



NHS

East of England Ambulance Service
NHS Trust



Consultation Exercise with Employees Identifying as Neurodiverse or Disabled: March 2023

Report compiled by:

McKenzie Human Resources LLP

www.diversitymckenzie.co.uk



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Section 1.0: One Page Executive Summary:

What is this report about ?

It details the results of a confidential external research and consultation exercise (via an online survey and one to one discussions) undertaken with 233 staff employed by EEAST who; (i) identify as Disabled, Neurodiverse or both and (ii) elected to take part. The exercise was completed during January – March 2023. 71% of the 330 people invited to participate chose to do so - a comparatively excellent response rate.

Does the Trust have a major problem in this area ?

Not necessarily. Page 43 of this report details a summary of the key findings of this exercise. By way of a summary, on a positive note, many approaches currently taken within the Trust are assessed as being very good - as evidenced quantitatively (via the Trust's reporting against the Workforce Disability Equality Standard) and qualitatively via this exercise.

Key areas of concern include clear evidence of indirect Disability discrimination in certain EEAST policies, knowledge, skills and confidence gaps within some EEAST managers, evidence of inconsistency of approach, taken at a local level, by local EEAST managers, in managing workplace Disabilities.

Finally, non inclusive leadership behaviours from some EEAST managers were consistently reported by a number of the participants of this exercise.

Is it easy to fix ?

Some of it is very straightforward to action. This report makes eight initial recommendations which if implemented, should make a big difference to employees, managers and the Trust.



2.1 Introduction:

In December 2022, the East of England Ambulance Service (referred to hereafter as either EEAST or The ‘Trust’) commissioned McKenzie LLP – a specialist Equality, Diversity and Inclusion consultancy to undertake an external research and consultation project with all employees who identify¹ as either Neurodiverse or Disabled (or both).

During February and March 2023, all employees who identify as above were invited to:

- 1: Complete a confidential and anonymous online / digital survey comprising 14 questions exploring a number of areas including perceptions and experiences of how well Disability and Neurodiversity is understood and accommodated in the Trust.
- 2: Join a confidential focus / discussion group to share relevant experiences and perceptions in this area. All discussion groups were facilitated by external Equality, Diversity and Inclusion specialists from McKenzie LLP.
- 3: Have a confidential one to one interview with a McKenzie consultant – again with the aim of sharing perceptions and experiences in this area.

2.2 Participation:

Participation in all of the above three activities was both voluntary and confidential. Staff were therefore free to take part in all, some, or no activities at all.

In total, 233 out of the 330 selected employees participated via one or more of the consultation options shown above representing a 71% response rate. (From experience, an average response/participation rate in an exercise of this nature is 50%.)

¹ As of February 2023, 330 EEAST employees stated they were either Neurodiverse or Disabled. Source EEAST Human Resources.

² *Neurodiversity* describes the idea that people experience and interact with the world around them in many different ways. There is no one ‘right’ way of thinking, learning and behaving and differences are not viewed as deficits. The word *Neurodiversity* refers to the diversity of all people, but it is often used in the context of autism spectrum disorder (ASD) as well as other neurological or developmental conditions such as ADHD or learning disabilities.

Source: Harvard Medical School <https://www.health.harvard.edu/blog/what-is-neurodiversity-202111232645>



2.3 Online Survey Content / Other Qualitative Feedback:

The digital survey contained a series of 14 different statements. Participants were asked to rate their own perceptions and experiences against each statement by giving one of five possible responses;

1: Agree Strongly, 2: Agree, 3: Neither Agree or Disagree, 4: Disagree, or 5: Disagree Strongly.

All respondents were additionally asked **How would you describe your own disability?** Responses to this question are reported on pages 20 – 21 of this document.

The final section of the survey gave participants the option to add free flow comments. These are reported in section four of this document. (Page 22.)

2.4 Methodology:

Employee responses were collected on line using *Survey Monkey* (a web based surveying company). All other qualitative feedback obtained from one to one interviews was compiled, summarised and reported by key ‘themes’ (also reported in this document) by McKenzie LLP.

2.5 About McKenzie LLP:

Formed in 1996, McKenzie specialise exclusively in the areas of Equality, Diversity, Inclusion and Dignity at Work.

They have considerable healthcare experience - previously working with the *Care Quality Commission, The General Medical Council, The Department of Health* and a number of NHS Primary Care Trusts and Clinical Commissioning Groups. (www.diversitymckenzie.co.uk)



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Section Three: Survey Results



Interpreting the Format of this Report:

Pages 6 – 19 of this report shows a summary of all responses to the online survey statements ranked in order of the most number of positive responses received, to the least number of positive responses received using the following format:

Example Report Page (Simplified and Dummy data is used for this example)

Original Survey Question Number and Statement

17: EEAST provides good internal support e.g. employee networks, occupation health referrals and flexible working options to meet the needs of employees who have a Disability.

Summary of responses shown as negative, neutral and positive.

Participant Responses by %

Responses by %

Response	Percentage
Agree Strongly	10%
Agree	25%
Neither Agree or Disagree	25%
Disagree	20%
Disagree Strongly	20%

Summary:

- 40% Disagree
- 25% Neutral
- 35% Agree

Report Page Number

Rank: 2/14

Question Rank (out of 14)

1 = Most number of positive responses

14 = Least number of positive responses

Green Shading = Top 5
Red Shading = Bottom 5

1.7 'Free Flow' Comments.

Further 'free flow' comments obtained from the survey are included on pages 20 - 44 of this report.

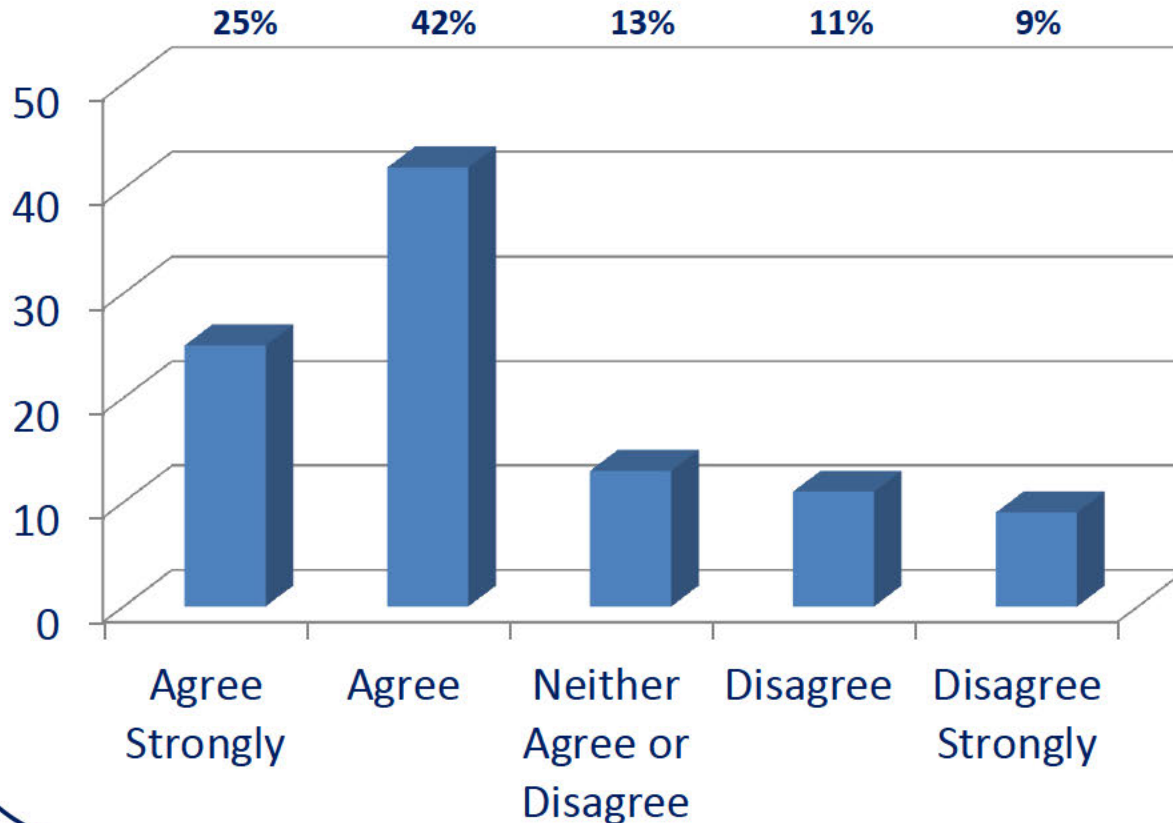
3.0 Survey Results:



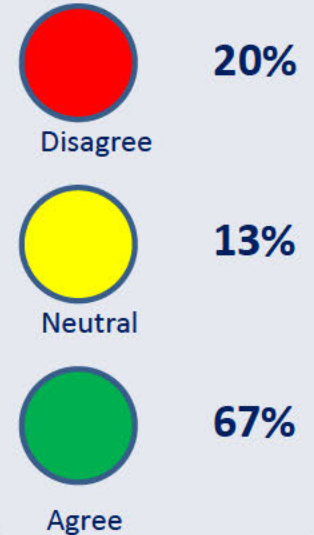
Survey Question:

13: If I witnessed a traumatic incident at work, I would feel comfortable talking about this with either my manager or colleagues.

Responses by %



Summary:



**Rank:
1/14**

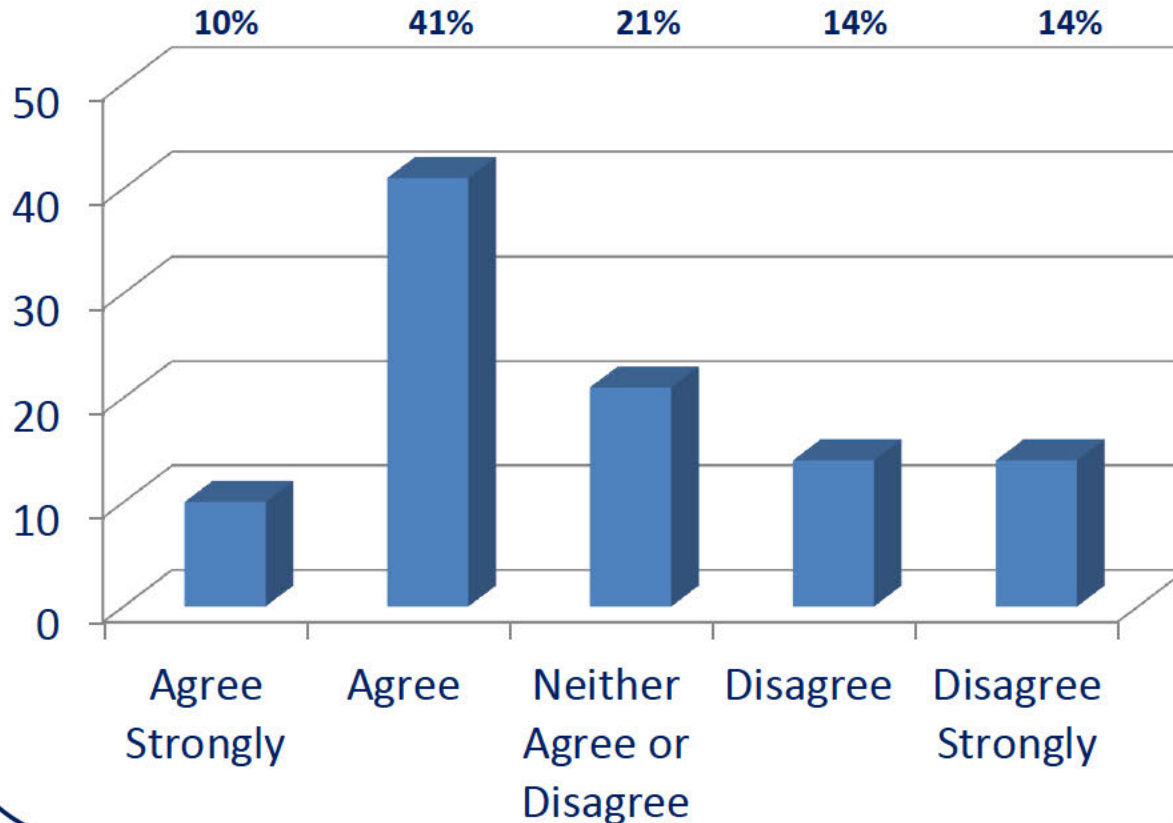
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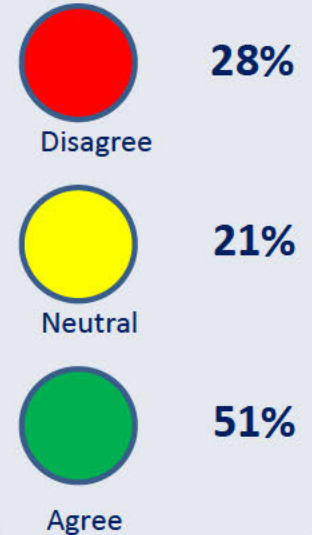
Survey Question:

9: EEAST provides good internal support e.g. employee networks, occupation health referrals and flexible working options to meet the needs of employees who have a Disability.

