

EQIA Working from home – Understanding Different Needs

- | | | |
|------------------------|--|----------------------------|
| 1. Age | 2. Disability (includes mental health) | 3. Gender |
| 4. Gender reassignment | 5. Marriage and civil partnership | 6. Pregnancy and maternity |
| 7. Race | 8. Religion or belief | 9. Sexual orientation |

Table 1: Mitigating Measures in Place

Potential issue	Mitigation / support	Groups impacted
<p>Juggling increased caring responsibilities, childcare and / or home schooling with working from home</p> <ul style="list-style-type: none"> ▪ Reduced hours / interrupted time can impact on timescales to complete work; ability to focus on complex issues ▪ Staff may feel exhausted, that neither is being done well, frustrations building and losing the difference between home and work. ▪ Safety measures for carers 	<ul style="list-style-type: none"> ▪ TPT policy and flexible working patterns ▪ Special time code established for those unable to work their normal hours with message from Management Team that caring for children, dependents and oneself is of prime importance ▪ HR are collaborating with the Carers’ Group to look for ways to support those giving care to adult dependents. ▪ Yammer groups for Carers, Home schooling, How Are You Doing? ▪ Line managers keeping in touch more regularly to ensure colleagues feel supported ▪ No longer needing to commute can be beneficial for some. ▪ Audit Scotland has actively participated in the postponement of reporting deadlines across the sectors, e.g. NHS audit deadlines postponed three months, LG audit deadlines postponed two months, and revised expected productivity levels thus ensuring a more realistic match between the resource we have within an extended time period to do the audits ▪ PABV have de-prioritised the work programme of performance audits – this releases staff to help with financial audits ▪ The audit appointments have been extended by one year so that there is postponement of Year 1 which can be a more resource intense audit year ▪ The residual 7 BVARs will be spread over two years, thus reducing workload 	<p>Research points to women having more caring responsibilities – we know both men and women across Audit Scotland have these responsibilities and so both genders impacted.</p>

Potential issue	Mitigation / support	Groups impacted
<p>Lacking the correct equipment to work safely and effectively from home</p> <ul style="list-style-type: none"> ▪ Home workstations not complying with Occupational Health Standards ▪ Home equipment not meeting specific health needs e.g. special adaptations ▪ Lacking full IT kit ▪ Bandwidth problems (geographical / number of people at home) ▪ Inability to afford new / ongoing items / increased energy bills 	<ul style="list-style-type: none"> ▪ All colleagues asked to consider their needs for their home workstations and submit request forms for items needed. DSG have dispatched home and office equipment to those that need them at Audit Scotland's expense ▪ BSS have arranged for desks and office chairs to be delivered to those that need them and offered external printing services for bulk documents at Audit Scotland's expense. ▪ HR have reached out to colleagues who have declared a disability on Cascade and offered to assist with any adjustment to workstations at home. ▪ For some of those with disabilities, home working allows people to work and remain in contact with colleagues without the difficulties of ability to travel and need for adaptations in the work environment. 	<p>All – all staff need the correct equipment for their needs to meet occupational health standards.</p> <p>May particularly impact on</p> <ul style="list-style-type: none"> ▪ Disabilities ▪ Socio-demographic ▪ Rurality
<p>Using new technology and working with colleagues in new and different ways can bring concerns around:</p> <ul style="list-style-type: none"> ▪ Difficulties understanding how to use new technology ▪ Discomfort using technology (e.g. visual participation in meetings, increased screen time, lacking a quiet space to work) ▪ Effectively communicating with colleagues particularly with new teams or on new pieces of work ▪ Continuing professional development and training given the loss of face to face direction, support and 'on the job' training ▪ Returning to work / new colleagues starting 	<ul style="list-style-type: none"> • Line managers keeping in touch to ensure colleagues who have issues feel supported • Some teams have changed the format in which they communicate, more informal team catch ups. • PTSG and HR are available for support to all trainees. They have been offered the opportunity to delay examinations if they feel they need to. All trainees also have access to a mentor they can refer to for advice and support. • Our ICAS training policy has been updated temporarily. Any exam failures for exams sat between April and June 2020 will not be counted as an attempt and will be disregarded (in line with ICAS). • For ASG, older staff who may have anxieties about increased dependency on IT and working remotely, DSG have provided extensive ICT hardware and software, a helpdesk that is manned for longer hours to suit ASG working patterns and an approachable demeanour. • DSG have actively sought ICT solutions e.g. for client meetings and providing training and guidance documents where needed. • Line managers remain alert to the additional needs of staff returning from paternity and maternity leave • Line managers keeping in touch with those on maternity leave to offer support • BSS are asking staff for feedback on the services they provide 	<p>All - all staff are being asked to use technology which may be new to them and work with colleagues in different ways.</p> <p>May particularly impact on</p> <ul style="list-style-type: none"> ▪ Older people ▪ Younger people ▪ Pregnancy and maternity ▪ Men and women with caring responsibilities ▪ Disabilities

