

## **Disability Action Committee**

Tuesday 6 December

14:00 – 15:30

Hybrid meeting

### **Minutes**

Present:

Kani Kamara	Head of the Equality, Diversity and Inclusion Centre – Co-Chair (KK)
Susan Littleson (SL)	Deputy Director Organisational Development & Inclusion – Co-Chair
Hannah Bannister	Director of Student Services (HB)
Chris Banks	Director of Library Services (CB)
Jasmine Chan	ICU Disabilities Officer (JC)
Lorraine Craig	Associate Dean (Learning and Teaching), Engineering (LC)
Stephen Curry	Assistant Provost (Equality, Diversity & Inclusion) (SC)
William Hollyer	Head of Sport, Sport and Leisure Services (WH)
Richard Johnson	Faculty Operating Officer, Business School (RJ)
Bouquette Kabatepe	Digital Accessibility Officer, ICT (BK)
Angela Kehoe	Strategic HR Partner (FoNS) (AK)
Hanna Magdziarek	Student Wellbeing Advisor Maternity Cover, Business School (HM)
Dez Mendoza	Co-Chair of Able@Imperial (DM)
Jonathan Mestel	Senior Consul (JM)
Kalpna Mistry	Staff Network Coordinator (KM)
Elizabeth Nixon	Internal Communications Manager (EN)
Maureen O'Brien	Head of the Disability Advisory Service (MOB)
Lisa Phillips	Co-Chair of Able@Imperial (LP)
Nathalie Podder	ICU Deputy President (Welfare) (NP)
Graeme Rae	Faculty Operating Officer, Natural Sciences (GR)
Nick Roalfe	Director of Estates Operations (NR)
Cynthia So	Secretary to DAC (CS)
Maggie Taylor	Assistant Buildings Manager (MT)
Chris Watkins	Faculty Operating Officer, Medicine (CW)

Also present:

Chris Allan	Senior Occupational Health Adviser (CA)
Michele Barritt	Product Owner, ICT (MB)
Rob Bell	Athena SWAN Coordinator (RB)
Lizzy Hand	Head of Building Operations, Estates (LH)

Agenda Item

### **1.0 Welcome and apologies**

1.1 SL and KK welcomed the Committee to the meeting.

1.2 Apologies were received from: Mark Allen, David Ashton, Harbhajan Brar, Daniela Bultoc, Benita Cox, Ana Faro, Adrian Mannall, Claire O'Brien, Roddy Slorach, and Tim Venables.

## 2.0 Minutes of the last meeting 15 June 2022

2.1 The minutes of the last meeting were deemed to be an accurate record of events.

## 3.0 Action tracker

3.1 The action tracker was considered. The following points were noted:

- Even though the Committee was using the action plan, there was still room for improvement including identifying which actions are business as usual (BAU) and which are projects, and defining a timeline for each action. The 2022 plan would be ending soon but members should bear this in mind for next year. If members want any changes in relation to the above, please contact CS.

**Action: All**

- 5 March 2020, minute 3.4 – Mental Health at Work Commitment: SL said that this would be picked up in the institutional Mental Health Strategy that was currently being written.

## 4.0 Action plan 2022-23

4.1 The action plan was considered. The following points were made:

- i. CS had gone through the 22/23 action plan and streamlined it into an Excel version, which people could refer to if they preferred.
- ii. There was a discussion about there still being a lot of actions on the plan, and that the secretary had tried to assign priority on the streamlined plan. Also that there were still some things on the plan that were suggested by Libraries but would benefit from being adopted across the College. As an example, CB said that item 3.13 on the action plan (about accessibility guidelines for teaching content) was not a Library action but a College action. There was another action which impacted on the Library's ability to deliver, but the source of the problem lay somewhere else, and the Library did not have any power to change that. SL said that there were definitely actions which had been suggested by local areas but would be helpful if they were adopted by the wider College.
- iii. NP said that she would be keen to get some ICU involvement in assessing the accessibility of physical spaces. A lot of the ICU facilities were quite inaccessible and she would want to have some conversations about that. NR said that she should speak to Martin Benson, the appropriate Buildings Manager.