Responses by %



Summary:



Rank:
2/14

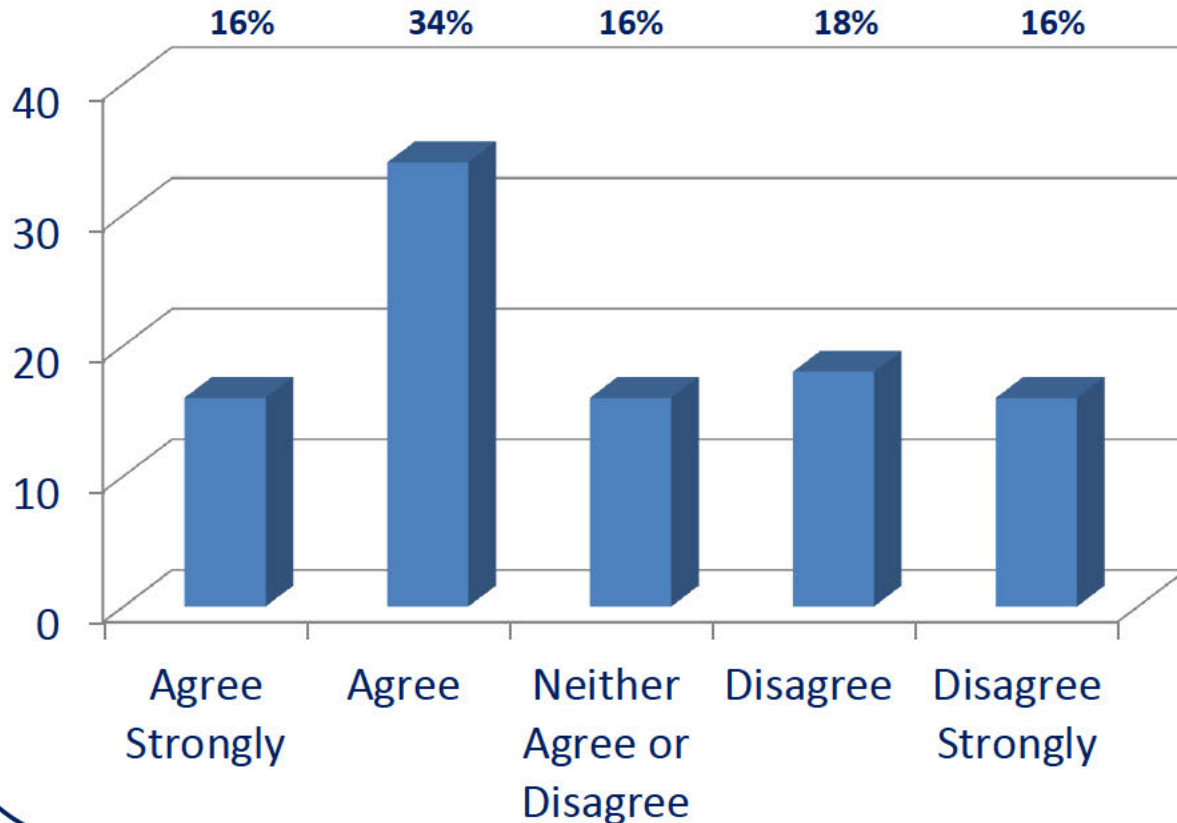
3.0 Survey Results:



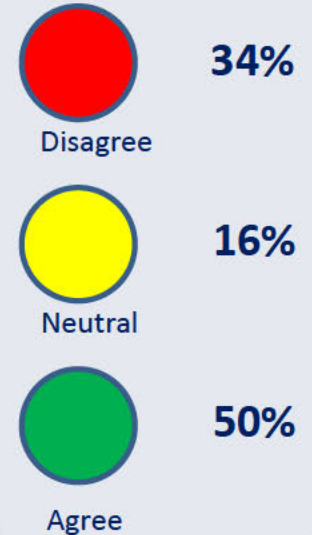
Survey Statement:

12: I would feel confident reporting any inappropriate behaviour or language used towards me (relating to my Disability) and that it would be dealt with accordingly in EEASt.

Responses by %



Summary:



**Rank:
3/14**

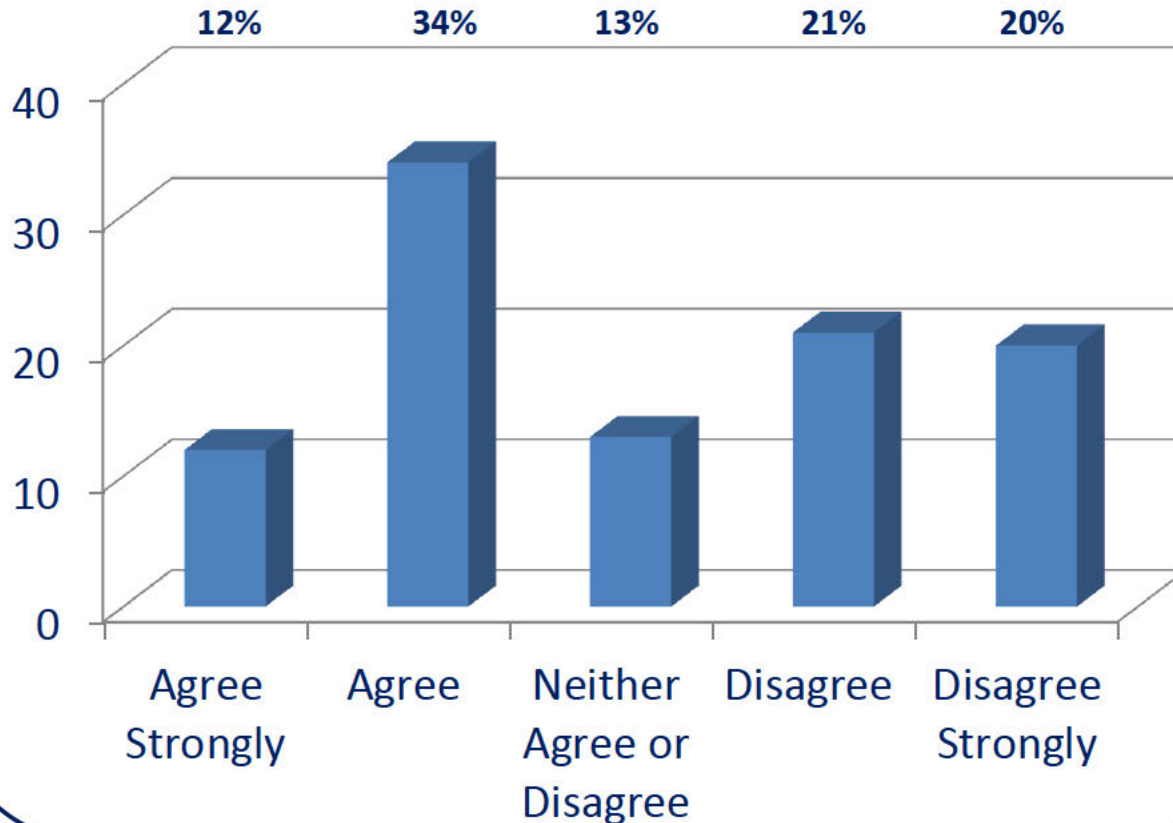
3.0 Survey Results:



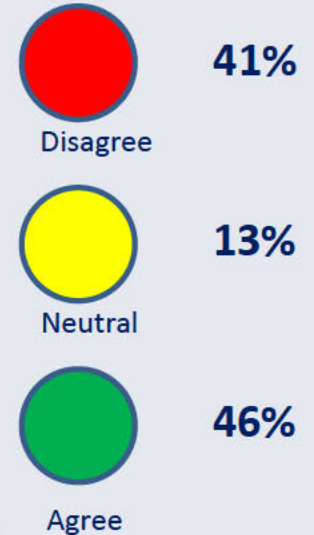
Survey Question:

10: I feel comfortable discussing my emotional wellbeing at work with either my manager or colleagues.

Responses by %



Summary:



**Rank:
4/14**

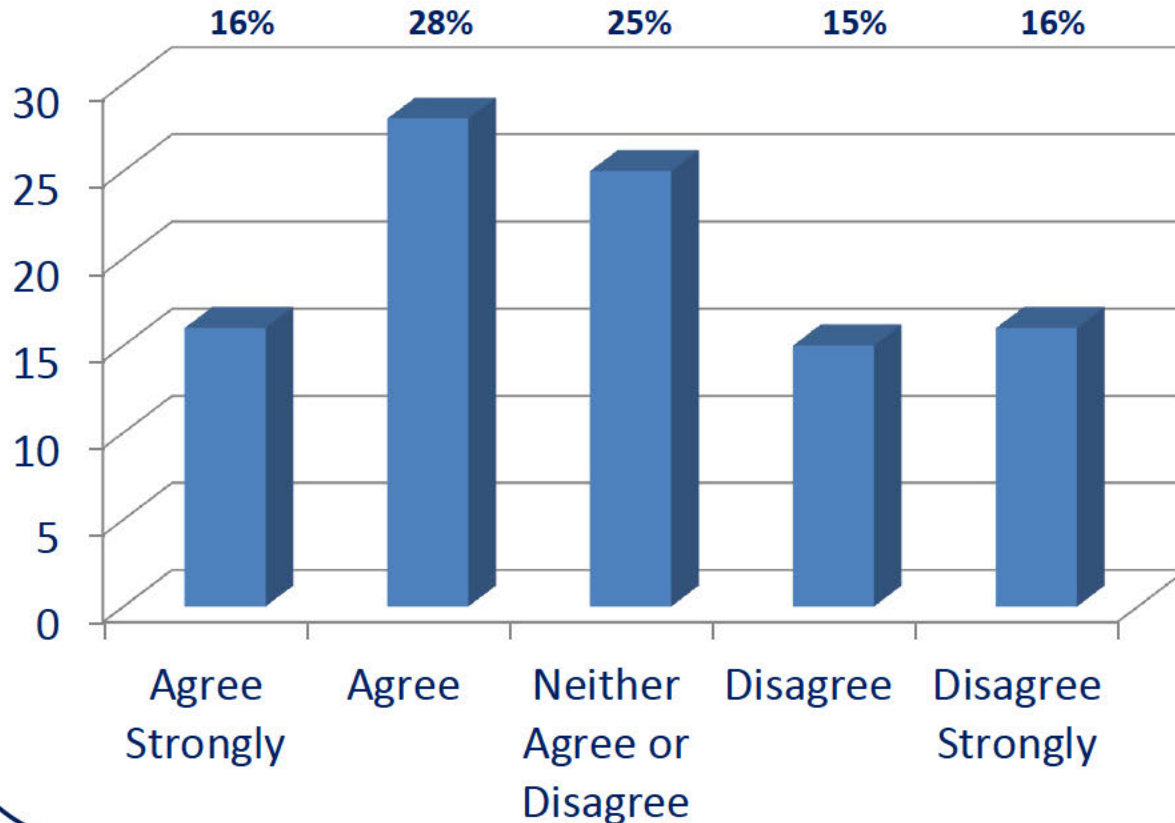
3.0 Survey Results:



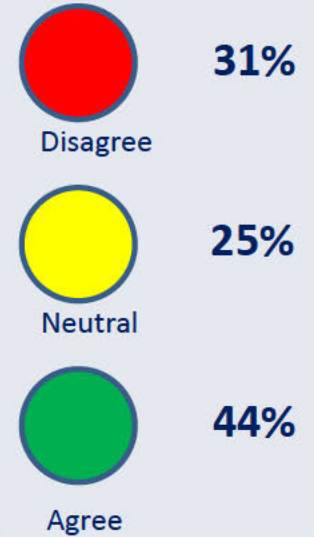
Survey Question:

3: My Disability is generally regarded by my manager as part of the spectrum of differences that exists amongst people and is both respected and accommodated in EEAST.

