UCEA consultation response to the Green Paper: "Improving Lives: the Work, Health and Disability"

Introduction

This is the response from the Universities and Colleges Employers Association (UCEA) to the Green Paper: "Improving Lives: the Work, Health and Disability". The response is based on views provided by our member higher education employers and focuses solely on chapter 4 of the Green Paper: Supporting employers to recruit with confidence and create healthy workplaces.

UCEA represents the views of higher education institutions (HEIs) across the UK in their capacity as employers. UCEA is a membership body funded by subscriptions from 163 HEIs in the UK, in addition to nine sector associate members. Our purpose is to support our members in delivering excellent and world-leading higher education and research by representing their interests as employers and facilitating their work in delivering effective employment and workforce strategies.

UCEA is also the employers' representative to the Health and Safety Executive (HSE) on matters relating to health and safety in the HE sector. UCEA coordinates the sector's Health and Safety Committee, which reports to the UCEA Board and draws together sector representative associations with an interest in the health, safety and wellbeing of staff and students. UCEA also coordinates the Higher Education Safety and Health Forum (HESH), which is a tripartite structure between UCEA (as the employers' representative), the trade unions and the HSE, with the aim of developing partnership working between the employer and employee representatives and to provide strategic oversight on matters of occupational health and safety in HE.

Question 1
What are the key barriers preventing employers of all sizes and sectors recruiting and retaining the talent of disabled people and people with health conditions?

Our members outlined a number of potential barriers, many of which are inter-linked. In the first instance, a lack of knowledge on the part of some employers and/or line managers in relation to disabilities, rights and available support can create a barrier to the recruitment and ongoing employment of disabled workers. Managers may not be fully aware of the requirements of the Equality Act 2010. This may lead to disabled workers either being denied their rights, or to managers not engaging with individuals about their disabilities or health conditions (for example with a view to making reasonable adjustments) for fear of falling foul of laws that they do not fully understand. A lack of knowledge and understanding can affect managers' confidence, leading them to shy away from taking proactive steps to address the needs of disabled candidates and employees. This can be exacerbated by low levels of awareness of the support that is available from the Government and its agencies, and a lack of clarity about the processes and responsibilities in accessing support.

A lack of awareness and knowledge can be particularly problematic as it fuels negative perceptions about employing workers with disabilities or health conditions. It is not uncommon for managers to view disabilities as a hindrance that they have to 'deal with', and there are common presumptions that disabled staff will have more time off, higher levels of sickness absence, lower productivity and require adjustments to the workplace or role that may be inconvenient and/or costly. Line managers may also worry about a disabled worker's

ability to perform well in a role and envisage difficult performance management processes where they feel disempowered to manage poor performance effectively due to uncertainty or discomfort around sensitive health issues and fear of employment tribunal claims. A paucity of prominent role models and examples of the ways that the talents of disabled staff have contributed to the workforce do not help to dispel such perceptions.

In spite of efforts to train recruiting managers, unconscious bias may persist to the detriment of disabled applicants due to deep-seated perceptions about disabilities and health conditions. The prevalence of the model of 'medical disability' rather than the 'social model' may lead to an unwelcome focus on candidates' impairments or differences rather than their talents and abilities. Traditional recruitment processes can also impede the chances of disabled candidates succeeding in being appointed. Employers may not make sufficient effort to attract disabled applicants, either through the attraction media they use or through the 'requirements' for the vacancy. For instance, many roles are advertised as being full-time without any suggestion that flexible working might be considered. Employers may also not have considered whether their recruitment methods, such as application forms, tests and interviews, could be adjusted proactively to make them less challenging for disabled candidates to engage with (instead leaving the onus of responsibility on the candidate who is required to request adjustments to be made).

Both during the recruitment process and once in employment, many workers choose not to declare their health conditions or disabilities to their employer. This makes it difficult for employers to identify and monitor staff needs and identify barriers to employment. Potential staff and existing staff may fear that employers' negative perceptions of disabilities in the workplace may impede their chances of being recruited or promoted. They may also worry that their co-workers may treat them differently or that managers may handle them with 'kid gloves' rather than having mature, constructive dialogue about how to accommodate their health conditions. They may fear that employers will be reluctant or slow to make reasonable adjustments and they may have to 'make a nuisance of themselves' to see action taken.

