and it gave us a good baseline for the basics of what should be considered within each iteration of this survey. However, since that survey and in its findings, we started to see that the workplace adjustments process itself was only one part of what contributed to removing barriers in the workplace for disabled employees. The figure from the 2019 survey that workplace adjustments only removed all barriers at work for 19 per cent of disabled employees stayed with us, and we looked into it more. We worked with our members and with disabled employees working in their organisations and with leaders of employee disability networks to come up with additional related topics we wanted to introduce into the 2022 survey that we felt had a huge impact on disabled people's everyday lives at work and which the experience of workplace adjustments influenced.

Therefore, in addition to a comparison between 2018/2019 and 2022/2023 findings, this report also shares findings on the following topics:

- **Disability passports and Tailored Adjustments Plans** – how passports and plans impact overall workplace adjustments experience, and how far they are being used appropriately by employers.
- **Occupational health** – the effectiveness and use of occupational health from the perspective of managers and employees.
- **Working during the pandemic** – who now works from home indefinitely, who needed different adjustments during COVID-19, shielding, and returning to the office.
- **The intersectional role of assertiveness and self-confidence** – disabled employees' 'social' experience of work, including the impact of 'masking' a disability or condition, how far employees being assertive about what they need helps, and the bullying and harassment disabled employees experience at work.

- **Workplace stress and wellbeing** of disabled employees – how stressed disabled employees feel, how far they feel they have time to manage their disability and do their job, use of Employee Assistance Programmes (EAPs), and how inclusive employees find their workplace health and wellbeing initiatives.
- **Job satisfaction and disabled employees looking beyond their current role** – what employees want and how satisfied they currently are.

The survey collected a lot of statistics and we also invited respondents to explain their experiences in their own words to many of the questions. Therefore, each chapter begins with a set of key statistics, followed by a narrative formed by the words of respondents themselves. We were privileged to have received almost 7,000 free text responses which many respondents took time and care to share with us. In addition to this, we were keen when we first developed The Great Big Workplace Adjustments Survey that this was about providing evidence of the workplace adjustments experience through the voices of employees and managers in their own words. We have therefore heavily quoted from the many responses we received in each chapter. At times, we have quoted where we wanted to illustrate the scale or regularity of an issue or experience that emerged. We also listened to feedback from the last survey and how quotes and statistics were presented there. As a result, to those who see colour or different shades of colour, statistics are presented in purple, and respondents' quotations are presented in blue. We encourage anyone who wants to receive this report in a different way to get in contact with us, as we are keen to provide a version that is as easy as possible for people use and engage with this research.

In the Appendices, we have explained the methodology we have used to collect all of this data (Appendix 1) and, at many people's request, we have also copied the key statistics out of the main body of the report and put them all in one place for your ease of reference (Appendix 2).

As per our Acknowledgements section, we would like to thank the very many people involved in this huge project, and to everyone who shared their experiences with us. For many, this survey was the first time they had shared something about themselves or an experience close to them with anyone. Everyone has different experiences of working life whatever their job or life circumstances. We ask that, as you read this report and interact with its findings, you remember those people who have never shared the insights you are reading with the people they work with every day.

What are adjustments?

What is a 'workplace adjustment'?

A **workplace adjustment** is any change to the way someone does their job which enables them to work in the way that best suits them.

Workplace adjustments are typically arranged for job candidates and employees who have a disability or condition. The core aim of workplace adjustments is to remove the barrier/s that someone is experiencing in the workplace and therefore enables them to do their job.

Common adjustments include assistive technology (such as speech-to-text software), adapted ergonomic equipment (such as a mouse or keyboard), different working hours or shift patterns, a fixed desk in a 'hot desk' environment, or communications support (such as British Sign Language interpretation). The key advice we give to employers is not to focus on a medical diagnosis, but on the issues someone is experiencing and how to resolve them. We often say that disabled people are the experts in their own condition and so, when they know what will help them, trusting them is key.

This is all still the case. However, employees who are experiencing a new condition or who acquire a disability (bearing in mind that some figures show 83 per cent of disabilities are acquired, not present from birth) are likely not to know what they need but instead need support and a diagnosis to help them to understand their condition, how to manage it and what that means for their work.

And, due to health and social care-related services in the UK unfortunately being overwhelmed, backlogged, and under resourced, the reality is often that employees are waiting very long periods – sometimes between one and four years – to get a diagnosis which informs them what their condition is and helps them understand the full impact it will have on their working and personal life.

In practice, this means employees are often experiencing difficulties in their job or working environment before they know what their condition is, or even if they have a condition at all. For this reason, an increasing number of employers make adjustments for **anyone** who is finding something difficult at work, regardless of if they have an identified disability or condition that 'qualifies' them for support under the Equality Act 2010.

Why not 'reasonable adjustments'?

The duty on employers to make reasonable adjustments for disabled job applicants and employees comes from the Equality Act 2010. This duty was first introduced to the UK in the Disability Discrimination Act 1995. The duty to make 'reasonable adjustments' has therefore been embedded in disability-related workplace equality law for some time.

The Equality Act 2010, its statutory employment guidance, and UK employment case law gives us a framework for identifying what constitutes an adjustment that is 'reasonable'. However, this legal framework relies on all parties involved having definitive answers to some key questions - for example, what someone's disability or condition is, how long that disability or condition has or will last, and whether an individual's specific experience and nature of a condition fits the criteria of "disabled" in the UK Equality Act. Identifying what is 'reasonable' is, therefore, quite a legal procedure.

Sometimes it is necessary for employers to go through such a procedure to identify if an adjustment is 'reasonable'. However, the process can feel rather 'clinical' and it takes time and a lot of information from both the employee and employer. This can also mean that, at the very time an employee needs support and changes to their job and working environment, the process is increasing the length of time it takes to get that support and those changes in place.

This creates a very 'medicalised', legal narrative to supporting disabled employees and being an inclusive employer. It can also feel like 'hard work' or, from disabled employees' perspective, that they are 'a problem' for their employer, or that they have to go through a lengthy process just to get what are often small changes approved to the way they work.

Increasingly, employers have therefore shifted away from the legal terminology of "reasonable adjustments" to the phrase "**workplace adjustments**". It takes the legal and clinical tone away from supporting disabled employees. In addition, this broader inclusive language has allowed employers to broaden the remit of who can request and benefit from workplace adjustments whenever they need to change the way they work or when they find work difficult because of their current life circumstances. For example, many employers make workplace adjustments for employees who are carers or who look after someone, pregnant or experiencing menopause, going through family or relationship changes, or experiencing a significant life event, such as losing someone close.

In this way, the shift from "reasonable adjustments" to "workplace adjustments" has opened up conversations which allow as many employees as possible in workplaces to request support and changes to how they work to make their work more manageable – which also often means that they are more productive.

What are 'everywhere adjustments'?

Everywhere adjustments refer to the equipment, adaptations, or support that disabled people use in **every** area of their lives, not just in the workplace. Everywhere adjustments are needed at home, when out in public, socialising, and when at work. They are needed in every area of their life.

Although everywhere adjustments are not provided by someone's employer, the employer may have to make changes to the workplace or working environment to allow someone to use their everywhere adjustments while they are at work.

Examples of everywhere adjustments include:

- Assistance animals, including emotional support animals, guide or hearing dogs, and medical dogs.
- Mobility aids such as frames, wheelchairs, scooters, sticks, and crutches.
- Devices or equipment to help part of someone's the body function well, such as breathing machines and tubes, stoma bags, or catheters.
- Medical garments, prosthetics, and orthotics – such as prosthetic limbs, splints, compressions, or adapted footwear.
- Blue badges that allow people to park in designated accessible parking spaces.
- Environment controlled medications or treatments – such as insulins, medically prescribed foods that need to be kept in the fridge or free from cross-contamination, and other tablets or medical liquids that needs to be kept at specific temperatures throughout the day.
- 'Human' support – such as a support worker, or personal assistant or carer.
- Other medications which may need to be taken at certain times throughout the whole day, every day.

Who responded to the survey: Types of disabilities, being ‘disabled’, and the adjustments people live and work with

A total of 1,480 employees with disabilities or conditions responded to the employee survey.

Self-describing as “disabled”

We asked 1,480 employees with a disability or condition whether they describe themselves as being “disabled”.

- **43 per cent** said they would describe themselves as disabled.
- **27 per cent** said they would not describe themselves as disabled.
- **27 per cent** said describing themselves as disabled depends on the situation.

Throughout this report, although just 43 per cent said they definitely would describe themselves as ‘disabled’ for sentence simplification and ‘shorthand’ we refer to employees with disabilities and conditions as “disabled employees” or just “employees” throughout this report. It should be remembered that for the purpose of this report “disabled employees” refers to a cohort of respondents and, as above, “disabled employees” is increasingly a term that employees with disabilities and conditions do not recognise themselves in or identify with.

Type of disabilities and conditions among survey respondents

The following table shows the types of conditions that the 1,480 respondents have. It was common for most employees to have more than three conditions.

Type of condition (Number of employees: 1,480)	Percentage
Mental health	38
Musculoskeletal	34
Developmental or neuro-processing (such as dyslexia, dyspraxia, and autistic spectrum conditions)	33
Chronic pain	31
Long term condition (such as diabetes, HIV, heart condition)	31
Any condition that affects your mobility or how you move	28

Energy limiting condition (including ME and chronic fatigue, fibromyalgia)	25
Neurological (including stroke, epilepsy, migraine, MS, spinal and brain injury)	23
Deaf or hearing related condition	9
Blind or vision related condition	5
Learning disability	4
Cancer	3

Two additional categories we offered in the survey were “speech related (including voice loss, stammer and stutter)” and “limb loss or difference”. Less than 40 people indicated they had these conditions, and we have therefore not reported on them separately.

In the category “Long term condition”, the most common free text responses were:

- Autoimmune conditions.
- Bowel and digestion related conditions.
- Respiratory conditions, predominantly asthma.
- Sleeping disorders.
- Long COVID.

In addition, **79 per cent** said their disability or condition fluctuates and they cannot predict how they will feel most days.

A small number of responses said they have not got a known “condition” *per se*, but they feel they are or are becoming disabled due to getting older, the menopause, or due to their weight. Some were waiting for or expecting a diagnosis of a condition imminently.

The ‘everywhere adjustments’ that people use

Many employees tell us they have support and adjustments that were not provided by their employer as a workplace adjustment, but which they nevertheless need to go to or be in work. These adjustments or type of support are needed in almost every area in someone’s life – at work, at home, when socialising, when travelling around, and when communicating and interacting with people and places generally. They are ‘**everywhere adjustments**’ because they are needed everywhere, not just in the workplace. ‘Everywhere adjustments’ are generally provided by a specialist medical or therapeutic team or a social care team. However, continuing pressure on the NHS services that have historically been the main

provider of these types of support have meant that many disabled employees are paying for these with their own money, including with their Personal Independent Payments.

People use the following 'everywhere adjustments' for support or ways to manage their disability or condition:

- **70 per cent** take medication every day.
- **52 per cent** are supported by a specialist medical team other than their GP and have to attend medical appointments routinely.
- **20 per cent** have a Blue Badge for accessible car parking.
- **12 per cent** use a wheelchair, scooter, or other mobility aid during their working day.
- **8 per cent** have a carer or personal support worker to help them at home.
- **3 per cent** have a guide, assistance or emotional support animal.

Do employees have the adjustments they need?

A total of 1,307 employees told us about their current workplace adjustments-related situation:

- **45 per cent** have adjustments and currently have everything they need.
- **35 per cent** have some adjustments and are still waiting to get everything they need.
- **9 per cent** do not have adjustments but they have requested them and are waiting for them to be put in place.
- **6 per cent** do not need workplace adjustments.

What type of workplace adjustments are employees working with?

A total of 1,307 employees told us what type of adjustments they use at work.

- **47 per cent** work flexibly or with adjusted hours.
- **42 per cent** have time off to attend appointments related to their disability or condition.
- **42 per cent** use ergonomic equipment, such as supportive chairs or different computer and desk equipment.
- **24 per cent** use assistive IT technology, such as speech-to-text software or screen-readers.
- **18 per cent** have alterations to the immediate working environment, such as altered lighting, controlled temperatures, or being exempt from hot desking.
- **18 per cent** have adjusted duties and/or targets.
- **18 per cent** have additional or longer breaks.
- **13 per cent** have flexibility to make travelling to and in work easier, such as travelling at different times or getting taxis.

- **11 per cent** use accessible parking.
- **4 per cent** have alterations to the built environment, such as ramps, needing to use the lift, wide and clear access around buildings.
- **3 per cent** work from home some or all of the time as an adjustment.

We also gave options for “support worker” and “interpreters or communication support”. However, responses to those options were less than 40, and we have therefore not reported on them separately.

Other free text responses in this question included the following insights:

- Other common adjustments included coaching, needing hearing aids that are better suited to a specific working environment, and having access to nearby or accessible toilets.
- Some employees were waiting so long for their adjustments that they either self-referred to Access to Work or they bought their own adjustments. In one employee's words, **“I did all the organisation myself as I waited 2 years for my manager to do something and in the end paid for it myself.”**
- Adjustments are less needed in organisations where flexibility is designed into the culture. In one employee's words, **“It's the freedom to ask to work the way that makes me most productive given my neurotype [which helps most]”** and, in another's, **“I don't have formal adjustments, but my job inherently allows me to work flexibly”**.

In addition, to the above, a significant recurring theme in the ‘free text’ responses was people request noise cancelling headphones to concentrate, whether working at home or in open plan offices.

Worryingly, another commonly cited adjustment in the ‘free text’ field of the survey was “communication”. When employees explained what they meant by this, they recalled the following:

- Having important decisions confirmed in writing when they are spoken quickly or unclearly.
- Being really clear what someone's tasks and priorities are.
- Knowing what is going to be discussed in meetings so people can prepare for them well.
- Knowing clearly what the actions from a meeting are.
- Not being overwhelmed with lots of requests.

- Ensure correct use, amount, and purpose of emails.
- Having a clear job description which is kept to so employees and everyone in that team and department knows what their job is and how it fits within the team.

Clear communication or clarification about the job an employee should be doing should not be a reasonable or workplace adjustment but should be provided to everyone. The UK's Health and Safety Executive clearly states one of the six most common workplace stressors leading to work-related stress is when an employee does not understand what their job and responsibilities are¹.

Conclusion

Many types of adjustments and support that disabled employees have are used at home and also need to be used in the workplace (such as taking medication, having accessible parking or somewhere to charge a scooter, or using hearing aids). These are 'everywhere adjustments'. However, employers rarely see these as workplace adjustments *per se*; however, employees see these very much as part of adjusting their working environment and situation and needing these things cannot be separated from their experience of work. While employers often provide equipment and aids that can be during work and outside of work, this can often be beyond what is 'reasonable' for what employers are required to do. It remains though that, for the employee, adjustments and support used between home and work often feel 'one and the same' thing in terms of how they experience the workplace.

Aside from this, many adjustments that are needed are a consequence of what has become the norm for many working environments now – for example, noisy open-plan office or work environments with a lot of background noise. In such environments, adjustments such as noise cancelling headphones no longer necessarily need to be classed as a workplace adjustment and therefore the preserve of disabled employees, but as almost essential for everyone.

What employers can do

Employers can do the following:

¹ The UK's Health and Safety Executive (HSE) defines six key causes of work-relates stress: demands, control, support, relationships, role, and change. HSE states two of the key causes of stress with these areas are when employees are unable to control the way they do their work and/or they do not fully understand their role and responsibilities. For more information, see HSE's information about stress at work at the following link: <https://www.hse.gov.uk/stress/>

- Consider offering noise cancelling headphones to every employee as standard practice (where appropriate). Offer a range of different types for employees to choose from. Some people do not like to wear big headphones; common reasons cited were some people with autism not liking headphones covering or touching around their head and ears, and people with upper limb, neck and shoulder weakness or musculoskeletal conditions saying large headphones can be quite heavy. In-ear noise cancelling options are preferable to some. Choice is important. If employees are comfortable while they work, that is one less thing distracting them away from their tasks and productivity.
- Establish what clear communication means across the whole of your organisation. It should not be an adjustment to know what your job is, have clear explanations, or have decisions communicated clearly.
- In organisations where roles are agile and employees can self-define some or much of their role, there should still be a remit and definition of what the role is and what is expected of the employee and when. Not having this too easily leads to work-related stress and unclear expectations of the employees and their team colleagues around them.
- Know the difference between generic home working policies, and requests to work from home as a reasonable adjustment. For example, a reasonable workplace adjustment might be to allow changes to the home working policy to ensure an employee can work from home more than the policy defines to help them manage a disability or condition.
- Consider the terminology you use around disability and workplace adjustments. Language in documents, policies, guidance, and internal communications should be as inclusive as possible so that everyone who could benefit from adjustments can see 'someone like me' in the language that is used.

The difference adjustments make to disabled employees: ‘employer-employee experience gap’

This chapter shows the difference in experience between this survey and the 2019 survey. It also shows the difference between managers’ experience and employees’ experience, and the gap between the two.

What disabled employees and managers think of adjustments when they are in place

We asked the same questions about whether adjustments have improved satisfaction, productivity, and career progression of both disabled employees and managers. The findings show a huge gap between the experience of managers and how employees feel.

We asked respondents how far they agreed with the following statements:

Statement we asked survey respondents to rate their agreement with	Percentage of managers who agreed a lot with this statement	Percentage of employees who agreed a lot with this statement	Percentage gap between manager and employees’ views
Adjustments have helped employees progress their careers in their organisations	47	18	29
Employees enjoy their job more when they have the adjustments they need	66	38	28
Adjustments have helped employees be more productive in their job	75	48	27
If employees move to a different job in the organisation, they would be able to keep their adjustments	61	43	18
Employees need to tell their manager they have a disability or conditions before adjustments are made for them	26	37	11

Employees are confident that, if adjustments need to change, everything possible would be done to provide what is needed	49	42	7
Employees are happy with the adjustments they have	41	42	1

The above table shows there is a large difference in opinion between managers and employees with a disability or health conditions on the following:

- How far adjustments have helped employees progress their careers in their organisations (disabled employees agreed with this **29 per cent less** than managers).
- Whether employees enjoy their job more when they have the adjustments they need (disabled employees agreed with this **28 per cent less** than managers).
- Whether adjustments have helped employees be more productive in their jobs (disabled employees agreed with this **27 per cent less** than managers).

The statement that disabled employees and managers agreed with almost entirely (only one percentage point of difference) was whether employees are happy with the adjustments they have – 41 per cent of managers and 42 per cent of disabled employees agreed with this. **This means less than half of employees and managers agree disabled employees are happy with the adjustments they have.** As adjustments are fundamental for disabled employees – both in terms of removing barriers practically and being their most basic of disability related employment rights, it should concern employers that significantly less than half are happy with what has been put in place.

Change in experience: comparisons between 2019 and 2023 survey

The following table shows managers' experiences of the ways in which adjustments are beneficial to employees has significantly improved since our 2019-2020 survey.

Managers' experiences – where managers agreed 'strongly'	2018/2019 (Per cent)	2022/2023 (Per cent)	Improvement (Per cent)
Employees enjoy their job more when they have the adjustments they need	31	66	35
Adjustments have helped employees be more productive in their job	45	75	30

Adjustments have helped employees progress their careers in their organisations	25	47	22
If employees move to a different job in the organisation, they would be able to keep their adjustments	42	61	19
Employees are confident that, if adjustments need to change, everything possible would be done to provide what is needed	35	49	14
Employees are happy with the adjustments they have	32	41	9

The greatest increase in how positively managers felt about the adjustments their employees have are in relation to:

- employees enjoy their jobs more (a **35 per cent improvement**);
- employees being more productive in the job (a **30 per cent improvement**); and
- adjustments helping employers progress their careers in their organisation (a **22 per cent improvement**).

The improvement gaps from the perspective of disabled employees, however, are very different. In most areas, there was a negative improvement or no improvement at all.

Employees' experiences (indicated 'agree strongly')	2018/2019 (Per cent)	2022/2023 (Per cent)	Improvement (Per cent)
If employees move to a different job in the organisation, they would be able to keep their adjustments	33	43	10
Employees are confident that, if adjustments need to change, everything possible would be done to provide what is need	37	42	5
Employees enjoy their job more when they have the adjustments they need	37	38	1

Adjustments have helped employees progress their careers in their organisations	18	18	0
Adjustments have helped employees be more productive in their job	50	48	-2
Employees are happy with the adjustments they have	44	42	-2
Adjustments have helped employees stay in their job	54	50	-4

The experience of disabled employees got worse in three areas:

- Whether adjustments help them be more productive in their job (**2 per cent decrease**).
- Whether they are happy with the adjustments they have (a **2 per cent decrease**).
- Whether adjustments have helped them stay in their jobs (a **1 per cent decrease**).

Experiences on whether adjustments had helped disabled employees progress their career did not move at all. The proportion of disabled employees strongly agreeing with this statement remained at 18 per cent.