Responses by %



Summary:



**Rank:
5/14**

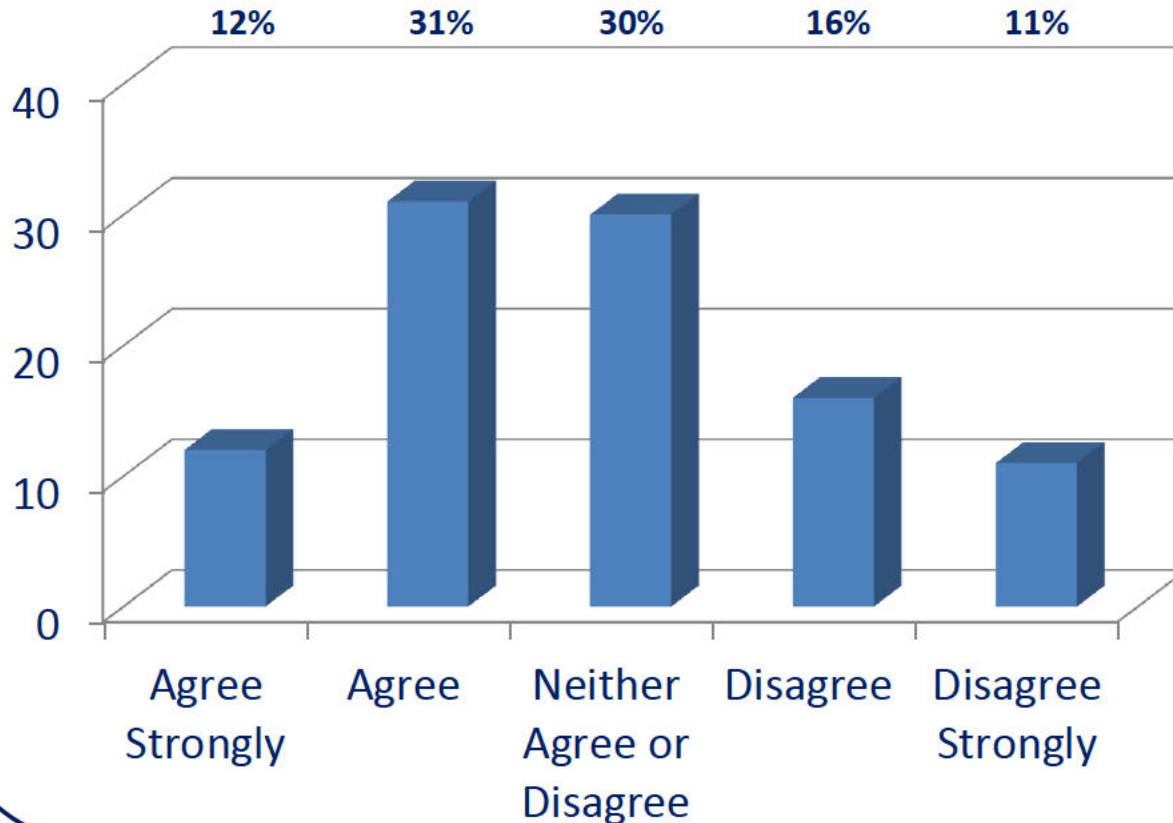
3.0 Survey Results:



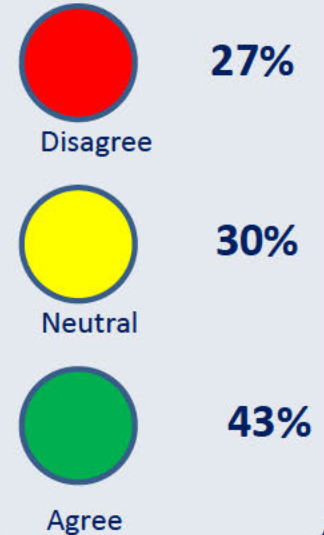
Survey Question:

4: My Disability is generally regarded by my colleagues as being part of the spectrum of differences that exists amongst people and is both respected and accommodated in EEAST.

Responses by %



Summary:



Rank:
6/14

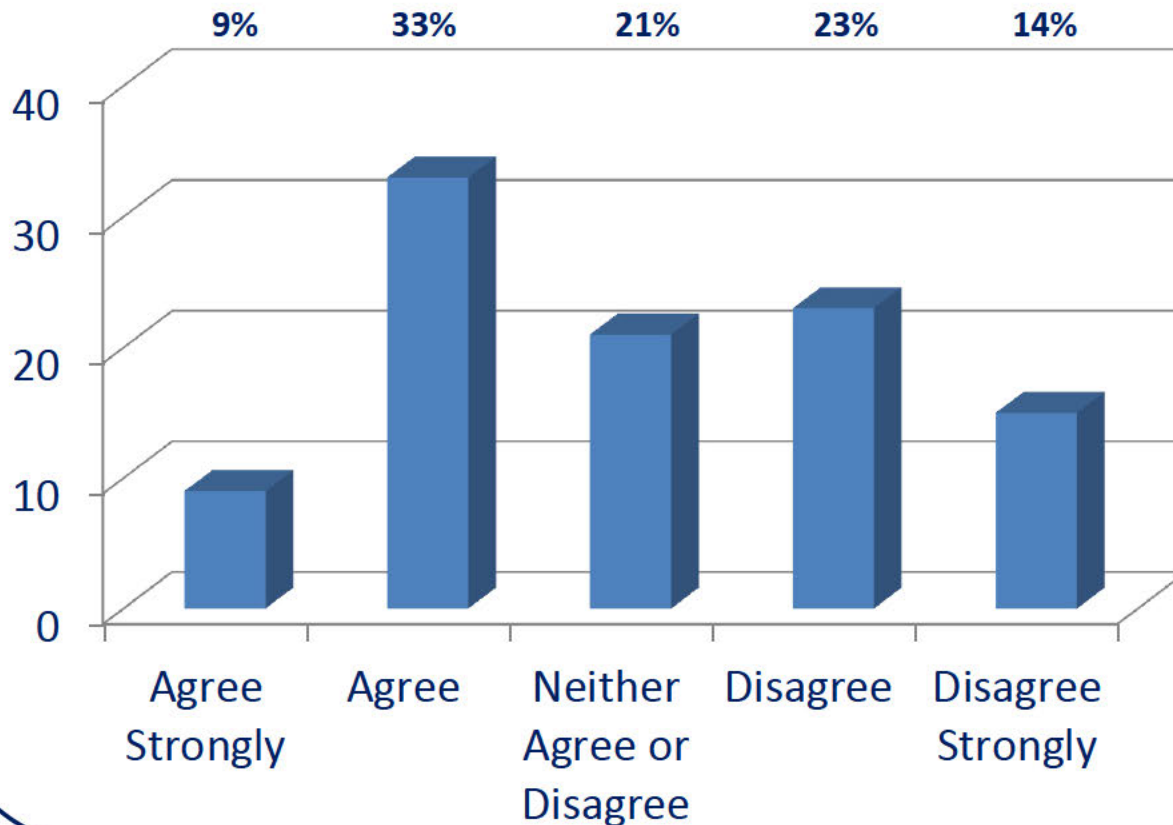
3.0 Survey Results:



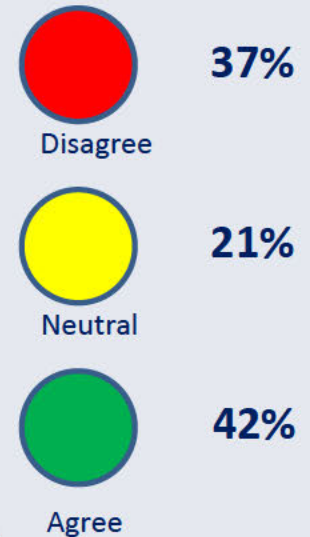
Survey Question:

1: I believe EEAST is a modern and inclusive organisation which understands and accommodates people’s differences and requirements relating to their Disability.

Responses by %



Summary:



**Rank:
7/14**

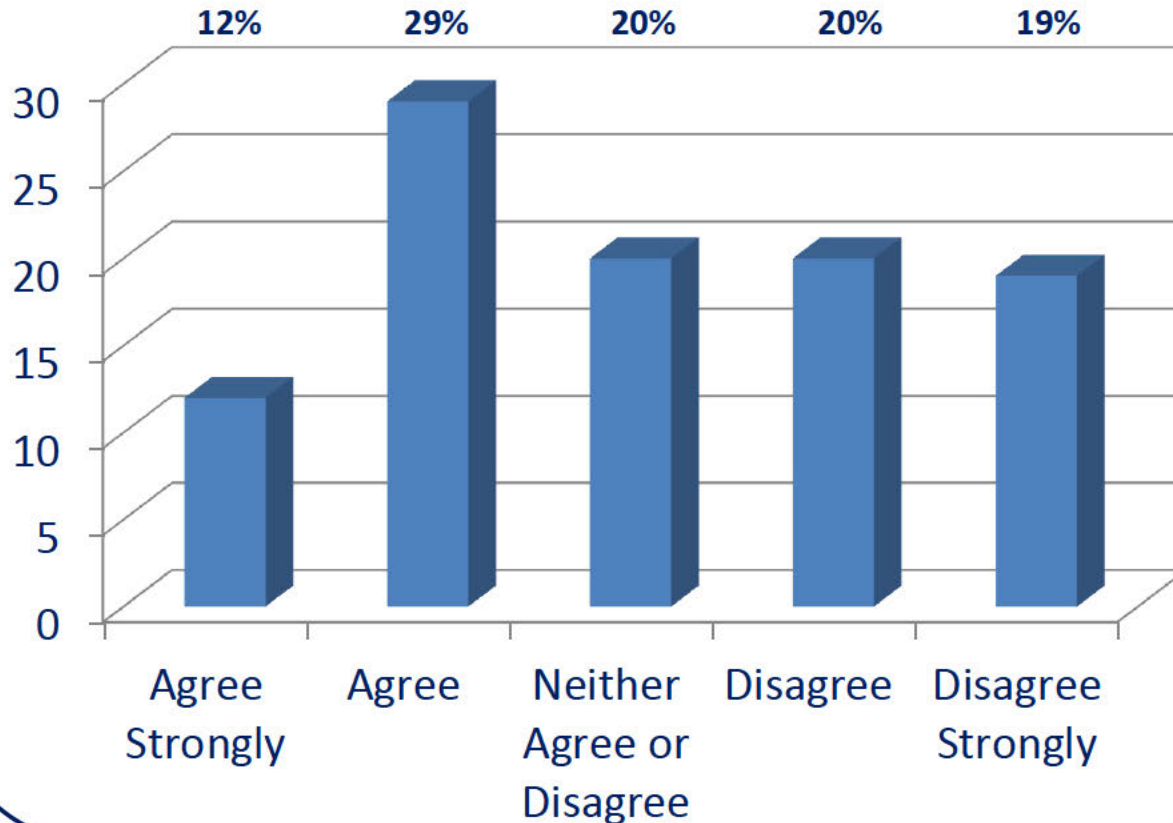
3.0 Survey Results:



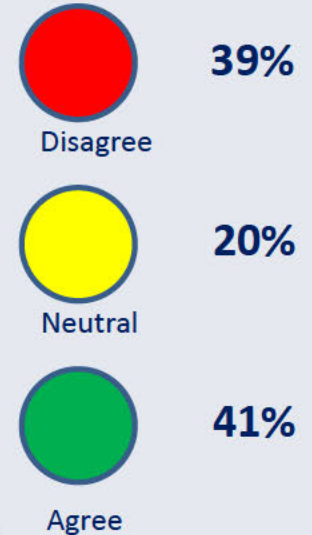
Survey Question:

11: Inappropriate nicknames, terminology, language or mimicking (relating to Disability) are NOT used with EEAST.