## 5.0 Staff Survey results breakdown

5.1 RB presented on the Staff Survey 2022 results in relation to disability. Overall there was a big response rate in the Staff Survey of those selecting a disability or mental health condition of some kind. This was much higher than the rate on ICIS. Nearly 17% of people who responded on the Staff Survey selected an option for disability or health condition. This fed into conversations on the action plan about encouraging people to declare their disability. There was a "Prefer not to say" category—these people could have a disability or they might not. Generally, the "Prefer not to say" category across different protected characteristics were less satisfied than the

College average result. This might be because if people were saying negative things in their response, they would be more worried about being identified.

5.2 Continuing, RB said that disability had the clearest trend across all the protected characteristics. People who had a disability were less satisfied overall than the average. For ethnicity it was a much more mixed picture, and for sexual orientation it depended on the specific group.

5.3 A suggestion was made that it might be good to try and identify where the biggest gaps were between those who had a disability and those who did not, to focus where the College should put their most immediate attention.

5.4 A suggestion was made that it could be useful to drill down into different types of disability to figure out where action could be taken. RB said that although people were able to select different options when filling out the survey, People Insight had grouped these together so RB did not have access to the full detail. He could go back to People Insight and ask, although this might not be possible at this point.

**Action: Rob Bell**

5.5 A question was asked about the free text questions on the Staff Survey. RB said that there were two free text questions and he could look at them, but he had not done that so far with any of the EDI data as he had been asked to focus on the standard questions first. The comments in the free text questions might not have anything to do with the individual's disability but about other things, but this was an avenue to look at.

**Action: Rob Bell**

5.6 KK said that there was also an opportunity to discuss with Suzanne Christopher about conducting additional pulse surveys to drill deeper into what might be driving some of those results. SL said that one could identify a target population to run the pulse survey with, but this would miss out people who had not declared a disability on ICIS. It was also a possibility to run focus groups to unpick some of the priority areas.

5.7 A point was made that there had been feedback from members of Able@Imperial that they had not declared their disabilities as they had not seen those disabilities represented on ICIS. There was not enough nuance in those profiles for them to select something that fit their experiences. There was also the fact that some of them did not feel safe to disclose. Additionally, with neurodivergent conditions, it could be very difficult to get an official diagnosis, and whilst self-diagnosis was valid, these staff members might wonder if they could declare without having an official diagnosis.

5.8 Summing up, SL said that the next steps were to get a better understanding of where the biggest gaps were, to see if People Insight could provide more detail around different disabilities, to look at free text comments, and to consider how we might use pulse surveys and focus groups.

## **6.0 Encouraging staff and students to declare their disability**

6.1 MB said that there were a lot of positive changes, proposed by HESA, that were coming around the declaration of disability on ICIS next year. For example, staff would be able to select multiple values for the first time instead of having to choose a single item from the list of disabilities. Once the development was complete on

ICIS, then these changes could be communicated out to all staff to encourage them to declare.