How comparisons in the experience of disabled employees and managers have changed since 2019

There is a clear difference of opinion between managers and employees, particularly when we compare their views in 2018/2019 to 2022/2023:

- There was a **35 per cent increase** in managers who believe disabled employees enjoy their job more now than in 2019, compared to **just 1 per cent** of disabled employees.
- There was a **30 per cent increase** of managers saying that adjustments help disabled employees be more productive in the job, compared to a **decrease of 2 per cent** among disabled employees.
- There was a **22 per cent increase** of managers saying that adjustments have helped disabled employees progress their career in their organisations, compared to no change at all in opinion among disabled employees.

Why experiences differ so much between managers and disabled employees

We continue to hear from organisations that employees and employers are not always interpreting definitions and experiences in the same way. Commonly we hear that employers generally measure ‘positivity’ and success by targets achieved, whereas employees have much more emotionally-loaded experience, particularly when they are also managing a disability or health conditions all the time, inside and out of working hours. This is particularly relevant in the areas where we found the largest employer-employee experience gap.

One of the reasons for this could be a lack of clear definitions and metrics set by employers, which could mean managers and employees are interpreting definitions differently and therefore reporting a different experience. For example, “productive” to a manager may mean “my departments’ targets are being met” whereas, for an employee, productive may be “I cleared my ‘to do’ list today”. Equally, “progressing a career” is a subjective definition. We speak to employees and employers who commonly include any combination of the following in their definition of what “career progression” means:

- Working on a new project in their current job.
- Shadowing a colleague to learn a new skill.
- Reducing and altering hours to help make their current role more manageable so they can feel better about it.
- A secondment which meant returning to their original role after the secondment project had ended.
- Moved to a different role at the same pay grade and level as their original role.

To some, however, whether employees or employers, ‘career progression’ could be interpreted as simply getting a promotion. Either way, when employees talk about “progressing their career”, they often mean that their career has progressed in the way they want it to, rather than securing a job (whether through a competitive interview process or through an organisation restructuring) that is an ‘option’. This means employees sometimes make career choices with the options available to them, which are not necessarily the options that they want.

Conclusion and recommendations

- The key outcome employers need to achieve to is bring managers’ experiences in line with disabled employees’ experiences.
- Any efforts to measure managers and employees’ views must be based on shared definitions of what is being measured.

In addition, another reason for the anomaly between managers’ and disabled employees’ experiences is likely to be due to managers typically responding with what is **‘visible’** to

them – for example, employees changing job, employees laughing and being ‘positive in mood’, employees staying in their job – whereas employees are understandably likely to respond by how they **feel** about situations. The challenge is that how employees feel is not ‘visible’ to managers unless conversations happen. Until definitions and outcomes are consistent and good conversations about how employees are feeling take place, data will continue to report gaps in the views between managers and disabled employees.

Managers' experience of having disability-related discussions and making adjustments

A total of 396 managers responded to the survey. There was a general balance in representation between sectors, with 53 per cent of those managers working in private sector organisations and 47 per cent working in the public and non-profit sectors.

Confidence of managers

- **64 per cent** of managers are very confident to have a conversation with an employee who tells them they have a disability or condition.
- **45 per cent** of manager do not feel any nervousness about having disability and adjustments-related conversations.
- **43 per cent** of managers are very confident in how and when to review employees' adjustments.
- **43 per cent** of managers are very confident about what their organisation's policy and procedure for making adjustments is.
- **42 per cent** of managers are very confident in managing the wider team's attitudes to employees who have a disability or work with adjustments.
- **37 per cent** of managers are very confident about how and when to talk to an employee about making adjustments when the employee does not mention it to them first.
- **33 per cent** of managers agree a lot that the organisation gives them enough information and training about when they need make adjustments and how to do that.
- **27 per cent** of managers are very confident in their ability to recognise when someone may have a disability or condition.
- **25 per cent** of managers are very confident in knowing what disability-related language to use in different situations.

Knowing an employee has a disability

- **81 per cent** of managers said it is a lot easier to make adjustments when an employee tells them they have a disability or condition.
- **74 per cent** of managers said it is a lot easier to make adjustments when they have a good working relationship with the employee.
- **73 per cent** of managers said it is a lot easier to make adjustments when the employee knows what adjustments they need – but nearly 20 per cent said this only makes it a little easier.

In one manager's words:

- **“No individual should feel pressured to disclose their disability. However, where they feel comfortable doing so, this can help to open up the conversation, and facilitate discussions about use of appropriate adjustments which avoids problems arising ‘down the track’. For an individual to feel safe to disclose, a good working relationship with their manager is really important.”**

While this was managers' experience, employees said they generally felt telling their manager is one thing, but that the information has to go somewhere else beyond the manager as well (such as on a HR system, or to the manager's manager). Therefore, employees were often thinking about 'being comfortable' in the context of the whole organisation, whereas managers tended to think of employees feeling 'comfortable' and 'safe' to share information just with them.

How easy it is for managers to make adjustments

- Just **19 per cent** of managers said it was very easy to make adjustments for employees in the organisation.

Managers generally pointed towards their relationship with employees as the key factor which improved the ease of making adjustments:

- **“Things fly if there is joint ownership. If the employee is engaged [and has] done some of their own thinking and research, then the conversation is easier.”**
- **“Communication is the important thing and, as not all disabilities are visible, there are some things that employers won't know if employees don't tell them – especially with hybrid working and work from home being more common.”**
- **“If they [employees] know what they need and you can have a constructive, open conversation, the right outcome is much easier to achieve.”**

However, for many reasons, relationships between managers and employees are not always good. Managers know this did not affect them having to put support in place, to the point where some managers said the working relationship between managers and employees **should not** matter:

- **“All employees should get the same support, so the working relationship does not factor into making adjustments.”**
- **“We need to put adjustments in place regardless of the relationship between the employee and manager.”**

Within managers' views on the relationship between managers and employees, managers often referred to trust being the most important factor in a manager-employee relationship,

because trust is important for making adjustments, discussing disability and health, and making other referrals (such as to occupational health):

- **“It shouldn’t matter if a good working relationship exists, but broaching the subject with someone you don’t get on with can make it harder. Trust would be an issue.”**
- **“Sometimes we can be dealing with sensitive matters, and we need to be able to trust one another and have a two-way conversation.”**

Interestingly, some managers felt the opposite and that it was easier when they do not know what disability or condition the employee has or when the employee does not know what adjustment they need:

- **“I think them knowing the adjustments isn’t always useful as the OH [occupational health] report may indicate something different.”**
- **“Not knowing the condition is the easiest, because barriers should be the focus.”**
- **“I don’t need to know what an employee’s condition is. I need to know what they’re finding difficult at work. Employees need to feel safe to disclose what they’re finding hard, so a good working relationship and psychological safety is essential.”**

In addition, many managers cited eight common factors that make it more challenging for them to put adjustments in place for employees:

- **A lack of centralised budget.** In organisations where there is no centralised budget for making adjustments, managers had to rely on their own departmental budgets. Some mentioned that this means ‘reasonableness’ changes depending on what time of the year an employee requests or needs adjustments: **“[They] are more likely to get adjustments at the beginning of the financial year”**.
- **HR’s involvement is often complicated and/or unclear.** Managers do not always know when they should be involving HR or if they have the authority to making decisions or purchase some items for adjustments.
- **Buying adjustments** was also difficult and inconsistent as some managers are budget holders with access and decision-making authority over a budget and account, and others are not. Some managers were unclear on whether they could use the same account they did for the business of their department (such as marketing and advertising) to buy adjustments, and, if they did, whether they would get in trouble when the expenditure was picked up in accounts and in invoices.
- **Managers are overwhelmed and time poor.** Many managers said they have **“so many competing tasks”** that it is often hard to know what the priority is: for example, getting an employee’s adjustments today, making a Board report deadline, or making an afternoon deadline for their own job’s daily target.

- **There are some adjustments managers do not feel they can advise on.** Even though managers are responsible for managing adjustments, there were some adjustments they did not feel they could advise on or had knowledge to discuss. A common theme here was assistive technology. Managers said they knew from their employees that internal IT systems were generally incompatible with some assistive technology products, but they did not generally know why or how to overcome the issue (or if it could be overcome at all).

Managers generally said the following would help them:

- A **“single point of referral”** to make and purchase adjustments would be most helpful.
- The organisation making information and advice for managers easier to navigate instead of providing a lot of it in different places and in different formats.
- Reviewing the employees’ user journey of accessing workplace adjustments. Managers were aware that the **“speed and efficiency”** of getting adjustments is not working for employees and, as a result, for managers either.

How supported managers feel

- **49 per cent** of managers agree a lot that they know exactly what their employer means by the phrase “inclusion”.
- **25 per cent** of managers are clear about their employer’s vocabulary around disability, adjustments, and inclusion and they know what they should be doing about it.
- **22 per cent** of managers agree a lot that policies, processes and what their employer wants them to do is communicated well and clearly to managers in their organisation.
- **20 per cent** agree a lot that they have enough time to manage their team and do their job.

We often hear that managers feel they need to find the answers. The narrative in responses here was interesting; managers felt the **“fixes”** were for **employees** to find, and they were looking to provide employees with support for that. For example:

- **“The onus seems to be on me to provide all of the fixes when, in my view, they [the employee] are the one who best knows how their disability affects them at work and what might help.”**

Making adjustments is an organisation’s responsibility, not an individual department or individual managers. Managers need to know who and where in their organisation they can go to for support and advice on potential solutions. Although many employees do appreciate managers seeing them as experts in their own conditions, they also felt that although they knew how their condition affects them, they may not know what adjustments may help. Managers rarely saw the difference between employees being experts in their condition and being experts in the solutions that would help them. This creates the friction

of employees looking to managers to make suggestions, and managers looking to the employees to do the same. It ultimately remains the employer's duty to put solutions (adjustments) in place for employees, not the other way around. Expecting employees to know what they need can create extra pressure on them at the very time they need support from the employer; yet managers are needing support too, but in a very different way. It means managers and employees are, in effect, looking to each other to solve the same difficulties and pressure builds between them.

Managers also pointed to well-meaning flexible and inclusive statements and approaches from employers, but which do not ultimately help to provide solutions or remove barriers for employees:

- **“When an employee knows what adjustments they need, it is so much easier. When they want some direction on what support or adjustments are available [though] (1) I don't know what that could be [because] I'm not an expert, and (2) when the employee doesn't know what could help them the firm just says, “We'll support you with whatever you need, but doesn't say how they will support. It's almost, ‘you tell us’.”**

Ultimately, the pressure on managers is felt and without the support from the wider organisation, there is worry about asking the wrong questions and the consequences they may face as a result. One manager explains:

- **“It's hard to ask someone what might help without offending them. If you make assumptions about what might be going on or just that they might need support or alterations, you can then end up damaging the relationship and even facing a grievance.”**

Wider systemic barriers

While it was common for employees to feel that the resistance in their organisations for getting adjustments lay commonly with their line manager, line managers pointed towards resisters beyond themselves that the employee may not be aware of. In managers' own words:

- **“It's difficult because I have to advocate for a lot of my employees as the organisation is quite rigid in wanting x results from 100 per cent of its employees.”**
- **“Financial and cultural barriers [...] nearly always discriminate against disabled employees.”**
- **“Whilst I might be able to do it [make adjustments], ‘enforcing’ them is a problem; there is wider institutional problem of being very dismissive if not outright discriminatory about disability and I constantly hear that adjustments are too much work or too difficult to remember.”**

- **“There are many factors which dictate how easy it is to make adjustments. Often organisational pressure, finance, and efficiency seem to be prioritised over good support mechanisms. Personally, I am confident to make decisions and signpost/refer to support mechanisms, but there are many who are not and are pressurised by senior leaders who are managing KPIs or budgets.”**
- **“Organisationally, it would help if we focused on outcomes rather than ‘reasonableness’.”**
- **“Adjustments are always tied to cost. It would be great for the organisation to consider people not pounds.”**

Conclusion

Managers, as well as their employees, generally feel unsupported by the wider organisation. They very often ‘get’ what they need to do, and they want to be supportive, but they do not often feel their organisation has been structured or resourced to do this. Ultimately, both managers and disabled employees lose out and remain stressed, ill-equipped to do the amount of work expected of them and come up against challenges when trying to remove barriers.

There was evidence of managers understanding well the impact of employees not having barriers removed at work – particularly about knowing they had to support everyone regardless of whether they “got on” with them, and the importance of understanding barriers rather than medical and health details. However, managers could often point to wider discriminatory and unfair barriers and practices elsewhere in their organisation which hampered their will to support disabled employees. They are aware their disabled employees are put through what are often inaccessible processes (such as occupational health) just because it is part of a policy, when both managers and employees would prefer to focus on improving conversations and inclusive communication and fit for purposes processes internally.

As a result, managers generally wanted all services, budget and information in one place: a single workplace health and adjustments service for all employees and their managers, pitched as ‘workplace wellbeing whatever an employee’s situation’ rather than ‘reasonable adjustment for disabled employees only’. In one manager’s words:

- **“A single-entry point to colleague wellbeing services which take me as a manager to the colleague in the right service rather than us trying to suss out what we need – WPA [workplace adjustments], OH, or internally available stuff. I have a good knowledge, but less experienced managers can get lost and it may take ages to get to the right place.”**

What employers can do

There are two key areas for employers to work on in this area.

- Much of the issues managers reported are created by multiple points of support and inside and outside of the organisation. One 'single entry point' into all of the employer-provided health, adjustments and wellbeing support available will make decisions and finding support quicker and easier for managers which will then be felt by staff. This may include bringing together much of what many employers already provide into one internal service, but it also needs employers to undertake a review of what is not currently working and provided and then ensure it sits within this single service offer. Within this single offer must come a single, overall workplace health and adjustment budget available to the whole organisation and communicated effectively to all.
- Senior leaders need to trust their managers to implement the flexibility in their teams that they are happy with, and which still delivers business critical results. Compromise may be needed and employees' 'first choice' adjustments may not always be reasonable, but we saw evidence of reasonable flexibility that managers were keen to grant which was being disallowed by more senior leaders without, from managers' perspective, an unidentifiable reason.

The impact of disability passports on workplace adjustments and removing barriers at work

- **62 per cent** of disabled employees do not have a passport in place.
- **36 per cent** of disabled employees said their organisations use passports.
- **22 per cent** of disabled employees have never had their adjustments reviewed.
- **20 per cent** are unsure if their adjustments have been reviewed.
- **17 per cent** of disabled employees have their adjustments reviewed less than once per year.
- Only **11 per cent** of disabled employees who have a passport in place said they speak to their manager 'a lot more' or 'a bit more' about their disability or adjustments since having it in place.

What are passports?

A disability passport is a 'live' record of an employee's adjustments. It is 'owned' by the employee, and it helps employees and manager have conversations about an employee's disability and/or adjustments. Other common terms used for the passport are "Tailored Adjustments Plan", "Adjustments Agreement" or "Workplace Adjustments Plan", or "Workplace Support Plan".

In this section of the survey, we asked employees what their experience of using the passport was and how they would improve it. In total, 1,307 employees completed this section. We received 743 free text responses in this section, too. As we want to do justice to the experience of so many people who shared their experiences with us, we have included a lot of quotes from employees' responses in this section.

Part 1: Employees' experiences

The experience of using passports was incredibly mixed, but they could be viewed in three key categories:

- Employees who **"love"** their passport, but this experience was driven by the employee having a good manager that knew how to use them.
- Employees who have a disability, whose organisations use passports, but who are trying not to tell their employer about their disability and therefore resisting completing a passport for fear of how differently they would be treated and who would see the information.
- Employees who have a passport and have not had any follow-up conversation or acknowledgement from their manager or HR team since they completed it. Many employees in this category are still waiting for their adjustments documented in the passport.

A summary of the complexities of the experience of using the passport can generally be summarised in the following employee's words:

- **“I have had a passport for years, so it is a very lengthy document. I think it is great, especially if you change roles and get a new manager. However, do they need to read your life story? No. I give a short review of current issues and needs and let them have the full document to read should they wish. The passports are a great idea but can be very emotional to write. It can feel like writing everything that is and has been wrong with you and can feel very negative. It can feel scary passing it to a new manager, hoping that they have experience of working with team members who have a disability or long-term health condition.”**

This employee's experience highlights many areas that hundreds of employees also told us:

- The structure and content of the document.
- The acknowledgement that is helpful.
- Questions about the 'agency' of employees to make the document 'work for them' and on their own terms.
- How it can feel to see the experience of your body written in a work-related document.
- The fear when giving it to a manager, not knowing what their reaction will be or if they will know what to do with it.

These are some of the themes we explore in this chapter. The findings and recommendations in this chapter are purposefully led by employees' own words.

Strengths of having a passport

Employees told us what the strengths of having a passport are:

- It structures a conversation: **“I find the passport useful as it helps initiate the conversation about my disability with any new manager I work with”.**
- 'Protecting' adjustments when things change: **“It saves the agony of having to renegotiate adjustments”.**
- **“I like the passport and feel they open up conversations with line managers much easier than without.”**
- **“It's a great idea, easy to pass on if I move departments. Then my manager has an idea what is going on before I discuss with them.”**

When passports do not work

Employees also told us about why they do not think passports work well:

- **They are often “inaccessible” and “unusable” documents.** In an employee’s words: **“In theory, it [the passport] is a good idea, but I have seen some really inaccessible ones that aren’t worth completing”**. One employee who is blind said the passport **“does not play a great part”** for them. Another employee said, **“I have been sent a template, but I don’t know where to start with it”**.
- **It is too long and asks for too much information.** As one employee said, **“writing and updating it can be mentally taxing”**. Employees said the passport needs to be **“less complicated,”** that it is **“over the top,” “invasive,”** and **“there are too many categories on the form, making it quite confusing to fill in”**. Another employee said, **“I find it challenging to list all of my ailments [and] I am not sure all are always relevant”**. Another employee said, when they wrote everything in the passport they thought was relevant, they **“ended up writing an essay about my condition and its effects which my line manager became overwhelmed by”**. Another employee said they had **“so many conditions”** that **“writing them all down”** in the passport was **“embarrassing”**.
- **When employees are expected to initiate having a passport.** In an employee’s words: **“They [passports] are very helpful but should be led by employers rather than the employees saying they want one”**.
- **They focus on what is ‘wrong’ rather than what the employee can do.** In one employee’s words, **“I find it problematic as I don’t like discussing the ins and outs of my health conditions. [The passports] are all about what you can’t do and need help with, and not about what you can do”**.
- **They do not work well in agile or project-based occupations.** Some employees said their teams are collaborative or project-based, and this made the passport difficult to change so often and they felt they were often talking about the passport with colleagues rather than just what would help them. In one employee’s words, **“There needs to be away to discreetly flag that somebody has a passport in place. My job is hugely collaborative and it’s really difficult letting everybody know”**.
- **Storage and, therefore, data protection is poor.** In an employee’s words, **“I complete them and send them on, and then they can’t be found”**. And, in another employee’s words, **“At the minute, [the passport] is a Word document saved on my OneDrive. It would be great if it was sat somewhere safe. I have password protected it as, out of context, some of that information could be misinterpreted”**.