Responses by %



Summary:



Rank:
8=/14

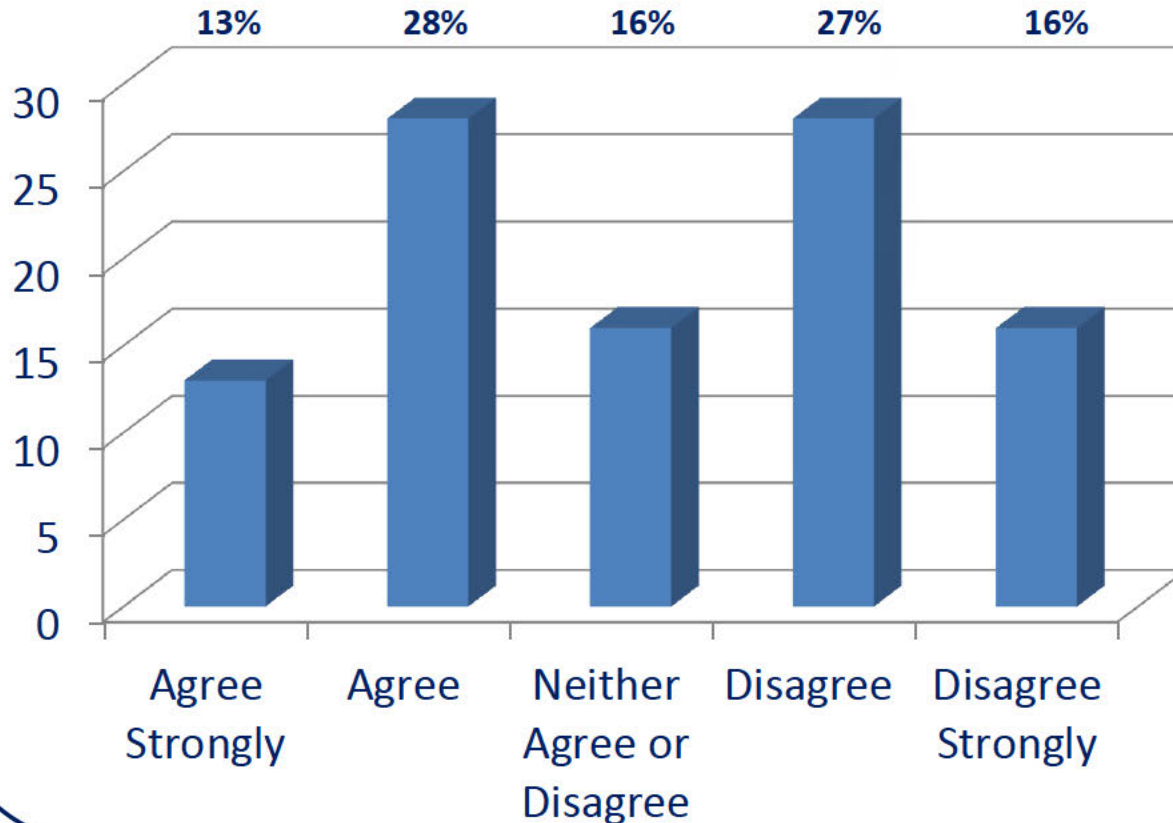
3.0 Survey Results:



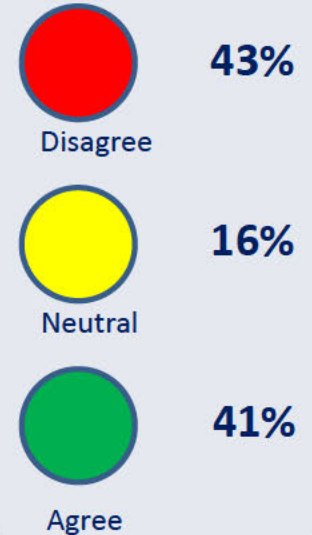
Survey Question:

2: I feel comfortable presenting my 'whole self' at work – irrespective of my Disability.

Responses by %



Summary:



Rank:
8=/14

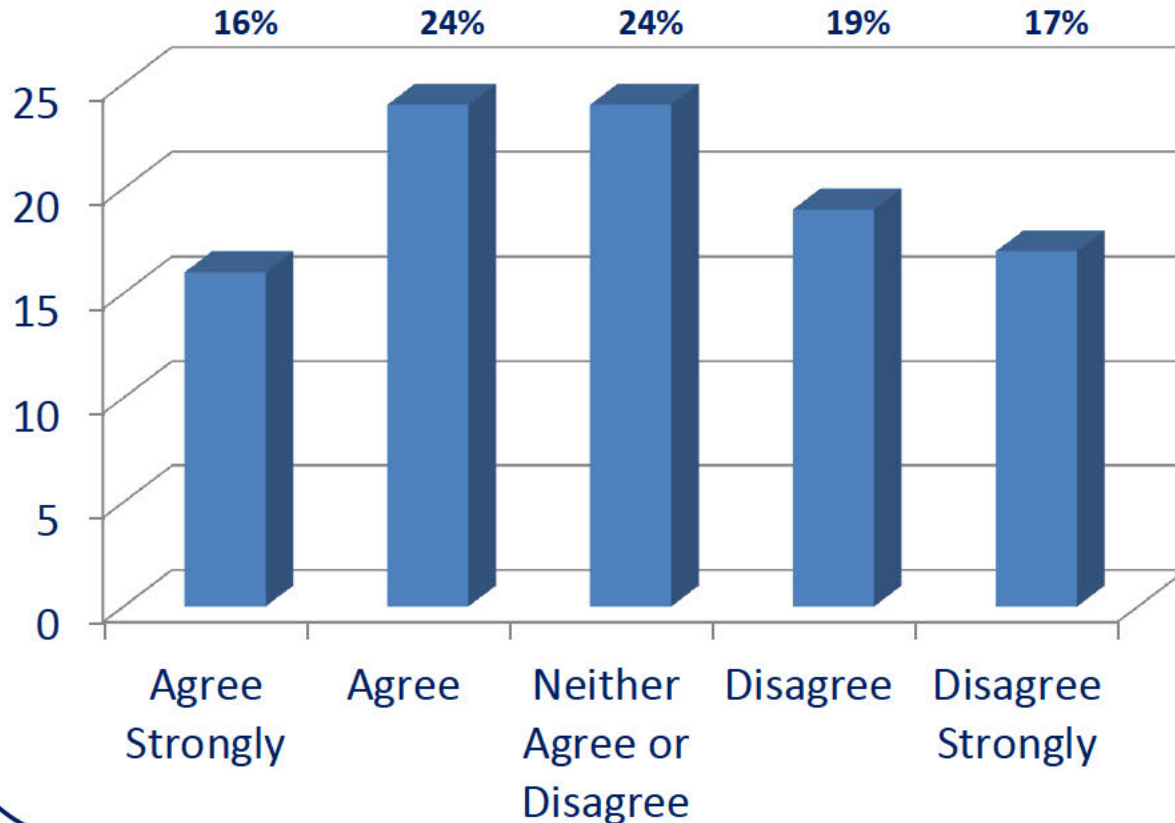
3.0 Survey Results:



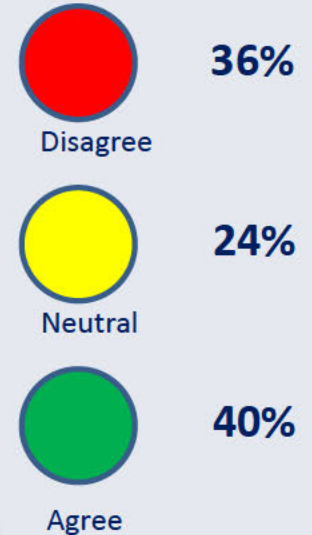
Survey Question:

5: When I have previously requested adjustments to my working arrangements due to my Disability, these have been willingly considered and accommodated within EEAST.

Responses by %



Summary:



**Rank:
10/14**

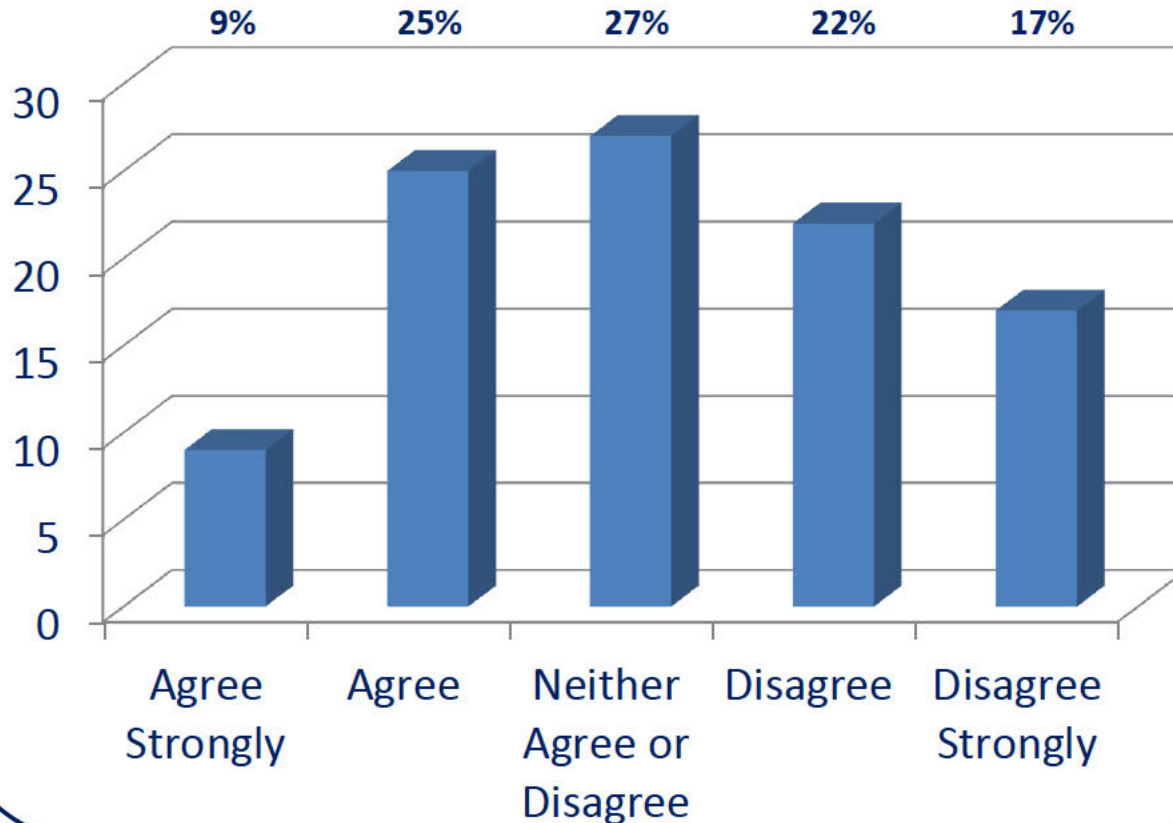
3.0 Survey Results:



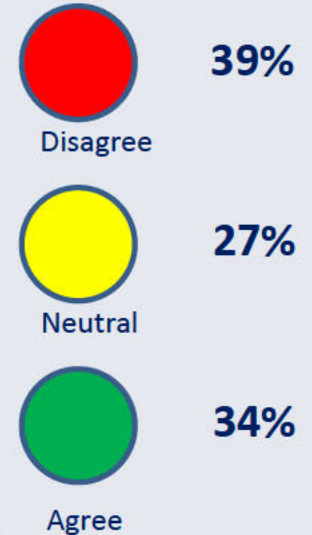
Survey Question:

14: All places of work or working arrangements in E EAST are equally accessible to employees who have a Disability.

