



KENTGARDEN of ENGLAND

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Disability At Work

This work book provides information, practical advice, and tools to help you support people with disabilities within your workforce.





Contents

- 1. What is disability?
- 2. Types of disability
- 3. Discrimination & disability
- 4. Making reasonable adjustments
- 5. Tips on language
- 6. Accessibility audits
- 7. Additional resources
- 8. Action plan template



What is disability?

Definition in the Equality Act 2010

In the Equality Act, disability is legally defined as follows:

"A person has a disability [if they have] a physical or mental impairment and the impairment has a substantial and long-term adverse effect on [their] ability to carry out normal day-to-day activities."

For example, somebody who needs to use a wheelchair due to a spinal injury would fit this legal definition, because their condition is likely to:

- Have a significant impact on their daily behaviour
- Last for more than 12 months, and possibly for the rest of their life
- Affect how they conduct their usual tasks and actions, such as movement, accessing buildings, and travelling

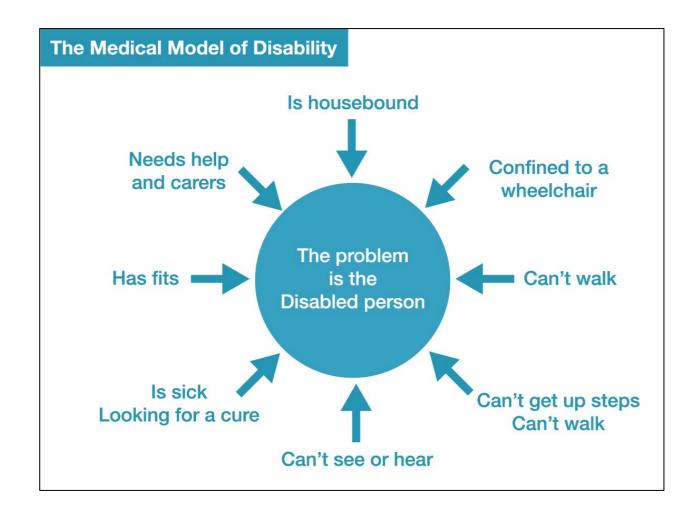
Conditions which develop over time (such as Parkinson's disease) or which can fluctuate in severity (such as chronic pain conditions) are also included. A person having a "good" day with their condition still qualifies as disabled.

The medical model*

This is a term for describing how mainstream society often approaches disability (including doctors and other clinical staff).

The medical model sees a person's condition or disability as a problem, and focuses on changing the person or their specific circumstances. In this model, the individual and what is perceived as being "wrong" with them is seen as the issue.

This can be a harmful way of looking at disability, because it defines people by what they can't do, rather than thinking about how society and culture could change. It often frames disabilities and differences as inherently negative, even if the condition does not necessarily cause pain or illness, and assumes that every person with a disability is looking for a "cure".



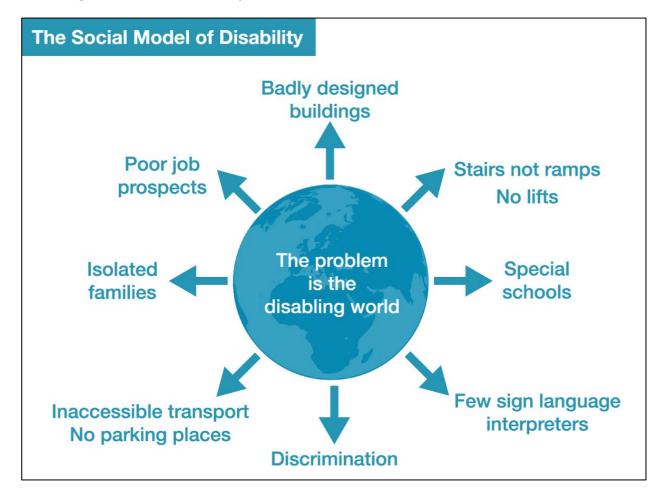
The social model*

The social model of disability frames the problem around society and cultural expectations. With this model, the barriers that can prevent people with disabilities from taking part in society are the problem - not the fact that people have different abilities, mobility, thought processes,

This model also addresses the existence of **ableism**. This is a word that covers the various stereotypes and prejudices against people with disabilities, social exclusion, and other systemic barriers.