- **It is unclear who could share the passport and under what circumstances.** In an employee's words, **“It is not clear enough as to how this will be shared with people across the organisation. While it is helpful to be able to share this with individuals and not have to disclose everything multiple times, this sharing should be up to me and not done automatically without my consent”**. Another employee said, **“[I am] reluctant to have full details of [my condition] on a document held by various managers”**.
- **The passport was used as an initiative to ‘market’ being an inclusive employer.** The phrase **“box ticking”** came up on almost every page of the free text responses. Employees often felt the passport was for show, particularly as there tended to be a policy, guidance for managers, or and workplace adjustments process implemented alongside the passport. In one employee's words, **“[The passport is] an absolute waste of time. [It is] used for benchmarking and award winning rather than being useful”**.
- **The passport says what adjustments have been agreed, not what adjustments have been put in place.** One employee said there needs to be a way of recording on the passport what has been requested, what has been implemented, and what needs to be reviewed. In another employees’ words, **“My passport contains adjustments that my line manager would like to be able to give. However, managers above are preventing that from happening”**. Even if an organisation uses passports, if managers do not know how to make adjustments related decisions or provide helpful support, the passport does not help. In an employee’s words, **“Agreed by one does not mean agreed by all”**.
- **The term “passport” is not liked.** As one employee said, **“I hate the term ‘passport’! It makes me think of strict airport security [and] insiders/outsideers”**.
- **They do not mean an improved understanding of adjustments.** Some employees said the passport had not helped managers or colleagues understand how their disability fluctuates, and others said that, even with the passport, **“some really dated views on reasonable adjustments”** remained.
- **They do not make a difference to how quickly employees get adjustments.** In one employee’s words, **“The passport is a great idea, but it doesn’t make [the employer] provide you with adjustments any quicker”**.
- **Passports are often not referred to after they are completed.** Many employees recalled this same experience. For example:
 - **“With my new manager, she’s never looked at it... I’m missing out on adjustments I really need meaning I’m really struggling in my job.”**
 - **“I don’t get any feedback, support, or conversation about it [the passport]. It’s a case of, fill it out, send it to my manager, and then nothing is ever mentioned again. This has happened with my last three managers.”**

- **“I filled it in because I thought I should but, to be honest, my manager never discusses it with me.”**
- **“Now it has been completed, the ‘box is ticked’ and they have moved on”.**

Where the passport was used, but the experience of adjustments remains poor

As a result, many employees told us that they have a passport, but this did not improve their experience of getting support or adjustments. This meant **even in organisations where the passport was used, the experience of workplace adjustments remained poor**. One employee recalled that the passport is a **“necessary evil”** for getting what they need in an organisation when the workplace adjustments process is inconsistent and undefined. Another employee agreed:

- **“[The passport] sounds like a good idea. My employer has no formal processes for requesting and reviewing adjustments, so there is always a long wait whilst adjustments are requested and get ‘bounced around’ different departments.”**

In this way, passports are acting as ‘sticking plasters’ in organisations where workplace adjustments processes are either not in place or not fit for purpose. This was also evident when the passport is not part of the wider workplace support and adjustments process. In such cases, this can mean that an organisation using passports does not necessarily equate to an increased likelihood of employees getting adjustments and their manager ensuring they are implemented and maintained. In one employee’s words:

- **“It is an ineffectual document as it is not used by occupational health and human resources, and we do not get to see what the managers say when submitting new passports. We are only allowed to fill them in and return them to the manager. We are not allowed direct contact with occupational health and human resources. A reduction in workload has been meaningless and it is not enough to allow me to take breaks I need, which means I have to work into the weekends. I have also not been given the time to take the breaks which means I have to work over 37 hours and into the weekend to meet my hours.”**

There is stigma about the passport

The **“stigma”** of having a passport was mentioned repeatedly throughout the free text responses in the survey and some employees said they were **“worried about having one”**. Employees generally felt the stigma is created by only disabled employees having a passport. It meant there is a ‘disability form’ whenever someone has a disability or long-term condition, and some felt it was easier to explain a disability than say they have a passport among team colleagues. In some employees’ words:

- **“The focus [of the passport] needs to be on the employer to use them properly and not stigmatise those staff who use them to detail what adjustments they need.”**
- **“I feel there is a stigma attached, which puts me off using [the passport]. An improvement would be to open conversations about the point of the passport to give wider understanding.”**

Attitudes and different treatment from managers and senior managers were also feared. This was a commonly cited reason for why employees do not use the passport, have stopped using it, or are worried that their organisation asks them to use it:

- **“It would make the management team more aware of [my] personal situations.”**
- **“I like the idea, but I worry how many managers can see it. For example, our HR system allows my manager’s manager and so on to see employee information.”**
- **“I feel [the passport] is sometimes being used against me.”**
- **“Management would use this against me.”**
- **“I know some [employees] fear the discrimination that may result from using [a passport].”**

Where employees do not currently have a passport

Where the passport is not used, either by the organisation or by the employee, free text responses ranged from employees between **“it sounds like a good idea”** and **“I probably would not use it”**. Some even recalled poor experiences of completing the passport. Some employees felt discomfort in having to ‘put in writing’ everything about their condition rather than being able to talk about a disability or condition at different times and in different ways, depending on the work situation and their changing circumstances. One employee recalled how their passport was rewritten by their manager, which left the employee feeling **“I wish I didn’t do it”**.

There were also some concerning feelings among employees who felt their employer would treat them differently if all of their disability and adjustments related information was together ‘in one place’, and that there was no ‘protection’ for employees from being treated unfairly:

- **“I am not sure I’d want a record of everything I’d asked for. I feel my employer could treat me differently.”**
- **“I still feel awkward about the passport and like it may affect my career.”**
- **“In some instances, this would give validation, but I believe this would be used against me to question my ability to perform in my role.”**

- “I discovered it is not always good to have the passport, as my new line manager copied and pasted sections out of it to use in a disciplinary case against me and to provide wording to request an occupational health assessment.”
- “I’ve not agreed to a passport as I feel a little concerned about having my issues recorded in writing. I’d rather have more informal conversations about what I need with my manager.”

The passport is not needed when there is a good workplace adjustments experience and good managers

Overall, employees who are comfortable and confident to discuss their disability and adjustments said they did not need a passport:

- **“I don’t feel the need for it as I can say if I feel bad and need an adjustment.”**

Ultimately, the passport is not a substitute for a fit-for-purpose workplace adjustments experience which includes good communication between employees and managers, and that allows employees to decide what they share and when:

- **“I felt that, if you have a supportive manager, the passport is only needed so they know where to start the conversation. I think it would be better if I had access to a workplace adjustments team who I could use when needed to advocate on my behalf. Also, they would be able to tell me about adjustments I am not aware of.”**
- **“I didn’t need it to get my adjustments in place.”**
- **“I don’t feel it is necessary as I can deal with [what I need] with the workplace adjustments team.”**
- **“My organisation acts appropriately without the passport in place.”**
- **“In a progressive organisation, there should be a continual discussion around what is and isn’t working with changes made as needed.”**

This was further supported by employees’ experience where the passport had worked well for them. In responses where employees reported a good experience of passports, references to equipped and **supportive managers and self-confidence** were also included:

- **“[The passport] works really well. I have moved roles three times and each time the manager has been totally supportive of the passport. It is reviewed and updated on any occasion I have requested changes.”**
- **“I wouldn’t want a passport. I’d prefer to have a one-off conversation with my line manager/HR, reviewed annually as or when needed. I think a passport would only be needed if you had a difficult line manager.”**

- “I’m glad I have it [the passport]. It makes me feel more secure in my job. I feel confident having a conversation with my manager. If I am having a bad day, my manager is happy to make allowances, because he knows I am trying my best.”
- “[The passport] doesn’t really impact me. I am very confident in my difference and my line manager gets me everything I need.”
- “I would openly talk about my disability without [the passport]”.
- “I sort of want to keep things to myself and just try. I have a good line manager at the moment and could talk to her any time. My old line manager just used to take over and do things I didn’t need.”

Managers who are equipped to know what the passport is, how to use it, and how to support employees, regardless of whether the passport was part of the support process, were key to a good experience of the passport. In some employees’ words:

- “[The passport] is okay, but it is not a replacement for supportive, regular conversations.”
- “There is good information out there, but unless the organisation educates and enforces the support needed, it is for nothing.”
- “I feel it is very personal to share my details about my disabilities and my needs. I need good trust in my line manager before sharing my needs.”
- “If a boss is not understanding, a piece of paper will not help, and could make things worse.”

Ultimately, when employees felt included in their teams, could get what they need, and had a supportive manager, not only did they feel the passport was an ‘unnecessary formality’, but they also did not need to discuss their disability unless they wanted to. These experiences can be summarised in the following employee’s words:

- “The team is small enough and we are all close, get on very well, and are really supportive of each other. As such, I don’t think this type of formality is needed where I currently work. It would actually make me quite uncomfortable having to talk about my disability at set times and in such a formal way.”

Part 2: Managers’ views on passports

We asked managers for their views on the use of passports in their organisations, too. Their views corroborated entirely with employees’. Managers reported three key concerns which, as above, were endorsed by employees:

- The passport does not increase the number of conversations managers have with employees.
- Passports are predominantly in Word format. This often led to multiple versions and updates being saved, often by different people in different places. Some felt Word documents were difficult to update as opposed to having a 'live' online digital record or portal to update when needed.
- Managers said the structure of the document did not help, because it asked for too much information, and the document itself did not prompt more conversations – all views felt by employees, too.
- The practice and guidance about how to use passports in individual organisations is poor and passports are, in one manager's words, **"patchily applied"**.

Some managers found the passport useful, but these views were few.

- **"It works well and helps the colleague feel supported and helps to keep the conversation going and promotes regular check ins"**.
- **"It helps to ensure that there is clarity about the adjustments required and agreed"**.
- **"It's a good tool to have and support you with the conversations you have with the employee"**.
- **"They are a positive step and help me support my team. They are especially useful when line management changes"**.

There were frequent concerns about it giving employees too much 'say' over what could be done when, in practice, the employer needed to make the decision about what could be done. Employers needed to consider more factors to decide if adjustments discussed were doable. Such factors included how long the adjustment would take to implement, the impact the adjustment would have on the rest of the team, and the ongoing costs and resources of maintaining an adjustment. Related to this was the practice that some organisations were sending the passport to employees to complete themselves, and this meant employees felt they had to be proactive or 'vocal' about what they needed:

- **"The system encourages the passport owner to arrive at solutions on their own rather than consulting on options with the relevant teams in the organisation."**
- **"Some managers are not having conversations but expecting their employees to fill the form out themselves."**

However, other managers indicated that they felt the onus was on employees to keep and update their passport:

- **“I would make it clearer that the employee owns it and has responsibility to keep it up to date [and] stop relying on managers to do this.”**
- **“It is the staff member’s responsibility to complete the passport. This makes it difficult when the document is done, and they have not uploaded it.”**

Managers also felt passports were a **“tick box”** initiative. The term “tick box” regularly emerged in the free text responses of managers as well as employees. Another said the passport was implemented because the organisation was **“under pressure for some good press”**.

Overall, managers said they would welcome more guidance on how to use the passport. The following words from a manager were widely echoed by others:

- **“[They] aren’t used very well because so little support is given on how to implement and keep them relevant for employees. I’d like to see better training and support given to managers, so they’re better used and implemented.”**

The stigma of having a passport was also a concern for managers and employees. One manager felt the stigma attached to passports was due to how much personal information the document asks for and that it is ‘only disabled people’ who have this ‘piece of paper’:

- **“We will be removing all medical information from the passport and making it a broader workplace passport that will be issued to everyone. In doing this, the aim is to remove stigma from asking for adjustments as anyone can do without disclosing a health condition.”**

Managers agreed with employees that passports should not be necessary in inclusive workplaces where conversations and support are embedded practices:

- **“The focus on passports diverted us away from the general understanding that inclusive working should be the norm, not just when an individual has a passport in place. We have further work to do to embed inclusive behaviours.”**
- **“It is a great conversation starter. But it does not substitute a great conversation.”**
- **“[The] conversation took place but, in reality, we have an open conversation on how we can get the best out of the member of staff”.**
- **“It is good for record keeping, but I don’t think it really encourages employees that need support to ask for it.”**

- **“It is a straightforward process and reviewed once a year, but my team members know they can discuss things at any time during the year. They don’t need to wait for the review, especially if things need changing.”**

Managers commonly said their organisation's process was for passports to be reviewed annually. Another said, in one manager’s words, **“Once complete, it sits on the shelf”**, but that it **“saves a conversation”**.

Conclusion

Both managers and employees report a very mixed, but mostly negative and ineffective use of passports in their organisation. In addition, the original intended purpose of the passport – to encourage and structure helpful conversation about adjustments between managers and employees – is not often being relayed in practice. This results in ‘more paperwork’ for employees whereby they typically give a lot of information about themselves only for them to not see how it is being used or stored after that conversation, and it also means their passport has become a substitute for an effective workplace adjustments process and experience. We also saw evidence of some views that were concerning from both an inclusive practice perspective and in terms of having potential legal risks. These were mainly:

- The view that passports and adjustments information were the employee's responsibilities to raise and maintain.
- Policies that required managers to review passports just once per year when, in law, adjustments should be reviewed as soon as something needs changing or when an employee's (or employer’s) circumstances change.
- The unrealistic and unreasonable expectations given to employees that, whatever adjustments are recorded in the passport are agreed indefinitely and, in one employee’s words **“are protected and can never be taken away”**.

It was a common theme for employees to want a passport to ‘protect’ them from having their adjustments taken away. This, however, is not realistic. ‘Reasonableness’ can change. This is not about employers withdrawing their support or being ‘mean’. It sometimes means resources and whole ways of working across organisations or teams can change and what works for both the employee and the employer therefore needs to be discussed or renegotiated.

In addition, the three main ways employees said would improve the passport use in their organisations:

- Develop positive, stigma-free, internal campaigns about passports, what they are for, and why people may have them.

- Provide written guidance for managers on how to use them.
- Develop an accessible digital version instead of using Word documents. This would help inform employees about how their information is stored and who has access to it.

However, the overwhelming feeling from employees was that the passport is not needed if three things are in place:

- A supportive manager who knows how to support employees.
- A supportive team where everyone helps and gets on with each other.
- Implementing a cross-organisation workplace adjustments process which employees report a good experience of.

What employers can do

Although there is evidence that inclusive organisations whose employees, teams and managers are supportive and communicate well with each other do not need a passport, employers who feel they do need to use it should ensure they do the following six things:

- **Ensure conversations and adjustments reviews happen every time something changes, not just annually.** The passport is a record of what has already been agreed; employees should not have to keep re-negotiating what has already been agreed, but there should be an adjustments-related conversation each time anything changes, and adjustments may need to be re-negotiated as a result. This includes when something changes for the employee or the employer. If adjustments need to be changed by the employer, the employer must discuss this kindly with the employee, give reasons for why this is the case, and discuss with the employee what different adjustments could be provided instead. It should never be a case of, in one employee's words, "**adjustments have been taken away**". It should be instead a case of 'adjustments have been **updated**'.
- **Make sure you are not creating more work for employees just because they have a disability.** Not only does this create additional unnecessary processes but, according to many of our survey respondents (both employees and managers), it also increases the stigma of both having a disability and having a passport. Employers should consider how the passport **enhances** the adjustments experience for employees. If employers have the communication and inclusive mechanisms to support employees already, the passport sometimes can add additional anxiety for employees who are being asked to give information, data implications, and create clunkier processes. If employers' workplace adjustments process is not working as well as it could, the answer is rarely to add more document or process stages; efforts should first be made to make existing processes work better for everyone.

- **Ensure passports are not implemented to avoid conversations.** If employers are considering the introduction of passports to, **in one manager's words, "get away from having a difficult conversation"**, employers are trying to fix the wrong thing. Employers must ensure conversations between employees and manager happen, whether difficult, emotional, or uncomfortable. The part that needs employers' attention here is how to improve colleagues' comfort and confidence levels with such conversations. The passport should facilitate a conversation, not replace it.
- **Ensure passports are kept in a safe, secure way.** Passports contain sensitive, personal information. It is not enough to accept that managers and employees will keep them in personal cloud drives. Whether the information is kept on an HR system or in another digitally secure way, IT security and data protection policies must apply. Where and how these are stored, as well as who can access the information, must be communicated clearly to employees and managers.
- **Provide more guidance and training for managers on how to use passports.** This includes guidance on what the passport is, how to discuss disability and adjustments with employees, and how to ongoingly review agreed adjustments, too. The latter must also include identifying how to agree what an appropriate review period is for individuals and must not rely on a 'one size fits all' annual review of passports and adjustments. Training must also not be something that happens 'once' or 'ad hoc'. It must be designed into induction, onboarding, and continuing professional development for managers.
- **Where employers do use passports, consider providing passports (or equivalent) for everyone, not just disabled employees.** We all need different things to be at our best and a document which sets this out for everyone could both remove the stigma of having "a special document" and enable all employees to thrive.

The barriers that remain for disabled employees after adjustments have been made

- Only **18 per cent** of disabled employees said their adjustments have removed all barriers in the workplace – **1 per cent less** than in 2019.
- **56 per cent** of disabled employees said there are still disability related barriers in the workplace after adjustments have been made.
- Only **37 per cent** of disabled employees feel their employer is genuine about removing all disability related barriers and making the workplace inclusive for disabled employees.

A prevailing understanding of adjustments is that they provide solutions for disabled employees which remove barriers for them in the workplace. This is, however, only partly true. The overwhelming response from employees was that even after employers had made all possible adjustments, these were only adjustments for identifiable workplace barriers and did not stop or 'put on hold' the experience of their bodies, their disability or conditions, while they were at work. Some employees even felt that the overwhelming expectation is that, if an employee has adjustments they can, **"do everything now"** which puts more pressure and unrealistic expectations on disabled employees. This, in turn, had an impact on how they felt about their employer and their understanding of disability and being disabled. Many employees said that their workplace adjustments cannot remove the difficulties caused by a disability:

- **"I am still limited in terms of my comfort. Adjustments don't take away the disability. It is still hard. The adjustments just 'take the edge off'."**
- **"[Work] is still hard and trying to get through some days. I cannot stand, and that can't be removed."**
- **"The adjustments help more than not having them, but they don't remove all of the barriers because the conditions are still there and still affected the working day. For example, they can't help when I have a bad day and am in so much pain."**
- **"There will always be barriers when you have a disability. There's nothing you can do to predict fatigue and you don't know how you are going to feel each day or what support you will need."**
- **"I will always face difficulties at work because the nature of my disability makes general tasks more difficult."**

Other barriers remained outside of an employee's own working space and immediate working environment that they had adjustments for. These included:

- **Noise in the wider workplace** - “beeps” were often referred to. Employees often referred to being “overwhelmed” by bright working environments.
- **Generally feeling “excluded”, “different” or “lesser”** than other people. A common phrase used was “I feel as though I don’t fit in here”.
- **Poor attitudes**. For example, “just an understanding of my neurodivergence” and “stigmas and awareness around mental health conditions”. In addition, employees referred to situations where senior leaders had heard unhelpful or unfair comments about disability and being disabled and these attitudes were not challenged.
- **Exclusion from social events** if they are not accessible – particularly for people with hearing conditions who have technology at their workplace, but not during social hours or breaks (such as ad hoc social interactions with colleagues in the restaurant).
- **‘Mandatory’ social events** caused difficulties for people who struggle with energy or socialising, some of whom said they want to reserve their energy for doing their job well: “It is a nightmare to me as an autistic. Just let me work”.²
- **Untrained and unsupportive managers**. Many cited current training as “condescending” or portraying a “poor narrative” of disability and disabled employees.
- **Accessibility beyond immediate working environment**. Some employees said their immediate working environment had been made accessible, but they could not “access all areas”. This included people saying they could not access the kitchen, and how plugs and sockets are always in difficult locations to reach.
- **Meetings and events are organised by other** teams or managers who do not know about an individual’s disability or adjustments.
- **Digital accessibility** across the whole organisation, including intranets and online resources.
- **New processes implemented without consultation** or equality impact analysis, often which have a negative impact on disabled people.
- **Adjustments were seen as static** and, since agreed, ‘that’s how things are’. Some employees referred to adjustments needing to change and not be ‘fixed’: “My condition is lifelong and changeable. Some days I need more support and other days less. So my adjustments work for the more stable days but, on bad days, they are not enough. But the bad days are not enough to justify a permanent change so I may sometime need ad hoc adjustments just for those days.”

² It must be noted that everyone has different preferences. The view and preferences of one person with autism (or any condition) does not dictate the view of everyone else with that same condition. Everyone is different.

- **Lack of home working** and ‘return to office’ policies having been enforced across organisations with little conversation with disabled people. Some employees said they worked at home, not because that was their preference, but because their built environment at their workplace was not accessible. This was predominately said by employees with conditions affecting their mobility and who use equipment such as walking frames and wheelchairs. Others said their office does not have accessible parking spaces.
- **Discriminatory policy practices** such as punitive attendance management and lack of disability leave support. Sickness absence processes were often mentioned as being unfair towards disabled employees, particularly when there is not disability leave even as an adjustment and employees then take time off sick to attend planned hospital appointments.
- **Doorways.** References to doors which open too quickly or too far away from key card panels and close before people with mobility aids can move through them.
- **Poor expectations of managers** – sometimes expectations were unrealistic and unfair and, for other employees, expectations were too low and not challenging. In one employee’s words, **“Some people try to bubble wrap me, giving me less responsibility even though I am able, when in fact they unconsciously disable me”**.

There was also a huge perception from disabled employees that they would not be able to progress into more senior roles because of the toll they see those roles taking on current leaders:

- **“As I progress, I wonder how supportive senior managers would be of adjustments if I was in a senior role. I don’t have meetings between 9-10 and they always seem so busy. Also, too many Teams meetings are stressful and over stimulating for me and they always seem to be on back-to-back calls. They also work super late – I don’t have the energy for this and nor do I want to give up my free time. I need it to recharge. Also, people in other parts of the organisation struggle with adjustments. I am one of the lucky ones, but I realise this luck may not extend beyond my current role, internally and externally.”**

Conclusion

Adjustments agreed for an individual are most often specific to their job and immediate working environment. They may not remove barriers when employees work, socialise, or learn across teams, and many areas of their workplace may remain inaccessible and therefore unusable to them. Disabled employees rarely felt they were considered when policies, environments, or procedures changed, often which negatively impact them. Many employees reported inaccessible internal digital environments. These existing barriers diminish the benefits of the adjustment employees have to their own immediate job and working space. This can end up meaning the manager may well have provided lots of

adjustments to a job and working spaces but the employee remains unhappy, feeling excluded and as though they do not belong in other teams and also in the wider organisation as a whole.