- 6.2 KK said that there had been an action to run a declaration campaign during Disability History Month, but due to these upcoming changes, she supported MB's recommendation to wait until the new year before running the campaign.
- 6.3 A suggestion was made that if the campaign was going to be paused for now, perhaps it might be worth trying to understand the barriers to people not declaring and therefore providing clarity and support to help them feel confident to make that declaration. SL responded that this was the original intention when this item was first put on the agenda, to hear from HR Partners what worked for encouraging people to declare and where they understood any barriers. AK said that the declaration rate for central College was higher than the faculties. This was down to senior staff being disability champions and visible and active, and attending EDIC and Able events with managers and having that dialogue with them. Whereas in the faculties, one of the barriers that came up was that people felt that declaring a disability would go against them. There should be a communication plan or project to break down those barriers and give them the confidence to declare and help them understand what was done with the data. Some faculties including Natural Sciences and Medicine had invited Able co-chairs to come and talk to the faculty to spread the word.
- 6.4 A suggestion was made to consider whether there was a significant number of staff who had not declared but did not have ready access to computers. For the Race Equality Charter survey, paper copies were printed out and distributed to enable staff who did not have access to computers to fill it out. Another suggestion was made to create an impactful communications campaign fronted by videos by the new President, and having senior staff say that they had declared their disability on the system and the positive outcomes of that. SC was happy to volunteer to participate in such an effort.
- 6.5 RB said that specifically around disability, overall there were 8% who had not responded to that question on ICIS. 84% of people had selected "No known disability". As HESA was looking to change other categories and values for EDI characteristics, RB said that it would be useful to think about the campaign more broadly and ask people to update their personal characteristics more generally, not just around disability. It might be useful to think about why people respond to some things and not others, and have specific communications for different characteristics under an overarching banner.
- 6.6 EN said that anyone who had any feedback on the webpage that currently explained how the College used the data should get in touch to let her know if there were common concerns not being addressed. What would make a campaign like this more impactful and easier to run would be if there were some concrete examples of actions taken because of the data, and what the College would want to do with more accurate data. EN had also published an Imperial Stories piece for Disability History Month, which would be rolled out across channels over the coming days.
- 7.0 170 Queen's Gate accessibility**
- 7.1 NR said that both 170 Queen's Gate and 58 Prince's Gate were problematic in terms of physical accessibility. Over NR's time at the College, he had looked continually at 170 and 58 to see what could be done to enable access through the ground floor and upper floors and the buildings as a whole. 170 Queen's Gate was Grade II listed, and they would require permission from English Heritage to carry out any alterations. Whenever they had looked at this issue, it seemed as though attempting to solve one problem would create another problem, and they also had to

consider the means of fire escape from the buildings. They did put in handrails at 170 as a number of people said that would help. Every three to four years, they conducted a review of 170 and 58 to see if there was any new technology out there within an acceptable budget that would help them to do something differently. NR would circulate the detailed notes to the Committee.

**Action: Nick Roalfe/Secretary**

## **8.0 Workplace adjustments process**

8.1 KK said that workplace adjustments had often come up as an issue the past few months for line managers. As soon as the work location framework was published, there was an uptick of individuals coming to the EDI Centre, wanting to discuss disabilities and how to have conversations with managers and supervisors around working remotely, in terms of doing less than 20% on site. Within the current workplace adjustments process, there was an area where if an individual or their manager did not reach an accommodation or an agreement, the decision-making was left to quite a local level, with the assistance of HR. The EDI Centre had been discussing this with HR colleagues and thought it might be more effective if this was pushed into the flexible working process, because it would mean that the member of staff would then have the option to formally appeal if they felt their request had not been scrutinised in as much detail as needed. The plan was to start discussing with individuals in the new year about which would be the most practical route in terms of making sure that staff continue to be supported but managers also continue to feel supported in the decisions they make.

8.2 Summing up, KK said that if anyone within this Committee had any issues when it came to individuals requesting adjustments around disability, especially in relation to remote working, they should discuss with KK.

## **9.0 Updates and issues from Able, ICU, EDIC, DAS, and Student Services**

9.1 SC asked a question about the dyslexia and neurodivergence screenings provided by the EDI Centre and whether those screenings provide an official diagnosis. The answer was that the screenings did not provide an official diagnosis but indicated the likelihood of an individual having neurodivergent traits. Staff members could still access work needs assessments and workplace adjustments without an official diagnosis.

9.2 HB said that a steering group was meeting monthly to work on a College mental health strategy. The aim was to get a frame for the overall strategy by January but with development of meaningful outcomes for April. SL said that one of the issues raised in the latest Mental Health and Wellbeing Strategy Group was making sure that this strategy could be developed collaboratively, using the expertise and experience across the College, and that it should not be written in isolation. It would be useful to circulate a draft once ready and gain views from this Committee and to approach Able for comments.

## **10.0 AOB**

10.1 No other business was raised.