'Everyone Wins a Balloon'

The Business Value of Adjustment Management

A DISABILITY EMPLOYEE NETWORK BRIEFING FOR PURPLESPACE

By Susan Scott-Parker OBE Technical Advisor Nasser Siabi OBE



Engineering 'Fit for Purpose' Workplace Adjustment Management

The I2 Critical Success Factors

- 1. A named senior executive is accountable for ensuring the managed adjustment service meets explicit performance standards and drives continuous improvement across the business for employees and for job candidates with disabilities and/or health conditions.
- 2. A named dedicated service manager is responsible for managing the adjustment response - ensuring that service partners and key providers across the business meet requisite performance standards.
- 3. There is a well-publicised single 'door of entry' to the service.
- 4. There is a 'real' speed of delivery standard it is reasonable for a managed service to take on average no more than 20 days from when adjustments are first requested by an individual, to being delivered and operational.
- 5. Line managers do not pay and do not manage delivery of adjustments for their team member/s.
- 6. Employees are trusted to self-refer. They are not routinely required to prove they have a 'disability' in order to get the tools, accessibility and/or flexibility that they require.
- 7. There is a well-publicised central catalogue of approved 'hard' adjustments, i.e. technology, assistive devices, furniture, quiet spaces.
- 8. There is a well-publicised central catalogue of approved 'soft' adjustments: i.e. policies relating to flexitime, rest breaks, medical appointments, reallocation of duties, disability related absence.
- 9. Passports or Workplace Adjustment Agreements routinely document those adjustments which have been agreed, so that the individual does not need to renegotiate when managers change.
- 10. Procurement requires key suppliers, including Facilities Management and IT support, to meet both specified adjustment and accessibility KPIs, so that the service can deliver adjustments promptly and effectively.
- 11. The quality and impact of the service is routinely documented; including the cost benefits associated with both enhanced productivity and employee engagement – and cutting the costs of absenteeism and of managing complaints.
- 12. Adjustments are clearly positioned as a managerial, not a medical responsibility: medical interventions are kept to the necessary minimum.

Foreword by Sally Owen, Managing Director PurpleSpace

This briefing aligns perfectly with our mission at PurpleSpace - to nurture the high impact Disability Employee Networks / Employee Resource Groups (ERGs) which 'drive change from the inside out.'

In the run up to our 'world's first' Global Disability ERG/Network Summit, 2024, our global community of disability ERG/Network leaders voted for their 'Top Three Employer Action Priorities':

- I. Ensure that the organisation systematically and routinely learns directly from disabled employees and customers, to inform improved policy and practice.
- 2. Invest in a visible and effective workplace adjustment/accommodation service which enables employees to access adjustments promptly, within a specified time frame, via carefully structured service level agreements.
- **3.** Normalise the experience of disability by routinely delivering storytelling campaigns - which also include the stories of senior executives with disabilities.

It is no surprise how these three critical success factors circle round each other: the first step in improving adjustment management must surely be 'learning directly from your people' - after all, only they know what really happens when colleagues managing disabilities and/or health conditions need their employer to do things differently. Employee Resource Groups and Networks are one of the most powerful vehicles for surfacing these insights.

And the 'stories that normalise the experience of disability' also serve to illustrate how the business benefits when every employee has the tools, accessibility and flexibility that enable them to thrive at work.



Disability ERG/Networks are not responsible for delivering process improvements but they are ideally placed to advise. This practical briefing provides network leaders with a structured framework for the conversations with the executive team that start with taking stock: "What does adjustment management look like when it is truly fit for purpose?" How does that compare with what happens here? Do we need to do things differently?'

Networks will want to remind their allies that delivering adjustments is a logistics challenge similar to that managed by any retailer needing to make it easy for you to place your order, and then to deliver your selected parcel, cost effectively, undamaged, and on time. This means the end-to-end process must be managed by people with relevant skills, working to specified performance standards.

Yet, somehow, too many organisations still tolerate dysfunctional, stigmatising, needlessly expensive - and ultimately unmanaged adjustment responses - which fail to deliver real value to anyone. We mustn't forget that our aim is to both enhance productivity and to treat people fairly- as organisations make the reasonable changes to how things are done, which in many countries are also a legal obligation.

However- and this is indeed the 'everyone wins a balloon' headline - a growing number of leading businesses are driving a carefully managed business transformation, which they describe as being aligned with their values as they cost effectively enhance productivity, workforce well-being, and employee engagement. And they do this by going beyond mere, dare I say, grudging, compliance. Many of these thought leaders are members of PurpleSpace and partner with Microlink as their Adjustment Management provider and have contributed to this guide.

We are grateful to Susan Scott-Parker, SPI, and to Nasser Siabi, Microlink, for sharing their deep understanding of what it takes to ensure that we learn from each other, enable everyone's contribution, and tell the success stories which make these business improvements truly rewarding and sustainable.

Sally Owen Managing Director, PurpleSpace



INTRODUCTION

Moving from Ad Hoc to Streamlined Efficiency

PurpleSpace asked thousands of Disability Employee Resource Group and Network leaders around the world: "What are your top 3 drivers of disability equality and equity in the workplace?"

The votes are in, and the results are crystal clear: employers worldwide need to do a much better job providing the workplace adjustments that enhance productivity, wellness, and employee engagement - while mitigating legal, Health & Safety and brand reputation risks.

It doesn't matter if they work in Mexico City, Hong Kong, or London, or if they're in Milan, Tokyo or Hyderabad - it doesn't matter if they work for a bank, an energy company or in health care - employees with disabilities and/or health conditions are telling us that they need greatly improved access to the tools and flexibility which enable them to contribute, on an equal basis, to business success. And disability ERG leaders are keen to play a crucial role, helping their leaders learn directly from their own people, so that... 'Everybody wins a balloon'!

As staunch allies of PurpleSpace and its fast growing 'global network of networks', Nasser and I have combined forces to share some of the learning that we find useful, when asked by network leaders: 'How do we help our complex organisations manage adjustments in a way which is truly fit for purpose?'

Some Notes on Terminology

We say 'adjustments' because we want to enable the contribution of every employee, including those with disabilities and including those who could describe themselves as having a disability, but for many understandable reasons do not.

We avoid the term 'accommodations' because all too often the word is heard to apply only to people with disabilities, and only to those few that trigger a legal obligation because they meet narrow, medicalised definitions of 'disability' in local law. This then reinforces counterproductive and indeed risk-generating behaviours, as people are required to prove that they are 'disabled enough' to be treated fairly and with respect.

We respect the views of those who prefer 'person first' language and describe themselves as 'people with disabilities.' We also respect the views of those who prefer 'identity first' terminology and describe themselves as 'disabled people.' We will use both terms interchangeably.

We define 'accessibility' as being barrier free for groups of people with similar access needs - think: ramps for people with mobility impairments; websites that blind job seekers can use easily.

We define 'adjustments' as making the adaptations for individuals which enable each person to be treated on an equal basis - think: giving someone who stutters extra time in an interview; changing a light-bulb that triggers a colleague's migraines.