What employers can do

- Each area of a working environment should be reviewed whether or not adjustments have been requested to alter or adapt it. Otherwise, when someone cannot use a space or an area they need to access, they have to ask to be included rather than the employer having proactively ensured premises or policies are designed with inclusion in mind. Ensure shared spaces are reviewed by disabled users, ideally actual users of the building. Accessibility audits can be helpful, but employers must ensure that usability of all spaces and areas is reaching way beyond a legal compliance standard of build accessibility. Disability networks in organisations and employees themselves in organisations are often invited to give this feedback. Employers should ensure they do this proactively: before it needs to be done because someone has asked for it.
- Whenever managers are aware of cross-team working or socialising, adjustments or alterations to communication among colleagues should be arranged in advance. Teams organising events, training or meetings should be equipped to proactively ask if anyone attending or taking part would be able to do so better if things were done differently and adjustments were made. This should be standard practice for every team in every organisation as an embedded inclusive behaviour. When it is not termed as ‘reasonable adjustments for disabled colleagues’, organisations have found that people have asked for, for example, different food or said that they want non-alcoholic drinks or that they may need to adapt their attendance due to family or care situations. In effect, asking if anything needs to be done differently to make taking part easier allows **anyone** to say what would make taking part easier for them, whatever their situation.
- Ensure intranets meet the same inclusion and usability standards as your consumer websites. This is not just about the technicality of the website and the intranet itself; it is also about how content is organised and ensuring that content is accessible.

The use, effectiveness, and accessibility of occupational health when supporting employees and providing adjustments

We asked managers and employees about their experiences of occupational health and how far occupational health input helped managers to manage and support disabled employees. We also asked employees about their experience of the referral, the assessment, and what happened after the report.

Part 1: Employees' experiences

A total of 1,307 disabled employees told us about their experience of using occupational health.

- **44 per cent** said the occupational health report was accessible and easy to understand.
- **37 per cent** said the occupational health process felt supportive.
- **33 per cent** said the format and location (including online platform) of the appointment or assessment was accessible for them.
- **32 per cent** felt they had enough information about what would happen at the occupational health appointment or assessment.
- **31 per cent** said the occupational health process help their employer put adjustments in place for them.
- **27 per cent** said occupational health helped their manager know how to support them.
- **22 per cent** said the occupational health process helped them understand or manage the impact of the disability or condition at work.

68 per cent had used occupational health during the last five years. An additional **3 per cent** were unsure if they had, partly because some organisations integrate occupational health into in-house workplace health and adjustments support. In such situations, it is not always known by the employee which part of the support they are accessing is 'occupational health' and which is not. For the most part occupational health for many employees is a process by which they are referred 'outside' of the organisation to an external or third-party provider.

We also encouraged employees to give feedback in their own words about their experience of occupational health. Of the 577 responses we received in this way, only **9 per cent** of disabled employees reported a positive experience of occupational health (OH).

The most common free text response were employees saying they felt OH was a **“tick box”** part of the process that their manager ‘had’ to put them through, regardless of whether OH was the best fit for an individual’s situation; it was part of a process outlined in the employer’s policy and therefore ‘had’ to be done. In many situations, this left the employee feeling as though the OH assessor had merely repeated for the report what the employee said during the assessment, and it also made employees feel as though their employer did not trust the employee’s own experience of their own disability or condition:

- **“My manager wanted me to go to occupational health even though I told him this wasn’t necessary and I had identified the adjustment I needed already. He wanted to ‘cover his back’.”**
- **“I feel it [OH] is easily open to abuse. They [OH] literally take at face value what you say. My employer had already agreed and implemented the adjustment I require. I felt it was a bit of a ‘box ticking’ exercise.”**
- **“They repeated to my employer what I told them and so this was effectively an extra hoop to jump through – my employer could have just taken my word for it!”**
- **“I don’t feel any benefit from OH referrals. I felt like a tick box exercise. For my condition, they then to ask what I want/need and then put that in a report.”**

There was much evidence that, in these situations, OH causes employees much stress, unease, and to distrust both their employer and OH as a profession.

Occupational health versus employee’s own medical teams

Employees said they were unsure why they were being referred to OH when they had their own specialist medical teams who would be able to inform the manager with more detail about their conditions at work and what would help. Instead, it felt to employees that they were relaying a lot of very personal and, often, emotional details to professionals who would repeat in writing what the employee had told them. The OH was also a ‘stranger’ who the employee would rarely see again, and this also felt impersonal and difficult. Some employees, however, said their own medical consultant had been asked for information but, because OH is detailed as a necessary part of an employment policy, OH had to be used as well:

- **“[OH] was of very little value. It was no different to what [my] consultant had stated.”**
- **“OH are not experts on conditions and it feels like a tick box exercise that all three parties [employee, employer, OH] go through with no real outcome. OH should be more joined up with [my] hospital and carer to work effectively – or they should use notes, test results, and letters that the employee already has from the consultant.”**

- **“The [OH] process was unfit for purpose. I had to discuss my condition much more than seemed necessary. I was asked to revisit occupational health despite no changes to my condition and the second OH doctor said the same as the first, so it wasted my time (and theirs). My expertise in my condition was not taken into account by my employer and they preferred to get some else’s opinion.”**

Employees who felt their situations were not understood well by OH providers or who found the process particularly difficult had the following disabilities or types of conditions:

- Neurodiverse conditions, particularly Autistic Spectrum Disorder (ASD), dyspraxia, dyslexia, and ADHD (Attention Deficit Hyperactivity Disorder).
- Rare conditions.
- Employees who are Deaf or have significant hearing related conditions.
- Energy limiting conditions, particularly ME/CFS (Myalgic Encephalomyelitis/Chronic Fatigue Syndrome).
- Long COVID.

Occupational health is used even when employees know what they need

Many employees said they were referred to OH even when they knew what they needed, purely because that was their employer’s process for getting adjustments:

- **“I accessed them [OH] to ask for a keyboard I already knew I needed.”**
- **“I had to use it to get access to the disabled parking spaces.”**

We also heard some candidates applying for jobs with organisations were referred to OH to get suggestions for adjustments. One employee said she requested an interpreter for her interview and was referred to occupational health for this to be confirmed.

Occupational health assessors included links to other websites as advice

Employees regularly said their OH report included limited advice and there appeared to be **“copy and pasted”** section of their report to other websites which were generic.

Employees said, when this happens, their manager had been unclear whether the OH adviser was including these links as ‘additional reading’ purely for interest, or if information in the link was part of the advice for their specific situation:

- **“When the [OH] report came through, it suggested that the managers look as the HSE [Health and Safety Executive] links, and those links recommended reduction in hours, workload, and additional breaks. But because it was not written in the actual report, my employer hasn’t done a thing about it.”**

Inaccessible assessments and reports

The inaccessibility of OH assessments and reports was commonly referred to:

- “Occupational health call only rather than [meeting] in person or [by] video, which is inaccessible to me.”
- “Paper letters were sent to my employer which, for me, are hard to read as I would prefer an online copy.”
- “The online process was not fit for purpose. I was asked to access [assessments] which I could not physically do.”
- “I had to request to view the report and the deadline given wasn’t considerate to the challenges I face.”
- “[They tried] to make me carry out tests which would have made me ill for weeks and cause sickness.”
- “I am autistic. The appointment was about my physical disability, but I found the intrusive questions overwhelming and I had to leave. The OH report stated I was aggressive and other harmful comments. This was not helpful. The OH appointment was not accessible for me.”

The quality of assessments

Employees regularly reflected that the quality of OH assessment assessments and reports were “**inconsistent**” in quality. For example:

- “The assessor was in a café both times. It was very distracting, not confidential and I had to stop the second session and ask him to conduct it somewhere more suitable. This was late on a Friday, and he asked if I’d be able to pick it up an hour later in the day once he had travelled home...On first reading the report, it was like I’d been speaking to someone else. There were lots of inaccuracies, information missing, including the main reason the assessment had been requested. It took four versions before it was in any real shape to issue and even then not fully accurate, but my mental health was so affected by it I couldn’t cope with another version.”
- “They were reading from a script rather than listening to me as a person”.
- “My OH practitioner read from a sheet and did not seem to understand my condition. He then made recommendations based on the wrong conditions, because he wasn’t paying attention.”
- “There were a lot of silly mistakes in my report – for example, they said I worked part time when I was actually full time, but they wouldn’t change it once it was produced.”
- “The reports tend to be badly written, incomprehensible with significant grammar and spelling errors.”

- “The person didn’t turn up for my appointment.”
- “Sweeping assumptions were made [about my conditions].”
- “A waste of time and money. The report was as basic as it possibly could be. I had lost my voice, yet they wanted me to do a telephone appointment!”
- “I almost missed the appointment date because it was sent to my line manager instead of me.”
- “It was a 30 min phone call, which stopped exactly at the 30 min point, even though we had not finished.”
- “OH wouldn’t look at my ASD or ADHD assessment. I was told I needed a specialist OH assessment.”
- “One [OH assessor] told me I’m dyslexic, when I wasn’t.”
- “The report just seemed ‘copy and paste’ of statutory paragraphs.”
- “It seemed to be a ‘one test fits all’ approach.”
- “My report was clearly a ‘cut and paste’ - my name was wrong in a few places!”
- “I had to complain. The first assessor was arrogant, and got my name, role, and disability wrong, so I didn’t really appreciate that!”

Within this, employees referred to experiences where they felt their OH assessor had made inappropriate comments which indicated a lack of understanding of disability and disabled people's everyday lives:

- “The OH person I spoke to said she had no experience of chronic health issues (!) and that “at least I looked well” - which having ME/CFS is one of the most frustrating things to deal with. Even if it wasn’t meant unkindly, it’s not what I’d expect from a health professional.”
- “They gave bad advice [and] made me feel like I wasn’t doing enough to get support for my conditions (despite me going private) and required me to request support from services that had nothing to do with my conditions – to the point that I got accused of wasting that service’s time. It was a terrible experience.”
- “[OH] asked me when I acquired my conditions that are life-long.”
- “I was once told [by OH] that I shouldn’t be in my job if I couldn’t cope.”
- The [OH assessor] made very patronising comments including, ‘Baby, I don’t want you to cry’.”
- “When I had cancer, the [OH adviser] was trying to put her own experience of cancer onto me: “You are going through hell” statements and just annoyed me by wanting to follow her ideas such as not mentioning cancer on my ‘out of office’, and not being in a meeting wearing a wig. It kind of biased me against calling them again.”

- **“The first thing one doctor said was ‘Remember I work for your employer, not you, so please don’t expect me to have any interest in you personally’.”**

Poor attitudes and inaction from managers and HR

Many employees said OH referrals felt like so much of a ‘tick box’ that managers were doing the referral but not following up on what the report recommended afterwards:

- **“The occupational health service providers were generally excellent and offered personal support and support to my employer. Unfortunately, my employer chose to ignore all recommendations and offers of support.”**
- **“My line manager still doubted the need for adjustments recommended and made the process very stressful.”**
- **“My employer received the report with suggested adjustments and decided the adjustments were ‘unfair’ to other employees (it was working from home for one extra day when others already did so)”.**
- **“Nothing happened after the report. It was stressful to do, and I found it pretty traumatic.”**
- **“My previous workplace ignored it [the OH report] and are now going to tribunal”.**

It was a common recollection that policies referred to OH as part of the adjustments process but rarely gave the manager advice on what to do and how to follow up and with whom after the OH report had been received. In addition, we saw evidence of employers comparing recommendations between employees, even with an OH report for a specific employee. For example:

- **“Human resources pretty much ignore any reasonable adjustments suggestions based on the argument, ‘If we let you do XYZ, everyone will want to’ - despite no other colleagues either having the same conditions or disabilities or having them to their own unique levels – for example, ‘Bob manages to get into the office and he’s in a wheelchair’. Management also compares their own experiences (none have disabilities) when refusing reasonable adjustments, such as ‘I have to travel further into work than you do’.”**

Suspicion, distrust, and intimidating use of OH

A number of employees distrusted their employer’s use of OH:

- **“My experience is that OH assessments are used by management to intimidate disabled employees.”**

- “I felt threatened to talk about my disability and how it affects me as I’ve had the response “Well, in that case, I’ll tell them you can’t do your job and have your ‘fitness to work’ assessed, even though it’s just part of my role that is affected and that I’m struggling with sometimes.”
- “[OH] can be used as a HR tool to manage staff out of an organisation rather than support them.”
- “It was more aimed at reassuring my line manager rather than helping me.”
- “[My] referral for depression was very stressful and dismissive. It felt like a disciplinary for being depressed.”
- “It felt like a disciplinary process.”
- “It felt like a punishment, especially since I had a full diagnostic assessment available to my employer.”
- “[You are] made to feel like you have done something wrong when going through the process.”
- “The [OH] findings were repeatedly used to pressure me to leave the role.”
- “My employer seemed to use [OH] as a tool to not help me but as a tool for their benefit. I’ve had four between 2018 and 2022. It seemed my employer was awaiting an answer that wasn’t in my favour.”
- “[OH] are used by work to ‘push [you] out.’”

Part of this distrust was employees recalling how they felt they constantly had to ‘prove’ their conditions or that OH was there to prove to the employer that an employee did not really have a disability:

- “[OH] is about proving your conditions.”
- “I felt like I had to justify my conditions.”
- “It is used as a tool to postpone or refuse to make reasonable adjustments.”
- “What I needed from OH and my employer was “We’ve got this and we’ve got you”. But, after the recommendations came not to work nights, they couldn’t remove me from my role quick enough.”
- “I was forced to go to the appointment at short notice and I wasn’t prepared for the meeting at all. To go through all that for my employer to just ignore the recommendations was ridiculous. I’m not sure what my employer expected. It felt like they hoped I was just making up my non-visible disability and that I’d be ‘found out’.”
- “I always felt that they were trying to ‘catch me out’ and weren’t supportive or understanding of my condition.”

- “I feel like I’m in the position of constantly having to prove every minutia of my conditions. It’s exhausting and traumatic when I’m struggling to come to terms with a diagnosis as it is. My whole self-image has been turned on its head. To then have it challenged further just adds salt to the wound.”

Employees resigned because of their OH experience

Sadly, and worryingly, employees told us they had resigned from their jobs due to their experience of OH:

- “OH did not speak to my managers properly, so no measures were put in place. It was this that made me unable to carry on working there.”
- “My line manager was unwilling to make the adjustments recommended [in the OH report] and I ultimately ended up leaving my role.”
- [OH was] useless and demeaning. It’s part of the reason I left [my job].”

Others had not left, but had considered doing so because of their experience:

- “I considered leaving my job as the report said my employer should consider if it was reasonable to keep me employed, but after several months I managed to get the report changed. It was very, very stressful and put me off ever using occupational health.”

The good ‘9 per cent’

Responses from the 9 per cent of employees who recalled positive experience of OH included the following:

- “OH really helped my manager and organisation a lot to understand what adjustments I needed.”
- “After initially being worried, my OH assessment was actually a very reassuring process, and helped me understand my own limitations in the context of my role.”
- “It [OH] gives you reassurance that that you are not unreasonable and that you should consider options that you may not have thought about before to be as efficient as possible at work.”
- “The occupational health advisor was extremely friendly and really made me feel comfortable expressing the difficulties I have been experiencing.”
- “I’ve found occupational health very helpful and supportive, and I felt validated about my needs and my condition. Their recommendations have been practical and tailored to the situation.”

Ultimately, the experience to be achieved from the perspective of the employee is for barriers in the workplace to be removed. OH is engaged when there are 'gaps in information' missing from what the employee and employer already has. When OH can add relevant and helpful information that supports and advises both the employee and the employer, workplace situations can be better informed, and good employers can act accordingly. When the OH information is relevant and specific to both an individual employee's situation, disability or conditions, and job role, it can inform the and redirect the course of a situation which leads to a happier, more trusting, and more effective employee. The following situations are examples of this:

- **“I am so thankful to occupational health. I honestly do not think I would be here without them. The doctor was so nice, listened, understood, advised me and then wrote clearly back to my line manager, copying me in. My line manager immediately stopped hassling me and this has allowed me to get back to working as normal (much happier). All disciplinary actions immediately stopped too. My line manager changed again and I am now achieving great results again. Thank you so much, occupational health.”**
- **“Fantastic, very knowledgeable, patient, understanding. Understood about my main condition I was referred to them for. Beneficial to help my line manager and management team [understand] the severity of my condition and what should be in place for me to help me continue working.”**

Overall, as in other chapters in this report, employees said if there were good conversations between the manager and the employee about the employee's situation, their job, and the current difficulties, the employee and manager can then decide together if OH is the best intervention needed at any one time. In many cases, employees said they didn't feel an OH referral was necessary if they had a better conversation with their manager:

- **“My local support is so good and OH felt irrelevant.”**
- **“[OH] adds time, confusion, and bureaucracy to what could just be a conversation with a good manager. The key is to have a good manager!”**
- **"I find that if a person knows what they need to manage their conditions then they should be trusted to advocate this for themselves without OH rubberstamping it. OH are a brilliant resource when you need a safe place to talk through what you're going through but as they are generalists, they might not know what you need to cope at work.”**

Part 2: Managers' experiences

- **Only 36 per cent** of managers agree a lot that the occupational health process helped them make adjustments for employees.
- **Only 36 per cent** of managers agree a lot that they understand the role of occupational health, including what occupational health does and does not do.
- **Only 36 per cent** of managers agree a lot that they are confident to tell employees what will happen during their occupational health assessment and next steps.
- **Only 33 per cent** of managers agree a lot that they knew how occupational health fits in with their organisation's workplace adjustments process.
- **Only 27 per cent** of managers agree a lot that they knew what to do after they had received their employee's occupational health report.
- **Only 26 per cent** of managers agree a lot that the occupational health process was helpful.
- **Only 25 per cent** of managers agree a lot that the occupational process helped them understand how to manage and support their employees.
- **Only 14 per cent** of managers agree a lot that they were involved in their employee's occupational health assessment and was able to speak to the occupational health adviser as the employee's manager.

The emerging themes from managers' experiences resonated almost entirely with employees' experiences. Managers gave the five key difficulties they experience with OH referrals:

- The report is unbalanced if the line manager is not involved.
- The report generally details what the employee has told the assessor.
- The recommendations are unclear, non-committal, and generally give recommendations that could have been suggested without a OH referral.
- It appears a 'box ticking' exercise that managers have to do purely because it is part of the process.
- The OH assessors often give advice and recommendations that are not practical for an employee's role or how it needs to be carried out.

One manager summed up the concerns of many managers who felt that is a struggle to find an OH provider who fulfills what their business needs in terms of supporting employees, involving the line manager in referrals, and the employee being asked the right questions during the assessment which would lead to appropriate and relevant recommendations for their role and situation:

- **“I have yet to find a provider that I feel meets the expectations we require. Most occupational health just relay what the employee tells them, rather than asking probing questions or digging deeper, and fail to make recommendations that suit the needs of the business or liaise with the manager to help make recommendations. We always refer people because we want to support the employee, but usually occupational health is less than supportive.”**

Managers’ frustration with occupational health

Managers told us their following frustrations with OH:

- Many managers had not been trained or advised how to make good referrals to OH, yet they had learnt that OH is **“only as good as the referral”**:
 - **“You have to ask the right questions and give enough information on how day to day activities and work is affected.”**
 - **“OH can’t read your mind about what guidance/advice you require, so [it is] important to make the referral specific.”**
- Managers had also rarely been trained or advised on how to implement the recommendations of a report:
 - **“The occupational health service always finishes their reports with ‘decisions rest with the line manager’. However, line managers don’t have the skills to make those decisions and are either worried about making the wrong decision and getting into trouble or simply don’t have the budget or the wherewithal in the business needs (for example, the adjustments recommended, such as amended working practices, can’t be made with the duties of the role).”**
- Managers could also experience the accessibility of the OH process and report:
 - **“[There is] a tendency to resort to automation and inflexibility to request to work with the very disability we have referred employees for - for example, only phone assessments when the employee is hard of hearing.”**
- There was also recognition of the general role and remit of OH. Managers still expect OH to **“manage [employees’] expectations about what is reasonable”**.
- Managers, like employees, also referred to the poor quality of reports.

Some managers recalled how they can see OH assessments have an impact on the morale and engagement of their employees and, as a result, said they would avoid referring employees to OH. In one manager’s words:

- **“Staff report awful experiences of OH. I’d try to avoid having anyone who works for me need to go to OH and would find an informal work around where possible.”**

However, other managers recalled situations where OH had helped them:

- **“Our occupational health team are brilliant and are particularly good at having difficult conversations which might come over badly from a manager – such as where it may be time for an employee to start to accept their condition is more serious than they want to believe and has a bigger impact on their work than they want to believe – especially where a person has a condition which will deteriorate.”**

This example is particularly interesting because, from the manager’s perspective, an OH professional is the person to have this conversation with an employee. However, as per employees’ experiences, they feel OH is not needed when managers are prepared to have these conversations – and, in many situations, employees would prefer to have these ‘difficult’ conversations with their manager rather than what for most employees is effectively a ‘third party’.