With regard to employer perceptions about reasonable adjustments, there is still a lack of understanding about the range of possible adjustments that an employer might be able to make. Immediate perceptions tend to be around costly physical adaptations or equipment; however, whilst these may sometimes be needed, there are often many more minor or imaginative changes that can be made to roles, working hours or environment. Employers may not be aware of the support available to them for reasonable adjustments, for example though Access to Work. The support available for employers should be more visible and should be enhanced. Support from Access to Work and from charities is decreasing, with more responsibility falling on employers, which can make it complex and costly to arrange appropriate support and adjustments. Employers perceive a lack of engagement with them from support providers and insufficient expert advice available on the range of health conditions that workers may present with. Not accessing support and fears about cost can delay adjustments being made, which can deter a disabled worker from taking up a role, or from returning to work after a period of sickness absence.

In addition to concerns about support for employers, there are few Government schemes available to support disabled individuals into work, such as though targeted apprenticeships or mentoring support. Such initiatives could help to break down barriers to employment and promotion.

Question 2
What expectation should there be on employers to recruit or retain disabled people and people with health conditions?

The requirements in the Equality Act 2010, to remove barriers faced by disabled people, are considered appropriate. Employers should, of course, be expected to comply with the Act but, beyond compliance, there should also be encouragement to demonstrate and share good practice with other employers.

While further legislative requirements on employers are not considered necessary, it would be beneficial to ensure that employers and individuals with health conditions have a greater understanding of the Act. This would improve the confidence of managers in applying the legislation proactively, which in turn should increase individuals' confidence that their needs will be accommodated at work.

There were mixed views among our members about a possible requirement to publish data on the numbers of disabled staff employed. Whilst some members thought that requirements similar to the incoming Gender Pay Gap Reporting duty would be useful in improving visibility of the issue and in making progress towards increasing the employment rate of disabled staff, others felt that this would not be feasible given the very low levels of declaration from staff currently. Nevertheless, HE employers would welcome higher rates of declaration so that they can seek to meet employees' and candidates' needs better, but it is acknowledged that a cultural change is needed before more staff will feel comfortable to share information about their health conditions with their employer.

Employers should be encouraged further to recruit disabled talent. Employers should sign up to schemes like Disability Confident and should be held accountable for adhering to them. However, there was some criticism from our members of the credibility of the Disability Confident scheme, citing a lack of coherent measure whereby employers are fairly and robustly tested in terms of their anti-discriminatory practice. The Mind Workplace Wellbeing Index and the Disability Standard operated by the Business Disability Forum were cited as more robust standards for assessing employers' practices.

At a more local level, employers should be encouraged when recruiting to think about the requirements of a role before advertising. For example, job descriptions are often just reproductions of the list of duties of the previous incumbent, without consideration to how the role might be performed in future and what elements might be flexible. Employers should also provide training for line managers and those on recruitment panels to tackle unconscious bias and to improve understanding about the social model of disability.

Employers must comply with their obligations to make reasonable adjustments. However, improved guidance from the Government and enhanced support for employers would be very welcome. Employers should engage with local charities and job centres, as well as Access to Work and Remploy, but there should be better information about such resources, for example via a 'one stop shop' (see question 3 below).

Once appointments are made, employers should provide ongoing support to staff with disabilities and health conditions. For example, they should monitor the needs of employees who have declared a disability, and they should continue to encourage declarations of health conditions, for example through a standard question to all staff in the performance development review process. Employers should support line managers with appropriate training, including in relation to mental wellbeing such as spotting the signs of mental ill-health and supporting staff who are required to support others (such as students) with mental health issues.

In order to change culture towards a healthy workplace for all, employers should be encouraged to undertake visible initiatives to promote wellbeing for all staff, whether that be via high profile campaigns, or top-down encouragement (led by example) to take lunch breaks and annual leave in order to tackle pervasive culture of presenteeism and long hours.

Ultimately, there is only so much that individual employers can do in isolation, without a wider role for the Government in helping to dispel myths about disability and ill-health. There should be greater education of wider society about health conditions, the contributions of disabled workers to society and untapped talent in the working age population.

Question 3
Which measures would best support employers to recruit and retain disabled people and people with health conditions?

Our members voiced strong support for a 'one stop shop' via a central portal for information on health and work and for accessing support, both from national and local organisations and charities. Members noted that while there is currently information available, it can require considerable effort to find all relevant resources. As part of a one stop shop, employers would welcome:

- Specialist information on different health conditions and access to expertise for more tailored advice.
- Information and examples about putting in place disability-friendly practices and reasonable adjustments.
- Free online training materials which could be made available to line managers to raise awareness of disability issues.