One way that people think of the social model is that it frames **society as disabling**, rather than there being anything inherently wrong with a person who has a disability.

For example, if a person in a wheelchair tries to enter a building but is prevented from doing so because there are steps, the social model would say that the issue is that the absence of a ramp prevented them from entering – not their inability to walk.



^{*}Source for diagrams: https://www.inclusionlondon.org.uk/about-us/disability-inlondon/social-model/the-social-model-of-disability-and-the-cultural-model-of-deafness/



Types of disability

Below is a list of different kinds of disability. Keep in mind that there can be substantial overlap between the categories and that people can have more than one condition.

Sometimes this overlap can be connected (e.g. a person with a physical condition like cancer may have issues with their mental health following their diagnosis) and sometimes it might not be (e.g. an autistic person may have a back injury, which of course would not be connected to their autism).

D/deaf and hard of hearing

In general, there are three types of hearing loss.

Sensorineural: damage to the inner ear or the auditory nerve, which means that the delivery of sound to the brain is interrupted. This can be caused by ageing, genetic hearing loss, side effects from medications, various infections (e.g. meningitis), and so on.

Conductive: damage or obstruction to the outer and middle ear that prevents sound from reaching the inner ear. This can be caused by damaged inner ear bones, infections, ruptured eardrums, and so on.

Mixed: a combination of the above two types, often caused by head trauma (but not always). For example, a person might have an ear infection and also have age-related hearing loss.

Neurodivergence and mental health

Neurodiversity is a word we use to describe the wide variety of ways that humans think and process information. **Neurotypical** is a word we use for people that think in a way that is seen as "normal" in their culture. **Neurodivergent** is a word we use for people who think or process information differently.

Examples of neurodivergence include autism, ADHD, dyslexia, dyspraxia, cognitive difficulties, and so on. There is no one way to be neurodivergent, as symptoms can vary widely and affect people in different ways and at different levels of severity. That is why neurodivergence is generally considered to be a spectrum.

People with mental health issues may also be considered neurodivergent - for example, people with obsessive-compulsive disorder, schizophrenia, depression, anxiety disorders, and so on.

It's important to note that there can be significant overlap here, such as people who have both ADHD and autism.

Physical disabilities

These conditions affect bodily functions such as mobility, dexterity, or stamina. They can be caused by physical injuries and illnesses, or by neurological issues. Some examples include:

- Arthritis
- Cerebral palsy
- Chronic fatigue
- Chronic pain
- Epilepsy
- Sickle cell disease
- Stroke
- Traumatic injury (e.g. amputation of a limb)

Speech difficulties

Issues with speech affect the ways that people communicate verbally (though this does not necessarily mean that communication is impossible. It can include conditions such as:

- Dysarthria (slurred speech)
- Dysphonia (difficulty with producing sound)
- Stuttering/stammering
- Throat cancer
- Vocal cord paralysis



Visual difficulties

These conditions affect people's sight. It's important to remember that a person does not have to have complete loss of sight in order to be considered legally blind or severely sight impaired. For example, a person may still be able to recognise and distinguish colours and shapes. Conditions that can cause loss of sight include:

- Age-related macular degeneration (damage to the retina over time)
- Amblyopia ("lazy eye")
- Glaucoma
- Injury
- Various diseases (e.g. eye cancer, diabetes, shingles)

Reflection activity

Think about your workplace. How might some of these conditions affect how easily a person could work with you? How might they affect a potential client or customer?



Discrimination & disability

In this section, we will provide some examples of what discrimination towards people with disabilities might look like in the workplace using some of the definitions provided by the Equality Act 2010.

A common term that is used for discrimination and prejudice towards people with disabilities is "ableism".

It is also useful to know that the Equality Act also applies if somebody has had a disability in the past. For example, if somebody is rejected for a promotion because they have previously been signed off work for illness, this would still qualify even though they are no longer ill.