Conclusion

Good experiences of OH from employees’ perspective generally occurred when:

- The employee wanted to go to OH;
- The employee trusts their manager (or the person making the OH referral);
- The employee knew what to expect of the OH assessment and the outcome;
- The employee felt listened to by OH;
- Even if the OH assessor is not a specialist in a specific condition(s), they listened and understood the employee’s challenges; **and**
- The adjustments suggested by OH were realistic and relevant for the employee’s specific job.

However, employees recognised that if good conversations took place between the manager and the employee, the need for many OH referrals was hugely reduced.

A summary of managers’ overall experience of OH can be summarised in the following words from a manager:

- **“Occupational health is great when there is a specific issue and when all parties involved know what outcome we want. It’s not a great process when the individual is vague in the conversation with the doctor or when the questions are not targeted enough. The output becomes useless and usually another OH assessment is needed. I don’t think the OH process is explained to managers offering OH as to what will happen and what questions will be asked, which means that it’s not necessarily helpful to the individual who comes away feeling unsupported. I’ve seen recommendations from an OH assessment that have been frankly irrelevant.”**

Overall, the current approach to OH is not working. Employees feel OH is therefore to benefit the employer, and employees feel it is there only to relay what employees tell them. Ultimately, one manager’s feedback sums up what many other managers and many employees feel about using OH:

- **“OH is a complete nightmare. They barely understand the clients we send to them. Their reports seem to miss out many items. They are guided by the client and do not support the business. They make recommendations that are impossible to implement and they also do not support managers or let them have any involvement in the process”.**

One HR adviser’s conclusion was as follows:

- **“We find people can be suspicious of OH from their experiences from other companies. OH needs wider industry work.”**

What employers can do

There are two key sets of recommendations for employers to improve the experience of OH from both employers and employees’ perspectives: when designing OH tenders and contract specifications, and what managers should know about OH.

When looking for an OH provider, part of an employer’s **tendering questions and contract requirements** should include the following:

- Providers must adhere to an employer’s diversity and disability inclusion policies or guidance where appropriate language and ‘etiquette’ is adhered to.

- Any e-platform used by the provider must be accessible. This means websites, portals, and web applications must be compatible with accessible technologies and have considered the experience of users with a wide range of disabilities, conditions, and symptoms. At the very least, any tests, questions, or ways of accessing a referral must be accompanied with a statement which acknowledges that not everyone communicates and understands information in the same way and, therefore, if information, assessments, or questions are needed in a different format, that will be provided by the potential OH provider. Providers should expect that different formats and ways of doing assessments will be requested; they should not be 'shocked' or not know what to do if a client requests this.
- Providers must have a process in place to provide access to a British Sign Language interpreter for managers and employees when needed.
- Reports should be accessible as written. In addition, requests for reports in different formats should be provided.
- Any 'contact us' information must include at least three ways for people to get in touch. Providing a phone number only is not accessible, and this will not reflect the values of inclusive employers.
- Ensure there is a way for the employer to regularly provide feedback from managers and employees so that the service can be improved for their workforce.

In addition, employers should also **equip managers** to know the following about OH:

- How to write an effective OH referral.
- How to help ensure the assessment and report is accessible and inclusive to the employee.
- What to do on receiving the OH report (such as contact HR, book a meeting with the employee, for example).
- What decisions they can make about the report independently and which elements of a report should be escalated (and to whom).

In addition, employers should also:

- Regularly ask for feedback from employees and managers on the OH process, and feed this back to the OH provider for their action and continuous improvement.
- Ensure there is a process in place for raising inaccessibility, inappropriate comments, or poor quality of assessments and reports with providers.

Working life during and since the COVID-19 pandemic

The pandemic brought a significant change to how we needed to work, and that change came at short notice. Those who could, had to work from home with one week's notice from when the Prime Minister announced the plans to when they became legally enforceable. Those who could not work from home had to work differently with many more social distancing and increased infection control protocols than they were used to. For many disabled employees, this meant leaving their adjustments in their usual place of work behind and requesting new adjustments. For others, the change meant this was the first time they had to request adjustments. Whether the pandemic was laden with anxiety, stress, or was logistically difficult for disabled employees, or whether it brought welcomed changes (working from home was the most frequently requested workplace adjustment pre-pandemic), it had an impact in way or another.

We asked employers and managers how they felt about the impact working through the pandemic in their organisation had on disability inclusion and how well their organisation responded to how employees and managers felt and if everyone received the adjustments and support they needed.

Part 1: Employees' experiences

On working from home during the pandemic:

- **72 per cent** of disabled employees said it is easier to manage their conditions when working at home.
- **65 per cent** of disabled employees said they felt they performed better in their job when working from home.
- **56 per cent** of disabled employees have enjoyed their job and working life more since working from home.
- **52 per cent** of disabled employees said the pandemic was the first time they worked in the way they wanted to and that best suited them.
- **28 per cent** of disabled employees have felt pressurised to return to the office or onsite working but don't want to.

On whether employees needed different adjustment during the pandemic:

- **49 per cent** of disabled employees needed additional or different adjustments during the pandemic, but only 18 per cent said their employer provided everything they needed.
- **43 per cent** of disabled employees did not need anything different during the pandemic.

On shielding, isolating or restricting contact with others:

- **41 per cent** of disabled employees had to shield, isolate, or restrict contact with others during the pandemic because of their disability or condition.
- **14 per cent** of disabled employees are still shielding, isolating restricting contact with others.

Regardless of working patterns related to the pandemic, disabled employees told us whether working from home was part of how they are **now** regularly working. A total of 1,480 employees with disabilities and conditions told us their home working status outside of a workplace adjustments arrangement:

- **31 per cent** work from home all the time.
- **32 per cent** work from home 3-4 days per week.
- **14 per cent** work from home 1-2 days per week.
- **10 per cent** said working from home varies for them.
- **9 per cent** said they never work from home.
- **4 per cent** said their job cannot be done at home.

How employees' adjustments needed to change during the pandemic

Employees said the speed of getting what they needed during the pandemic was often poor:

- **“It took over a year to be provided with the most basic adjustments and some were never provided. The battle to secure basic adjustments was stressful and made me ill and unproductive.”**
- **“I was sent home immediately [when lockdown was announced] but my equipment was still at work. I didn't get the things I needed for 6 weeks.”**
- **“Working from home became much easier once I had adjustments implemented – I was off for 8 months waiting for them to be sorted out.”**

The difference home working made to disabled employees

Many employees referred to how they worked during the pandemic as being **“revolutionary”** and **“life changing”**:

- **“Working from home became an option that was never there before and this made life easier for me.”**
- **“Remote working was easier. On days where I felt more tired, I was able to sleep longer and not have to travel. I also took less sick time.”**

- **“It was a huge relief to be able to work from home for the first time. I suddenly had so much more free energy, both physically and mentally.”**
- **“It made me realise my true worth.”**
- **“Working from home was life changing for me. I feel more in control of my work pattern and not having to commute has helped with managing my mental health conditions.”**
- **“Working from home flexibly was FANTASTIC. I think I was my happiest during the pandemic.”**

Some employees said it made them realise they could do more in terms of workload and hours, because their home space was more accessible than their working space, and energy was not taken up by commuting, often which included navigating inaccessible transport and poor accessible parking options. Some employees also said that seeing other organisations allowing more homeworking caused them to think beyond their current employer and consider work opportunities with different organisations when they had previously not considered this. In one employee’s words:

- **“The pandemic revolutionised work for me. I am not able to work full time in-person due to my disability, but the pandemic showed me that I can work full time (or mostly) remotely. This has been life changing for me, especially as more companies allow homeworking.”**

For others, it disrupted opportunities for them and support was lacking. Increased workload was also often cited and reference to well-meaning but un-joined up wellbeing advice:

- **“There were no adjustments implemented despite me telling the organisation about my autism/ADHD diagnosis. They kept piling on work and responsibilities that sent me into autistic shutdown/meltdown. There were no boundaries (WhatsApp messaging all hours of the day, expectations not to take breaks), no work/life balance (contacted on evenings and weekends to do work) and it was a toxic environment.”**
- **“It was easier to get to work in the loft! In particular with chronic fatigue, [but] workload doubled with no extra support put in place – just many, many emails about mental health which I had no time to look at.”**
- **“There was a huge increase in workload and I was routinely working more than ten hour days, which impacted on my conditions. Moving from my bed to my work desk was pretty much all I was a physically capable of.”**
- **“My [employer] encouraged ‘self-care’ but also required more time on camera than ever!”**

New ways of meeting and communicating

Employees often cited digital accessibility and communication as a challenge that employers had not foreseen, or at least could not resolve quickly enough for colleagues not to be excluded for a period of time. Some employees in this situation said inaccessible IT and communication systems remain a huge barrier in their workplace today. Many employees who are Deaf or who have hearing-related conditions said their organisation failed to provide British Sign Language (BSL) interpreters or Video Relay for increased remote communications. In addition, many said their employer had blocked permissions to caption functions on online meeting platforms which caused a significant barrier. However, for others whose employer had not provided interpreters when working into the office, online meetings where captions could be used was the first time they **“didn’t miss some of the conversation”** and could take part in meetings more productively than ever before.

But working from home was not a panacea. **“Teams fatigue”** and **“Zoom fatigue”** were common phrases. This, among other reasons, were cited for why some employers preferred the office environment. Many said they find in-person communications easier, and some referred to enjoying the office environment more with fewer people coming in – yet another indication that busy, open plan offices do not suit many people, with or without disabilities:

- **“Working from home was extremely hard for me because I need routines and structures in place and clear work/life separation, so working from an office is best for me.”**
- **“[Working from home] was harder from a mental wellbeing perspective. Based on this, I was allowed back to the office earlier.”**

Aside from inaccessible communication, employees also referred to how communication was generally complex and unclear during the pandemic:

- **“Communications were challenging with my dyslexia/focus issues working across multiple online platforms. Misperceptions and confused messages increased.”**
- **“I struggle with written communications and find it easier face-to-face”.**

Return to office or onsite working

Employees often felt pressure to come back into the office. Many used the word **“forced”** to come back to the office before they were medically ready or felt comfortable to do so.

Some employees experienced helpful changes that were applied organisation-wide which have been maintained ever since:

- **“The ‘quiet Friday’ put in place at the end of the month was helpful in that it gave me a day where I would expect not to have a call or meetings unless it was urgent. [It] allowed me to use that day to catch up on things without feeling obliged to always be answering my phone or Teams calls. This made it easier to manage stress and my workload.”**

Employees also referred to the need to **“double up”** on their adjustments – that is, so they have the same adjustments when working at home as when they are in their office. Others referred to **“kidnapping”** their adjustments from the office themselves when their employer did not arrange for this to happen for employees.

Anxiety was a commonly cited term used by many who are still working at home but whose employers have signaled this arrangement is finite and will soon end:

- **“Working from home made my life so much better. I am in constant pain and commuting 4 hours a day is difficult for me. I am dreading returning to the office.”**
- **“I’ve had to fight to keep [working from home] since hybrid working was brought in. The increasing push back into the office has been very stressful.”**

Sadly, some employees said they left their job during the pandemic due to how poorly supported they felt by their employer:

- **“I left due to being offered another role where my conditions have been taken seriously and I’ve been supported amazingly.”**
- **“My initial support from my manager and HR was very poor. I changed my job.”**

Ultimately, the pandemic was a very mixed experience for disabled employees, many of whom said there were awful experiences as well as positive experiences during changed working arrangements. One employee summed up how many disabled employees generally felt:

- **“Impact: Working from home and talking via Teams difficult. Isolation, lack of outside contact. Good points: working from home, flexibility, more work done, work-life balance.”**

Part 2: Managers’ experiences

- **52 per cent** of managers said their employees needed different adjustments during the pandemic.

- **46 per cent** of managers agree a lot that employees generally still met their deadlines and target and were generally as productive as before the pandemic while working at home.
- **42 per cent** of manager agree a lot that employees could manage their disability or condition better while working at home.
- **35 per cent** of managers agree a lot that employees seemed to enjoy their job and working life more since working from home.

The pandemic placed significant pressure on managers as well as disabled employees. Managers told us the following factors made managing disability inclusion in their teams much more difficult. In one managers' words:

- **“Pandemic working put a lot on managers...I did well at supporting others, but that came at a cost to me.”**

How communicating and talking about disability and adjustments changed

Some managers said hybrid and home working meant different types of adjustments were needed. For example, ensuring captions were always used on Teams calls, providing noise cancelling headphones for people working in noisy home environments. Some managers said it was more difficult to manage employees **“where all communications are online”**.

Other managers could easily see the negative impact home working had on some of their employees' mental wellbeing. Managers observed this also impacted how mental health was spoken about.

- Managers said it was unhelpful that the narrative about short term and pandemic-related anxiety had become conflated with anxiety as a disability:
 - **“We found employees tend to be confused about the distinction between short-term anxiety about a change (like coming back to the workplace) and anxiety in the context of a disability. Which is not to say we shouldn't be supportive of both, but the expectations of employees aren't always realistic.”**
- Some managers felt narratives about health had created a 'divide' and increased judgments about different types of conditions:
 - **“[The pandemic] helped open conversations about health which is only a good thing. It has also created a slight divide with employees who don't have a visible or open health condition sometimes being a little judgy about employees who do.”**
- Some managers felt there was more a focus on mental rather than physical health during the pandemic:

- “[There] was greater focus on mental wellbeing as physical issues became less with all staff working from home”.
- Other managers, however, felt the pandemic working conditions had opened up similarities and shared experiences between disabled and non-disabled colleagues due to the fact that a large proportion of the workforce now had to work in a similar way:
 - “The pandemic meant more people disclosed underlying conditions and helped I think to break some of the stigma and open up conversations between them and their employer. It was easy for us as everyone could work from home really due to the nature of the work we do and the technology available to us”.

Management styles had to change

Managers referred to how they had to manage employees differently to ensure they kept an understanding of how their teams were coping by keeping in touch with them when everyone was working from home during lockdowns:

- “I had to ask more questions and recognise everyone has different needs and backgrounds.”
- “I can’t pick up on signs that someone might be struggling.”
- “It was a massive learning curve and a lot harder to manage remotely. I found that staff were not communicating as much but also for some working remotely created more problems or additional problems for some of the team.”

However, some managers felt there was, in one manager’s words, “**upwards bullying**” toward them from the employees they managed. Other said that being a manager throughout the pandemic was “**extremely energy draining**”.

Nevertheless, some managers welcomed the changes pandemic working brought:

- “Although there were some initial challenges ensuring staff had the right adjustments in place at home, a massive benefit of widespread working at home was that it normalised it; it provided evidence that it doesn’t reduce productivity and led to more employers being willing to allow remote working. This has opened up more job opportunities for those disabled employees who need to work from home. It has also meant that they are less ‘out on a limb’ when doing so as teams have adapted their ways of working to include home workers more effectively. So hopefully this supports both productivity, engagement, and sense of belonging”.

- **“Home working was something that was frowned upon [prior to COVID-19] and is proven to be a positive support mechanism where feasible to manage disability has now become more amenable and has a positive impact on disabled colleagues.”**

In addition, many managers were positive about how their organisation had managed quick changes from usual to altered working arrangements during the pandemic:

- **“The business were quick to provide support to all colleagues including those with disabilities, ensuring adjustments were sent to homes. If the situation meant that a colleague with a disability couldn’t work, then they were permitted to be off on full pay without being penalised.”**
- **“As we were able to operate a ‘working from home’ approach throughout the pandemic and now moving to a ‘hybrid’ model of working, there were no discernible problems over this period in managing and supporting staff.”**

Although many managers were positive, some were disappointed with how senior leaders had responded. For example:

- The move online cause issues with hearing impaired members of the team **“which took a frustratingly long amount of time to find workable adjustments for.”**
- **"I feel that our employees with disabilities suffered massively during lockdown. Our senior leadership team did not prioritise adjustments while working from home, the changing environment or provide employees or managers with the information they needed to be effective and supportive. Likewise, the transition since lockdowns and restrictions have eased have focused heavily on getting ‘back to normal’ without considering the benefits working from home has given employees, especially those with disabilities.”**

Conclusion

Managers and employees report somewhat different experiences of the pandemic, particularly when the move to homeworking was first introduced. Many managers felt that their organisations were equipped to move to home working relatively quickly with few problems because of the nature of their work or because they had the technology available. However, there was evidence from disabled employees that this was not their experience. Instead, for them, they struggled to get what they needed to continue working as everyone else had been able to. Employees with hearing related conditions or who needed assistive technology or physically adapted or ergonomic equipment struggled. Many said that they had to sort out getting their own adjustments from the office themselves to bring home with them.

There is no doubt, as was evident, that the pandemic was a stressful time for both employees and managers. Managers looked to senior leaders for swift inclusive decisions, and these were not always realised.

Ultimately the major benefit is the difference that homeworking has made to many disabled employees across the UK workforce. Employees who are still working in this way and have done since they moved to home working during the first lockdown said how anxious they feel about being asked to return to the office; they have now worked in this way for years and they have been productive and doing their job during this time. But one style of working does not suit everyone and, although many welcomed homeworking, for many others it did not suit them at all and they wanted to come back to the office, many of which were quieter but also emptier with less of their colleagues around for them to be with and work alongside.

Managing change, including bringing back employees to the office who are yet to return and who don't want to return, must be managed with care. It demands the understanding that this is another change that means employees may need to alter how they manage their disability or condition to achieve. For others, some of whom are still shielding, isolating, or restricting contact with others, returning to the office is still not an option for now; this remains the reality for some disabled people.

In any case requests for flexible working which includes working from home or to work from home as a “reasonable adjustment” must be seen separately to employees working from home ‘just because’ that is how they have got used to working because of the pandemic. Working from home is, in an employee's words, a **“game changer”**, but there was evidence that leaders are indicating to disabled employees that this arrangement is finite. We are advising and encouraging employers to recognise when it might be reasonable to allow employees to keep working from home some or all of the time as an adjustment.

What employers can do

- Action needed to be fast as the UK moved to home working wherever possible. For many workforces this was unprecedented and there were therefore no protocols in place for such a quick response to moving adjustments and arranging new adjustments at short notice. Employers (if they have not already) should undertake a review of what worked well and what would need improving in case such a crisis were to happen again. Inclusive employers capture learnings even from isolated or unique circumstances and feed them back into workplace policy and process design.

- Employers should ensure managers know the difference between a home working policy and home working as a reasonable workplace adjustment. Sometimes this will mean making an adjustment to an organisation's home-working policy, and sometimes homeworking will be requested or discussed as part of a workplace adjustments conversation outside of the home working policy. Either way managers should be equipped to know how to make these decisions and consider the wider implications of different working arrangements long term. They should also ensure they are observing where changes are difficult, emotional, and stressful for employees so that they can have supportive discussions and put the right arrangements in place wherever necessary to make transitions as easy as possible for employees to go through.

The role of assertiveness and self-confidence

We asked disabled employees what life situations, personal characteristics, or backgrounds they felt had prevented disabled employees from being treated fairly or getting adjustment and support put in place:

- **58 per cent** said getting what they needed was due to how assertive and confident they are at work to ask for what they need.
- **33 per cent** said whether they had raised a disability-related issues, complaint, or grievance in their organisation influenced how fairly they are treated or how well supported they are.

Events and social occasions

Employees referred to occasions that were outside of their immediate daily job or duties which caused barriers for them and other disabled people. Some said they raise how non-inclusive inaccessible arrangements or alcohol-centric social occasions are, but this was rarely appreciated or taken seriously. For example:

- **“I recently travelled to an event. Firstly, it was only announced just before the event that overnight stay was possible. [It was] too late for me to organise. I advised the event prior to the date that I had dietary allergy and the response was ‘purchase your food elsewhere’, whereas on the day I noticed other conditions were catered for. There was a flashing/moving light and I mentioned this to the event organisers that it might be a good idea to give a warning about this to be told ‘don’t look at it’ and they didn’t understand the issue for either people with sensory issues or light induced seizures. I genuinely felt that ‘disability and inclusion’ was paid ‘lip service’ to... I got an email telling me I was rude, insulting, and to consider the impact of my statements when I highlighted the issues that had affected me. This would not endear me to make future comments.”**
- **“I raised a grievance because a team I was in had set up a WhatsApp group and a joke about a disability was sent. It wasn’t upheld and I was made to feel like nothing short of being a problem. I have to leave that role and go to a new team as it made me very ill.”**

Others referred to needing to prioritise their energy for their job, rather than taking part in work-related social activities:

- **“I definitely have issues with being tired out from work and not having the energy for personal pursuits - especially after being in the office. I don’t feel as though I have much of a life outside work. I have a low social battery anyway, and work often eats that up entirely. Personal projects/hobbies are also much harder to engage with, and it feels as though it is impossible to set any boundaries because the workplace has precedence and there’s a constant looming dread that pushing on too far could mean losing employment. I also dissolve into tears very easily... It turns into an exhausting cycle of hope and despair.”**

This is not to say that employees in the above situation are ‘anti-social’, or that they do not want to engage in social situations. In is instead the need for employers and colleagues to recognise that is work related social occasions are optional, these activities are sometimes seen as not being a priority over preserving energy, particularly during busy times at work where their intention might just be to ensure they get the rest they need to work again the next day or keep themselves well for the duration of a project or to reach a deadline.