It is a great pleasure to launch our pragmatic 'Adjustment Management Gap Analysis' in collaboration with PurpleSpace and Microlink. This initiative examines what employees see, hear, feel, and experience, providing businesses with a clear measure of whether their adjustment management system is truly 'fit for purpose'.

Our aim with this briefing is to help employee networks to help their senior leaders to :

Visualise what fit for purpose adjustment management really looks like.

Articulate the benefits of these trust based, pro-actively managed service lines, versus traditional, reactive, compliance driven processes and cultures.

Become more disability confident; effective leadership is crucial. Leaders who are committed to diversity and disability equality can inspire their teams, drive positive change, and ensure that all employees feel empowered, valued and respected.

Understand some of the unintended, often hidden, adverse impacts of compliance driven policies and practices.

Expedite the business improvements that also benefit disabled employees and job seekers – including the many employees who will acquire disabilities and/or health conditions in the future.

Re-engineer using the 12 Critical Success Factors – think 'Fundamental Engineering Principles' - to expedite systemic improvement.

We hope you find this helpful,

Susan Scott-Parker OBE Scott-Parker International

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9 Top Tips

For Network Leaders helping their organisations deliver workplace adjustments promptly, fairly and cost effectively

9 Top Tips

- I Focus on how the business benefits when everyone understands that the reason for making adjustments is to enhance productivity, trust and engagement - to reduce hidden costs - to treat people fairly - all while mitigating legal, health and safety and operational risks. Reinforce the message that only best practice transforms legal obligation to business benefit.
- 2 Highlight how your corporate values align with the principles that shape fit for purpose adjustment management-and that everyone benefits when leaders are seen to 'walk the talk'.
- Remind everyone that just as apples always fall down 'compliance & distrust' cultures (people needing adjustments must first prove they have a disability) always generate greater risk than those which trust their people to self-refer and are seen to aspire to best practice.
- 4 While line managers should have permission to quickly approve a wide range of requests, do recommend that any proposals to deny adjustments must be submitted, in writing, to a named C-suite leader for approval. This senior executive can then track trends across the business to understand the types of adjustments that managers are typically reluctant, unable, and/or not permitted to approve. And ask why.
- Remind leaders that the data you don't have can be more revealing than what you do have - which is why using the Gap Analysis to highlight some of these information gaps is so helpful. And in a pinch, do point out that the data gap works both ways - does anyone have data which proves that unmanaged distrustbased adjustment processes deliver greater value to any business than those which are managed and meet our expectations as fit for purpose?
- 6 Remind everyone frequently! that productivity is a practical business imperative not an ambiguous inclusion aspiration. The manager of an adjustment service must have the authority to require IT, Property, Procurement, HR and other actors, to work to new performance standards. Different functions are called upon to expedite delivery of 'adjustment packages' which may well include adaptations to technology, the built environment and procurement processes.

- 7 Avoid cumbersome cross-departmental consultations which typically only add needless complexity and delay decision-making to the initial 'review and improve' process. Your strategic adjustment performance and yet very practical review, is best led by one person tasked with coordinating the Gap Analysis, assessing options, and driving the business transformation, supported by relevant expert advisors.
- 8 Suggest as a helpful first step, that you work together to gather some essential insights, as you ask managers and staff: "what happens when an employee asks us survey;

Government of Canada's Employee Survey

9 Encourage your organisation to benchmark at national level, using the ILO Global which systematically manage adjustments, while learning from their own people...to drive continuous improvement.

ILO GBDN Self Assessment

- Where, when and how do people request adjustments? From whom?
- What happens then?
- What kinds of adjustments are employees requesting?
- Who pays?
- the business?
- how many disability related grievances?
- How do these management and legal costs compare to the cost of the adjustments that were delayed or denied?
- How satisfied are managers and staff with the quality of the adjustment provision?

to do things differently" - while learning from the Government of Canada's employee

Business and Disability Network's Self-Assessment which 'rewards' those organisations

• How long do colleagues usually wait, with what impact on the person and on

• How much does it cost internally, and for any external legal advisors, to manage

Leading corporations are moving to streamlined efficiency

GSK, a PurpleSpace Futurist, member of the ILO Global Business and Disability Network and a Valuable500 partner, is one of the world's leading pharmaceuticals, with operations in more than 150 national markets.

For nearly a decade, GSK has successfully implemented trust-based workplace adjustment management, with Microlink as their specialist provider. This global service line is managed by a leading member of their Disability Employee Network. GSK's strategy is grounded in the following principles, as set out by the



Global Disability Confidence Council

- We trust our people and want to give everyone the tools and flexibility that they need to be productive in their work.
- We support adjustments (accommodations) to remove barriers and enable colleagues with disabilities to access equal opportunities and be their authentic selves at work.
- Disability inclusion aligns with our core values and is more effective globally than a medical and legal compliance approach, which can vary widely in different markets.
- Our focus is not on someone's private medical status but to provide the environment and tools for each individual's success, helping them to thrive and perform at their best
- Solutions are routinely approved without needing to formally involve health & wellbeing/occupational health practitioners for medical assessments. We acknowledge people rarely ask for support they do not need.
- Our advice: Don't get bogged down in a compliance culture, mapping legal complexities and various definitions of disability. Best practice minimises legal risk while turning your commitment to treating people fairly to business benefit.

"We designed our service line at GSK for the 99.99% of our people who would never dream of requesting adjustments they don't need. Why would anyone construct any system for the tiny number who might try to abuse it?"

Andy Garrett, Global Director Workplace Adjustments, GSK

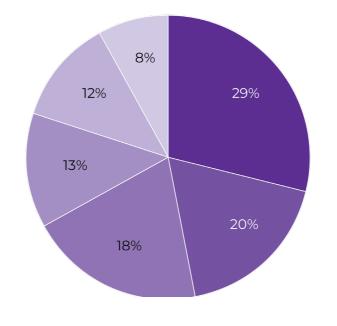
The scale of need, demand, & opportunity

Microlink has over the past 3 decades managed provision of adjustments for public and private sector workforces totalling some 500,000 employees. Their experience has taught them:

- $\cdot \ 25^{\prime\prime} \text{of any large workforce will have a disability and/or health condition- data recently corroborated by Boston Consulting Group'}$
- When an adjustment service is well publicised, 3-5% of a large workforce, in any given year, can be expected to request adjustments to enhance their job performance. However, it takes time to build the trust which reassures people who could benefit, that it would be both safe and helpful to come forward.
- 80% of disabilities are not immediately apparent.
- 92% of people with disabilities do not use wheelchairs.
- Many employees who could benefit from adjustments do not regard themselves as having a disability - neither do their colleagues nor their managers.
- The average cost of managed adjustments, per person, is circa £900-£1200*, which can include the cost of managing the end-to-end process, and any work related assessments deemed necessary by the adjustment service provider. At least 40% of service users will need more than one adjustment.

* Data based on spend by UK companies. Results from other regions may vary.