A one stop shop should put employers in touch with Access to Work, but our members had some suggestions for how the service might be improved. The scope should be widened to include access to public transport to help individuals get to interviews and to work. There should be more funding to support reasonable adjustments. The processes for initial applications and routine re-applications should be revised to avoid delays currently experienced. Greater continuity with individual advisers would support workers and their employers and avoid delays. The current restriction against making an application after six weeks in employment is also unhelpful. It would support employers, and speed up a worker's start in the workplace, if Access to Work could provide a package to disabled applicants such that they already had support in place when they start a new role. It was also suggested that it would be useful if employers could access financial support directly to implement reasonable adjustments, rather than the support process having to be initiated by the individual.

A one stop shop should go a considerable way to raising awareness of the various support routes available, including Access to Work and Remploy. The Government should build on this by commissioning campaigns to tackle stigma and improve awareness of the good practice demonstrated by some employers. As noted above, some of the barriers to recruitment and retention stem from cultural issues in society and perceptions about the abilities, or perceived lack of ability, of disabled people and people with health conditions. It should be the Government's role to seek to address such views, for example by promoting the social model of disability. Initiatives noted in the Green Paper such as the Barclays "This is me" campaign provide role models to individuals and send very powerful messages to employers by showcasing diverse talent and actions that other employers have taken to recruit and retain such talent. With an aging workforce, the Government should take a lead in demonstrating the contributions that older workers can make, in order to help to shift perceptions away from potential health conditions that might require some flexibility on the part of employers.

Beyond campaigns, the Government should have a role in reforming some of the support already available, for example as noted above in relation to Access to Work. Particular issues that our members identified included:

- Faster access to health services, particularly in relation to mental health issues.
- Paying Personal Independence Payments (PiP) for the initial weeks of employment, before the first salary instalment is paid, and travel costs, in order to support people moving into work.
- Reviewing again the role of GPs in relation to sickness absence. Employers seek realistic reports on what an individual is capable of doing, which the Fit Note system has not yet achieved. Without useful information, employers are limited in their capacity to make useful adjustments to work, and employees can stay off work for longer than necessary, reducing the likelihood of them ever returning.
- Financial support for a staged entry into the workplace, to support rehabilitation into work for those currently not in employment.
- Funded apprenticeships for disabled people.
- As noted above, there is support for schemes like Disability Confident, but a concern that they are not sufficiently robust in assessing employers' adherence to the commitments.

The ability to respond appropriately to mental health issues is a concern for employers, and this is an area that warrants specific support from the Government. We note with interest the Prime Minister's announcement of plans to transform mental health support, including at the workplace. Many employers in HE already engage with initiatives such as Time to Change and Mental Health First Aid training, which are excellent, but these need to be backed up with Government funding for action such as staff training, CBT and mindfulness.

Question 4
Should there be a different approach for different sized organisations and different sectors?

Whilst different organisations may require different approaches, the same legal requirements of the Equality Act 2010 should apply to all employers. In addition, the overall messages and expectations on employers to recruit and retain disabled workers should be aimed at all employers. The differing capacities of employers to make adjustments for disabled staff are acknowledged in the term "reasonable adjustment" whereby what is reasonable for a large profitable employer may not be reasonable for a small start-up, for example.

Although the legal requirements should be the same, variance in terms of what is reasonable needs to be acknowledged as, for example, smaller employers and those in the not-for-profit and public sectors may require more financial support to engage disabled staff. In addition, smaller employers are less likely to have access to in-house occupational health and equality specialists, and may require more support from Government and its agencies to understand their legal obligations and the practices they can put in place to recruit and retain disabled talent.

However, distinctions in relation to access to financial support based on size alone are unhelpful, as larger employers do not necessarily have more financial resources to contribute to workplace adjustments. HEIs are often large employers but they are not in the same financial situation as large private sector businesses.

Different approaches for different sectors might be appropriate as the challenges will vary depending on the types of roles they have; some sectors will necessarily have more manual work whereas others will have mostly desk-bound jobs, both of which can present issues for

disabled staff. However, a one stop shop with good information on health conditions and examples of innovative practices to accommodate these conditions, should provide useful resources for employers in all sectors.

Question 5
How can Government strengthen the business case for employer action?

The Green Paper estimates the cost of working age ill health to be £100 billion a year, with economic inactivity costing the Government £50 billion a year and costs of £7 billion for the NHS to treat people with conditions that keep them out of work. With such costs highlighted the business case should be fairly clear for the Government to invest in programmes that support disabled people into work. As noted above, there are negative attitudes in society that hinder the chances of disabled people entering work. The Government has a role in delivering campaigns to tackle prejudice in society against people with disabilities and health conditions, particularly mental health issues.