Any work-related events or social occasions that are mandatory should be factored into employees’ workload capacity, as employees will need to spend energy on mandatory events, which can be challenging for employees such as the above individual. A change in activity or pace can also introduce an additional type of fatigue which can take longer for someone to recover from if it a type of activity or task that they are not regularly used to – for example, employees regularly mentioned that team ‘away days’ were often long, needed different travel, and sometimes different pain management or medication. For many, they said they needed to take time off work to recover from this type of occasion.

The impact of ‘masking’

Other employees said they were not deliberately lacking confidence to assert themselves, but they had “masked” their disability for so long that they were **“used to covering up”** their disability:

- **“Sometimes I feel I may play down the effect of my dyslexia. I am very good at hiding my struggles. I feel self-conscious of my disability. I avoid any situation where my weakness are shown, or have found ways to mask them. Therefore, because I have been coping for decades now, I don’t know what help I could get or even if I need it.”**
- **“I’ve been pretty good over the years at ‘masking’ so very few people actually believe I have any conditions that require adjustments. I’ve been told that there are no concerns with my performance, half in a reassuring way and half as a challenge to my request. I have the overwhelming sense that people don’t believe me and it has really knocked my confidence.”**

Bullying, harassment, and not getting adjustments

Not getting adjustments that had been asked for often felt like bullying, harassment or intimidation from managers and senior leaders; a fundamental dismissal of someone's very body and identity, as well as a 'dampening' of everything they are able to do, be, and bring to the organisation:

- An employee with a hearing condition said, **“No adjustments at interview, no adjustment in training, forced to take calls without necessary equipment, accused of faking hearing impairment, told I ‘wasn’t trying hard enough’ and was given menial tasks to do.”**
- **“I experienced [a former supervisor] saying ‘You used to be so much quicker’ [and] ‘this shouldn’t take this long to do’ and ‘X can do the same in less time, why can’t you?’”**
- **“I am vocal about my disabilities because I have to be. It was put to me, when I applied for a fixed term appointment, that I was only offered an interview because I’d ticked the disabilities box, not because I could actually do the job. I was told I shouldn’t have ticked that box as my disabilities aren’t real.”**
- **“Being female has definitely got in the way in the past, and I have been told I’m too sensitive/emotional (also comes with my ADHD). I have been told I won’t be able to progress in my role until I ‘sort myself out’ (in relation to being emotional/sensitive).”**

This led to many employees feeling as though, in one employee's words, **“you are seen as a pain for fighting for what you need”**. Yet many said they necessarily had to raise a grievance to get the adjustments they needed:

- **“I was refused all adjustments [and] had to go through a grievance to get them.”**
- **“I had to raise a grievance in order to obtain a reasonable adjustment that could have very easily been put in place without the trouble.”**

Another employee recalled that their non-disabled colleagues had noticed how bad accessibility in the workplace was for disabled people and that, if they spoke about this in the media, they felt adjustments would be made more quickly:

- **“Colleagues who know about the workplace not being accessible have said to me that they’re surprised I have not gone to the papers as yet as, if people knew [employers] who go on about how disability friendly they are were not making adaptations for their employees, things would get done soon.”**

Others said they needed to get external support to get adjustments:

- **“I needed outside help from a support worker to raise requirements for adjustments. I do not have the confidence to ask for this on my own and got very stressed about it until I had external help.”**

Others reported stigma and stereotyping about their specific disability or conditions, or disability related situations:

- One employee was told that they **“come across as ‘rude’ for being blunt due to being autistic”**.
- **“[I felt] humiliated by a comment made about “not smiling” in a team meeting at a point when the line manager was aware of challenges at home and the impact on my mental health.”**
- **“I have been accused of needing too much support [and] going to the support team too often. This is down to brain fog, which can often lead to self-doubt. I have been pulled into a meeting twice because others have complained of my body odour when I shower every day and use deodorant. They don’t understand that a hormone imbalance can affect you this way and it’s not because you’re dirty. I was really embarrassed and didn’t understand what they thought I could do about it.”**
- **“[My colleagues] thought that I was ‘a bit much’ with one [colleague] referring to me as ‘spectrumy’.”**
- **“Some colleagues think we ‘pull the disability card’ to get an easier ride. I have frequently heard other colleagues say ‘if you tick the disability box on the application form, you are guaranteed an interview, regardless of whether you have the skills or experience required for the job.’”**

An increasing trend we hear about is coaching being arranged for disabled people (or other employees with specific protected characteristic) rather than the organisation addressing the systemic or embedded barriers and biases; i.e., disabled employees are ‘sent away’ to get coaching to ‘cope’ instead of the employer looking at what barriers are there for individuals and how to remove them.

- **“I need clear and consistent structure to know what I am doing. This has led to being mis-categorised as anxiety and a confidence issue to be bolstered with coaching for that rather than addressing the root cause, and I’m getting more burned out trying to jump through all the hoops to get the support I need while I’m afraid I’ll end up slipping up and getting fired.”**

Senior leaders' and managers' behaviour and attitudes

Many referred to senior leaders not intervening or advocating for employees who were waiting for adjustments. Others referred to senior leaders' and managers' poor understanding of disabilities:

- **“I have had a couple of meetings initiated by a senior member of staff about me asking for help and then not helping myself in my own time. I went walking with my husband as I have two conditions, one that gets worse quicker if I am inactive and one that’s painful all the time. I was so chuffed I was able to get out with my crutches I told someone at work and this other person said that I should not ask for help at work if I don’t look after myself at home! What they didn’t know was that after a 45 minute walk, I slept at home for 3 hours. I was beyond shocked and fed up that this was even discussed with the assistant manager, and then for me to made to feel like I am just playing on my conditions.”**
- **“There seems to be an assumption that disability is static and unchanging, so when asking for modifications to adjustment there does seem to be an air of ‘another one?’”**
- **“I felt that when trying to be heard about my disability, my people leader found me irritating and [they] told everyone that I was too angry.”**
- **“I recently had three interviews where I was told at the end of one of them that it was possible that I didn’t score highly because I was unable to verbalise due to my newly diagnosed speech impairment.”**

One employee showed the impact that a hostile and unkind manager and team culture can have and, when a supportive manager and team is found, how life-changing that can really be:

- **“I’ve had one very significant and prolonged bully of a manager who destroyed any confidence I had and made me feel worthless every day. I would cry and shake in the car journey into work. I didn’t understand what I was doing wrong and I didn’t understand the social cues to know what to say to fix it. This crossed over into the pandemic and led to my autism/ADHD diagnosis. I moved teams and they were brilliant. If it wasn’t for them, I’d likely not be alive [or] still in my job as they showed me what true support and friendship was... I’m too scared to stand up for myself as I don’t understand social cues and don’t want to get in more trouble again.”**
- **“My previous manager victimised and ridiculed me for being less productive than others. She said she would say I was ineffective at my job [and] it would affect pay and bonus if I didn’t speed up. I ended up having a nervous breakdown.”**

- **“I have been bullied and harassed for several years because of my disability. Instead of the workplace getting better for disabled staff, it’s actually getting worse... My managers have ignored the Equality Act and the occupational health recommendations along with medical evidence from my GP and hospital specialist. Disabled staff are made to feel like a nuisance and unwanted. Policies don’t work if they are simply ignored by managers. It’s horrible being disabled in the workplace in 2023. I wish I could resign, but I can’t afford to.”**

Many employees referenced being taken through a performance procedure:

- **“I had a line manager who did not have empathy or sympathy for my condition or fatigue levels. This made my life really difficult, exacerbated my condition and caused me a great amount of stress at the time. I had to go through an appeals processes for my performance, which I subsequently won.”**
- **“I was given a ‘developing’ performer rating due to my sickness from chronic migraines because I was off sick. I have also been treated unfairly by another manager who wanted to manage me out due to my complicated medical issues.”**
- **“I was given a ‘partially achieved’ as my manager said I’d had a ‘wobble’ due to my autism diagnosis.”**

Other employees said managers were more understanding when the employee had received a formal diagnosis of a condition:

- **“I lived with chronic pain, fatigue, and breathing issues for many years before I had a diagnosis. I had to seek out support for myself, and I suspect there are many people out there who should be supported under the Equality Act that are missing out on that much needed support. The minute I got a diagnosis and a Blue Badge [for accessible parking], they were suddenly very proactive in their support.”**

Some employees said they did not feel discriminated against per se, but that the working environment was just ‘not good’ for disabled employees. In one employee’s words:

- **“I don’t feel overly discriminated [against] at work. It is just uncomfortable. As a neurodiverse person, I ask a lot of questions and want to know the reasons for things a lot. This is not to question those reasons, it is just to get things straight and in order in my own mind. I have experienced some tension when doing this and felt like I am a minion – just don’t ask questions, just do what they’ve asked. I notice errors and often raise them. Sometimes I feel like people don’t appreciate that and take it in the wrong way.”**

Being assertive and confident at work

Disabled employees very commonly said they needed to be assertive to get the adjustments they need. When people repeatedly asked for adjustment or 'call out' something that is not disability inclusive, they are seen as **"troublemakers"** and **"problem children"**. This was a very common theme in the responses:

- **"As soon as you are seen as being assertive about your needs, you are labelled as a troublemaker."**
- **"I believe I am viewed as a difficult employee because I am an older woman with disabilities who knows her rights."**
- **"I felt that as a disabled queer woman there are lots of additional barriers that others don't face. I feel like I only get things done when I become a problem".**

This puts disabled employees in the 'no win' position of employers wanting them to discuss their disability and what they need (as per the earlier chapter on managers' experiences where some managers said it was easier to make adjustments when employees knew what they needed), yet employees are very often made to feel like a 'troublemaker' if they do this confidently.

In other situations, employees commonly referred to wishing they could say what they need at work but lack the confidence to do so:

- **"I am not confident in what I can ask for in terms of adjustments and am a 'people pleaser'. I will struggle intensely before asking for help because I don't want to let others down."**
- **"I feel that if I can advocate for myself better then things would be much easier for me and I may be heard correctly and less assumptions would be made about my request for adjustment."**
- **"You're only taken seriously in some parts of the business if you have the loudest voice."**

There appeared to be an evidence experience of 'no winning' in terms of how disabled employees are expected to 'be' - that is, if disabled employees are too vocal, they are 'troublemakers' and if they are too quiet, they need to 'speak up' or are incapable of performing well. In one employee's words:

- **"If I am assertive, I am treated like I am being unreasonable or unfair. If I don't stand up for myself, I am chastised for lacking confidence."**

Some employees said the ramifications of being a ‘troublemaker’ were huge. In one employee’s words:

- **“I was seen as a troublemaker and disruptive because it was assumed that because I was good at some things I would be good at everything else and my support needs were ignored. When I spoke up for myself, they used the disciplinary process rather than working the adjustments out with me. I had to pursue a diagnosis in order for them to get the disciplinary process reversed. This caused me a great deal of harm making my chronic health issues much worse and putting me into burnout. I had to stop working and it was 5 years before I could carry out any paid work.”**

However, some employees felt that being confident in their ability to do their job was also detrimental:

- **“Sometimes, being confident in the work you do can be detrimental, as some people may think you’re a ‘know it all’.”**

Others referred to comments that were perhaps meant well, but did not feel positive; for example, being called **“passionate”** when employees are trying to be assertive about what they need or when saying when something is not accessible from others.

Overall, employees overwhelmingly felt that their employer would not promote people who did not **“communicate well”**:

- **“Promotion and career selection is not performance related rather the person’s ability to reflect the company image. Therefore, having dyslexia/ADHD and sometimes stuttering to find the words that I can say isn’t a promotion candidate.”**
- **“The fact that I am more introverted isn’t really catered for in general working or developmental opportunities.”**
- **“I was told I had to be more assertive on many occasions by a few managers if I want to thrive in the business.”**
- **“Coming across confidently is almost a required behaviour.”**

Positive experiences of ‘being who you are’ at work

Some employees did recall positive and inclusive experiences of the workplace where they did not feel they had been discriminated against, bullied, harassed, or unsupported:

- **“It is a good place to work [but] some managers have more time to listen than others.”**

- “Myself and my disabilities have always been treated with understanding and respect.”
- “My company is very fair to all, no matter what disability, religion, or sex you are.”
- “Work and colleagues are very open-minded and I feel I can be ‘me’ at work. Lack of confidence has held me back in the past, especially in an interview situation, but this is not related to my disability.”
- “I’ve never felt my protected characteristics as a disabled gay white man have been negative in the workplace. Condescending and negative behavior I find far more out in general society from the public.”
- “I have always enjoyed a very inclusive and healthy working environment. Managers and colleagues have always been very supportive and understanding. I have never felt anxious or guilty about needing extra support due to their continued assurance.”

Conclusion

Age, gender, and how assertive and confident someone was at work were felt to impact how well supported disabled employees were at work. Some White disabled men said they should feel “privileged”; yet many White males said the key thing White male men – let alone disabled men – need to be is an “alpha male”, someone who will have a “loud voice” and who is confident and assertive in the workplace.

People referred to “White” males, but no one referred to “White British” males. White male disabled employees also said there is an embedded bias that ‘White males are privileged’, and that has somehow become the diversity stereotypes to ‘push against’. This has the effect of White males feeling they are somehow ‘bad’ for a diverse and inclusive workplace.

Biases were evident but this survey did not seek to prove whether combined discrimination or harassment occurred. This chapter relies on employees’ own observations and experiences which are nevertheless extremely important but, as many employees themselves were clear to say, discrimination because of one of more protected characteristic was, in one employees’ words, “**difficult to evidence**”. Employers however should notice that this chapter details how employees **feel** and how they have **interpreted** their experiences, even if a formal review of each case would determine discrimination had not occurred.

Employers should note from this chapter that employees felt **not** making adjustments constituted bullying, harassment, or created a hostile working environment. This might not be viewed as such by an employer but there was evidence that many employees interpret not getting adjustments as a bullying and harassment experience. There was sadly plenty of evidence that disabled employees are subjected regularly to careless and unkind

comments about their disability. Whether or not there were bad intentions or malice behind what, to the person who said it, might feel 'minor', the experience and environment created at the moment 'stays' with disabled employees. In addition, for the most part, this treatment and behaviour was happening on top of employees battling for and having already waited a long time to get adjustments in place, meaning they are already struggling on many levels because of their disability at work when they hear or are subjected to unkind words or behaviours.

Everyone's experiences of the workplace are informed by every part of who we are and what we have experienced in our lives. Therefore, everyone's experience of how they feel in the workplace is different and equally valid. Employers do nevertheless need to ensure they are not reinforcing any unhelpful stereotypes or that their workplace culture and team behaviours unintentionally imply that a specific personality type is more valued or worthy of progression over another.

What employers can do

- The single most important thing employers can do as a result of the findings in this chapter is to undertake a bullying and harassment review in their organisation. Many surveys undertaken in the workplace collect protected characteristics data at the beginning of the survey. However, surveys often do not ask the respondent if they feel the treatment they have experienced was **because** of this protected characteristic. This is what employers need to understand from employees. When employers have this data and information, they can target interventions appropriately and more specifically.
- Employers must be confident that the threshold of what bullying and harassment constitutes in their policies is appropriate for the culture and behaviours they want to see achieved in their workforce. A lot of the time, employees reported experiencing this time after time and it still going unreported or unaddressed. In other circumstances employees raising it end up experiencing repercussions for doing so.
- There is still work to do on ensuring managers speak and act appropriately in response to disabled employees' concerns, difficulties, and requests for adjustments. Every manager should be able to have discussions with any employee about any life situation. This does not mean they need to be experts in every life situation, but that they need to be able to have a conversation when an employee needs it. This includes disability and adjustments related conversations as well as menopause, caring responsibilities, or just wanting to discuss career progression.

Work-related stress and managing a disability at work

There are many surveys that look at levels and reasons for work-related stress in UK organisations. These however rarely look at the work-related stress levels of disabled employees specifically. We wanted to find out what disabled people's experiences were of work-related stress and what caused them to be stressed at work. We were interested to find out how their experience of adjustments and disability related support had an impact on how stressed they felt at work. This chapter shares the findings from those questions.

- **69 per cent** of disabled employees generally feel valued and supported by their line manager.
- **30 per cent** of disabled employees feel stressed at work most of the time, and **56 per cent** disabled employees feel stressed at work some of the time.
- Only **19 per cent** of disabled employees said they have enough time to manage their conditions and do everything they need to do in their job.

We asked employees in free text responses what caused them stress at work. The overwhelming response was **“workload”**. This was followed by **“unreasonable deadlines”**. **“Pressure”** was another commonly used phrase. Other common workplace stressors reported in free text response questions included:

- Poor communication from managers and senior leaders, including about changes to the organisation and to individual task deadlines, and general **“indecisiveness”**.
- Poor or **“toxic”** culture in teams, and **“ableist”** culture in the wider organisation.
- Lack of support or having adjustments in place. Responses on this topic included one employee saying they have been off work for 4 months while waiting for their adjustments, and another describing getting adjustments in place as **“attempting to climb a greasy pole”**.
- Overstimulation (including sight and sound) in office environments. **“Overwhelm”** was a commonly used term. One employee said, **“there is a noticeable spike in my heart rate and stress levels compared to days when I am at home”**.
- The demand created by lots of different types of communications. The number of emails was a common stressor.
- Experiencing bullying and harassment by colleagues and managers and feeling **“unwelcome and unwanted”**.
- The volume of meetings each day, including the amount of time employees are expected to spend in online meetings.
- Commuting to work was a huge stressor, and some said commuting was one of the main reasons they did not want to return to the office.
- Working at home when others work in the office **“means less communication with colleagues”** which results in **“[I] know less what the team are doing”**.

- Unstructured roles or not having clear direction on tasks and job **“boundaries”**.
- Dealing with difficult customers and clients with no additional support with the impact difficult interactions can have.
- Inaccessible IT software.
- **“Not being shown appreciation”**.

Some employees reflected that how they feel their disability impacts their performance at work:

- **“I constantly worry about how I am performing; whether people are judging me for resting; worrying about needing sick leave; worrying about the variable, random nature of my illness and how unreliable that makes me; worried about people thinking I’m not ‘pulling my weight’. [I am] in pain 24/7, so pushing through to do my hours is stressful.”**

Employees who were worried about their performance at work also worried about the consequences this could have in limiting their promotion opportunities:

- **“Although I have adjustments, I feel I’m falling short of the standards I would like to be working at because of my conditions. This is more of a personal issue than organisational issue, but I also wonder if my adjustments also mean I’m not considered for promotion. I tend to overthink interactions on the lens of whether my condition affected them.”**
- **“I worry I can only ever do a low-level admin job because any additional responsibility or stress puts too much pressure on me. I require a lot of sleep and can’t always trust that I’ll feel able to do my job each day, so I worry a lot about money and my performance, and my ability to do my current job, let alone progressing and earning more money.”**

Some employees pointed to factors outside of the workplace which nevertheless impacted the stress they felt at work. These included:

- Relationship breakdowns.
- Being a carer or looking after a relative.
- Being a parent.
- Financial difficulties.

Sometimes, the nature of having a disability, the onset of a condition, or managing a condition with medication, caused a complexity of issues which impacting employees’ working life:

- **“Pain (and sometimes medication) can affect sleep and lack of sleep can affect concentration or the ability to learn new things. I worry a lot that I am replaceable and/or overlooked if new opportunities come up as my learning them is slower paced than many others.”**

Lack of promotion opportunities also came up often or worries about whether employees would get a job in another organisation:

- **“I am good at my job, but not getting anywhere.”**
- **“My manager [bullies] me but, as I am disabled, I am concerned that I could not find employment elsewhere.”**

Others, however, referred to how they feel they work better under pressure:

- **“ADHD people work best in a ‘crisis’ type situation, so it’s actually helpful to have some measure of workload pressure. It makes me feel productive. I’m most stressed when I don’t have enough to do and am unproductive.”**

As per previous chapters, some employees referred to ‘masking’ and not telling their manager about the reality of how much they are working to ‘keep up’:

- **“It takes me longer to do things which puts me under pressure. I usually resort to working extra hours (unpaid) to ensure I achieve what I need to. I do my best to make sure my employer is not aware of this in case I am labelled as inefficient.”**

Employees also referred to the impact of a good line manager for reducing the amount of stress they feel:

- **“I am rarely stressed at the moment because I have a very kind line manager”.**

The general level of mental wellbeing of disabled employees

- **27 per cent** said their mental wellbeing is generally good in an average week.
- **20 per cent** said they feel the mental wellbeing is generally neither good nor bad.
- **13 per cent** said their mental wellbeing is generally bad or very bad.
- Only **5 per cent** of disabled employees said their mental wellbeing is generally very good in an ‘average’ week.

This was evidenced by a general feeling in free text responses that mental wellbeing when you have disabilities or conditions is generally a state of ‘neutral’ or poor. This was

summed up by an employees' words which described mental wellbeing when you have disabilities as being in a constant state of **"meh"**.