Leading Accounting Organisation: Actual Case Cost Data



Boston Consulting Group: Your Workforce Includes People with Disabilities. Does Your People Strategy?

Areas of Spend on Adjustments across the Workforce





Legal fees for defending a UK employer in disability employment discrimination cases average $\pounds 8,000 - 10,000$ per case. The average cost of managed adjustments is between $\pounds 900 - \pounds 1200$, depending on the person's circumstances.

A recent UK Tribunal fined an <u>employer $\pounds 4.6$ million¹ for treating a disabled</u> employee unfairly by failing to adapt policies and procedures.

Legal costs triggered by alleged non-compliance with the Americans with Disabilities Act (ADA) can be much, much higher.

The cost of a managed, trust-based response is more than offset by enhanced employee productivity and engagement, plus cost savings relating to reduced absenteeism and presenteeism, medical fees, employee disengagement, litigation, health & safety risks, and more.

However these benefits can be hard to quantify: the costs of needless absenteeism for example, are often hidden. Unmanaged processes, by definition, do not, and indeed cannot, track the management information that would trigger any C-suite's determination to improve the process and the employee experience.

Microlink report that referrals to Occupational Health can drop by more than 60% when the managed process routinely starts by exploring with the person and their manager, job relevant solutions, such as assistive devices, specialist software and HR policy change – rather than medical diagnoses. However, these savings, and those generated by associated reductions in absenteeism, are rarely if ever visible.

The 2023 UK National Health Service (NHS) <u>anonymous survey</u>² of more than 1 million staff saw:

- 4.9% of the workforce declaring a disability.
- 23.4% declaring they have a long-term condition or illness

LBHF: london-borough-of-hammersmith-and-fulham-worker-wins-46m-in-discrimination-tribunal

People ask for adjustments when their condition is having an adverse impact on their job performance and well-being.

Microlink note that over the past 5 years, in the companies they support, people managing the following conditions are most likely to request adjustments:

Back Pain	١
Shoulder and Neck Pain	[
Arthritis	0
Migraine	١
ADHD	ł
Anxiety	I
Dyslexia	(
Sciatica	A

This picture is changing however, as the impact of mental health conditions and/or neurodivergence on the workforce continues to escalate. In 2024, across 3 Microlink clients, the percentage of all requests relating to neurodivergence varied from 10% to 18% to 51% of cases.

See Microlink data relating to Large, Mid Size and SME organisations:

Large Organisation		Mid Size Orga	
	57,000 EMPLOYEES	*******	
4% Employee Referral Rate	£1000 Average Case Cost	5% Employee Referral Rate	
Case Cost	Breakdown	Case Cost Brea	
Assessment Cost	9% Assistive fechnology 8% Assistive 22% Care Management 23% Ergonomics	244% Assessment Cost 28% Training Cost 28% Training Cost	
Condition Br	eakdown	Condition Brea	
🧬 Back pain	39%	🕜 Back pain	
🕘 Neurodiversity 📃	18%	🕑 Neurodiversity	
🐣 Sensory	9%	🐣 Sensory	
Pain Related	31%	Pain Related	
•••• Other	3%	0 Other	

Mental Health - Wellness - Adjustments

<u>The Financial Times</u>¹ recently quoted Bright Star CEO Rob Jupp as saying that his employees have monthly meetings with a life coach, and the company has had mental health first-aiders for years. The investment in nurturing mental health has paid off in terms of better staff retention, fewer sick days, and productivity that is 40-60 % higher than comparable companies.

- Wrist and hand problems
- Depression
- Stress
- Visual and/or Hearing Impairment
- Fibromyalgia
- Depression
- Cancer
- Autism

anisation	SME 4,000 EMPLOYEES		
16,000 EMPLOYEES			
£1200 Average Case Cost	3% Employee Referral Rate	£900 Average Case Cost	
kdown	Case Cost Breakdown		
e 15% Case Management	21% Source Strategy Strategy 10% Cost Strategy Schware		
e ogy ree 18%	Training As & Coaching	19% sistive chnology ardware	
kdown	Condition Breakdown		
18%	🧬 Back pain	38%	
51%	阙 Neurodiversity 📃	10%	
2%	🐣 Sensory	3%	
16%	Pain Related	37%	

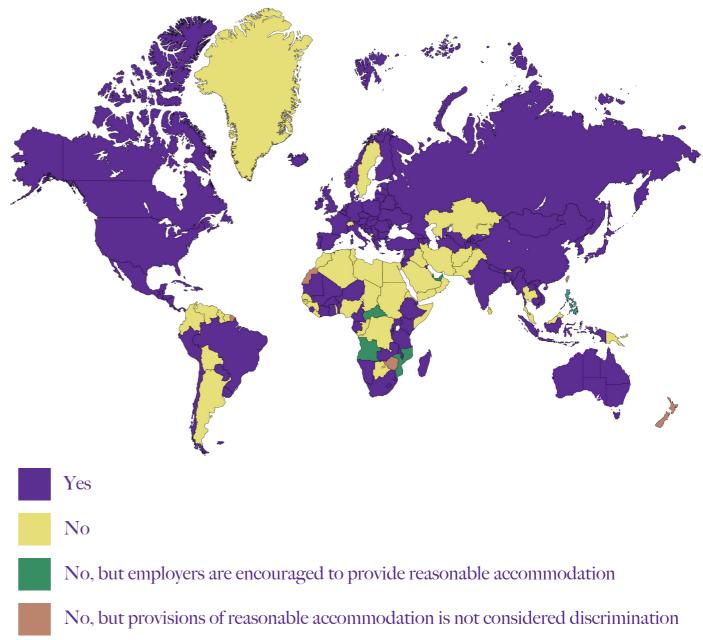


There are 7 kinds of Workplace Adjustments

What should the employer do differently to enable employees with disabilities and/or health conditions to contribute on an equal basis, and reach their full potential?

- I. 'Think Differently!' replace generalisations about groups i.e. 'Deaf people can't work in Teams' with a focus on liberating individual talent: 'How could this Deaf graduate contribute if we were open minded and flexible?'
- 2. Manage an accessible built environment which also adapts signage, office layout, egress, security, parking etc. for individual users.
- **3.** Accept processes taking a bit longer, as you personalise the employee experience to enhance everyone's productivity and engagement.
- 4. Flex procedures and policies i.e. redeployment, phased return to work, flexible working, revised job descriptions.
- 5. Upskill managers and colleagues in IT, Property, FM, Legal, Talent Acquisition, HR in the best practice that turns legal or ethical obligation to business and societal benefit.
- 6. Adapt ICT and digitalisation policies, mitigate HR technology related risks to candidates and employees, provide and enable use of assistive devices and specialist technologies.
- 7. Welcome human aides such as: job coaches, sign language interpreters, personal assistants.

Are employers required to provide reasonable accommodation to workers with disabilities?



Map reflects policies in place as of January 2021

Consistent with WORLD's commitment to advancing universal coverage, this analysis captures the minimum guaranteed level of policy-based protection available and does not include protections that are available in some localities, but not nationally.



