Dear colleague

Thank you to those of you who were able to join us on 30 April for our virtual meeting for disabled network chairs, leaders and staff during Covid-19. It was great to speak to so many of you and to hear about your experiences and some of the challenges that you are facing.

The purpose of this email is to summarise the key areas that were discussed, invite you to be involved in contributing to this work and to advise you on next steps.

Overview

The virtual meeting lasted 60 minutes and attracted over 200 delegates from across health and social care. The purpose of this discussion was to capture the lived experience of NHS disabled staff in relation to Covid-19, focusing on the following four themes:

- Theme 1 Home working and reasonable adjustments
- Theme 2 Line management support
- Theme 3 Staff networks and peer support
- Theme 4 Mental health and neurodiversity

Summary and key themes

These themes generated considerable discussion – both through the virtual meeting, the chat box and follow up emails to the WDES team. The key topics that emerged were:

 Reasonable adjustments and management by processes – The experience of the sudden move from office to home-based working was mixed. Many participants shared experience of issues surrounding (a) equipment (b) technology (c) combining home-based working and caring responsibilities (d) managing health issues.

The following quotes provided a useful insight:

- "It was initially hard to get a keyboard for the laptop to make the desk more comfortable to use"
- "I've had to buy a chair adaptor and memory cushion to support my back"
- "Unable to work at the same pace at home as at work, as I have lots of home-working adjustments, so more pain and fatigue whilst home-working"
- Support of the line manager is important Despite the pressures of line managers, participants expressed the value of regular line management support.
 - *"We are very lucky in our team as we have a good line manager who understands how the law works"*
 - "I have a MS Teams calls each week with my line manager as we would have one to one good support"
 - "I am in regular contact with my line manager via phone and zoom so any problems I can go to them"

3. Staff networks and peer support – Participants shared the value of staff networks. Feedback indicated that staff and organisations are using technology to make the most of staff networks. Examples included the use of virtual staff support hubs and use of Zoom and MS Teams.

- "At our trust we have support hubs to support staff with their wellbeing"
- "To everyone the power of staff networks is the ability to listen, hear and act and support"
- "Our network is planning a Zoom meeting to keep in touch with staff"
- "We have also set up a well-being page and disseminated information about that. I have done a Covid-19 Equality Impact Assessment, which takes into consideration people who are disabled. Will be designing a questionnaire to send out to the network and put on our networks page"
- "We have set up a Virtual Staff Networks Cafe via Team, which brings together all 3 of our staff networks. At our meetings we do check-ins, so this is replicated at the virtual meeting."

4. Disability and health and wellbeing – Participants shared their experiences of working during Covid-19, the changes in their work environment and the impact that this had on their health. Experiences of anxiety, isolation, not being valued, fatigue and increasing pain were shared.

- "It would be good to talk about implications for those of us that might be in the vulnerable groups in terms of when lockdown ends, we will need to continue homework"
- "I am struggling with the amount of information on the screen and reading. I am dyslexic and struggle with screen glare"
- "Impact of isolation those with neurodiversity of various kinds"
- "I agree working from home is difficult, I am neuro-diverse, and so are the kids, the chaos and distractions abound"
- "Could I add that I have been less isolated and working from home. I can now work with the adjustments I have at home. I am now able to attend meetings that previously I was unable to attend as meeting are virtual"
- "Disabled staff at work can also feel isolated. Many staff are taking on new roles or simply joining in with moving equipment etc. Disabled staff like me feel 'disabled' as I can't easily 'roll up my sleeves' and join in"
- "I feel very undervalued and disappointed with the way many, including myself are being treated and distrusted when having to work from home for the first time in my career, and being treated as a second class and irrelevant member of staff due to my disability"
- "An area that none of us could have predicted is the unexpected impact on isolation on two groups: those with neurodiversity of various kinds, and people who live alone. As a result, and for future models of working where remote location will feature more strongly, I suggest these are key factors that need to be considered and accommodated for".

Next steps

As a result of this virtual meeting, we will take the following steps. Some of these are actions for us – but some of them could involve you. We are asking if you would be interested in becoming more actively involved in moving things forward in partnership with us:

1. Communication

- a. We will be asking the senior leaders in NHS England / Improvement to develop some strong / clear messages to the system about how disabled staff have been impacted by COVID-19 and what managers and leaders need to think about doing to address these issues. We will be gathering and sharing examples of good practice identified in the virtual meeting and elsewhere. NHS Employers has produced <u>COVID 19 guidance</u> which has been developed to help support NHS trusts and includes reference to staff health and wellbeing & disability. Also just as a reminder to you all there is a suite of <u>resources</u> that have been developed over the last 18 months, to help support organisations address some of the issues discussed at the meeting including reasonable adjustments, line management support and staff networks.
- b. website. If you have any examples of good practice that you would like to share with us, please contact <u>england.wdes@nhs.net</u> and we will liaise with you to get this created and published.

2. Capturing the lived experience of disabled staff

The rich and vivid stories and insights that many of you shared with us in this virtual meeting would, we think, be great to capture in the form of a blog or vlog. If you would like to volunteer to write a blog – or record a vlog about your experience of adjusting to the new reality of Covid-19, please contact england.wdes@nhs.net and we will help you compose this.

3. Future virtual meetings

We will be organising another similar virtual meeting within the next couple of months. We would like to know what topics you would like to talk about and what issues you are experiencing. We are looking at the best ways to capture this information either through an online survey or online engagement tool and will be in contact in the coming weeks with details.

We would like to thank you once again for your time, openness and honesty – and for being part of this work with us. Your continued support is critical to making this work – and for us (together) to bring about the changes that we all want to see for disabled staff across the whole of health and social care.

Several people have asked us for access to the recording of the virtual meeting. However, as personal information was disclosed during the meeting, we have decided not to release the recording. We have instead, endeavoured to capture the salient points raised in this virtual meeting which we hope will be helpful. Stay safe. Yours sincerely, Dr Christine Rivers – Head of Workforce Disability Equality Standard, WDES Implementation Team, NHS England / Improvement Paul Deemer – Head of Diversity and Inclusion, NHS Employer