The following themes were recurrent in the 422 free text responses we received to the question on what causes disabled employees' mental wellbeing to improve or get worse. The following factors caused employees' mental wellbeing to worsen:

- Lack of sleep, often caused by pain or effects of medications (such as **"drowsiness"**), which then made work more difficult.
- The fatigue and pain which was a daily or very regular part of a disability or condition.
- The impact of being disabled and being a carer or looking after a relative.
- Work related stress and unrealistic workloads.
- Sudden changes to routine – whether those are work related or caused by something in an employee's personal life.
- Generalized anxiety about wider world crises and economic situations.
- The combination of existing disabilities and conditions while also experiencing the menopause or onset of menopause.
- Feeling **"forgotten"** when events or social occasions are planned that are inaccessible.
- Fear of catching COVID. Many employees said when they have had COVID, it took them much longer to recover due to their disability or condition.
- Financial worries.
- Worrying that people at work are judging them because of their disability or condition.

Poor self-confidence and lack of self-belief was also cited. In one employee's words:

- **"I can't help but set myself unrealistic performance goals and is (when) I can't complete them all due to my condition; I judge myself very harshly. I am usually disappointed in myself, even though I know I am doing the best I can, and that makes me feel horrible. I usually end the week feeling quite depressed."**

Others said their mental wellbeing is directly related to the type of disability or condition they have:

- **"My mental wellbeing is fundamentally linked to my autistic/ADHD brain. I am constantly trying to maintain a calm yet interesting existence in a world that is frequently inconsistent and needlessly cruel."**
- **"My mental wellbeing and work are very much together. If I'm, struggling to keep my pain managed and/or am more tired, I am less mentally resilient. Equally if, for whatever reason, my mental wellbeing takes a hit, I am much more fatigued and struggle to keep my pain managed, so it's a vicious cycle."**

- “[My mental wellbeing is] bad. Chronic pain and chronic fatigue are very hard to live with.”
- “It [mental wellbeing] varies from day to day and even sometimes throughout the day. It’s often down to how well I’m accomplishing my tasks (both in and out of work), how many tasks I have to complete (for example, how overwhelmed/burnt out I am) and how tired I am (I often don’t sleep well due to my ADHD). My ADHD also makes it hard to regulate my emotions and I can have mood swings without warning. Some days I’m ecstatic to be alive and other days I’d rather not be here at all.”
- “I am diagnosed Autistic. I also have a chronic pain condition which has led to a long-term depressive illness. Additional emotional stress or additional physical pain, or fatigue can add to the load on my mental health and wellbeing which will obviously suffer”. I am less able to control my Autistic tendencies and more likely to meltdown or shutdown if my pain level is high.”
- “Menopause affects my mental wellbeing, mood swings from anger to vulnerability. Fatigue from an underactive thyroid affects my energy levels and positive outlook.”
- “I have lost the vision in one eye and may still lose my eye. I have days, even weeks, where I have been unable to do anything but sit and cry.”
- “I am chronically depressed as well as autistic, so most things are just ‘meh’. I suppose they are better when I feel like I have achieved something and worse when I feel drained or am doing things that I feel have no real meaning or intrinsic enjoyment.”

For others, mental wellbeing was impacted by a constant underlying fear of the wider implications of potentially not being able to work and what the future may look like for them:

- “It [mental wellbeing] is entirely related to my condition. I’m always worried about flare ups and my condition getting so bad I can’t work anymore and lose everything I’ve put so much effort into. I’m also the main bread winner and if I can’t work we would lose our house and our whole lives would dramatically change. The unpredictability of a fluctuating ELC [Energy Limiting Condition] and the frustration of your body not being able to do what you want it to is highly depressing and anxiety inducing.”
- “I have MS [Multiple Sclerosis] and although I am relatively well currently, I worry about the future due to the symptoms I have already had. Also, I have recently been tested positive for a virus which means I am at an increased risk of a fatal brain infection with the treatment that I am taking. My treatment also means I am immunosuppressed, so I am always worried about picking up illnesses. It is all a lot to take in and live with.”

- **“I suffer with chronic fatigue and PTSD, both of which are in remission. It is a constant battle for me to keep both in remission.”**

Some employees said they generally have a low mood anyway:

- **“Generally, I am low in mood and am anxious. This can change with workload demands, changes to process without sufficient explanations, support, time to work with it. Fatigue plays a big part and I lack confidence as I feel like I may be letting people down or not performing at the required level. Things improve if I have the time to focus/respond and feel confident about what I am doing.”**

Positive responses where employees were satisfied with their mental wellbeing were rare among the free text responses. However, one employee described the factors that have enabled their quality of life to be “good”. Within this was also the acceptance that a disability is not going away:

- **“Overall, my quality of life is very good. I may have to deal with work stress from the nature of my job, but I am living comfortably, safe home with a supportive partner. I have created an environment where, most of the time, I can forget I am disabled. I find joy in little things and relax well. My mental wellbeing is mainly impacted by my (physical) disability – I can't escape it, I can't cure it, and they will only likely get worse. On top of this, it causes me to miss out on things that matter to me and to shrink my life to fit within its boundaries. I think I live nearly the best life possible with my condition and I am grateful for this, but sometimes I remember that other people don't have their agency limited in this way.”**

Other employees said the following helps:

- Connecting with friends and **“positive people”**, a partner or other supportive people.
- Breaks – including being able to rest at weekends and having micro breaks throughout the day.
- Feeling **“listened to and heard”**, in and outside of work.
- Changing the ‘volume’ of activity and **“being somewhere quiet”**.
- Being in nature and **“going out into the garden”**.
- Having realistic goals to achieve, in and outside of work.
- Getting good feedback and feeling valued by managers and colleagues at work.

Other responses showed the link between having a supportive manager or workplace and their mental wellbeing:

- **“For the first time in my working life, I have good work-life balance with an extremely supportive line manager and an employer who genuinely cares about the inclusion, equality and wellbeing of their staff. All this means I enjoy my job [and] feel supported and valued.”**
- **“When I manage to be more realistic about my goals or when I get positive feedback from my colleagues [or my] manager for good work, I can feel my stress and other negative feelings dissipating.”**
- **“Prior to starting my current job, my mental health was very poor. I am currently doing a lot better thanks to work. I feel I have more purpose and pride in myself. Work is fulfilling.”**

Conclusion

It is evident that many disabled employees worry about how they are performing at work and how they are being perceived by colleagues and managers as a result. The phrases **“I am worried...”** and **“I am anxious about...”** came up often in free text responses. The reasons for disabled people being stressed in the workplace can be straightforward and purely about workplace conditions; but, for other disabled employees, stress is complex and is an experience that is not divided between work and non-work times and locations. Their disability and how they experience and manage their disability is difficult and stressful in itself, and the energy demanded to do this every day will inevitably have an impact on the energy they have available during working hours.

Nevertheless, most free text responses started with **“I think...”** or **“I feel as though”**, and employees themselves even acknowledged that how they perceived themselves and their own performance and career opportunities available to them in their organisations may not necessarily be the reality of how their employers and colleagues see them. The perception they have is however powerful enough to limit the ambitions they have and self-worth they exhibit in their job and in the workplace. Either way, working with a disability or condition is often just difficult, on many levels and in a complexity of ways depending on someone’s type of disability or condition and the other things that are going on in their personal life.

What employers can do

Regardless of how many adjustments are made and how inclusive a workplace is, there will most often remain an element of someone's disability or condition that cannot be removed. It is the nature of having a disability or condition and many disabled people's realities that some difficulties cannot be resolved by adjustments or by inclusive workplace cultures.

However, one of the key workplace experiences employees referred to that makes them feel better and valued was when they get good feedback for something they have done well, either from managers or employees. In the previous chapters and throughout the data, we saw a lot of workplaces being target and deadline driven. In the pace of such

environments, it can be easy to forget supportive comments to colleagues about something done well or the value of their contribution.

- Consciously and intentionally giving praise may seem like a small action, but disabled employees said they want more recognition and to feel like they belong and are contributing.
- Encouraging team cultures of giving good feedback which is both truthful and which also aims to make each other feel good goes a long way, particularly for disabled employees' wellbeing at work.

The inclusion and accessibility of employers' health and wellbeing initiatives

We asked employees about their experiences of using their workplace health and wellbeing initiatives and services. This chapter shares what they told us.

- **45 per cent** of disabled employees have used their employer's Employee Assistance Programme (EAP).
- Only **44 per cent** of disabled employees who used their EAP felt it was accessible and inclusive to them.
- **15 per cent** of disabled employees said their employer had promoted health and wellbeing initiatives that were inaccessible to them because of their disability conditions.

Employees said many health and wellbeing initiatives were inaccessible, un-inclusive, and inconsiderate to disabled employees. For example:

- **“Stairs and distance walking challenges, going for regular walks, online yoga classes and weight loss were all recommended to us.”**

Disabled employees told us of the following types of wellbeing initiatives they had been invited to take part in that were inaccessible to them:

- People with breathing and mobility conditions said exercise classes, 'fun runs', and group walks were not an option for them.
- Employees with some neurodiverse conditions – particularly ADHD and anxiety – said they find mindfulness activities and apps inaccessible and damaging.
- Drinking and alcohol related social activities were frequently cited as being non-inclusive for people who daily take medication and for disabled employees who said they do not want to drink due to their religious beliefs.
- Social or wellbeing activities which required travel involved inaccessible transport options or routes.
- Self-care meetings which encouraged 'ad hoc' unstructured talking and 'ice breaker' activities.
- Accessible activities but which took place in inaccessible rooms and locations.

Many employees felt that their employers' health and wellbeing initiatives were **“coming from the assumption that all participants are healthy”** and with **“the expectation that everyone's abilities are the same”**.

The top 6 non-inclusive health and wellbeing advice and interventions

1. Use the stairs, not the lift

The most commonly frustrating initiative that employees referred to was notices on or next to lift doors which encouraged people to walk up the stairs:

- **“All employees are pushed to walk more, not use the lifts on sustainability and health grounds. My heart condition means I can’t walk far, so it is a constant reminder of my disability.”**
- **“I find the ‘use the stairs’ signs next to lifts irritating and patronising.”**
- **“Signs in the lifts encouraging people to use the stairs for fitness make me feel judged and stigmatised.”**

2. Walk more, it’s good for you

Employees said they were often encouraged to go for a walk to improve their mental health:

- **“I was told it would be helping [my] mental health by doing a 10 mile walk when I have mobility issues.”**
- **“The EAP talks a lot about getting your steps in and walking to meetings. That is not easy in a wheelchair or when you cannot walk far.”**

3. Team exercise competitions

Initiatives where teams were encouraged to beat each other’s daily fitness targets often made employees feel excluded:

- **“Physical initiatives are really inaccessible to me as I have mobility issues. [There is] no recognition or sensitivity of the exclusion”.**

4. Diet-related advice

Employees with bowel, digestion, and diet-related conditions also experienced exclusion related to social events or ‘health’ advice:

- **“I am a Coeliac. Most wellbeing initiatives seem centered around food (mainly cake) and when a gluten-free alternative is provided, organisers have little to no knowledge about cross-contamination and implications on health. I have been made to feel awkward for refusing to eat.”**

- **“The [employer] promotes the app regarding losing weight but I feel they should be promoting a healthy lifestyle without mention of weight. I have BDD [Body Dysmorphic Disorder] and seeing this being promoted feeds into the notion that skinny is the goal, and I am sure there are many people within the [organisation] that have BDD or an eating disorder to whom this sends the wrong message.”**
- **“I have an eating disorder and I was told to go for a walk or eat a nice meal.”**

5. Mental health advice and mindfulness initiatives

There was a concerning lack of understanding that mindfulness interventions can be dangerous and an inappropriate intervention for people with specific mental health conditions and some neurodiverse conditions. Access to mindfulness apps seemed to be generically accessed and promoted across the whole organisation with no ‘trigger’ warnings or any information about when these might not be appropriate for someone to use. Employees said how they were told to use a mindfulness app, and, not knowing what it was and not being asked if they have any conditions, they used it and narrowly avoided a crisis situation. Others referenced mindfulness classes and apps:

- **“[The advice] was unhelpful and distressing at times due to my mental health.”**
- **“Meditation apps are difficult for people with ADHD. It isn’t enough for tackling my mental health issues.”**

Others felt that the prevailing mental health narrative from their organisation was that the blame for feeling stressed was now being put onto employees:

- **“They [the employer] are currently pushing mindfulness hard, I find it impossible and so frustrating. The veiled implication is that now they have provided the tools and told us how to look after our wellbeing, so how stressed we are is now down to us!”**

6. Inaccessible EAP services

Some employees referred to how their EAP was not offered in an accessible format, and neither was health and wellbeing information that was applied to all employees:

- **“It takes quite an art to access it and understand what there is in place and if it is appropriate so I usually give up as it’s lots of words and some videos, both of which I struggle with.”**
- **“The [EAP] is not compatible with assistive software.”**
- **“Use of mobile phone apps to access the material. I cannot use touch screen phones so cannot use apps.”**
- **“Mental health services never had any provisions for deaf people, and they tend not to be experienced enough to support people who are disabled.”**

The ‘unintended yet felt’ discrimination and exclusion

Some employees said that while they could not take part in many of the activities their employer promoted, they did not feel the employer should not do them. There should, however, be recognition that not everyone can take part.

Disabled employees generally felt their employer ‘says the right things’ about disability inclusion, but provided initiatives and services did not sync with those inclusive values. This had an impact on how disabled employees feel about their place in their organisations and in their teams. Many had experienced inappropriate things being said to them in front of other people which left them feeling upset and excluded:

- **“I was told I ‘wasn’t trying hard enough’ [to take part].”**
- **“A physiotherapist [told us on a Teams call] that everyone can do these exercises and should be doing them. I felt completely cut off and ended up leaving the call due to being upset.”**
- **“My previous team leader lost weight and then started saying openly in front of other employees that she can help me to lose weight ‘when I’m ready’.”**
- **“Socially distanced events – all standing – impossible for me. The introduction of the park run – impossible for me. When I challenged the inclusive nature of the park run, I was deleted from the mailing list!”**

Some employees said they knew health and wellbeing initiatives were not designed to deliberately discriminate or exclude disabled employees, but that was nevertheless sometimes the felt impact:

- **“They are not forcing us [disabled employees] to take part if we don’t want to. However, you feel a bit left out.”**
- **“Wellbeing hours – the suggestion is always to ‘go for a walk’, and I get told “just you do something yourself”. That is not group or team building for me! I don’t think any malice is intended but some thought about my feelings would be good.”**

Conclusion: For employers to consider

Overall, employees experience a lack of recognition that ‘health and wellbeing’ interventions must be appropriate for individuals, particularly when someone has a disability or condition. When workplaces health and wellbeing narratives position everybody as being the same and infer that everyone moves, thinks, and eats in the same way, it compounds the message that there is a ‘normal, healthy body type’. Some employees pointed out that this is not just non-inclusive, it is also outdated as a ‘medical’ health concept and that added to the frustration and patronisation disabled employees felt:

- **“The material treats us like we are stupid and able to do everything. It is [not very good, expletive edited out], outdated, and inaccessible.”**

Many employees said similarly – that it was assumed they could do everything, the information and advice was poor, the narrative was dated and not inclusive, and the materials were predominantly inaccessible. Many workplace health and wellbeing initiatives are reinforcing this, and disabled employees are feeling the tensions between what disability inclusive values employers **say** they are committed to and the messages they are endorsing in their health and wellbeing initiatives. Disabled employees have long said that health and wellbeing services, advice, and apps are predominantly ableist, but it appears employers have been slow to influence the accessibility and inclusiveness of what their health and wellbeing services are providing.

- **“It was all about healthy living for non-disabled people and that if only we were more active, ate better, we would all be not needing sick time or being stressed. It was ableist and did not include disabled employees’ lived reality. It was used against me for not attending by a manager who thought me being disabled was actually me being unhealthy and tried forcing me to go to things like ‘know your numbers’ (health checks for blood pressure, diabetes screening, heart health, sleep well, etc.) which wasn’t appropriate as it would have been telling me the wrong things or flagging up issues that I knew about but was already being treated for.”**

Looking ahead: What disabled employees want in their current job and future career

We asked disabled employees how satisfied they are with their current work situation:

- **58 per cent** are satisfied or very satisfied.
- **24 per cent** are dissatisfied or very dissatisfied.

When we asked disabled employees what they want in their current job and beyond. There were three themes:

- Reducing responsibilities and working hours.
- Being promoted.
- Thoughts about leaving their current organisation.

Of those who would like to decrease their responsibilities or working hours:

- **55 per cent** would like to or would consider decreasing their hours in their current job to help them get a good work-life balance while managing their disability or condition.
- **31 per cent** would like to or would consider decreasing the amount of responsibility (including management, deadlines, and targets) in their current job to help them get a good work-life balance while managing their disability or condition.

Of those who would like to be promoted:

- **62 per cent** would like to be promoted to a more senior role with higher pay in their current organisation within the next two years.
- **45 per cent** would like to get a more senior job with higher pay in a different organisation.

Of those who were thinking of leaving their current organisation:

- **28 per cent** of disabled employees said they want to or are considering leaving their current employer because they don't feel they have been treated well.
- **23 per cent** of disabled employees want to or are considering leaving their current employer purely because it is time for a career change.

When employees are unhappy, 'stuck', or looking to leave their job

Some employees told us they were looking to leave their organisation:

- “I am so unhappy in my job, I’m seeking other employment. I don’t want to go into an office at all. I don’t want to drive two hours a day to an office. I want to work in a job [where] I can be my true self and I know this is possible with the right support. [I want to] flourish and be productive and do what is expected of me.”
- “I’m buying time so I can set up something and be my own boss. I’ve given [my employer] two years and went through hell at the end of last year because I still haven’t recovered after 6 months post- re-infection, that no one is doing anything to stop.”
- “I have now got to the point where I am not coping at work, so I am going to have to retire, which is something that I do not want to do.”

Others said they are looking for another role or already have a new job they are waiting to begin:

- “In my current job, I am not very satisfied as the work isn’t terribly fulfilling and I don’t feel I am being treated like an adult. However, I am about to move to a job that will be much more varied and interesting and which is part of a team that I’ve worked in before and that is much more respectful and supportive.”
- “My job itself isn’t a good fit for me but my organisation is generally better [at] accommodating disability than some other places, so I hope I can get better accommodations in future and transfer to a more appropriate role.”

Others referred to being “**stuck**” where they are and as if there are no other options for them:

- “I wish I could leave but I’m not well enough to learn a new role, meet new colleagues and all that goes with it so I’m stuck in this role where I got sick in the first place.”
- “[The] job is not fulfilling, but [it is] hard to find a job where people are understanding and I can work part time with remote working.”
- “I am disadvantaged because of my disability. Promotions and opportunities are given out based on networking and social skills. This is openly discussed, if you want to move on, you have to socialise and network.”
- “My team is great and my role is fine. I wanted a low demand role while I was in treatment. I am qualified to do a much higher paid and more interesting role, so I feel bored and that I am not using my skills. Long term, neurodivergence is the biggest barrier to me meeting my goals in my workplaces.”

- “I would like to find a new role that is more suited to my abilities, but I struggle to think about what I would be good at and what would work for me. So I just end up staying where I am.”
- “[I am] thinking of leaving because of stress, but my health issues are a worry. Can I find work at the same rate but in a better working environment?”
- “I need to move jobs/employer but lack the confidence or self-assurance to any longer work at the highest level. I’m emotionally exhausted. I look at a new 50k-a-year job and think I’m wasting their time as someone will deserve the job more than me.”
- “I think it would be hard to find another organisation where I can work in the way that I do. This is frustrating as I have a lot of experience but very little chance of progression or development and am therefore likely to never fulfil my potential.”
- “My disability makes it hard to progress even though I am capable of the next role. The interview process is hard for me with my autism.”
- “I am dissatisfied as I had hoped I could achieve more than I have/can. I feel trapped in my role and that I can’t leave because of my disability as I wouldn’t be able to get an accommodating job, so I stay doing something I am no longer interested in.”

Related to feeling ‘stuck’ and as if they are not progressing, some employees referred to being underutilised:

- “I like to be busy all of the time. I have capacity to do more.”
- “I get stressed when I don’t have enough to do. I’m bored.”
- “I’m satisfied, albeit quite bored, in my work.”

Employees who were looking to progress their career often referred to the worry of having to reapply for or renegotiate adjustments:

- “I feel well respected and supported by my employer, manager, team, and wider stakeholders. Having worked at the organisation for nine years, I am proud of the company and being part of it. I am starting to consider the next challenge though externally and securing/having effective adjustments is a big concern in taking that step, which I think may hold back me realising my potential and having to reapply for Access to Work support too.”

Some employees referred to seeing how others were treated made them feel vulnerable, too. For example:

- “My team are great, but seeing others leave because of not getting adjustments and [their] teams bullying them makes me feel very vulnerable.”