Potential issue	Mitigation / support	Groups impacted
<p>Concerns over health issues and susceptibility to C-19 – self and others</p> <ul style="list-style-type: none"> ▪ Underlying health conditions and / or being in an ‘at risk’ group for C-19 ▪ Chronic illnesses / recovering from illness ▪ Cancelled or postponed appointments, screenings and surgery ▪ Looking after health at home e.g. getting sufficient exercise / lack of outdoor space ▪ Bereavements ▪ Pregnancy 	<ul style="list-style-type: none"> ▪ Lack of travel and greater ability to vary work patterns can be beneficial ▪ Line managers remain sensitive to the need to carry out a risk assessment when someone advises they are pregnant ▪ The HR & OD team are reminding those affected that our OH provider, Wellness, offer counselling to all employees to support those impacted 	<p>All – all staff may be affected.</p> <p>May particularly impact on</p> <ul style="list-style-type: none"> ▪ Disabilities ▪ Race ▪ Older people ▪ Gender ▪ Gender reassignment ▪ Pregnancy and maternity
<p>Loss of vital support networks. Isolation and increased risk of feelings of loneliness</p> <ul style="list-style-type: none"> ▪ Staff may not be able to access formal community groups and support networks that they rely on ▪ Staff may get less support from family and friends ▪ Less able to observe religious practices ▪ Impact on those shielding / living on their own 	<ul style="list-style-type: none"> ▪ Yammer groups ▪ Remotely keeping in touch with colleagues ▪ Tea-breaks and quizzes have been introduced to maintain bonds with colleagues ▪ Yammer post from Muslim colleague enhanced the understanding of colleagues that Ramadan and Eid may have been experienced differently this year ▪ Disrupted clinical appointments ▪ Having a baby during lockdown will limit the ability of new mothers to access peer/social groups in the normal way, such as mother and baby/toddler groups. Such groups are recognised as being beneficial to new mothers and be supportive of good mental health. ▪ There are individuals on maternity leave with a newborn and other children to care for too, not getting the practical support from grandparents that might normally receive. 	<p>All – all staff may be affected.</p> <p>May particularly impact on</p> <ul style="list-style-type: none"> ▪ Religion or belief ▪ Sexual orientation ▪ Pregnancy and maternity ▪ Gender reassignment ▪ Disability ▪ Older people
<p>Harmful home environment</p> <ul style="list-style-type: none"> ▪ Risks of domestic abuse ▪ Relationships in home environment 	<ul style="list-style-type: none"> ▪ Regular all staff emails from IMT highlight external avenues for support if experiencing domestic abuse ▪ The wider detrimental economic impact of the pandemic, the loss of employment; loss of income due to shielding could create stresses and pressures within the family home and units. ▪ Postponement of weddings 	<p>All – all staff may be affected.</p> <p>May particularly impact on</p> <ul style="list-style-type: none"> ▪ Women ▪ Sexual orientation ▪ Disabilities and mental health ▪ Marriage and civil partnership

Potential issue	Mitigation / support	Groups impacted
<p>Unknown and unmet needs</p> <ul style="list-style-type: none"> ○ Cascade only records staff that register and meet the legal definition of a disability ○ Individuals may not feel comfortable discussing their needs and well-being with their manager or they may not have had sufficient opportunity to discuss changing needs 	<ul style="list-style-type: none"> ▪ Yammer support groups – Carers Group / Stonewall ▪ Pulse Survey 	<p>All – all staff may be affected.</p> <p>May particularly impact on</p> <ul style="list-style-type: none"> ▪ Disability including hidden illnesses
<p>Staff at risk of increased mental health issues</p> <ul style="list-style-type: none"> ▪ For factors outlined in this table 	<ul style="list-style-type: none"> ▪ Mental Health Awareness Week resources ▪ Two half days have been gifted to staff to provide breathing space from current circumstances ▪ Tea-breaks and quizzes have been introduced to maintain bonds with colleagues ▪ Regular all staff emails from IMT highlight external avenues for support if experiencing mental health issues ▪ The sentiments of being flexible, pragmatic and kind are really important at this time. ▪ Wellness counselling sessions available and offered to all employees 	<p>All.</p> <p>Anxieties, stresses associated with the issues in this table can affect all groups of staff.</p>