What is Adjustment Management?

Adjustment management is the systematic provision of workplace adjustments for candidates and employees, as a managed service line.

It is designed to cost-effectively provide applicants and employees, including those with disabilities and/or health conditions, with the tools, accessibility and flexibility that enables them to thrive, to compete and/or contribute on an equal basis with their peers. An efficient adjustment process is typically managed internally with support from external expert adjustment providers.

The purpose of adjustment management is to enhance productivity, wellness, employee engagement, talent acquisition, trust, and employer brand. 'Fit for purpose' adjustment management makes <u>disability equality</u> possible – as a prerequisite to inclusion, while mitigating health and safety, legal, and brand reputation risks.

When is an adjustment service 'Fit for Purpose'?

In the wake of the Covid-19 pandemic, leading 21st century organisations want to enable their entire workforce to be their best selves at work as their organisations shift towards a holistic approach to human sustainability.²

They are beginning to position 'adjustments' as requiring management not medical expertise. Just as they take responsibility for profitability, business development, talent acquisition, customer experience and the provision of safety boots or the right computers, so they take responsibility for productivity and employee experience.

They have learned two fundamental truths:

- · Medical expertise cannot tell managers how to enhance a particular colleague's job performance in their particular work environment.
- Mere compliance systems i.e. requiring people needing adjustments to first prove high-risk strategy, as the workforce hears the usually unintended message: "We will only make it easier for you to do your job - we will only treat you fairly - if compelled to do so."

Companies like the Bank of England, BAE Systems, GSK, KPMG, Sky and Virgin Media, and the Bank of England see the benefits associated with trust-based, well publicised, easy to access service lines, supported by adjustment specialists. They want to provide their entire workforce with the necessary tools and flexibility, including colleagues with disabilities and/or health conditions. This includes the many who will acquire disabilities and/or health conditions in the future.

Definition of Disability Equality by S Scott -Parker

Deloitte Insights: Six leader / Worker disconnects affecting workplace well-being 2023

they medically and then legally qualify as having a disability - presents as a corporate

"Would you require a left handed manager to get a medical certificate to prove she really is left handed? Or would you just give her the left-handed mouse that prevents RSI and lets her work more comfortably?

But what if she lost her right hand in an accident – would you send her to a doctor, now that she has an obvious disability – or would you save everyone a lot of bother and just give her a left handed mouse?



Crucially, these leading enterprises trust their people. Employees are asked to describe the impact of their condition at work, not their private medical history. The adjustment provider then explores with the person and their manager, the practical 'productivity solutions' which would help the individual not just keep their job - but develop their career. Occupational Health providers typically do not engage with these effective nonmedical solutions. Only the very few needing medical, as opposed to job performance, expertise, are referred to medical practitioners. And the workforce hears the message that the business trusts its people and wants to help everyone 'to be their best selves at work.'

Assistive Technology

We have learned that it is unhelpful and indeed inappropriate to expect Occupational Health to deploy non-medical expertise.

Leading organisations set challenging but achievable speed of response & delivery standards- with most adjustments delivered within 20 working days. Many of these solutions, such as specialist software, assistive devices, furniture and ergonomic devices, are simply 'clicked down' by employees from their pre-approved in-house catalogues and can be operational within 24 hours.

Job Performance Technology Includes:

Assistive Technology Software solutions







MINDVIEW

Assistive Technology Hardware solutions



LEXILENS

PHONAK ROGER

TABLE MIC





CEPHABLE

dBUDS



ANTIDOTE



LIVESCRIBE



HANDY READER

Line managers do not pay, which always speeds things up. And they appreciate being freed up to do their day jobs when a managed service takes over and they are no longer expected to help their people navigate confusing, time consuming, uncoordinated processes.

GSK - "Workplace adjustments/accommodations costs are approved and funded centrally within Facilities Services to speed getting solutions to employees without needing line manager approval"

It can be helpful to remind senior allies that delivering adjustments is a specialist logistical challenge similar to that facing any online retailer who needs to get the right package from A to B – delivered and fully operational – as quickly, as undamaged, and as cost-effectively as possible. Delivering adjustments requires an understanding of both the impact in work of a wide range of disability and health conditions on human beings, and the growing range of empowering innovative technologies, devices and management practices which are now available. It is clearly not reasonable to expect medical advisors, line managers or diversity teams to have this specialist expertise.

The Government of Canada's own workforce survey¹ found that 2 in 3 of their supervisors handled fewer than one request for accommodations per year. The Canadian Government also learned that their essentially unmanaged process:

- had 7 possible start points for people asking for assistance,
- had 14 functional areas that could be involved in handling any request, ranging from the direct supervisor to Employee Relations to Facilities Management to Trade Unions to HR to Occupational Health.

It is unreasonable to expect managers to identify, locate, procure, and implement the complex array of innovative solutions and assistive technologies now available to employees managing a broad range of disabilities and/or health conditions.

22

So why do so many organisations just let managers improvise?

Many businesses still settle for 'let line managers improvise' - a state of affairs reinforced when leaders are out of touch with what is really happening.

And, ironically, they are out of touch precisely because unmanaged processes cannot, by definition, provide the insights and the data which would keep leaders in touch - and would then help them drive the necessary business improvement.

Consider Deloitte's 2023 'Well-being at Work' survey, which included 3,150 workers, managers, and C-suite executives across Australia, Canada, the United Kingdom, and the United States.

Deloitte discovered that, and I quote: "leaders well-being strategies are hindered by critical gaps between perception and reality."

80% of C-suite believe worker 'physical well -being' has improved - 36% of workers agree.

77% of C-suite believe employee 'mental well- being' has improved - 33% of workforce agree.

90% C-suite believe employees are satisfied with well-being provision - 43% of employees agree.

Had the study focused on 'gaps in perceptions regarding the quality and impact of workplace adjustments', well I am confident that we would see very similar results.

Deloitte does not clarify that for many employees managing disabilities and/or health conditions, ready access to an efficient, non-stigmatising adjustment service would have a substantial impact on their well-being - but the connection is self-evident.

Failure to make adjustments on the job for frequently encountered conditions such as... back pain, arthritis, migraines, mental ill health, MS, cancer, fibromyalgia, stress, anxiety, ADHD, and so on... must inevitably undermine the return on investment of any wellness programme, while exacerbating 'unwellness' and any related health and safety risks.

I have never understood how those investing in workforce 'wellness' can continue to ignore the 'unwellness' that results from management failure to make those adjustments which would enhance someone's 'wellness,' by mitigating the impact of their pain, stress, health condition and so on...

Is providing sunscreen lotion to an employee with albinism, working in the Nigerian or Texan sun, just a 'disability accommodation' for one person - or would making this 'adjustment' available to every employee at risk of sunburn, simply enhance the 'wellness' of an entire workforce? Is 'sunburn' not 'unwellness'?

Does changing the light-bulb that triggers someone's migraines not enhance their 'wellness'? Does providing software which reduces stress for someone with anxiety not enhance 'wellness'? Is there an opportunity to amplify ROI in wellness programmes by taking a whole systems approach and integrating adjustment management throughout?