Responses by %



Summary:



**Rank:
11/14**

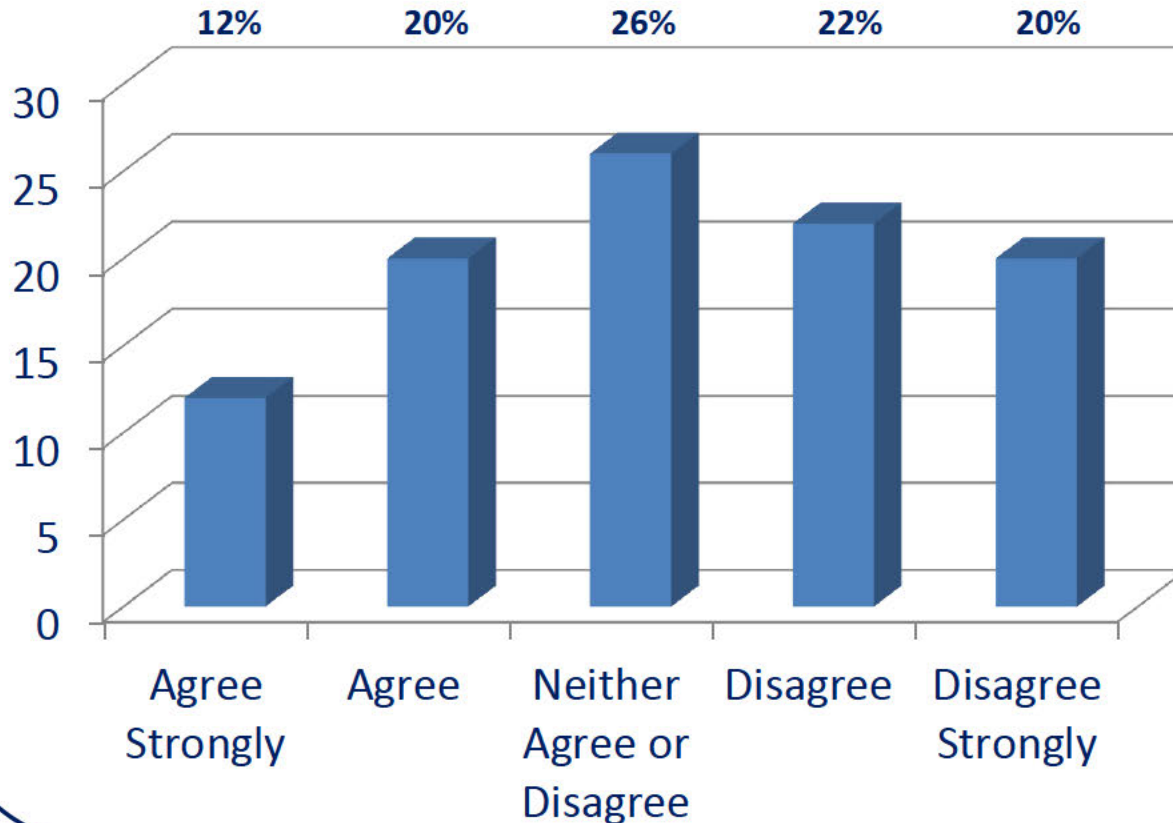
3.0 Survey Results:



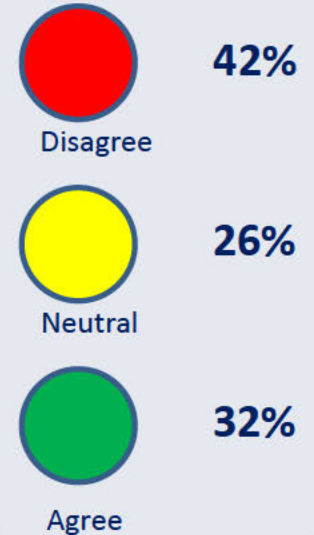
Survey Question:

6: I believe my manager has sufficient understanding / knowledge about how my Disability affects me to allow day to day workplace approaches and expectations to be adjusted accordingly.

Responses by %



Summary:



**Rank:
12=/14**

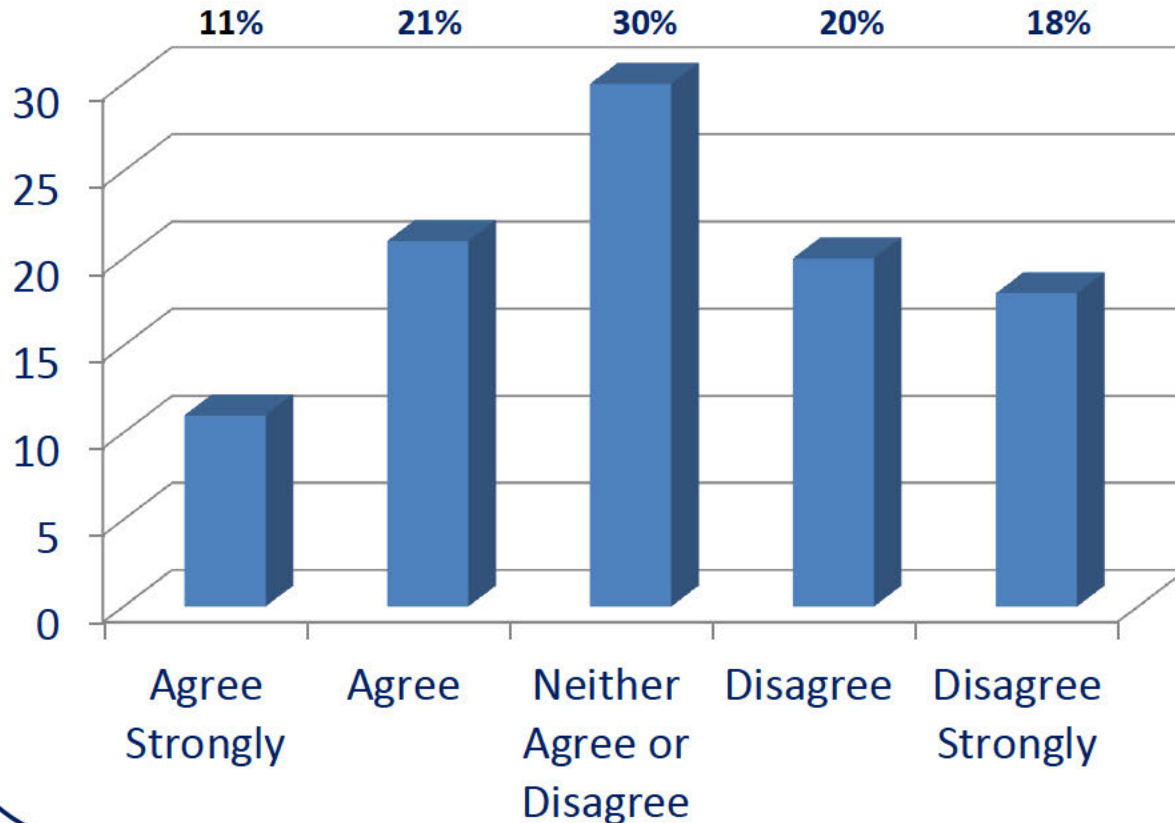
3.0 Survey Results:



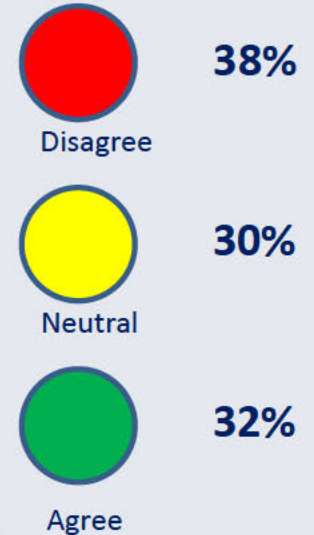
Survey Question:

8: Suitable career development, advancement and training opportunities are equally available to all staff in EEAST – irrespective of their Disability.

Responses by %



Summary:



**Rank:
12=/14**

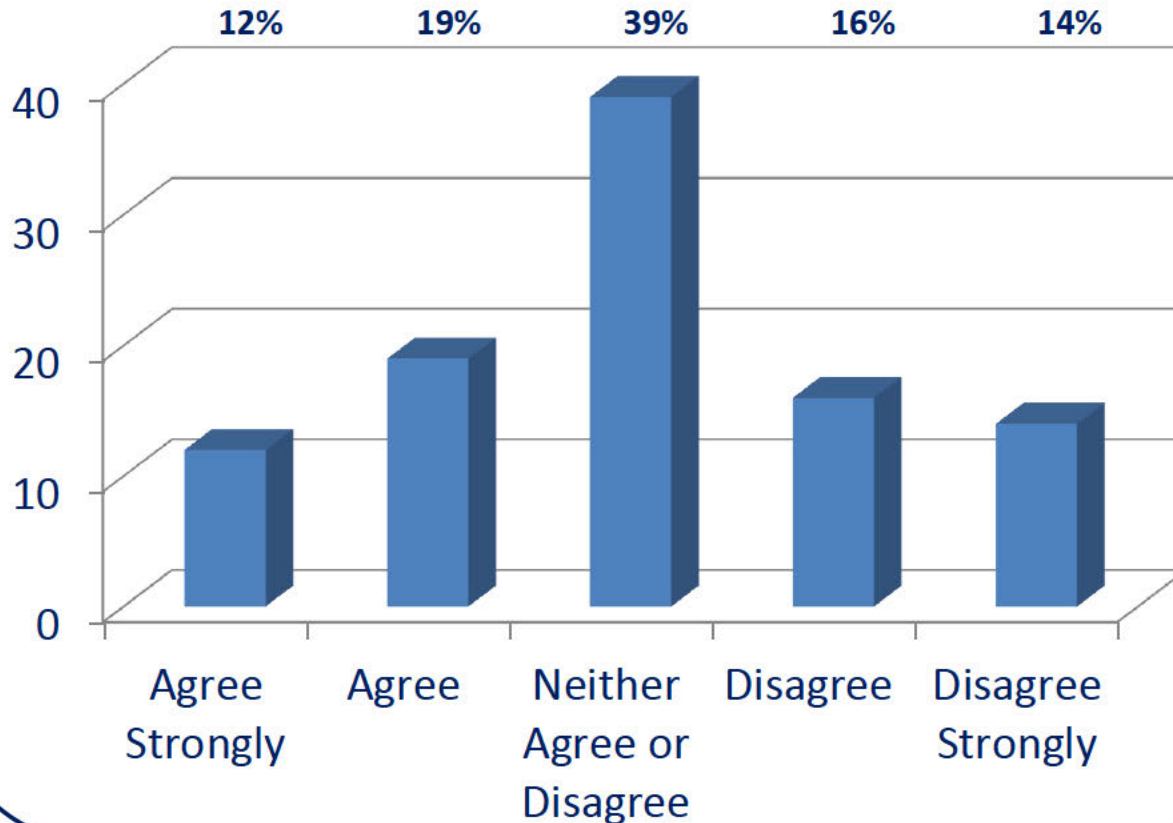
3.0 Survey Results:



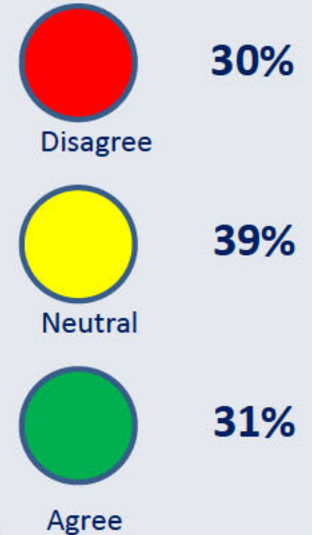
Survey Question:

7: If I am ever absent from work because of my Disability, my manager and colleagues demonstrate sensitivity and understanding towards me.