The Government should also deliver campaigns aimed specifically at employers, acknowledging that workplace discrimination persists and is unlawful. This would be commensurate with current Government messages around issues such as the gender pay gap, or discrimination against women who are pregnant or on maternity leave. The rhetoric associated with disabled people being 'scroungers' is very detrimental and requires national attention. Campaigning should also seek to dispel myths around the capabilities of disabled people and should seek to address stigma associated with disability and mental health issues, for example through positive case studies and role models. Case studies should demonstrate the value that disabled people can bring to business, for example by accessing an underused talent pool; an issue that will increase in importance when the UK exits the EU and the recruitment pool shrinks with the anticipated loss of unrestricted access to EU workers.

The Government could also promote inclusive work practices, for example wellbeing initiatives and flexible working, which can benefit all staff without focussing specifically on those with disabilities or health conditions. The working environment should adopt good disability practice as standard to the benefit of everyone in the workplace. Employers should be made aware that they may lose very talented staff if the systems and procedures are not flexible enough to live with diversity including disability.

The Disability Confident scheme should be promoted to bring it to the attention of more employers; however, as noted above, it should be reviewed to ensure that it is sufficiently robust. Support should also be given to schemes such as the Mind Workplace Wellbeing Index and the Business Disability Forum's Disability Standard. Consideration should be given to recognising and promoting employers who perform well against these standards.

Ultimately, financial support from the Government will support the business case for employers so that they can make necessary adjustments to the work environment to the benefit of disabled staff. As noted above, the Government should review and improve funding for Access to Work and charities that support employers. The Government should also invest in programmes such as funded apprenticeships and financial supplements to support volunteer roles, which would introduce employers to disabled talent (and vice versa) and help to change culture.

Question 6
How can existing Government support be reformed to better support the recruitment and retention of disabled people and people with health conditions?

There is a range of existing support that would benefit from being better promoted to employers and individuals. For example, awareness should be raised of Disability Confident, the roles of Jobcentre Plus (including new Community Partners), Access to Work, and the sources of specialist local help that are available. The proposed one stop shop should help with this. When employers seek to improve their knowledge around disability it is crucial that there is readily available advice and guidance specific to individual requirements.

As noted above, Disability Confident should be reviewed to provide a more robust assessment of employers' adherence with the standard. There is a commitment in the Green Paper to "establish a Disability Confident Business Leaders Group who will work alongside ministers and officials to increase employer engagement around disabled employment, starting with FTSE 250 companies". This sounds positive, but we would suggest that this group should also include large public sector organisations in order for sector differences to be taken into consideration.

With regard to Jobcentre Plus and other Government agencies, their emphasis needs to be changed from catching people out and saving money, to providing support to disabled people in a positive way. This requires a culture change in these organisations and better training for advisors, but has the potential to result in higher employment and ultimately cost savings to the Government. The recent confirmation from Damian Hinds at the Department for Work and Pensions that a number of smaller jobcentres will close and merge with larger and busier ones may be counterproductive as it could result in disabled workers, including those with mobility impairments, needing to travel further to more crowded buildings, thereby reducing accessibility.

Improvements should be made to Access to Work to make it easier for employers and individuals to access. There are perceptions that the service currently does not meet the needs of the individual, with the process taking too long to complete. An account manager approach, where employers using Access to Work have a dedicated point of contact, would improve user experiences. For instance, it can be challenging to get through to an advisor, and employees of one employer can be sent to different centres, making it very difficult to track progress for staff. The service should provide more local and specialist help, particularly with identifying reasonable adjustments. However, employers also perceive that recommendations for adjustments sometimes go beyond what is sufficient to being 'gold plated', making the costs of adjustments too expensive. There should also be increased collaborative working between Access to Work, GPs, the Fit for Work service and employers.

The Government should provide more funding to support disabled people into work and to support employers in retaining them. Suggestions include:

- Some financial support for employees who develop mental health conditions so they can lighten their workload and/or working hours without drastically decreasing their income.
- Some disabled people find it difficult to work full time. There should be an interaction between welfare support and paid employment that is easy for the individual to navigate and does not penalise them for working.
- People often become disabled whilst in employment, and their disabilities may be such that they can no longer do their current job. The Government could provide support for retraining/reskilling these people whilst still in employment so that they could be redeployed into other roles in the workforce.
- Increased funding for employers to implement reasonable adjustments.
- Funded apprenticeships and internships for disabled people.