Bridging the gap between perception & reality

Few senior leaders will have had much exposure to the practical, innovative, business relevant solutions that liberate disabled talent.

Employee network leaders will often need to raise awareness of what is now possible - by spotlighting the assistive devices, the specialist software, the management strategies, the emerging technologies, the flexible policies that now sit in the tool-kit of the adjustment specialist.

And we need to remember that few people across the business will be alert to the outdated assumptions and stereotypes, the rarely articulated fears and misconceptions, that continue to shape organisational and indeed societal, cultures worldwide.

Network leaders can help senior managers to take a fresh look as they:

- Learn directly from their own people and from other businesses.
- Gain a better understanding of 'what happens now' when their own people need adjustments.
- 'inclusion' aspiration.
- Set challenging but achievable adjustment performance standards.
- Agree priorities for systematic and continuous business improvement.
- Share success stories!

Remember: Sometimes the data you don't have is as important and as revealing as the data you have.

Encourage your senior leaders to work with you as together you ask:

- How many colleagues are asking for adjustments? What kind?
- Who are they asking? What happens when they ask?
- Why are so many who might benefit not coming forward?
- How many managers can describe the adjustment process and know how to use it?
- How long do people wait? Why? For what kinds of adaptations?
- Are we achieving our speed of response standards?
- How many requests have been denied? How? By whom? Why?
- Are we documenting impact on absenteeism, engagement, productivity?
- How many disability complaints, grievances, tribunals, court cases are we managing, compared to last year? At what actual cost, including management time?
- How do these costs compare to the costs of the requests we delayed and/or denied?
- Are we all, managers and staff, satisfied with our adjustment performance this year? Compared to last year? How do we know?

Realise that enhancing productivity is a concrete business imperative not an abstract

Just as apples always fall down, we all know that ad hoc, unmanaged, compliance and distrust-based processes always - inevitably - lead to.....





Everybody really does win a balloon! Keep this list of key headline benefits to hand.

The business and human 'value add' of efficient, well publicised, cost-effective, trust based, adjustment management starts with:

Leaders are seen to 'walk the talk' regarding their personal and corporate values, as the business fairly and routinely provides the workforce with the tools, accessibility and flexibility that enable disabled talent to compete on an equal basis - and enable every employee to thrive.

'Fit for Purpose' adjustment management will also;

- Enhance employee productivity
- Enhance trust, employee experience and engagement
- Enhance workforce well-being
- Mitigate health & safety risks
- Reduce hidden costs of absenteeism
- Reduce hidden costs of presenteeism, that is the cost of people working despite their health condition but not performing at their full capacity
- Enhance employer brand internally and with potential talent
- Enable access to a wider pool of disabled talent
- Reduced churn as the business adapts when employees acquire disabilities and/or health conditions
- Reduced the needless, often hidden management, legal and related costs triggered by distrust and compliance- first cultures

But how much will it cost?

The psychic cost of challenging the status-quo often triggers the objection "But it would cost too much" even though those raising this concern have no idea what an acceptable price might be. But they do know that persuading people to change is hard, and that talking about disability makes people uncomfortable - and that advocating for these improvements is especially hard when all one has is indirect influence."



We need creative thinking if we are to overcome the reluctance to create a new visible cost, when the cost of inaction remains undercover and when a brand new, and I say again, a visible, budget line may be required.

We suggest that there is now a real opportunity to shift the model to a subscription basis, akin to that used by EAP providers: why not position adjustment management as a per head 'insurance' cost, to meet the needs of employees who acquire their conditions in the future, as well as those already managing the impact of disabilities and/or health conditions?

For large organisations, the estimated cost of providing adjustment management coverage for an entire workforce is on average £50 per employee per year - equivalent to just 23p per day. This investment covers:

- In-house communications and engagement
- Intake triage and referral processes
- Functional assessments
- Solution recommendations and procurement
- Employee training
- Data collection and reporting
- Ongoing service line, performance reviews and continuous improvement

Cost Offsets & Business Benefit

While this does represent a new budget line, the cost is more than offset by the tangible financial and operational benefits, including:

- Lower Occupational Health Costs: Only employees needing medical expertise are referred, reducing unnecessary OH costs.
- Boosted Productivity: Deloitte UK¹ found that every £1 spent on mental health interventions returns nearly £4.70 in improved productivity.
- Reduced Absence & Presenteeism: The CIPD reports businesses lose £975 per employee per year to sickness absence.
- Fewer Legal & Management Costs: Proactive support prevents disputes, lowering tribunal and settlement costs (often £8,500+ per case).
- Lower Disability Insurance Claims: Timely adjustments reduce long-term claims, which should positively impact insurance premiums.

A subscription-based model spreads costs predictably, ensuring employees get support when and where they need it, as their circumstances change with time, while delivering measurable business returns.

Deloitte UK Poor Mental Health Costs UK employers 51 Billion a year for Employees

The New Rationale for systemic improvement

To strengthen your case, consider the following stories, evidence, insights - and choose those that best align with your corporation's stated priorities.

If employee engagement is high on management's 'this really matters' list - the Gallup and the Mercer and GDI data in Section 1 below could be compelling. If productivity is a strategic priority, you would probably focus on messages in Section 2, while reminding your senior allies that employee engagement and well-being has an obvious impact on productivity.

Section 1 Adjustments management enhances employee experience, engagement and well-being.

Engagement matters.

See Gallup, 2020:¹ "companies in the top quartile for employee engagement saw a 17% lift in productivity - 20% higher sales - and 21% higher profitability."

A recent Mercer & GDI report finds that on average, across all generic engagement questions, there is a -6-to-8-point negative difference in engagement of employees with disabilities, "with some data points reaching a remarkable minus 12- or minus 13-point gap". They note that "a -5% negative finding related to engagement of females in a business would result immediately in a detailed enquiry."

Disabled employees, across industry sectors and across geographies, are typically less engaged and less satisfied with their work, with their companies, and with their managers. Failure to efficiently and respectfully provide adjustments is a key contributing factor.

Remember: 25% of any large workforce are likely to have a disability and/or health condition. 2-5% of any large workforce can be expected to request adjustments from a well publicised service in any given year. $\mathcal{S}^{\mathcal{D}}$ Scott Parker

In no instance did employees with disabilities score higher on any question when compared to those who did not identify as having a disability.

And we mustn't underestimate the wider impact on employee trust levels were we to assume that each 'aggrieved' person shares their story with only two close colleagues. Mercer & GDI: The State of Disability Employee Engagement based on $12M + \text{global responses}^2$

Few organisations disaggregate the engagement scores of employees who identify as having a disability, and those that do, often fail to share what they learn with researchers, or even with their own colleagues. We are left with anecdotal evidence, such as the fact that a large UK company recently held a disability summit where they informed more than 100 employees that after introducing adjustment management, the engagement gap between their disabled and non-disabled colleagues had dropped from -12% to -2%.

One would think this is a positive news story they would be eager to convey!