Responses by %



Summary:



**Rank:
14/14**

3.0 Survey Results:



Survey Question:

15: How would you describe your own Disability (you may tick one or more boxes)

Answer Choice:	Number of Survey Respondents (out of 232) selecting this choice: (A reminder you could tick one or more boxes.)
It affects my emotional wellbeing.	142
It affects my dexterity, concentration or learning.	125
It is a medical condition.	123
It affects my stamina or fatigue.	123
It affects my ability to read or process information.	90
It affects my physical mobility.	65
It affects my hearing, sight or other senses.	53
It is a trauma based condition.	34
My disability is not accurately described above (see overleaf).	24

3.0 Survey Results:



15: My Disability was not accurately listed, I would describe it as: (verbatim responses)

- *PTSD poor memory and concentration*
- *Mental Health*
- *Nothing*
- *Long Covid, depression and generalised anxiety disorder, dyslexia and more recently diagnosed with autism*
- *I have both a chronic medical condition and I have Asperger's*
- *PTSD*
- *These all vary depending on my level of fatigue*
- *Aspergers*
- *Dyslexia*
- *It affects my ability to communicate effectively as often miss non verbal cues unless there is context*
- *Aspergers*
- *Autism/ADHD*
- *I am bullied*
- *Chronic Pain*
- *Dyslexia*
- *It is a result of a work place injury and effects how long I can remain in one position.*
- *ADHD Diabetic*
- *There are more symptoms other than stated but all depends on external factors*
- *It is mainly co-ordinational*
- *Adult ADHD, affects my memory, emotional regulation, motivation*
- *I have a medical disability and PTSD, in addition to dyslexia and [REDACTED]*
- *Epilepsy*
- *Long Covid 19 and knee arthritis*



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Section Four:



Employee Feedback: One to One Discussions and Survey Comments

Employee Feedback: One to One Discussions and Survey Free flow Comments:

“I think we are very old fashioned, behind the times and undereducated as to what disabilities are and how they should be accommodated. Decisions should not be left to the discretion of local EEAST managers who simply block things if they themselves don’t believe in them.”

“I have been told - surely you can’t do your job with your type of disability - not how can we best help you to do your job in EEAST.”

“Approaches to Disability adjustments are very inconsistent and are often a matter of whether your face fits or whether your manager likes you or not – not your actual needs.”

“We need a central point of contact who have real ‘clout’/authority for Disability adjustments, fundings and arrangements in EEAST. We don’t have this at the moment so approaches are very haphazard.”

Employee Feedback: One to One Discussions and Survey Free flow Comments:

“I think we need a central point of support e.g. a welfare officer, to give advice, support and information to EEAST employees who have, or develop a disability. My experience is that H.R. do not help, the union do not help, the Disability support group only help a bit and line managers do not know how to, or want to help.”

“I believe we need a plan to support our older workers. If many of us will be required to work until we are 67 before we can receive our state pension, it is inevitable that more and more of the EEAST workforce will develop a disability. We therefore need a plan, a policy and a structured consistent approach to support. Not this current amateur approach which, if left unchanged, could cause us some real issues in the future.”

“Our managers should receive up to date Disability and Neurodiversity awareness and support training”

Employee Feedback: One to One Discussions and Survey Free flow Comments:



I can talk to management but management don't care and I am still threatened with capabilities and job loss every time I exceed the sickness 'allowance' which makes me feel anxious and like I should come back even though I am not well enough to do so.



As a front-line paramedic, I have had no formal meeting with my line manager for more than two years. If we had a regular scheduled "catch-up" meeting, say every 3 months, that would be a perfect opportunity for me to raise this subject. I don't feel I want to demand a meeting to raise this.



I applied for flexible hours (not to do more than 3 days in a row) and was refused. I now use my annual leave to make sure that happens.



Employee Feedback: One to One Discussions and Survey Free flow Comments:



EEAST need to realise that neuro diverse (people)are heighten when tired or been in a stressful situation this doesn't always have to be related to a traumatic accident. I find when everyone is [REDACTED] over each other makes me more stressed than having to deal with a trapped injured person in a car and a dead person in the other car. The other thing that East don't take into account is the [REDACTED] can be very distracting and invasive on thoughts. I have to have a discussion every time when doing [REDACTED] and that the [REDACTED] is such a better tool for me to use. If the trust was actually supportive of neuro diversity I would need to have this conversation every time.

My main issue is MSK following an accident whilst at work but this has been made worse with long covid (chronic fatigue, brain fog, some respiratory issues) - under the [REDACTED] [REDACTED] but there is no support network in place for MSK long term issues. Many of my colleagues do AWD's in ECAT and have LTC related to MSK

 **Employee Feedback: One to One Discussions and Survey Free flow Comments:** 

There is a second floor where I work which I can't access as there is no lift. There is nowhere suitable for me to sit in the rest room so I end up taking my breaks at my desk. Why can I not opt out of night shifts when my disability makes it so much more difficult to work nights, I've been told I will have to leave if I don't work nights.

I think there is diversity with the trust recruitment program only to comply with national required employment statistics , not because they want to employ an incredible mix of people. There is still a huge stigma surrounding surrounding many things, whether that be sexuality, disability, mental health... making it difficult to be open in fear of judgement and victimisation. And if you do declare something, you might as well have it tattooed on your forehead as that's all people see you for.

I've requested to have an assessment to confirm my disability but despite this being recommended by Apollo it was refused due to cost . It has been requested since but refused.

 **Employee Feedback: One to One Discussions and Survey Free flow Comments:** 

HR need to become far better at processing contracts. I left EEAST fulltime [REDACTED] to get my neurodiverse diagnosis and take some MH time away. [REDACTED] later I asked to return, [REDACTED] but it's taken [REDACTED] for HR to process my contract and I still haven't got my unconditional offer yet. It has caused great stress to me, they have delayed and then emailed me for information that has already been provided to them within the application (i.e, my [REDACTED]), thankfully I was [REDACTED] so could continue to work but again, I was working as a [REDACTED] for the trust and then receiving an email last month asking me if I had my [REDACTED], makes no sense. The whole process has caused immense frustration and stress exacerbates my condition.

The trust fails to acknowledge that staff can have none visible disabilities that require extra training needs or further considerations during day to day activities. Instead they try to manage staff via their sickness absence policy. Poorly trained management repeatedly fail to recognise the protected characteristics of disabilities and bluntly make poor decisions about staff needs.

Employee Feedback: One to One Discussions and Survey Free flow Comments:

The Trust need to Educate staff appropriately in this area.

██████████ is not diverse if you are not a fit single 20 something then you cannot fit in and do not feel part of the team!

When recruiting, why did it take over ██████████ to provide equipment but then thus wasn't compatible with the it systems and still isn't within ██████, due to the lack of equipment coming late it made me feel inadequate and since resigned from my ██████████, I feel there isn't enough awareness and communication about how best to support people in the departments and equipment should be compatible if offered this to use however it wasn't and I felt disappointed that this issue was never resolved.

To have more inclusive vaccines for disability's to have a manager for the well-being of staff

 Employee Feedback: One to One Discussions and Survey Free flow Comments: 

I am disgusted with EAST and my experience of mine and others disabilities. The networks are there, but what real impact do they have? My personal opinion is that the groups have some use but we are still right at the start of being inclusive.

I was diagnosed with autism recently, I also got [REDACTED] for [REDACTED] which I feel were mostly related to undiagnosed, albeit managers are aware of the possibility (autism). [REDACTED] but am not sick as doing [REDACTED]. I came back [REDACTED] but still am not doing my substantive job, god knows why. Since I got COVID ([REDACTED]) I have seen occupational health [REDACTED]! I am trapped in this TOXIC workplace. I'd maybe say 2% support and inclusive but 98% against. [REDACTED] [REDACTED] They avoid me, I offer help to various people, and teams in my own time, but it's wasted. I have had to whistleblow about [REDACTED] because, at an executive level, [REDACTED] was seemingly [REDACTED]. But because we got [REDACTED] involved, [REDACTED] [REDACTED], my [REDACTED] had been informally dealt with at [REDACTED] when [REDACTED]. One week after [REDACTED], that is such a coincidence. My friend told me about a podcast recently about psychopaths in top level jobs and how they display these characteristics. It all makes sense after watching it!

Employee Feedback: One to One Discussions and Survey Free flow Comments:



Some aspects of the environment where I work (when I'm in the office) make life hard but I acknowledge would be difficult to fix, such as the noise of heating fans or room acoustics. These all impact on my hearing, even with aids, and make being at work tiring. Luckily I'm based at home most of the time so it's not a major issue, but days in the office are draining. My problem is a hidden one and I sometimes disguise the impact it's having to avoid having to explain myself, although generally people are very understanding, especially my team. Whilst some stations are very disabled friendly in terms of access, some do leave a lot to be desired and do present a challenge that is negative for those of us with a disability.

For my own experiences within this department I have been extremely satisfied with the support and understanding I have received.

I'm still in training, so I'm not sure my answers are precise.

 **Employee Feedback: One to One Discussions and Survey Free flow Comments:** 

I think awareness raising of conditions that are not visible or are chronic conditions needs to happen. Line managers require training in listening without judgement, without dismissing symptoms, without feeling that they need to find an example when they may have experienced something similar - a disability is not something that occasionally happens like getting a cold it's a long term condition that affects every sphere of one's life and puts individuals at a disadvantage where workplaces are obsessed with output targets. Flexibility in the workplace is crucial when one has a disability and People's Services policies need to reflect this particularly around absence monitoring and reporting it cannot remain a one size fits all approach its discriminatory and affects employee mental health and wellbeing. Management need to be supported to support their own staff to work hard to protect employees against burnout and stress particularly amongst it's employees who have disabilities which are wide-ranging and not always visible

The trust tries to be accommodating, unfortunately bullying and harassment is too much of a culture issue in the trust. And the processes of tackling the through grievance or dignity at work has been messed up by the trust for me in the past so confidence in the system is not high



Employee Feedback: One to One Discussions and Survey Free flow Comments:



I believe that I have been treated very well in regards to my disability and feel my work needs are met

Whilst some stations are very disabled friendly in terms of access, some do leave a lot to be desired and do present a challenge that is negative for those of us with a disability.

I would personally like our occupational health to contact us sometimes just to check on how we are doing.

I believe that we are in danger of making 'disability' a buzz word to get what people want - for example some people who are legitimately disabled will threaten to claim that a particular action (for example not being given a job) is due to them being disabled rather than another candidate being more suited to the role. Whilst I agree we need to improve our service to disabled staff, and reduce the stigma around disability, we also need to protect non-disabled staff from reverse discrimination as a result of positive actions being taken for disabled staff being open to abuse.

 **Employee Feedback: One to One Discussions and Survey Free flow Comments:** 

My line manager appears to be disempowered by those above them when it comes to arranging and agreeing to requested/needed reasonable adjustments. It also seems to me that some of the Trust's HR staff are a hindrance to supporting staff with disabilities. Although the trust has a really good disability policy in place, it is, in my experience not supported or followed by HR or managers. Everything is a battle, nothing is easy - even getting responses to emails is very difficult.

Managers appear to make more effort to try and support visible and physical disabilities. There is a real lack of understanding or interest in disabilities which affect people emotionally or lowers their immunity, particularity if not front line operational.

Since starting with EEAST nearly 2 years ago I have had nothing but support from my colleagues and managers. Having the right tools to help me work at my desk. if there is anything I need they will always support me with obtaining the items that I need. Always someone that I can talk to if I am having a bad day. I very rarely go off sick with my issue, but if I do then they are very supportive.

Employee Feedback: One to One Discussions and Survey Free flow Comments:

I have been directly 'outed', mocked and asked why I am doing my job in front of colleagues and [REDACTED] + [REDACTED]...colleagues looked uncomfortable, one did ask if I was ok, but did not challenge this (I understand why), [REDACTED] interestingly did and were supportive to me.

I am a front line staff member and sharing my disability has previously got me isolated and threatened with capability. I have changed area to a much more supportive place but struggle with trusting that if I shared too much I would end up being dismissed or in a role where I couldn't afford to pay my mortgage.

95% of staff are ignorant of my condition and do not understand how it affects me. More education is required on neurodiversity, not just a 2 minute video which they show during refresher weeks.