Others said they felt stressed and as though work was having a poor impact on their general health and/or their disability:

- **“I’m very stressed by my job, and it is impacting my mental health very negatively. My work/life balance is very poor, and little is being done by the organisation despite me flagging these issues. I am using all of my energy trying to keep going with work and have nothing left at the end of the day for myself or my family.”**

In many of the responses which spoke about employees being unhappy or stressed in their job, inaction of the employer was commonly cited. Similarly, the dissatisfaction with senior leaders’ communication, decision making, and inaction was also a regular feature of responses:

- **“When I needed support for my mental health, it wasn’t there from senior leaders, even though we are supposed to be an organisation which cares for people’s wellbeing and we have an award [for this]. It is just a job now, nothing more. I will do my best for myself and my team, nothing more.”**
- **“I am very dissatisfied and disappointed by the continued attitudes of senior management and HR in respect of stress, workloads, and concerns we raise – for example, “I could do [X amount] a day when I was doing your job’, which bears little resemblance to our role today.”**
- **“I like the work and the organisation and most of my colleagues. The issue is management, both my direct manager and some of the behaviours from senior management.”**

Worries about returning to the office or being made to come into the office were a key feature of responses where employees were worried or unhappy within their work situation:

- **“I am unhappy about the forced return to offices for no real purpose as I find this difficult.”**
- **“I wish to work at home until I retire, but I am unable to do this as we are ‘an office-based organisation’. The people I work to are happy with me working at home, but managers are not agreeable as it is deemed to be unfair to others. Others are not disabled.”**
- **“It is wonderful working with my team. I just wish I was not pressurised to go back into the office.”**

- **“I thoroughly enjoy my job and my team are great. However, with being told it is a requirement to increase my office days when this is not consistent across other departments within the business I do feel is unfair as I’m still able to fulfil my job.”**

Others, however, felt they were already in situations where their employer was planning to exit them from the organisation:

- **“I feel I am being bullied out of my role.”**
- **“I feel discriminated against. I feel like I am being pushed out of my job, even though I have had nearly no time off throughout my health deterioration. I can still complete the majority of my role and my company do not seem to want to follow processes to help with adjustments. They just want to move me out of the way.”**
- **“I’m at risk of losing my job due to [my] disability and I don’t feel very supported by my colleagues. They were supportive and sympathetic at first, but it feels like they don’t care anymore.”**
- **“They want me out on redeployment or out. As long as they don’t have to bother with me.”**

Ultimately, many employees felt their work-life balance was not good and some wanted to reduce their hours to help manage this and their disability better:

- **“I just feel as though I am living day to day with nothing else in life.”**
- **“I would prefer to reduce hours further to get a better work-life balance.”**
- **“I work from home, which is great for me, but I need to reduce my hours due to my condition and I was warned when I started in this team not to ask for a reduction in hours.”**

An employee who had already made the decision to reduce their hours and had started in these new hours said it was **“the best decision ever”**.

Some responses included employees referring situation where they are a carer or look after someone as being a key consideration for how well work works for them:

- **“My hours work well with my caring responsibilities. As a reduced hours worker, I can fit in all I need to do each week.”**
- **“I would like my employer to consider giving me more paid leave for caring responsibilities.”**

- **“Impersonal. [I am] unable to get flexible working to help with my caring responsibilities.”**

Being ‘grateful’ for having a job

Disability rights commentators in the UK have over decades argued against the narrative that disabled employees are ‘loyal’ to their employer, because the reality is what the employer sees as ‘loyal’ is a disabled employee who feels ‘stuck’, having limited accessible career options, or it having taken so long to get adjustments in place that they do not want to, in one employee’s words, **“rock the boat”**. Equally, the narrative of disabled employees’ being ‘grateful’ to have a job, while a very real experience and feeling, causes the narrative that adjustments, support, and accessibility are ‘favours’ or ‘gifts’ from an employer to a disabled employee – the subtext being that the employee has done nothing or offered no value or talent to the employer in return; the employer has been nothing other than charitable.

Decades later, in 2023, ‘gratitude’ and being ‘grateful’ to have any job still prevails among disabled employees:

- **“I feel that the things in place for me here are the best they are ever going to get... I don’t know much about how other organisations support disabilities within the workplace, but I do know from first-hand experience that this is the best place I’ve worked in regarding support. But, also, at the same time, they have a very long way to go in terms of supporting neurodiversity within the workplace. I often feel that I have to be eternally grateful for any tiny thing that is adjusted for me – it’s degrading at times.”**
- **“I would like to have a greater role but am relieved that I have the opportunity to do what I do.”**
- **“It seems I as though I ought to be grateful for what I have been afforded. I want (and deserve) equity, not sympathy or pity.”**
- **“I don’t really think there is better out there, so, while not perfect, I am satisfied that it’s the best I can expect.”**
- **“My situation at work is a lot better than it has been in the past. I am grateful to have a job at all.”**

When employees are satisfied with their current role

For others who felt there had limited career options because of their disability, enjoying the job, being in a location that was manageable or not too far from accessible transport, and being around colleagues they get on with was a commonly cited positive combination. For example:

- **“This is not where I expected to be at [my age]. Due to my conditions, I’ve been unable to return to my former well-paid career. I do feel stuck, with there being no clear path to progression for me. However, for the most part I enjoy being around my colleagues and whilst a job working from home would suit me best, the location is not too far from home. Transport connections can be poor though, which adds to the amount of time I’m on my feet and in pain”.**

Others said they look for an overall ‘situation’ that suits their disability, their mental wellbeing, and their work-life balance, and this was enough to want to stay in their job:

- **“I have found a situation that allows me to cater to my needs while also carrying out my job well and supporting myself, which is important for my mental wellbeing.”**
- **“The team I am in is great. My manager is great. Everyone is supportive and friendly. I am happy with that.”**

Employees who were happy with their job generally referred to having supportive colleagues who they get on with and can talk to:

- **“The communication on all sides is open and clear. Working from home means I can be more productive and, while past experience often deters me from communicating when I need help, once I have reached out to someone, it feels like a weight has been lifted.”**
- **“[I have] good relationship with colleagues, interesting work that generally motivates me, ability to do things that cause me to feel satisfied and proud of achievements, degree of autonomy in what I do.”**
- **“My team are great, they are helpful, and non-judgmental. My wider colleagues seem good, too.”**
- **“It’s not my dream job, but I have good colleagues and the work-life balance is much better than other jobs I’ve had.”**
- **“I like my job and my team and colleagues, but I wish more people would come back to the office. The sense of the team is being lost and is affecting the training of new staff.”**
- **“I work in a very supportive team, which includes other with disabilities and health conditions so there is a lot of understanding. I feel comfortable to talk about my disability. I feel supported by my manager.”**

In addition to good working relationships, some employees refer to being able to pursue development opportunities elsewhere in the organisation:

- **“My line manager is very supportive. I have good friendships with some of my colleagues. I feel sufficiently challenged and engaged by my work. I am able to pursue development opportunities which I find rewarding. I am involved with the staff networks which allow me to use my personal and professional experience to help others.”**

Past experiences of being bullied or unsupported were a feature in how employees felt and how they feel this has impacted them at work today:

- **“It is good to have been able to return to work and the work I do is well paid and rewarding. But with the right support in place, I would have been at this stage 10 years ago.”**

Conclusion: For employers to consider

Employees often felt ‘stuck’ in their current work situation because of their disability, and others referred to how they felt they should be further on in their career than they are now. Sometimes this was because of a continued and ongoing lack of support and, other times, it was directly because of an employee’s disability. When employers have not intervened, this has added to the feeling of overwhelm and the overall feeling that mental health and wellbeing has suffered.

Employees said the following key conditions or circumstances at work helped them feel satisfied with their current work situation:

- Working from home and/or flexibly.
- Having a good work-life balance.
- Good communication with decisions communicated clearly.
- A team and manager who are supportive and who get on together.
- Senior managers being ‘visible’ in resolving disability inclusion-related issues.

Conclusion: Workplace adjustments and disability inclusion in today's UK workplaces

Business Disability Forum first produced The Great Big Workplace Adjustments Survey in 2019. This was because we could see at workplace adjustments were fundamental to the experience of how included or excluded employees felt at work. We were thrilled to get almost 2,000 responses, more responses than we achieved in 2018/2019 survey.

Many disabled employees are struggling at work

Experiences showed overwhelmingly that disabled employees in today's workplaces are struggling. Overall, they continue to experience tense conversations and long waiting times for adjustments they need; there was a huge amount of evidence that employees every day are putting up with, at best, hostile working relationships and, at worst, bullying in the workplace; and the experience of having a disability or condition which is felt and impacted in every single area of their life is still seen to be an experience that can be somewhat 'removed' by employers putting adjustments in place at work (after a lengthy wait). There remains little understanding that the disability (or, more accurately and more often, disabilities) an employee has at work is what they also have and experience all day every day in every other area of their lives. This has an impact on what they may need at work, how comfortable they are in their bodies at work, and the understanding that is needed from every working relationship in the organisation for them to feel as though they belong in that organisation.

Senior leaders needed to 'live' disability inclusion

There was good news, though. More than in the 2019-2020 survey, we found many managers telling us how much they too could see the process barriers and the lengthy waits that employees felt, and they too were frustrated by this. We therefore found that, compared to the last survey, managers were more acknowledging of process-specific barriers and waiting times, and there was evidence of an improved understanding in many situations of how difficult work was for their employees. The new gap that was evident in this survey was the gap between managers/employees and senior leaders. When senior leadership was mentioned, it was often about lack of clear communication, indecisiveness, or poor attitudes and insensitive behaviours about disability and disabled employees being left unchallenged, even when they had witnessed these instances. Employees and their managers are looking to senior leaders to set the tone, make decisions in line with that tone, and 'live' those values in a way that is very visible to everyone in the workplace. The term **"visible"** in relation to senior leaders came up often.

The value of supportive team and colleague relationships

Disabled employees have overwhelmingly welcomed and valued working from home, much of which has been magnified by the pandemic. Those who have not yet returned to the office have huge anxiety about, not just when they will be asked to return, but the way in which they will be asked to do so.

Even with many adjustments, employees said their disabilities and conditions are difficult to live with, and the workplace barriers beyond their own job contribute another layer of difficulty for them during working hours. This was a consideration when we asked disabled employees about their overall satisfaction with their current work situation. When disabled employees reported being “happy” or satisfied with their work situation, having good colleagues and a supportive team and line manager was the most common factor in this. Employees even said this was more important than whether they were enjoying and being fulfilled by their job – as long as their teams and the people around them were kind supportive and they got on with them. There is often investment in career development for individuals or in training for managers, but employers must not forget to also invest in team cultures and building good supportive relationships at team level. The way this was often done in organisations was through group activities and team days, mostly which were inaccessible to disabled employees.

Even leaving aside accessibility, what was far more important was the everyday experience of being together (whether remotely or in person) and connecting ‘as things were’ every day in normal workplace circumstances; they were the connections and the opportunities for building better relationships that really mattered, because it was after all the ‘everyday’ in which those interactions take place, and that is where the reality of their experience of their disability at work takes place as well – the ‘every day’.

Satisfaction is not the same as fulfilment

Although there was a huge sense of satisfaction with employees’ current work situations, this was merely satisfaction and not fulfilment. There was evidence that some disabled employees are in jobs where they are being underutilised and where they are bored. However, inaccessibility of recruitment or fear of internal promotion was too much for them to think about or spend their energy on. In addition to this was the huge fear of losing the adjustments they had fought so hard for and waited so long to get. There are also employees who were thinking of leaving because of how they feel treated or because they feel unsupported.

Some employees, however, merely want a better work-life balance to be fulfilled and, for many disabled employees, that means a reduction in hours. We often hear a reduction in hours is not helpful for employers’ diversity figures when they are trying to decrease their disability pay gap or measure the increase of disabled employees who have been promoted; yet employees tell us reducing their hours is often the kindest and most

inclusive thing their employer could do – not least because it recognises the difficulty of having a disability (albeit which may be reduced by having adjustments in place) and, at the same time, recognises how much someone wants to stay in their job and continue doing their job well and to the best they can. Some employees did feel this causes them to be seen as unambitious. For them, though, the reality of their life and their body meant ‘realistic’ and ‘manageable’ was the most successful ambition to achieve.

Some disabled employees feel ‘stuck’

There were also the employees who feel ‘stuck’, either in their current role or in their current organisation. This was for a number of reasons: sometimes because of the nature of their disability itself; sometimes because they could not have or do not have the adjustments they need; sometimes because they have been treated so poorly that they do not want to go through the process of interviews and renegotiating adjustments again; and sometimes because they feel other organisations would not be flexible or make adjustments. Others felt they were overlooked for promotions or career or development opportunities purely because they lacked confidence and were not assertive enough to ‘fight’ for these opportunities.

A whole workplace adjustments ‘experience’, not just a ‘process’

Ultimately, we talk in terms of a workplace adjustments experience, not just a process. This is because the process of getting workplace adjustments is just one significant, but small part, of how disabled employees should be supported and included at work. The workloads disabled employees have, the review and ongoing conversations they have with both managers and colleagues, the level of health and wellbeing they experience every day, the wider barriers that remain in their workplace (such as physical accessibility, bullying and harassment) – all of these things are viewed by disabled employees as ‘building the picture’ of whether and how far they feel included or excluded by their employer. We can be confident that disabled employees do not see workplace adjustments in isolation of the wider culture of disability inclusion, including the relationships between teams and managers, strategic narratives about disability, and conversations about their own personal working conditions and arrangements. When employers start looking at the workplace adjustments ‘experience’ as a whole, they look beyond just the written process and also to how employees feel, impacted, and limited by the length of time they wait, the decisions that are made or not made, and the things that are said and done to them by everyone else in the organisation. It is a whole workplace inclusion experience, not just a process to be followed.

What Business Disability Forum will do next

Business Disability Forum will continue to use The Great Big Workplace Adjustments Survey to speak to employers about how to improve the experiences of disabled employees in workplaces today. We will also repeat this survey and measure what is

improving and what is not and, as a result, where resource and attention needs be focused. In the meantime, we are encouraging members to engage with one of our sessions about this survey, to speak to their Business Partner at Business Disability Forum about this survey to understand what areas of workplace experience and adjustments they need to focus on, and to keep having conversation with employees about how they feel about the overall experience of disability inclusion in their own organisations.

Appendix: Methodology

The Great Big Workplace Adjustments Survey project has run from October 2022 until June 2023.

What we did

We designed a survey which repeated key questions with the same wording from the 2019 survey to provide a direct comparison of views between 2019 and 2023.

In the 2018/2019 survey, we saw the beginnings of how disabled employees were not viewing workplace adjustments in isolation of their wider experience of their workplace. Therefore, for the 2022-2023 survey, we included the following topics into the survey:

- The barriers that remain in the workplace after adjustments have been made.
- Disabled employees' experiences of occupational health.
- The intersections and other person 'characteristics' that impact disabled employees' experience of inclusion or getting adjustments at work.
- What caused disabled employees work related stress.
- Disabled employees' overall health and wellbeing and how their disability and working life interact and impact one another.

The experience of recent (within the last five years) graduates of adjustments during recruitment and the differences in experience between support and university and support at work.³

We also issued three separate surveys for three different audiences:

- Employees with disability or conditions who are in work.
- Employees with disabilities or conditions who have moved from university to the workplace within the last five years.
- Managers who manage employees.

The surveys looked at the experiences of employees and managers in UK based organisations.

Disseminating the survey

We opened the surveys in November 2022 and closed them in March 2023. To help promote the surveys we undertook the following activities:

³ The data analysis and findings from the graduate survey is in a separate research paper.

- Contributed articles and interviews for trade publications about workplace adjustments and its relevance while the survey was open.
- Presentations to employee disability networks to promote the survey and the project.
- A digital marketing and communications campaign.
- Google Ads to target the people we wanted to complete the survey.

The responses we received

We received the following numbers of responses:

- Employees with disability or conditions who are in work: 1,480 responses.
- Employees with disabilities or conditions who have moved from university to the workplaces within the last five years: 99 responses.
- Managers who manage employees: 396 responses.

Survey respondents' circumstances may mean that they are eligible to have completed all three surveys, as they may be a manager who has graduated from university within the last five year who has a disability themselves.

Limitations and potential bias of the survey

All the of the data was collected via an online survey. Although we consciously promoted offering different formats of the survey and different ways to contribute answers, marketing of the survey and project was almost entirely digital and would therefore have been better accessed by people who are digitally active, have access to the internet and social media, and who have regular access to emails or other digital communications used by their employers.

Therefore, the findings of this survey are not a representative measure of behaviour and attitude across the whole of the UK workforce. However, as we stated during the 2018/2019 report, each and every response is someone's story and experience, and the feedback is both valuable and important.

The project was designed, led, and written by Business Disability Forum's Head of Policy and Research who has disabilities and conditions herself. However, care has been taken to reflect the data and stories which emerge from the data only to reduce bias in the data analysis and writing of this report.

If you have any concerns, questions, or comments about this project, please contact the Policy and Research team at policy@businessdisabilityforum.org.uk

Acknowledgments

The number of people involved in a project of this size is huge. As with any key project that we undertake at Business Disability Forum (BDF), we consulted our members and disabled employees working in our member organisations during the design and development of this project. There are therefore numerous people who have been involved in or touched some part of this project, even if it was just to give feedback on the last survey in 2019 or to offer support for the importance of the project itself.

The BDF team

We want to recognise our fantastic team at BDF, which is small but increasingly mighty. Every single person at BDF has either been involved in some element of making this project happen, whether by being involved in team sessions to learn about it and its findings or helping promote it to members during conversations about workplace adjustments. Teams which should be particularly mentioned are:

- Our Leadership Team, who are unwaveringly committed to ensuring that the experience of workplace adjustments improves in every single one of our member organisations, and who have supported this project from its first iteration in 2019.
- Our Executive Support team who have delivered crucial elements of this project, such as helping with building the technical parts of this survey. Our requests for help, even when at unavoidably short notice, are met with a positive 'yes' and their helpfulness is a constant, reliable 'heartbeat' among BDF's workforce.
- The Communications, Press, and Marketing team who have 'cheered us on', giving us feedback and being friendly, supportive colleagues to both the project itself and specifically in helping to increase the number of responses we achieved every week.
- To the Business Partner team who encouraged their members to get involved and who throughout the project have sent the policy and research team repeated requests for when they will see and be able to talk about the findings.

Lastly, but no less importantly, recognition goes to our CEO, Diane Lightfoot, who keeps this topic on the workplace agendas of our UK and global members and with the Government. Her support for the team delivering this project has never diminished and her vision that this project and BDF's work must lead to lasting meaningful change in disabled people's lives is unfaltering.

External supporters

There are many external supporters of this project:

- BDF's long-time friend and second time sponsor of The Great Big Workplace Adjustments Survey, Microlink. Their generous sponsorship enabled us to make the project better, get more responses, and provided a trusted colleague and workplace adjustments expert to run ideas by during the design and development of the project.
- BDF's Network Leaders Forum of employees with disabilities and conditions who run employee disability networks in our member organisations. The kindness, generosity and trust they have shown with sharing their experiences and giving feedback on our work and offering insightful direction for what this project (and others) should include have been invaluable. The interactions our Policy and Research team have with this Forum are a combination of friendly, fun, and mutual sharing about the real and living experiences of having a disability or condition. This is a much-cherished network of talented professionals whose insights reach across and influence the whole of our membership and BDF's work. We want to thank them here for the time and energy they continue to give to us.

Our Partners and Members

Without the support of our Members and Partners, BDF cannot exist. A key approach of BDF's is that we are 'collaborators with' our members; we learn as much from them as they learn from us. We therefore want to thank everyone in the organisations we work with who engage with new research and these findings. Some employers and employees have told us that they have learned new things and had new conversations internally even just by taking part in responding to the survey.

Everyone who completed the survey

This project has been designed, led, analysed, and written up by BDF's Head of Policy and Research who has disabilities and conditions herself. She would like to thank everyone who took part in promoting this survey or responding to it. For some, this survey was the first time employees had shared a very difficult experience with us and, for others, it was the first time they had told anyone or written anywhere that they have a disability.

Every single survey response and every single sentence that people wrote has been read more than twice. The responses have been a mixture of candid humour, contagious 'glimmers' of hope, and painfully sad moments of recognition and reminders of what disabled employees are going through, living with, and thinking about every single day.

A note on the findings

Some of the less positive findings in this survey may be difficult to read for employees who are experiencing similar things themselves. They may also be difficult to read for the many employers who work hard every day at trying to improve the experience of people working in their organisations. The purpose of research is to inform areas where there are existing gaps, evidence the things we know only through the conversations we have every day but

have no robust data for, and inform how we as a business community and disabled employees move forward together to make workplaces better and happier for every single person who works in them to be in. We want to thank those employers and employees who have engaged with this project for those reasons, as hard as some insights may feel.

Contact us

Business Disability Forum is committed to ensuring that all its products and services are as accessible as possible to everyone. If you would like to have this report in different way that would be easier for you, please contact us.

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