Gallup, 2020

Mercer & GDI: The State of Disability Employee Engagement based on 12M + global responses

Section 2 Enhance productivity and cut the hidden cost of absenteeism

Microlink calculated the cost to Company X on **back pain** related absenteeism:

- 965 people were absent over 12 months. •
- Resulting in a loss of 30,468 working days. •
- Hidden cost to the business of £3,808,500.00 per annum.
- Adjustment management reduced that absenteeism by circa 70%. •

And they documented the cost of **mental health** related absenteeism in Company X:

- 114 people were absent over 12 months.
- Resulting in a loss of 8,059 working days.
- Hidden cost to the business of £1,007,375.00 per annum. •
- Adjustment management reduced that absenteeism by circa 83% •

Inadequate provision of adjustments for people with mental health conditions who continue to work, but less effectively, is extremely costly - as we can infer from recent studies regarding the workforce impact of poor mental health.

For example, recent research from Deloitte has revealed 'that the cost to UK employers of poor mental health is £,51bn per year', a decrease from £55bn in 2021, but an increase from £45bn in 2019. Presenteeism is the largest contributor, where people work in spite of illness but do not perform at their full ability, which is costing employers around £24bn annually.' I would only add to that definition that they work in spite of illness and in the absence of effective adjustments they do not perform at their full ability in the absence of effective adjustments.

Section 3 Cut the risks generated by a compliance mindset

Ironically, compliance-oriented cultures generate more risk than those which aspire to best practice.

The Government of Canada's employee survey found:

• that 77% of their employees with visible disabilities had to prove they were disabled enough to trigger an obligation to consider their requests.

• 86% of their staff with non-visible disabilities were also obliged to obtain medical reports. In both instances, managers described these 'not job relevant' medical reports as so unhelpful that they demanded additional reports, causing further delays. Line managers reported that their teams blamed them as 'the problem,' even though the process was out of their control.

This employer discovered that requiring individuals to prove they have a legally recognised disability before receiving adjustments inevitably led to distrust, delays, resentment, and negative impacts on health. In turn, this resulted in significant management, legal, and operational costs, as HR, Employee Relations, Line Managers, Legal, Health & Safety, Property, and IT were forced to invest substantial time and resources in handling grievances, absenteeism, reduced productivity, staff turnover, and litigation expenses.

Yet typically these significant costs remain invisible: those few businesses which do track complaints from employees with disabilities and/or health conditions would never share the data, not even internally, never mind with the Harvard or other Business School! And we know of no organisation that monitors the cost of the hours and hours of management time lost to dealing with related disputes.

The Government of Canada workforce survey¹ revealed that 7 in 10 employees with disabilities when denied accommodation do not complain:

- 44% feel complaining would do no good
- 32% fear negative consequences
- 28% fear complaining would damage relationship with supervisors.

Which is why we must remind ourselves, that just as we are all prepared to accept 'apples still fall down' and don't demand fresh data to prove it...Surely we can just accept that human beings in work will feel aggrieved, disappointed, unhappy... when denied prompt provision of the reasonable adjustments which would alleviate their pain and distress and to which they may be legally (or ethically) entitled.

The absence of complaints should be met with empathy and information gathering- not inaction. The helpful first question for a senior champion is to ask: 'what happens when people need adjustments?' - and then, in the context of any compliance oriented culture - How would you feel, if you had to first prove you were 'disabled enough', before your manager made it easier to do your job?

GSK continues year on year to trust their people, and they encourage others to do the same. They point out that 'trust' saves time and money while enabling consistent fair treatment from country to country - that very few colleagues try to exploit the system ('how likely is it that someone would pretend to need a Braille keyboard?'). GSK's objective is to enhance everyone's contribution - not just those who, somehow, depending on the jurisdiction, technically qualify as medically, and perhaps legally, as having a disability.

One director told me that 2 years after introducing trust based adjustment management, their Employment Tribunal cases had dropped by more than 80%. But there was no way they would let us publish what to us looked like such an outstanding "good news' story.

Nasser Siabi OBE, Microlink CEO

Section 4 Retain talent by pro-actively tackling disengagement

'Replacing one employee can cost from one-half to two times the employee's annual salary -- and that is a conservative estimate'. (Gallup 2023)

'Every one of us who isn't already managing a disability and/or health condition, could acquire such conditions in the future - fewer than 20% of people with disabilities were born with their disability.

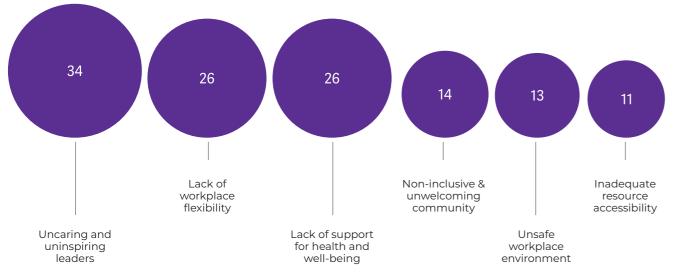
Nearly half of those requesting adjustments from Microlink's managed services have only recently acquired their condition. While they may be under a doctor's care, they have also realised that they need things to be done differently at work. Many of those needing adjustments have no idea what solutions would make it easier to do their job - neither do their managers and neither do their doctors.

Most people acquire their disabilities and/or health conditions while of working age.

"The average cost of replacing an employee in the UK is around $f_{25,000}$ per worker, which accounts for rehiring and lost productivity. For specialist and senior roles, this number can range higher, think £40,000 to £100,000 per head. (Jan 2024 CIPD)

The average cost of Microlink managed adjustments per individual service user is £,900 - £,1200.

McKinsey identified 6 top Reasons for Quitting April 2021-April 2022



McKinsey & Company Fit for Purpose Adjustment Management supports the cultures and behaviours that encourage people to stay and develop their careers and helps to counter each of the six disengagement factors driving attrition which McKinsey describes.

As we show below, effective adjustment management can facilitate the shift from 'disengagement' to 'engagement' on each of these six factors- i.e. when everyone can see that the company trusts its people and promptly provides the tools, flexibility and accessibility which optimise everyone's contribution and well-being.

Adjustment Management addresses Reason for Quitting

Reason 1

The employer is seen to value every employee's contribution, as they access a managed adjustment service at each stage of the employee life cycle.

Reason 2

Leaders are seen to 'walk the talk' - showing they do care for workforce well-being, including the well-being, fair treatment and engagement of the 25% who are managing disabilities and/or health conditions - and the 3-5% who may well request adjustments in any given year, when the service is well publicised.

Reason 3

Work expectations become visibly more human centred as they 'adjust' to meet the needs and expectations of both the business and the entire workforce.

Reason 4

The adjustment service reinforces the level of flexibility and personalisation that empowers everyone's productivity and sense of belonging.

Reason 5

The culture is seen to be authentically inclusive, as it welcomes and nurtures diverse disabled talent and retains employees who acquire disabilities and/or health conditions, on a fair and equal basis.