Table 2: Further Measures to Consider

Potential issue	Further support measures to consider
<p>Juggling increased caring responsibilities, childcare and / or home schooling with working from home</p> <ul style="list-style-type: none"> ▪ Reduced hours / interrupted time can impact on timescales to complete work; ability to focus on complex issues; attend long sessions ▪ Staff may feel exhausted, that neither is being done well, frustrations building and losing the difference between home and work. ▪ Safety measures for carers 	<ul style="list-style-type: none"> ▪ <u>Resourcing:</u> <ul style="list-style-type: none"> ○ Risk of a disconnect between leadership messaging to support staff and the resourcing decisions being made. Some teams are seeing significant work demands, deadlines and additional commitments as a consequence of Covid-19 legal and policy changes. In some teams, expected/actual work productivity is as high or indeed higher than ever. This will be particularly important as deadlines come and go, for example: Audit Services Group for financial statements deadlines; Professional Support (supporting technical queries, Covid grants, benefits, NDR changes etc). If deadlines or workloads cannot be flexed, additional appropriate resource should be sought to mitigate against the risk of overwork and a reduction in work quality. ○ Resource availability – ensuring the impact of those with caring responsibilities and working reduced hours is being properly assessed and written into workplans. This will need to be considered in the coming months ahead as we know schools will not be returning full time in August and caring responsibilities will be ongoing. ○ Resourcing across the organisation should be responsive and flexible to meet demand and skills requirements to mitigate against health and safety risks and wellbeing of staff who ‘do not have enough to do’.

	<ul style="list-style-type: none"> ○ As an organisation we should plan to succeed, not plan to fail. Realistic deadlines should be set rather than trying to work to something that we know can't be achieved. By ignoring this, there is a significant risk that the physical and mental health of staff is compromised. ○ In the longer-term, we will probably have to consider further changes to work patterns ▪ <u>Understanding workflows</u> <ul style="list-style-type: none"> ○ Would like a better understanding and management of workflows. ○ Clearer understanding from other departments about incoming work, both timings and load. ▪ <u>Supporting Dedicated Work Time</u> <ul style="list-style-type: none"> ○ Is there something that could be done (from a policy/management perspective and technologically) to encourage staff to indicate that they are 'not to be disturbed' to allow for focussed uninterrupted periods of work? ○ Manage competing work priorities, could there be dedicated time where staff undertake mandatory work activities: e.g. workstation safety assessments: mandatory training sessions?
<p>Lacking the correct equipment to work safely and effectively from home</p> <ul style="list-style-type: none"> ▪ Home workstations not complying with our responsibilities under the Health and Safety at work Act 1974 ▪ Home equipment not meeting specific health needs e.g. special adaptations ▪ Lacking full IT kit ▪ Bandwidth problems ▪ Inability to afford new / ongoing items / increased energy bills 	<ul style="list-style-type: none"> ▪ <u>Workstation assessments</u> <ul style="list-style-type: none"> ○ A formal workstation assessment undertaken by all is needed in the near-term to comply with HSE regulations and ensure the reasonable safety of our people from the long-term impact of working this way ▪ <u>Equipment provision</u> <ul style="list-style-type: none"> ○ Consider need to provide colleagues with better office furniture, e.g. special chairs, footrests, etc. ○ More ICT kit and training will be required as we take on temporary members of staff, who work from home ○ In the long term we will probably have to consider more specialist equipment ○ Ensure all staff know how to ask for new equipment / speak to the right people to advise them ▪ <u>Financial pressures</u> <ul style="list-style-type: none"> ○ Clear policy on reimbursing staff additional costs of working from home (e.g. cost of equipment, ink, stationery, energy bills etc. – clearly communicated to staff