 **Employee Feedback: One to One Discussions and Survey Free flow Comments:** 

The Trust is so focused on BAME groups little consideration is given to other groups particularly when the condition is not visual.

I feel that my dyslexia is not supported by anyone above my LOM team and colleagues who off great support, Anything above this level I feel are not interested or don't understand or don't want to understand, All are only interested in maths and English qualifications, Must nice to hold a BSc or masters and not have to worry about GCSE or equivalent qualifications.

Have often heard "we are all on the spectrum" from senior members of clinical staff & management, this is belittling of the difficulties I experience & shows minimal understanding at best of neuro diversity. While it is commonly accepted and indeed recognised that people without neuro diversity may exhibit a trait often associated with something like ASD this does not put them on the spectrum demonstrates a invalidating view of disability. It has been a fight to get support and adjustment as this process does not seem to be understood.

The local management team (██████) and control have been extremely accommodating with regard to my needs and have provided excellent support.

Two overlapping speech bubble icons in a dark blue color, one slightly behind and to the left of the other.

Employee Feedback: One to One Discussions and Survey Free flow Comments:

Two overlapping speech bubble icons in a dark blue color, one slightly behind and to the right of the other.

My personal experience is a great one. having been recently made disabled by my condition this is the first workplace I have worked at where people actually try to accommodate me in any way that helps weather that be allowing me to sit at the desk closest to the room or checking in on me and wellbeing. shoulder to cry on when i have dark days and also happy to not talk about stuff if I don't want to either. the disabled toilets are purpose built and not used as a mop cupboard like at other places. I was terrified about starting this job as a disabled young man but my managers and colleagues have made me realise I wish I did this job years ago and gave up on [REDACTED] before being forced to do so.

Was not aware of disability passport until 5 years into employment. AG Manager was dismissive of my struggles.

As an Autistic Paramedic the greatest challenge that I face is in adapting to working with a different crew mate on every shift. This takes up a lot of my mental resources and causes a lot of anxiety. It can also reduce my bandwidth for the job.



Employee Feedback: One to One Discussions and Survey Free flow Comments:



I feel there is a lack of access to ambulance stations/buildings for wheelchair users. It seems only built for able-bodied users.

I feel that the new redeployment SOP 19 is very restrictive and is detrimental to staff with a protected characteristic as you can only now apply for redeployment within the same banding or one below to gain future employment.

As an Autistic Paramedic the greatest challenge that I face is in adapting to working with a different crew mate on every shift. This takes up a lot of my mental resources and causes a lot of anxiety. It can also reduce my bandwidth for the job.

 **Employee Feedback: One to One Discussions and Survey Free flow Comments:** 

How to make EEASt inclusive for people with disabilities: -

- *To put inclusion at the top in front and centre of the Trust, not hidden, not a small part, it needs to be big and wide, in the same way the 'Black Lives Matter' campaign for example 'disability lives matter'. Perhaps do a campaign on Disabilities lives matter.*
- *Take the time to understand a person's disability. Not everyone is the same. e.g. There are varying levels of deafness and Neuro conditions.*
- *To ensure everyone including the Exec team to understand what disabilities staff have across the Trust.*
- *To ensure there is good training material for all.*

Employee Feedback: One to One Discussions and Survey Free flow Comments:

“I am both gay and disabled and I think EEAST has handled this very well. I feel included for who I am and would give the trust 8/10 for the workplace adjustments I have received. One minor frustration I have is the duration of some of our on line training sessions (via Teams). I have ADHD and half a day on Teams does not suit me. Perhaps shorter sessions, or one to one options might work better.”

“Some of our job specifications indirectly discriminate against people who have a disability. I am epileptic and as a result of this, have lost my driving licence. When applying for some alternative roles in EEAST, the person specification lists holding a full driving licence as either ‘essential’ or ‘desirable’ - even when this is not really capable of being justified. Examples of this include a [REDACTED]’ role (where this was listed as essential) and a [REDACTED] [REDACTED] Receptionist’ (where driving was listed as desirable). I have had to personally challenge things to get these types of barriers removed.”

“I have been told, when applying for jobs, that I will be treated no differently to any other candidate even though I have a disability and UK Equality law states reasonable adjustments should be considered. I have also been called [REDACTED]’ a reference to the fact that I [REDACTED] due to my disability.”

Employee Feedback: One to One Discussions and Survey Free flow Comments:

“I have been told that sharing any problems I am experiencing within EEAST with our Disability support network using Microsoft Teams is a breach of our social media policy as Microsoft Teams is classed within EEAST as a type of social media (?)”

“There is a clear training and awareness need within EEAST in respect of both Disability and implementing workplace adjustments. Some managers either do not ‘get it’ or do not want to ‘get it’.”

“One of the main problems in EESAT is the very low bar that is set on entry. We end up recruiting and accepting horrible staff. Whilst I accept that recruitment is a problem in some areas, for example, if you live in Essex you can easily commute and work for London Ambulance service and earn more. Even so, in EEAST, we do very little testing. In the ambulance service I worked before EEST, they used proper tests to route out the racists, the biased and the bullies. We don’t do that here and we end up with horrible staff who are not interested in people and who breed a horrible culture.”

Employee Feedback: One to One Discussions and Survey Free flow Comments:

“I was given no support whatsoever from either my line manager or H.R when I developed a disability which meant I had to be removed from operational duties. I was placed on ‘redeployment’ and it was entirely up to me to find a new job in EEAST. I was invited to countless review meetings with my manager and H.R. where I was constantly given three clear options:

1: Take early retirement through ill health.

2: Find another position.

3: Be taken down the capability route and dismissed.”

Additionally, I was told by H.R. that my [REDACTED] was ill health and not a disability. The stress of this treatment (the above two paragraphs) required me to take Counselling to deal with my levels of anxiety.”

“Our standard operating procedure ‘SOP19’ stipulates that whilst placed on redeployment for ill health reasons, you are not permitted to apply for an alternative position in a higher grading/banding than your existing substantive role. This effective bar on on applying for promotion does not apply to other employees who are not on redeployment for health reasons.”



NHS

East of England Ambulance Service
NHS Trust

Section Five:



Report Conclusions and Recommendations:

5.0 Key Considerations:

In summary, we have identified six key factors (shown below) relevant to the experiences of EEAST employees who identify as Neurodiverse or Disabled.



Good Disability
related
support and
adjustments
are provided
within EEAST

Reasonable
requests for
adjustments
are made but
not always
implemented

Unreasonable
expectations of
the Trust are
held by a
minority of
employees

Some EEAST
policies and
practices risk
unlawful
Disability
discrimination

Some EEAST
managers are
poorly trained
in respect of
Disability and
Neurodiversity

There is
Inconsistent
local practice
within
different parts
of EEAST

5.1 - Current Support and Adjustments Provided within EEAST.

Some approaches to managing workplace Disability taken in the trust are rated as good - as assessed by both employee experience and statistically.

Statistically, the Trust is required to report annually on 10 specific metrics under the NHS *Workforce Disability Equality Standard* (WDES). This is a set of 10 specific measures which enables the trust to compare the workplace and career experiences of Disabled and non-Disabled staff. The overall aim being to use the metrics / data to develop and publish an action plan and together with a year-on-year comparison, demonstrate progress in respect of promoting Disability equality in the Trust.

Good Disability related support and adjustments are provided within EEAST

The latest report ([Workforce Disability Equality Standard \(eastamb.nhs.uk\)](http://eastamb.nhs.uk)) indicates that 4.2% of all EEAST employees have declared a Disability compared to a 3.7% national average across the NHS.²

Positive progress against eight of the key WDES indicators is reported and the Trust has a detailed action plan for 2023 – 2024.

Key achievements include:

- *A Reasonable Adjustment Task and Finish Group* set up to bring about a more consistent and fair process for reasonable adjustments.
- Launch of a Cultural Ambassador programme to improve the experiences of staff.
- Hosting the newly formed *National Ambulance Disability Network*. The Trust is also registered as *Disability Confident Committed* (Level 1).

5.1 (Continued) Current Support and Adjustments Provided within EEAST.

During this exercise, some EEAST employees reported very positive experiences when asked how well the Trust managed / accommodated their own disability. A reminder of some of the positive comments received:

Good Disability related support and adjustments are provided within EEAST

“For my own experiences within this department, I have been extremely satisfied with the support and understanding I have received.”

“The local management team (██████) and control have been extremely accommodating with regard to my needs and have provided excellent support.”

“My personal experience is a great one. Having been recently made disabled by my condition this is the first workplace I have worked at where people actually try to accommodate me ... ”

“Since starting with EEAST nearly 2 years ago, I have had nothing but support from my colleagues and managers. Having the right tools to help me work at my desk. If there is anything I need, they will always support me with obtaining the items that I need.”

Question 9 of the survey stated: *EEAST provides good internal support e.g. employee networks, occupation health referrals and flexible working options to meet the needs of employees who have a Disability.* Responses to this were the second highest in the survey with just 28% of respondents disagreeing with this statement – confirming that not all employee experience is adverse.

5.2 - Adjustments Not Provided within EEAST.

The implementation of Disability adjustments in EEAST is perceived to be ‘adequate’ by just 54.7% of disabled people compared to a 77% national figure (Source NHS Staff Survey).

A total of 65 employees participating in this exercise (28%) disagreed with the survey statement: *EEAST provides good internal support e.g. employee networks, occupation health referrals and flexible working options to meet the needs of employees who have a Disability.*

Some of the examples provided to us confirm this may well be an area of development. For example:

- A job applicant being told that he would be treated no differently than anyone else - despite declaring a Disability.
- An employee applying for flexible hours on the ground of their Disability, being refused their request, and using their annual holiday entitlement to realise reduced working instead.
- A team member being told by an EEAST manager “*Surely you can’t do that job with your Disability.*”
- One EEAST employee told us he had to take external counselling because of the way he was treated during a reemployment process in the Trust after being repeatedly told to either find another job (in EEAST) quickly or he would be dismissed via capability processes.

At a more general level, a considerable number of employees told us, via the consultation events, that there was **great inconsistency regarding workplace adjustments**. Subjective, final decisions were consistently reported, made at a local level, by EEAST managers who in some cases, lacked knowledge, skills and even empathy in respect of Disability. A smaller number of employees told us that a change of line manager was all that was required to turn significant workplace problems, (in respect of their Disability) to a different and hugely supportive environment.

Reasonable requests for adjustments are made but not always implemented

5.3 - Unreasonable Expectations of the Trust:

We stress that whilst this descriptor relates to a very small sample size of EEAST staff, it nevertheless remains a key element in the overall reporting of this exercise and is likely to be a contributory factor to the adverse perceptions of the Trust in this area.

Unreasonable expectations of the Trust are held by a minority of employees

We believe regarding disability absence, there is always a ‘balancing act’ between making reasonable adjustments and the effective utilisation of resources. This ‘balancing act’ is perhaps not understood by all EEAST employees who participated in this exercise. A small number of participants described expectations that we consider to be unrealistic or not reasonable. We have used a non EEAST case (below) to respectfully illustrate an example of the circumstances we are alluding within this section of the report.

AMcAllister v HMRC

Mr McAllister commenced employment with HM Revenue and Customs (HMRC) in May 2011. He was employed in an administrative role. Mr McAllister suffered from anxiety and depression and had a high level of sickness absence because of these conditions. Following an absence management procedure, Mr McAllister was dismissed in December 2018, following which, he brought employment tribunal claims for discrimination arising from disability under section 15 of the Equality Act 2010 in relation to his dismissal.

The tribunal found that Mr McAllister had been dismissed as a result of his absence records as a consequence of his disability. However, the dismissal was objectively justified because the employer was able to show that its decision to dismiss for long-term sickness absence was a proportionate means of achieving a legitimate aim – that being to maintain a fair, effective and transparent sickness management regime, and the efficient use of resources.