Reason 6

Timely and effective adjustment provision mitigates health and safety risks, while enhancing wellness and well-being.

In another study leveraging the Indeed platform¹, it was found that companies that treat their workers well attract more job candidates² and hold on to their workers longer. This can carry significant implications for company performance, given the expense of hiring a new employee.

Indeed platform

MIT Management: Workplace Happiness & Job Search Behaviour

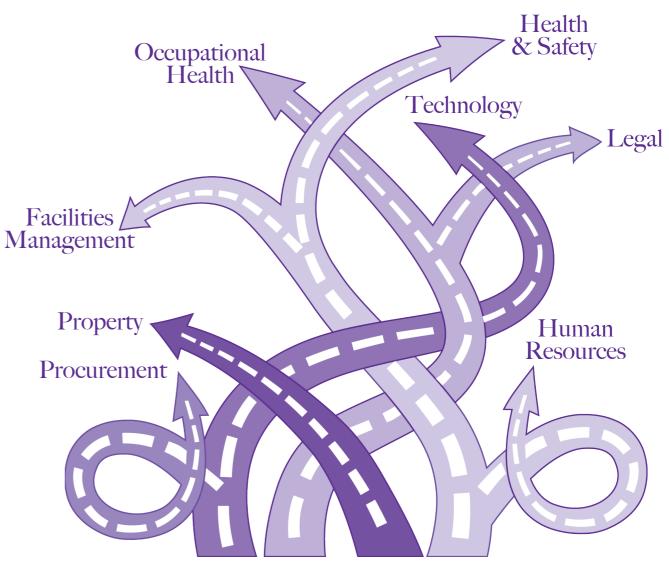
Moving from improv' to managed effectiveness

Few organisations have consciously taken the strategic decision to settle for an uncoordinated, medicalised, compliance oriented, 'let managers improvise' culture.

What we see however is the power of deep rooted, unquestioned assumptions that somehow these workforce issues 'belong' to Human Resources and/or medical advisors.

In reality, enhancing productivity is a business not an HR challenge – adjustment management service lines need sufficient authority to influence departments that have a direct impact on productivity – starting with Technology, Property, Facilities Management, Procurement, Occupational Health, Legal, Health & Safety...as well as HR.

So whose job is it?



The emerging Chief Productivity Officer role looks promising

The Chief Productivity Officer role is designed to work across departments, integrating strategies and initiatives that foster productivity and efficiency. Surely this is precisely the role best placed to engineer cross-business service lines that foster productivity by providing every employee with the tools and flexibility that enhance their job performance?

A Chief Productivity Officer acts as a catalyst for organisational transformation and is responsible for implementing new processes and systems that significantly enhance efficiency. This role requires cross-departmental authority and a matrix-based organisational structure to function optimally. Noting that the end to end adjustment process can cross IT, Property & Facilities Management, Procurement and HR.

CPOs often bring new ideas and insights that can be especially useful for companies stuck in traditional ways of operation. Their multi-disciplinary experience, often spanning the Theory of Constraints (TOC), Agile, Lean, Six Sigma, Systems Thinking, Design Thinking and Total Quality Management, allows for versatile problem-solving.

Logically, <u>Chief Procurement Officers</u>¹ would naturally prioritise providing every employee with the tools, access and flexibility that enable them to do their best work.

Logically, this would include enabling productivity and engagement for the 25% of their workforce who are now managing and/or will be managing the impact of disabilities and/or health conditions at work.

And logically, Chief Productivity Officers would use the 'Fit for Purpose' Adjustments Management Gap Analysis to review their adjustment management system and then drive continuous cross-business improvement.

In the absence of a Chief Productivity Officer – which C-Suite leader in your organisation is 'logically' best placed to strategically drive this business transformation?

Or in the absence of a Chief Productivity Officer how can we learn from and adapt the GSK strategy – which has a senior leadership team (the Global Disability Council) determine values, policies, budgets and key performance indicators for the service lineshaped by the 12 Critical Success Factors – which then drives the roll out worldwide of a dedicated, managed adjustment service, supported by Microlink as specialist partners?



The Fit for Purpose' adjustments gap analysis

Network leaders can use this 16 Step Gap Analysis in any geography to help their senior colleagues systematically compare "what happens now?" when people need adjustments, with the response that really is 'fit for purpose' - when that purpose is to enhance productivity, well-being, engagement and risk mitigation.

How do we move, step by step, into the GREEN column?

Fit for Purpose

What we see, hear, feel, experience which tells us that the adjustment 'process' IS working well and IS fit for purpose.	W te W
Key stakeholders describe a co-ordinated service which efficiently delivers employees the tools & flexibility that enable them to thrive at work.	Ke
People believe that the organisation aims to provide every employee with the tools, flexibility and fair treatment that they need to thrive at work	E ac re fit
There is a single, well publicised point of entry to a service that co-ordinates the response by all departments that need to intervene, at every stage, to deliver all requests for adjustments.	Tł re b w m
One C-suite executive is held accountable for the performance and impact of the service.	N ef
There is a named Service Manager responsible for ensuring that the service meets specified performance standards, at every step.	N Tł st
The service ensures that when adjustments are provided, they are appropriate and fully operational – with service users trained and permitted to deploy them.	N of th ai pi ex
Managers know that they do not pay from their own cost centres.	M d
Managers do not drive the delivery of adjustments for their people.	M th ai
Managers understand that the employer anticipates that they will approve most adjustments.	M gi in

Not Fit for Purpose

What we see, hear, feel, experience which ells us that the adjustment 'process' is NOT rorking well and is NOT fit for purpose.

ey stakeholders struggle to describe any uch service and may assume it doesn't exist.

mployees hear that the business provides djustments reluctantly, as 'special treatment' eserved for the few who qualify because they t into some legal and/or medical category.

here is more than one entry point: any equest can go through various channels and e touched by various functions who typically ork without reference to any others who nay need to intervene.

o C-suite executive is accountable for the fficiency and/or effectiveness and/or impact f any such service.

o one is responsible for managing a service. here are few if any specified performance andards at any point in the end-to-end rocess.

Vhen adjustments are provided – they are ften not deployed or not installed properly; ney are inadequate or inappropriate; and/or ne employee was not trained to use them; nd/or the person was not granted ermission to integrate their solution into xisting systems.

lanagers know they must pay – causing elays and/or request denial

lanagers are expected to drive delivery for neir people – causing delays, denials, ill will nd absenteeism.

lanagers and their employees assume that aining approval will be problematic if not npossible.