- Financial supplements to support volunteering roles for disabled people, as introductions to the world of work.
- More resources to enable specialist charities to engage with and support employers.
- Assistance to employers to create networks of employers and employees, to provide support around disability and health issues.

As noted in question 1, one of the barriers to recruiting and retaining disabled workers is a lack of understanding and confidence on the part of managers. The Government should support employers to be empowered to understand how best to manage sickness absence in a supportive, but commercial manner, for example through enhanced guidance from Acas. Whilst the risk of high absence levels or performance issues should not be a prominent focus, employers should have confidence that they can manage a capability situation appropriately (clearly, robustly and sensitively) if one were to occur. With such confidence in place, there should be less reluctance to hire disabled candidates in the first instance.

Question 7
What good practice is already in place to support inclusive recruitment, promote health and wellbeing, prevent ill health and support people to return to work after periods of sickness absence?

Employers in the HE sector demonstrate a wide range of good practices, examples of which are outlined below.

Committing to schemes such as:
- Disability Confident.
- Healthy Working Lives (Scotland).
- Time to Change employer pledge, and recruiting Time to Change volunteer champions.
- The Mindful Employer Scheme, recognising inclusive recruitment for people with any mental health issues.
- Engagement with the Business Disability Network.
- Membership of the [Healthy Universities network](#).

Services:
- Use of occupational health services, whether they be in-house or outsourced or a mixed approach.
- Facilitation, via occupational health, of short-term physiotherapy and clinical psychology treatment where there is considered to be a work component to the health issue.
- Referrals to Occupational Health or a Disability Adviser prior to starting a new job, to provide advice to management and employees to allow them to manage health and wellbeing as soon as they start work.
- Provision of employee assistance programmes.
- Access to counselling psychological support services.
- Good health and safety management, including robust work risk assessments with a view to preventing ill health.
- A dedicated wellbeing adviser post within the health safety and resilience team.

Initiatives to support attendance:
- Clear policies on managing attendance.
- Ongoing dialogue with colleagues during employment about health issues and adjustments.
- Effective communication through absences, including prompt return to work discussions after any absence to consider and discuss any adjustments that may

facilitate a return to work or to maintain attendance. Consistent approach to support across the organisation, managing expectation of each disabled employee throughout.
- Guidance for managers and staff about returning to work.
- Consideration of tailoring support plans dependent on the disability and ensuring that employees are at the centre of these discussions.
- Employee wellbeing reviews.
- Access to Remploy and Richmond Fellowship Foundation for staff support in cases of a phased return to work for individuals who are experiencing problems due to disability or ill-health which facilitate a gradual return.
- Phased returns to work from long-term sick leave. Policies and procedures which actively support colleagues and bring in specialists such as Occupational Health, external agencies and Disability Support are all highly beneficial. It is important that any such programme has an overarching plan of support, rather than 'drifting' for a lengthy period which may hinder a potential return to work.

Training:
- Management and leadership training.
- Training for managers on effective absence management.
- Implicit bias training regarding recruitment.
- Mental health awareness training.
- Support to line managers in managing their disabled staff.
- Training programmes to raise awareness of disability and mental health.
- The delivery of presentations across the institution's academic departments, with a view to tackling barriers to disabled people's employment and changing culture.
- The delivery of disability equality training to all HR Business Partners.
- Compulsory face-to-face equality and diversity training for all recruitment panel members.
- Compulsory online equality training for all probationary staff.

Wider initiatives:
- A support service for disabled staff through a specialist provider.
- Disabled Staff Network.
- Mental Wellbeing staff network.
- Flexible working practices, and support for people needing to work from home (or work partially from home).
- An agreement on expectations for staff and students presenting with mental health issues, e.g. fitness to study/practice procedures and a willingness to work with the organisations mental health experts to control symptoms.
- High standards of consideration for disabled building user needs in estates design and building projects.
- Including questions on wellbeing as part of the staff engagement survey and resulting action plans.
- Peer support staff networks.
- Workforce monitoring and KPI reports which indicate progress in the area of Disabled People's employment.
- The use of positive action statements in job advertisements.
- The provision of paid internships for Disabled graduates.
- The promotion of recruitment amongst under-represented sections of the community for a new apprenticeship scheme.