It is not uncommon for a claim of disability discrimination to arise out of absence management processes such as dismissal for long-term sickness or persistent absence. Where an employer has provided the employee with considerable support over a long period, made any reasonable adjustments necessary and followed a reasonable process such as in this case, there is a good chance that a dismissal can be objectively justified. [HMRC employee loses claim after being dismissed for absence relating to disability | theHRD \(thehrdirector.com\)](https://www.thehrd.com/news/hmrc-employee-loses-claim-after-being-dismissed-for-absence-relating-to-disability/)

Some EEAST policies and practices risk unlawful Disability discrimination

5.4 - Risks of Disability Discrimination in EEAST Policies and Practices:

As part of this exercise, we have observed examples of policies and practices that could risk unlawful Disability discrimination. We list three examples below and overleaf. Whether such risks are more pervasive with EEAST remains unknown at this juncture.

Example #1

An EEAST employee was diagnosed with [REDACTED], lost his driving licence and therefore lost his ability to undertake his operational role. He applied for a number of alternative roles in EEAST and was told holding a driving licence was an essential qualification for some roles or desirable for others - see examples below.

We believe these examples may not be capable of objective justification if challenged legally.

JOB DETAILS			
Job Title	Complex Case Lead	Band	7
Hours of Work	37.5	Base	Bedford/Chelmsford/Norwich EOC
Department	ECAT	Directorate	EOC

KEY COMPONENTS			
		Essential / Desirable	Measured by Application / Interview / Assessment
Qualifications	Registered Nurse or Paramedic with current professional registration with NMC/HCPC.	E	A/Int
	Educated to postgraduate level in relevant subject, or equivalent level of experience of working at a similar level in specialist area.	E	A
	Full driving licence.	E	A
	Evidence of Continuing Professional Development (CPD)		

Post Title: Administrative Assistant		Department: Operations	
FACTORS	ESSENTIAL	DESIRABLE	
1. Educational/Qualifications	<ul style="list-style-type: none"> 3 GCSE's or equivalent must have English and Maths OCR Certificate in Office Practice skills or equivalent 	<ul style="list-style-type: none"> European Computer Driving Licence and/or recognised qualification in relevant Microsoft office packages. Full UK Driving Licence 	
2. Previous Experience	<ul style="list-style-type: none"> 12 months previous experience within an administrative role Previous experience acting as a receptionist / telephonist 	<ul style="list-style-type: none"> Previous NHS experience Experience in a call centre environment 	
3. Skills, Knowledge, Abilities	<ul style="list-style-type: none"> Able to deal with a high volume of work whilst maintaining standards and meeting deadlines. Competent in the use of relevant Microsoft Office packages including proficient use of Word and Excel. Ability to liaise and communicate effectively with staff and managers at all levels in the 	<ul style="list-style-type: none"> Knowledge of Code of Practice and legislation e.g. working time directive, data protection, confidentiality and employment law Knowledge of the ambulance service. 	

5.4 - Risks of Disability Discrimination in E EAST Policies and Practices:

Example #1 – Our Assessment:

We conclude that the circumstances described by the E EAST employee concerned may risk Disability discrimination. The fact that the employee requested the job specifications be changed and was initially refused by an E EAST manager compound this situation further. A recent employment tribunal decision (shown below and by pure coincidence, also from HMRC) highlights the risks that exist in this area.

Some E EAST policies and practices risk unlawful Disability discrimination

An HMRC employee has successfully claimed disability discrimination, indirect discrimination and failure to provide reasonable adjustments, a Scottish tribunal has found. The Edinburgh Employment Tribunal heard that Mr Hamish Drummond, who experienced fainting episodes, had been automatically rejected from a job after mentioning in his application that he could not drive.

Drummond, who worked for HMRC since October 2002 and continues to do so, experiences fainting episodes, and since 2018 had been under a no-driving order from the DVLA.

The tribunal found that no assessment had been undertaken to determine exactly how many caseworkers had driving licences, despite the fact that this information was readily available in employees' annual written declarations. It also found that there was no discussion of how the requirement would impact people with protected characteristics.

[Source: Disability discrimination: HMRC employee wins claim after job rejection \(personneltoday.com\)](#)

5.4 - Risks of Disability Discrimination in EEAST Policies and Practices:

Example # 2

An EEAST employee who was placed on redeployment (on the grounds of a Disability) was seeking an alternative position in EEAST. He applied for a job for which he met the person specification and was told this job was unfortunately one grade higher than his existing role. Under current EEAST rules (standard operating procedure SOP19) an employee on redeployment can only apply for an alternative role which is the same grade as their existing position or lower.

Some EEAST policies and practices risk unlawful Disability discrimination

Our Assessment of Example # 2

Under the current rules, Person A who has a Disability and is placed on redeployment cannot apply for promotion. Person B who does not have a Disability and is not placed on Redeployment can apply for a promotion.

In our assessment, Person A is treated less favourably than person B in respect of circumstances arising from a Disability which is unlawful.

5.4 - Risks of Disability Discrimination in EEAST Policies and Practices:

Example # 3

An EEAST employee who could no longer continue in an operational role due to [REDACTED], met with his line manager and Human Resources on a number of occasions to discuss his future. At each meeting, early retirement due to ill health was suggested by his manager - despite the employee stating at a very early stage, that this was not an option he would accept and going on to request this option should not to be suggested by him in the future. The employee was also told by his manager that [REDACTED] is an illness and not a Disability.

Some EEAST policies and practices risk unlawful Disability discrimination

Our Assessment of Example # 3

Once again, this example highlights the potential risks of discrimination. We conclude that on balance, retirement due to ill health would not be offered to a younger worker and was being repeatedly suggested in order to persuade the employee to retire early for reasons arising from both Disability and Age.

“It is direct age discrimination to require or persuade a worker to retire because of their age unless you can objectively justify doing so” (Source The Equality and Human Rights Commission)

5.0 Report Conclusions:

5.5 - Knowledge and Skills of EEAST managers in this area:

Do EEAST managers have the necessary knowledge, skills and confidence to effectively manage disability issues in their teams and promote equality of opportunity ?

Some EEAST managers are poorly trained in respect of Disability and Neurodiversity

The survey explored employee perceptions of this by asking respondents to rate the statement:

“I believe my manager has sufficient understanding / knowledge about how my Disability affects me to allow day to day workplace approaches and expectations to be adjusted accordingly.”

Participants **returned a 42% disagreement rate (98 people) - the second worst ranking** survey question.

We also confirm that considerable negative references were made during the consultation events about some EEAST managers in respect of their understanding of Disability and their reluctance or inability to take appropriate action. We conclude this situation may well exist and for the following reasons:

- 1: **Poor levels of technical knowledge skills and confidence** in this area from some EEAST managers.
- 2: **A lack of clear training, guidance and procedures** for managers - especially in respect of what is, and is not, a reasonable adjustment.
- 3: **Clarity relating to funding, sourcing and application** of reasonable adjustments.

(continues overleaf)

5.0 Report Conclusions:

5.5 - Knowledge and Skills of EEAST managers in this area:

4: A culture (in some parts of EEAST) where difference is not always understood and accommodated.

Some EEAST managers are poorly trained in respect of Disability and Neurodiversity

The survey question *“I believe EEAST is a modern and inclusive organisation which understands and accommodates people’s differences and requirements relating to their Disability”* returned a 37% disagreement rate – some 86 people.

The comment on page 34 of this report *“I have often heard ‘we are all on the spectrum’ from senior members of clinical staff & management...”* (if true) is somewhat telling and represents a poor example of role modelling from senior staff.

Summary:

It is clear to us that a minority of EEAST employees have experienced very unsupportive behaviour from their direct line manager in the Trust when they have either declared a Disability or required workplace adjustments (or both). We have been privy to some supporting documentary evidence (e.g. records of email exchanges) to support this claim.

Quite why this minority of managers have been able to operate in such an arbitrary (in some cases discriminatory) way, is, we believe, indicative of both an absence of knowledge, skills and confidence and a lack of a robust, central and supervised approach to managing workplace disability. (Please see the next section of this report.)

We also conclude that current adverse perceptions of some EEAST managers is likely to be responsible for the results of one of the lowest performing survey statements *‘Perceptions of Equality of Opportunity’*.

5.0 Report Conclusions:


5.6 - Inconsistency of local practice:

We are aware that EEAST has its own Disability policy, Human Resources department and staff support networks which all presumably share the common aim of promoting a structured, consistent and supportive approach within EEAST.

We report that the a large majority of employees consulted with as part of this exercise reported the opposite in practice e.g. a perceived significant inconsistency of approach.

Perceptions of this apparent inconsistency could be summarised as:

- 1: If you have a compassionate and people focussed line manager, workplace adjustments are much more likely to be realised.
- 2: If you have a purely task and operationally focused manager, the opposite is more likely.
- 3: Access to funding for Disability adjustments (internally or by external grants) is unclear. Example: Some managers appeared to have declined reasonable adjustments for items under £100 on the grounds of cost.
- 4: There is not a central point of contact (with decision making authority) within EEAST to approve minor adjustments and provide authoritative guidance to EEAST employees and managers.
- 5: Accessibility issues are reported in some EEAST premises which should be identified and documented via formal accessibility audits with details of why adjustments have, or have not, been implemented.
- 6: There is no comprehensive training programme (not tick box e-learning modules) provided for EEAST managers in respect of workplace Disability and Neurodiversity. Knowledge and skills amongst this population is therefore inevitably inconsistent.



There is
Inconsistent
local practice
within
different parts
of EEAST

6.0 Recommendations:



By way of an introduction to development planning, the following actions are suggested:

- 1: Commission, design and deliver a bespoke one day Disability and Neurodiversity training event for all EEAST managers / supervisors.** This should at the very least, aim to explore and communicate the issues highlighted within this report.
- 2: Undertake formal Disability accessibility audits within all EEAST premises.** These should detail:
 - (i) Where adjustments have been made, (ii) Where adjustments are planned (iii) Where adjustments will not be implemented for reasons that can be objectively justified.
- 3: Revise and relaunch the existing *Disability and Adjustments* policy** to ensure it is reflective of the very latest thinking and ideas in this area and that it is used and 'lived' by EEAST managers. There is evidence to suggest this is currently not the case. The current document is somewhat 'heavy' and not 'easy read'.
- 4: Undertake comprehensive Equality Impact Assessments on all key EEAST policies relating to Disability with the aim of identifying if further indirect or unintentional discrimination exists.**
- 5: Amend the existing EEAST SOP19 procedure** to remove the risks of discrimination identified on page 50 of this report.
- 6: Design and implement a set of 'central' EEAST rules in respect of workplace Disability decision making** which disempowers local decision making and encourages a consistent approach across the Trust.



6.0 Recommendations:

By way of an introduction to development planning, the following actions are suggested (continued):

7: Appoint a central point of contact within EEAST to advise on workplace adjustments, funding, support during sickness absence, support during redeployment etc. (Employee accounts of how they were managed when placed on redeployment was an issue identified during this exercise.)

We are not suggesting the Trust creates a new role, but perhaps gives this authority to a senior person within EEAST who is an authorised decision maker.

8: We consider further work is required with EEAST managers generally in both promoting an inclusive culture and demonstrating modern, inclusive leadership. Whilst hard to capture exactly on paper, many accounts from the participants of this exercise, strongly alluded to somewhat unfriendly, autocratic and old fashioned leadership styles – especially from some first level and middle managers within EEAST who we are told, are often appointed with a minimum of formal management training.

Whilst we of course, acknowledge that these are unprecedented times in the NHS in respect of workplace demands, we also believe there is a risk that a minority of EEAST managers may be demonstrating inappropriate leadership behaviours and may require help in understanding how workplace expectations and leadership styles has evolved to be what they are in 2023.

Appendix A: Definitions of Disability:

The main definition of disability:

Unless their condition or impairment is automatically classed as a disability or they have a progressive condition, the Equality Act 2010 says someone is considered to have a disability if both of these apply:

- They have a 'physical or mental impairment'
- The impairment 'has a substantial and long-term adverse effect on their ability to carry out normal day-to-day activities'

Source and Further Signposts:

www.acas.org.uk/what-disability-means-by-law#:~:text=The%20main%20definition%20of%20disability%20Unless%20their%20condition,apply%3A%20they%20have%20a%20%27physical%20or%20mental%20impairment%27