Fit for Purpose	Not Fit for Purpose
What we see, hear, feel, experience which tells us that the adjustment 'process' IS working well and IS fit for purpose.	What we see, hear, feel, experience which tells us that the adjustment 'process' is NOT working well and is NOT fit for purpose.
People feel trusted to self-refer and are rarely required to prove they have a disability. They identify the job related obstacles they encounter and find solutions which enhance job performance.	People do not feel trusted. Potential service users must provide medical evidence proving they are 'disabled enough' to trigger an obligation to even consider their request.
Few requests trigger referral for medical expertise - the 'business need' is to understand and mitigate the impact of the condition at work.	In addition to providing diagnoses, medical advisors are often asked to go beyond their expertise into assessments which trigger delays, needless cost, disengagement. e.g. a blind lawyer wanting a Braille keyboard must see a doctor.
Adjustments are described as a managerial esponsibility, with managers expected to partner with their employees and expert adjustment advisors to find the work elevant solutions. Referrals to medical advisors are limited to hose requiring medical expertise; medical eports are carefully monitored for vorkplace relevance, quality, clarity and ranslated by the service into advice that nanagers can implement. People believe that their personal nformation will be kept confidential.	 Provision of adjustments is understood to be primarily a medical responsibility. Decisions regarding adjustments are the responsibility of medical advisors within narrow, ill-defined and often inconsistent HR and/or line manager practices. Medical advisors lack disability adjustment expertise e.g. with specialist software. Managers often want medicals repeated e.g. when they disagree with the diagnosis because they assume doctors are biased in favour of employeesor more often, because they don't understand the reportand/or because the report fails to provide work relevant advice. People do not trust the organisation to keep
requently requested 'hard' adjustments re delivered promptly, often within 48	There is no pre-approved catalogue of 'hard' adjustments. Substantial delays of months,
furniture etc. Each case is tracked as it moves towards	even years, are common and viewed as unavoidable. Anecdotal evidence shows people waiting 3-6 months and longer - triggering needless ill will, grievances, H & S risks, long term absenteeism, churn. No one knows how many people are waiting
delivery – senior managers know how many are waiting, for what, and for how long.	for what kinds of adjustments at any time, nor how long they can be expected to wait.

Not Fit for Purpose

What we see, hear, feel, experience which tells us that the adjustment 'process' is NOT vorking well and is NOT fit for purpose.

There is confusion regarding what degree of lexibility can be approved by whom, using what criteria.

Mandatory policies (i.e. Sickness Management, Disciplinary Procedures) are often seen to conflict with policies seemingly intended to offer flexibility (e.g. Work from Home, Disability Leave).

There are no meaningful speed of delivery standards.

People tend to shrug and say: "But lots of hings don't work around here..."

Qualified candidates struggle to compete airly, as it is difficult, if not impossible, to negotiate for adjustments at each stage of ecruitment: particularly when that process is online.

Adjustments are rarely available for new oiners, causing considerable disadvantage rom the outset, which has an undocumented impact on churn.

Management worry that employees will 'abuse" the system and fake their disabilities fallowed to self-refer – leading to expensive out unnecessary medical and functional assessments and inappropriate procurement projects.

Senior leaders do not know for example: • how the process is experienced by

- managers and staff.
- how long people are waiting.
 how many and what kind of adjustments are denied.
- the cost of managing disability discrimination related grievances.

Fit for Purpose	Not Fit for Purpose
What we see, hear, feel, experience which tells us that the adjustment 'process' IS working well and IS fit for purpose.	What we see, hear, feel, experience which tells us that the adjustment 'process' is NOT working well and is NOT fit for purpose.
The business positions both the individual employee and their manager as valued adjustment service users.	The line manager has the time consuming task of driving a confusing uncoordinated process for their colleague. And are blamed for the failure of a of a system they cannot control.
Satisfaction of both key service users – employees and managers – is routinely monitored.	Managers are not regarded as service users.
Line managers are encouraged to readily and routinely approve requests and are rarely required to justify such approvals.	Line managers are not trusted to approve requests - each request goes through a special approval process that can involve multiple departments.
Decisions to deny adjustments must be approved by a named senior leader who must justify each decision.	Decisions to deny adjustments are rarely reviewed by a senior leader.
The business has a clear overview of how the culture defines what is 'reasonable' when they adapt to meet the changing needs and expectations of their workforce and the business.	Line managers are left to improvise, as what the business defines as 'reasonable' remains ambiguous.
Managers and employees have recourse to a credible, values-based Appeal or Dispute Resolution Process that sits outside the legal department – should they wish to challenge decisions or register dissatisfaction with the service.	Legal counsel and/or Labour/Employee Relations intervene frequently to mitigate anticipated or presenting individual complaints - reinforcing the counterproductive message: "We are only doing this because we have to."
The service monitors complaints and consults employees and key stakeholder to drive continuous business improvement.	Employees are reluctant to take the risk of being seen to 'go nuclear' if they try to appeal a decision or register dissatisfaction.
Adjustment Passports or Agreements routinely capture the package of adjustments for an employee which has been approved by the organisation (not just by an individual manager).	Passports or Agreements are not in use: employees are expected to re-negotiate with new managers for previously approved adjustments.
	These renegotiations then trigger referrals for additional assessments, leading to needless delays, absenteeism and ill will.

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<u>New data from Indeed, analysed by Oxford researchers, shows</u> that investing in well-being is both the right and the profitable thing to do too: Companies with higher levels of well-being have better valuations, better return on assets and better profits.

"Ground-breaking data from a recent Oxford study reveals that well-being isn't just a perk - it's a business imperative'

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Designing an efficient, fair and cost effective workplace

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Microlink is the world's leading authority on the design and delivery of workplace adjustment management in complex public and private sector organisations. The social enterprise has managed the end-to end delivery of adjustments for nearly 500,000 employees working in the UK and in other markets, including Europe, India and the USA. Nasser Siabi OBE, as founder and CEO, has impacted the lives of hundreds of thousands by eliminating barriers from classrooms to boardrooms, deploying cutting-edge Assistive Technologies and support services.

PurpleSpace

PurpleSpace is a unique leadership development membership hub for disability ERG/Network leaders, champions, and allies around the world. Our 4,500 members across 180+ employer brands employ over 1.5 million employees with disability between them.

Members join to increase the effectiveness of their disability ERGs / Networks, develop their leadership skills, and learn how to help their organisations to become disability confident from the inside out.

We call it Networkology and it is having a powerful worldwide impact on driving the next phase of cultural change within many different types of organisations.



Susan Scott-Parker OBE founded the world's first business disability network now BDF(UK) and as CEO led the foundation of the Technology Taskforce and the first standard measuring an organisation's disability performance across the business. She is now strategic advisor to the ILO Global Business and Disability Network and a Zero Project Global Ambassador. Susan has unique experience helping the private sector to define, deliver and benchmark the corporate best practice that she branded 'Disability Confidence' in 2003.

She started up business disability international with Barclavs GSK and Infosys, in 2016 and founded Scott-Parker International in 2021. In 2018 she launched the volunteer global campaign Disability Ethical? Al-the first to highlight the potential harm to hundreds of millions worldwide, triggered by what she calls 'disability-oblivious' AI. https://www.linkedin.com/in/susanscottparker1/

Credit & Acknowledgement

This playbook has been designed and developed under the creative direction of **Anna Moody**, who has dedicated 10 years to Microlink. Anna has played a pivotal role in ensuring the accuracy, clarity, and visual excellence of this resource. Her expertise and attention to detail have been instrumental in bringing this playbook to life.



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