Direct discrimination (targeted at a person or group)

- A bus driver refuses to lower the ramp to allow somebody on a wheelchair to board the bus. This is discrimination because they are being refused a service simply because they use a wheelchair.
- A colleague applies for an in-house leadership programme, but is turned down because they are autistic and so their manager thinks they "won't be able to handle it".
- A job applicant brings their guide dog to an interview and is denied entry to the building.

Indirect discrimination (not targeted, but still disproportionately affecting a person or group)

- A work social event is arranged at a building that has several steps at the entrance, making it difficult or impossible for people with mobility issues or who use a wheelchair to attend.
- A business only holds appointments in person, though these appointments could easily be delivered over the phone or online.
- A manager creates a new rule that every member of their team is expected to speak in a meeting, but they have a staff member with a severe stammer.

Harassment

- A person with schizophrenia is asked hurtful questions about their condition at work and jokes are made about their mental health.
- A member of staff repeatedly pushes a person's wheelchair around despite requests for them to stop.
- A colleague with Tourette's syndrome has their tics mimicked and made fun of during meetings.

Failing to make a reasonable adjustment for a disabled person

- A shop refuses a request to get a ramp for the steps leading to the building.
- A colleague asks to work from home due to a chronic pain flare-up, but their request is denied, even though they can do their job easily without being in the office.
- A business refuses to allow a job applicant with speech difficulties more time to answer their interview questions.

Making reasonable adjustments





General tips

In general, a person with a disability should not have a substantially different experience to others. However, some accommodations and adjustments may need to be made in order to make sure that this is the case.

This does not constitute "special treatment", as it is being done to ensure that everybody has access to certain opportunities and can expect a fair chance at achieving certain outcomes.

It's important to remember that disabilities, conditions, and illnesses can affect people in different ways, and so there can never be a "one-size-fitsall" policy.

- Ask each person what assistance or additional support they may need. For some conditions, you may want to check-in regularly to see if anything has changed.
- If someone is unsure of what they may need, have some suggestions ready in advance so they know what is possible.
- Try to have a specific person or team to handle accommodations and accessibility.
- Be considerate without being patronising.
- Don't make assumptions about what a person can or can't do based on their disability.



D/deaf and hard of hearing

- Allow the person to sit wherever they will be most comfortable in the office, as they may read lips or prefer to sit opposite the people who are likely to talk to them.
- Speak directly to them, but do not shout. If they are using an assistive listening device, you may actually hurt their ears by shouting.
- If they read lips, speak at a normal rate while facing them, and be sure to keep your hands away from your mouth.
- Do not exaggerate your lip movements, but understand that your facial expressions, gestures and eye contact will all be helpful.
- If they have an interpreter, do not address the interpreter instead of the person (although not everyone who has an interpreter will need them at all times).
- It is commonplace for an interpreter to be seated across from the person.
- If an interpreter is not present and something is not clear, it is okay to write notes back and forth.



Issues with vision

- Always identify yourself and others who may be with you. Describe any new settings (for example, "There is a table in front of you and a seat to your right").
- If offering seating, ask if you can touch the person, and then place their hand on the back or arm of the seat so they know where it is. A verbal cue is helpful as well.
- Use specifics such as "left ten feet" or "right two metres" when directing a person with a visual impairment.
- The person may be unable to read body language, so let them know clearly when you need to move locations or end the conversation.
- Sharp contrasts of light and darkness may have different impacts on a person's vision; ask them what kind of lighting is best for them.
- Offer assistance in filling out forms and documentation. Most people with visual impairments can fill out forms and sign their names if the appropriate spaces are indicated to them.
- Allow guide dogs to accompany the person, but do not distract the dog.



Issues with speech

- Phrase questions so that they can be answered with short responses.
- Give your total attention to the person, and don't be afraid to ask for clarification if necessary.
- Do not complete the person's thoughts for them. Be patient and wait for the entire response.
- Never pretend to understand if you are having difficulty doing so. Repeat what you understand, and the person's reactions will clue you in and guide you towards understanding.
- Speak with a normal tone of voice. Speech impairments do not mean the person cannot hear or understand you.