Potential issue	Further support measures to consider
<p>Using new technology and working with colleagues in new and different ways can bring concerns around:</p> <ul style="list-style-type: none"> ▪ Difficulties understanding how to use new technology ▪ Discomfort using technology (e.g. visual participation in meetings, increased screen time, lacking a quiet space to work) ▪ Effectively communicating with colleagues particularly when working with new teams or on new pieces of work ▪ Continuing professional development and accessing training given the loss of face to face direction, support and 'on the job' training ▪ Returning to work / new colleagues starting 	<ul style="list-style-type: none"> ▪ <u>Professional Development Requirements</u> <ul style="list-style-type: none"> ▪ Professional trainees may need further adjustments to be made to the training programme to remove any barriers to success. Adjustments may need to be made by Audit Scotland as the employer and ICAS as the training provider. • <u>Communicating with colleagues</u> <ul style="list-style-type: none"> ○ We are examining how we can support individuals, teams and senior leaders to replace the natural way in which we communicated across a physical office space with something digital. The need to maintain relationships is important for individual mental health, security and to combat the gradual feeling of isolation that can grow for some. It is also needed to ensure teams and the whole business remain cohesive. ○ Further training may be needed on the use of new technologies, would a survey highlight these needs ▪ <u>Supporting Dedicated Work Time</u> <ul style="list-style-type: none"> ▪ Interruptions – is there something that could be done (technologically) to encourage staff to indicate that they are 'not to be disturbed' to allow for focussed uninterrupted periods of work?
<p>Concerns over health issues and susceptibility to C-19 – self and others</p> <ul style="list-style-type: none"> ▪ Underlying health conditions and / or being in an 'at risk' group for C-19 ▪ Chronic illnesses / recovering from illness ▪ Cancelled or postponed appointments, screenings and surgery ▪ Meeting health needs while working from home e.g. sufficient exercise / lack of outdoor space ▪ Bereavements ▪ Pregnancy 	<ul style="list-style-type: none"> ▪ Could Audit Scotland undertake an anonymous survey of all staff needs to capture and identify what else can be done to support these individuals affected? ▪ Raise awareness of our counselling service for those who need to use this ▪ Consideration needed for those in these groups when a return to the office is proposed, they may need continued support to work from home or alternative travel arrangements (where required)
<p>Loss of vital support networks.</p> <p>Isolation and feelings of loneliness</p> <ul style="list-style-type: none"> ▪ Staff may not be able to access formal community groups and support networks that they rely on ▪ Staff less able to connect with informal support mechanisms like family and friends ▪ Impact on ability to observe religious practices ▪ Impact on those shielding / living on own 	<ul style="list-style-type: none"> ▪ <u>Line Managers</u> <ul style="list-style-type: none"> ○ Further guidance for line managers? ○ It is important that Line Managers all continue to check in with staff as we progress through the phases. It is also important that individuals take responsibility for ensuring they keep their Line Manager up to date with how they are doing and raise any issues/concerns they may have in order to get the appropriate support required. ○ Encouragement of team check ins and more use of communication channels ○ We are examining how we can support individuals, teams and senior leaders to replace the natural way in which we communicated across a physical office space with something digital. The need to maintain relationships is important for individual mental health, security and to combat the gradual feeling of isolation that can grow for some. It is also needed to ensure teams and the whole business remain cohesive.

Potential issue	Further support measures to consider
<p>Harmful home environment</p> <ul style="list-style-type: none"> ▪ Risks of domestic abuse ▪ Relationships in home environment 	<ul style="list-style-type: none"> ▪ <u>Domestic Abuse</u> <ul style="list-style-type: none"> ○ Guidance for line managers on supporting those with domestic violence could be shared ○ Raising further awareness of our counselling service and avenues for support
<p>Unknown and unmet needs</p> <ul style="list-style-type: none"> ▪ Cascade only records staff that register and meet the legal definition of a disability ▪ Individuals may not feel comfortable discussing their needs and well-being with their manager or they may not have had sufficient opportunity to discuss changing needs 	<ul style="list-style-type: none"> ▪ <u>Line Managers</u> <ul style="list-style-type: none"> ○ Guidance for line managers? ○ It is important that Line Managers all continue to check in with staff as we progress through the phases. It is also important that individuals take responsibility for ensuring they keep their Line Manager up to date with how they are doing and raise any issues/concerns they may have in order to get the appropriate support required. ▪ <u>Other ways of highlighting needs</u> <ul style="list-style-type: none"> ○ Wellbeing checks – could be offered and undertaken by trained personnel independent of line management and HR & OD. This may create a ‘safe environment’ which might allow staff to be more open and feel freer to discuss any concerns at home and work. This could create an environment which encourages staff: to talk about ‘their situation’; to access available supports; create a process that enables them to engage with the organisation. ○ Undertake an anonymous survey of staff needs, including those of carers. An anonymised approach may allow staff to be more open and honest about their needs and provide the organisation with valuable intelligence to enable it to design safe and sustainable systems to support staff health and wellbeing. Carer Scotland or Carers Positive may provide such a facility that would be relevant to carers and other groups. ▪ <u>Sharing Learning</u> <ul style="list-style-type: none"> ○ It would be useful to have more of a feel across the organisation about what has worked and what has not for people working at home. We are aware that the HR&OD Manager has consulted with a cross-section of staff (including PABV colleagues and the Health Safety and Wellbeing Committee). This has focussed initially on the immediate issues but specifically it would be helpful to have a sense of people’s appetites and preferences for this looking ahead to the rest of the year and beyond. Also, what else do we need to do to help.
<p>Staff at risk of increased mental health issues</p> <ul style="list-style-type: none"> ▪ For factors outlined in this table 	<ul style="list-style-type: none"> ▪ <u>Line Managers</u> <ul style="list-style-type: none"> ○ Staff may be fatiguing of the lockdown and this may impact on wellbeing and mental health. Consideration should be given to further training to line managers to deal with this. However, Managers are not mental health experts, nor should they be expected to be. It would be a risk to the organisation and to staff to expect Managers to take on too great a role in this regard. ○ We think it would be great if the kind of resources provided in Mental Health Awareness Week including the conversations held on Yammer could continue to take place over the coming weeks