Promotion of the health and wellbeing agenda:

- Developing a wellbeing programme in collaboration with the institution's School of Clinical Medicine.
- Wellness Recovery Action Plans.
- Workplace health and wellbeing programmes, for example run by volunteer workplace champions and HR, supported by the local public health teams.
- Wellbeing steering group, which co-ordinates the work of workplace wellbeing champions.
- Wellbeing training programmes, including Mental Health First Aid, Resilience/Emotional Intelligence, general wellbeing sessions and access to lifestyle advice (healthy eating, sleep and stress, positive thinking, relaxation and wellbeing techniques).
- Mindfulness workshops.
- Smoking cessation courses and alcohol awareness campaigns.
- Wellbeing fairs and other events: access to information to improve individual wellbeing.
- Events such as Time to Talk day and a disability awareness month.
- Having an institutional wellness action plan, for example incorporating NICE guidelines.
- Encouraging fitness through subsidised rates for staff for on-site sports facilities, such as the gym and swimming pool, including staff-only fitness classes.

Question 8
Should Statutory Sick Pay be reformed to encourage phased returns to work? If so, how?

HEIs agree that there are limitations to the current Statutory Sick Pay (SSP) scheme which can impede an early return to work. In order to encourage earlier phased returns to work, we support the proposal in the Green Paper (paragraphs 204 and 205) to reform SSP, so that employees can still receive a proportion of SSP during a phased return to work, so that their income does not drop below SSP whilst returning to work.

However, any changes to the SSP scheme could further complicate the system, therefore HEIs request that changes are made in a way that results in as little additional bureaucracy on employers as possible.

Question 9
How best can employers be supported to create environments that support disclosure of health issues?

The language of 'disclosure' rather than 'declaration' contributes to negative messaging around disability and impairment. Impairment is part of life and, in the same way as other forms of diversity, should be celebrated proudly rather than 'admitted to' or 'disclosed'. As such, a change in language would be helpful: employers should not 'encourage' people to 'disclose' but 'welcome declaration' of impairment.

Part of the reason for low levels of declaration is the stigma and negative perceptions attached to disability. As noted above, there is a key role for the Government in seeking to address these views through national campaigns, case studies and role models. Only with wider tackling of cultural issues, will organisational cultures truly be able to change for the better. Nevertheless, employers can be encouraged to address cultural issues themselves, for example through staff training. Employers should seek to engender supportive work environments where open discussions can take place about a person's health issues, with a focus on finding joint solutions for mutual benefit. A disability or health condition should be viewed as just another element that is managed, and part of routine staff reviews, albeit with

recourse to expert advice and support as necessary. Employers should also be encouraged, for example via Disability Confident, to promote a genuine commitment to disabled candidates through the recruitment process.

Specifically relating to declaration, the Government should develop campaigns that demonstrate the link between capture of data and the resourcing and development of services to support staff based on such data. This would also increase public awareness generally and the acceptance of disability at work, as well as the confidence of staff to declare.

The Government should encourage senior leaders to understand and promote the positive value of declaration. There should also be greater promotion of employers who demonstrate good practice in this area.

As noted above, manager confidence is key in terms of instilling confidence in staff that their declaration will be handled appropriately. There needs to be faster access to quality support services for employers and individuals. This would enable managers to give swifter, better responses to declarations and requests for reasonable adjustments, thereby improving employees' experiences of having made a declaration.

Question 10
What is it reasonable to expect employers to do as regards monitoring and acting on the health needs of their workforce?

What is reasonable for employers will vary with the size and resources of different organisations. However, employers should be expected to monitor levels of sickness absence and reasons for absence to identify trends. Data monitoring should feed into local action plans, for example stress action plans. Employers should be encouraged to monitor the number of staff declared as having a disability, and the number of staff who are unwilling to declare, and should consider reporting annually on such data.

In order to support the collection of data, wellbeing issues should be included in processes such as staff surveys (by asking for employees' views on health at work) and the performance development review process (PDR). As part of the PDR, managers should reinforce a message that the employer welcomes declaration of disabilities or health issues, emphasising that there is support available. Including such issues in the PDR should help to normalise open conversations about health and disability. Line managers should be asked to review reasonable adjustments annually, and should be given clear information on where and how to access support from the organisation in relation to reasonable adjustments.

Again, many of the issues around declaration and acting on health needs come down to culture. Employers should consider ways in which they can improve the work culture for people with health conditions, for example through campaigns (e.g. using national materials), role models, training for line managers and staff more widely, promotion of work-life balance and health at work, and considering opportunities for flexible working. As one HE employer noted: "Employers should be ambitious for all their staff to develop.... Making people feel valued does not always have a cost implication if the environment is geared around inclusivity from the outset."