Issues with mobility

- Double check to be sure that all locations are accessible (including toilets and other facilities). If they are not, be prepared to find an alternate location or offer work-from-home arrangements.
- Be aware that people may need to make very specific transportation arrangements due to accessibility issues.
- When giving directions, consider accessible traveling routes, parking spaces, and potential physical obstacles such as stairs, kerbs, or steep hills.
- Be aware that some wheelchair users may choose to transfer themselves out of their wheelchairs into an office chair - don't assume that they won't need a chair.
- Remember that a wheelchair is part of a person's bodily space. Don't lean against it or move it without permission.
- Allow people using walking sticks or crutches to keep them within easy reach.



Neurodivergence

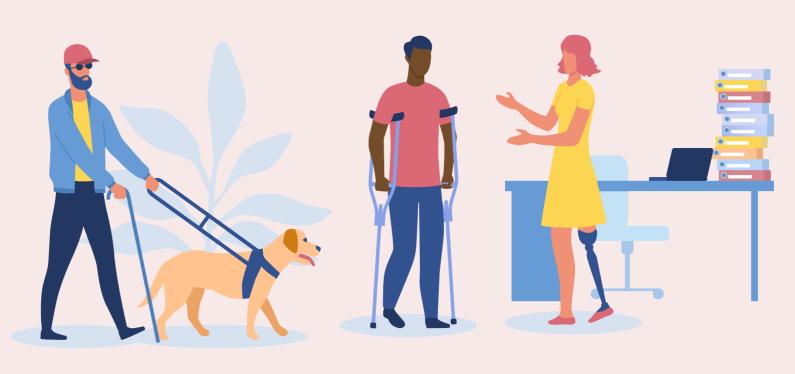
- Rephrase comments or questions for clarity if needed.
- Try not to use words and phrases with multiple meanings, or idiomatic expressions which are not literal.
- Moderate your language so that it is clear, avoiding acronyms and jargon.
- Offer multiple ways of communication (e.g. allow people to email after meetings with their comments, as they may not have been able to contribute on the spot).
- Consider that they may need extra time to complete certain tasks, regular breaks, or sensory aids (e.g. fidget toys, headphones).
- Be flexible and offer help with organisation or time-keeping.
- Designate a quiet space with no distractions to allow better focus or a place to escape sensory overload.

Reflection activity

What kinds of reasonable adjustments can you offer to colleagues or customers?

Tips on language

DO	DON'T
Become aware of the meaning behind particular terms. Improper use leads to hurt feelings, offended individuals, and unintentional disrespect.	Ignore up to date language and dismiss it as unimportant
Describe an individual where appropriate and with reference to their personhood, e.g. "the person with quadriplegia" instead of "the quadriplegic". Referring to an individual solely by their condition is generally not acceptable.	Use terms like "physically challenged", "differently-abled", "handicapped", or "wheelchair-bound".
Understand that words and terms change all the time, and so your language may need to as well.	Stick to the words you're used to even when told to stop.
View a person's disability as part of their experience, but not as their whole identity. It can be important, but they are a whole, complex person.	Use solely negative terms when describing people, such as "victim of", "sufferer", "stricken by", "deformed", "incapacitated", "unfortunate", "invalid", or "afflicted with".
Ask for clarity if you don't understand what a word or phrase means; this is better than pretending	Tell people they are "inspirational" or that you "don't know how they do it"; this is often seen as offensive or condescending
Accept that you may make mistakes. None of us are perfect, and that's okay: most people will accept an apology and a change in behaviour if you get something wrong.	Double-down on insensitive behaviour, judge others (e.g. "you're so sensitive"), or accuse them of over-reacting.



Accessibility audits

An accessibility audit is a review of your organisation to identify how inclusive it is for people with disabilities and how you could improve. The term is often used specifically about digital and online materials, but it can be applied to physical environments as well.

Each audit should be specific to the organisation itself, which means that you will know best what areas might need to be worked on; but you can use the following questions as a starting point.

Facilities & physical environment

- Are there disabled parking spots, and are they close to the entrance?
- Are there ramps, lifts, and/or power-assisted or automatic doors?
- Are there disabled toilets, and are they in a suitable condition?
- Are there emergency procedures in place for people with disabilities, e.g. alarms that use light as well as sound, evacuation chairs?
- Are lighting levels easily changed?
- Are there quiet spaces available?
- Is there a policy on welcoming service animals?
- Is the layout suitable for wheelchairs and scooters?
- Is ergonomic equipment available?

IT & Digital

- Are the IT team aware of the importance of digital accessibility?
- Is inclusive web design prioritised?
- Are your internal and external digital materials available in multiple formats?
- Do you have assistive software available (e.g. screen readers)?
- Is there a clear internal process for staff to request accessible software, and are staff aware of what it is?

Recruitment & HR

- Are job descriptions provided in accessible formats?
- Are your orientation and induction programmes accessible and flexible?
- Do you provide training on inclusive and accessible recruitment?
- Is information available on the accessibility of the workplace and on requesting reasonable adjustments?
- Is there a clear, simple process for requesting reasonable adjustments or assistive workplace equipment?
- Is there a training programme in place around disability and accessibility?
- Is there an affinity group or forum available for people with disabilities?

Strategy & leadership

- Do you have a written strategy on your commitment to inclusion and accessibility?
- Do you have regular check-ins or accountability sessions to develop this strategy?
- Do your mission statement and values include a commitment to diversity and inclusion?

Additional resources

Disability Confident

The Disability Confident scheme is a voluntary programme supported by the government. It helps employers to take positive action to encourage, recruit, retain, and promote people with disabilities in their organisations.

Taking part in the scheme means that businesses can benefit from a wider pool of potential candidates, advice on creating a more inclusive workplace (which improves morale and retention), and a PR boost.

Here is a useful checklist that you can use when applying for Disability Confident status. Have you...

- Assigned high-level sponsors to hold all departments (particularly IT, Recruitment, and Facilities) accountable for accessibility and inclusion?
- Appointed an accessibility lead to provide a direct contact for enquiries?
- o Arranged regular reviews of accessibility and disability inclusion at your organisation to identify further actions and improvements?
- Considered and implemented a Business Disability Network?
- o Considered offering a Guaranteed Interview Programme to applicants with disabilities who meet the criteria?
- Communicated your intentions and strategy to all staff?
- o Communicated your intentions and strategy to the public (including potential job applicants)?
- o Identified and engaged with people with disabilities to learn from them and do user testing?
- Identified positive action projects or schemes (e.g. internships)?
- o Provided comprehensive inclusive recruitment training for hiring managers?
- Provided general disability awareness training, including around reasonable adjustments and "adjustment agreement" documents?
- o Provided all relevant information (for staff, job applicants, and the public) in a range of accessible formats?
- Reviewed all relevant policies, including job descriptions and person specifications, to ensure they are up to date, inclusive, and fully relevant?

More information on the Disability Confident employer scheme can be found here: tourismtalent.co.uk/disability-confident-scheme

Access to Work

This scheme offers financial grants to those with disabilities (including hidden disabilities, like neurodivergence or mental health conditions). It covers a number of practical ways to help people start/stay in work, become self-employed, or start their own business.

There is no set amount available, as each person is different and will have different needs (though there is a cap each year).

The eligibility criteria are that:

- The claimant must be over 16
- The claimant must be about to start a job, work trial, or selfemployment; or already working
- The employer must be based in England, Scotland, or Wales
- The health condition must affect the claimant's ability to do the job or incur additional work-related costs

The claimant needs to disclose their disability in order to apply for Access to Work, so it's important for you as an employer to facilitate that and create an environment where people feel comfortable coming forward about their needs.

When they apply, they will need to provide evidence (such as a letter from a doctor) and go through a workplace needs assessment to identify potential barriers and challenges. The employer will then need to arrange for these recommendations to be addressed.

Access to Work might pay for things like:

- An interpreter or communicator for a job interview
- Assistive equipment
- Disability awareness training for staff
- Travel costs (if public transport is inaccessible) or payments towards adapting a private vehicle

You can find out more here: https://www.gov.uk/access-to-work

Health Adjustment Passports

This document is also known as a "reasonable adjustments passport", "health ability passport", or "workplace adjustments passport". It exists to provide a record of the needs and reasonable adjustments of a particular employee.

Having one of these passports can make it easier for new managers (or even new employers) to understand the needs of their staff and continue to support them. They can also be used to support an application for Access to Work.

You can adapt an existing template or create your own. The most important thing is that it is recognised and respected across your organisation; but other features might include:

- Review dates to assess how things are going and if the adjustments should be changed
- Informal conversations or check-ins
- A signed agreement to ensure that existing adjustments can't be
- Any recommendations from doctors or occupational health
- Circumstances to be avoided for the person's health

You can find out more here:

https://www.gov.uk/government/publications/health-adjustmentpassport

Sector-based Work Academy Programme (SWAP)

These programmes are available to anyone who is over 16, claiming benefits, and looking for work. This includes people who want to change careers, or who are over 50 and returning to work. It is currently fully funded by the government.

As an employer, you can work with Jobcentre Plus and a training partner to offer a placement of up to 6 weeks for people who are interested in working in your sector.

This will help you to recruit people more easily, improve your reputation as a business, and offer development opportunities for existing employees (i.e. by improving their mentoring or coaching skills)

These placements need to include:

- Pre-employment training, which you can deliver yourself or in partnership with a college or other training provider;
- Work experience, to provide a realistic idea of the role and/or sector
- A guaranteed job interview or assistance with your recruitment process

You can find out more here:

https://www.gov.uk/government/publications/sector-based-workacademies-employer-quide/sector-based-work-academies-employer-quide

Useful links

AbilityNet factsheets: https://abilitynet.org.uk/free-tech- support-and-info/AbilityNet-factsheets

Business Disability Forum: https://businessdisabilityforum.org.uk/

Details on disability as defined in the Equality Act 2010: https://www.gov.uk/government/publications/equality-actquidance/disability-equality-act-2010-quidance-on-matters-tobe-taken-into-account-in-determining-questions-relating-tothe-definition-of-disability-html

Guidance for online accessibility via the Web Accessibility Initiative: https://www.w3.org/WAI/fundamentals/

Guidance from ACAS: https://www.acas.org.uk/disability-at- work

The A11y Project checklist for web accessibility: https://www.a11yproject.com/checklist/

UK Hospitality EDI group:

https://www.ukhospitality.org.uk/work/eguity-diversity-andinclusion-edi-group/

Visit Britain toolkit: https://www.visitbritain.org/businessadvice/make-your-business-accessible-andinclusive/visitengland-accessible-and-inclusive-1

WAVE browser extensions to check accessibility for specific websites: https://wave.webaim.org/extension/



Action Plan template

You can use this template to decide on the most important next steps for vour business' inclusion journey.

,
What barriers to inclusion currently exist within your business?
1.
2.
3.
Have you sought feedback from your staff on this topic? Yes No
If not, when and how will you do this?
With their feedback in mind alongside your own ideas, what are your top three priorities?
1.
2.
3.



What do these priorities look like as SMART goals?

A SMART goal is:

- Specific (define what you want and who is responsible)
- Measurable (define how you will know when the goal is achieved)
- Achievable (realistic for your business and your capacity)
- Relevant (in line with your overall business strategy)
- Time-bound (has a deadline for completion)

SMART Goal 1:
What smaller tasks and activities need to be completed to achieve this?
What resources are needed to achieve this?
What are the potential challenges or obstacles?
Who will be responsible for achieving this?
How often will you check in and review progress?

SMART Goal 2:
What smaller tasks and activities need to be completed to achieve this?
What resources are needed to achieve this?
What are the potential challenges or obstacles?
Who will be responsible for achieving this?
How often will you check in and review progress?
SMART Goal 3:
What smaller tasks and activities need to be completed to achieve this?

What resources are needed to achieve this?	
What are the potential challenges or obstacles?	
Who will be responsible for achieving this?	
How often will you check in and review progress?	
Signed:	
Date:	