Purpose

Promoting Understanding & Research into
Productivity, Obesity Stigma & Employment

Returning to the workplace after Covid-19

A toolkit to help employers establish
a return-to-workplace plan for
employees living with obesity

Dr Zofia Bajorek and Stephen Bevan

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Acknowledgements

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Introduction

THE COVID-19 PANDEMIC HAS HAD UNPRECEDENTED AND WIDE-RANGING IMPLICATIONS FOR THE WORLD OF WORK AND INDIVIDUAL WORKING LIVES.

All sectors were affected by the national lockdowns in the United Kingdom imposed to reduce the transmission of Covid-19 and for many it meant that employees, where they could, should work from home. This resulted in significant changes to how and where people worked at sometimes very short notice. Aside from both operational and logistical challenges, this level of change and uncertainty (as well as the added anxiety about Covid-19 itself) also presented risks to both employee physical and emotional health and wellbeing.

However, as the government has now started its roadmap to opening up the economy, and lockdown measures are easing, workplaces are also developing plans to re-opening (be that in part or in full) safely. To do this well means recognising that employers have a duty to protect and safeguard their staff, and that individual employees may have justified concerns and anxieties about returning to work. Questions are being asked about how this can be done in a safe and practical manner, ensuring that latest government guidance regarding working safely during Covid-19 are implemented and that employee concerns are taken into account. Although the vaccine roll-out is playing a part in helping employers open up the workplace, any new variants may take the gloss off vaccine efficacy and this needs to be considered in any risk assessment or organisational contingency plans. Ensuring that this return-to-workplace plan is managed successfully will be important for both employee engagement and trust and for positive organisational outcomes.

What has become evident throughout the Covid-19 pandemic is that some employees with long-term health conditions, including people living with obesity and related health conditions, may have greater risks of severe Covid-19 related outcomes if they became ill with the virus. These employees may also have had limited or delayed access to any treatment they need throughout the pandemic, and so may have additional anxieties about returning to the workplace. It is important that these concerns are handled in a sensitive and non-discriminatory manner by employers.

> **ℹ** **The aim of this return-to-workplace toolkit is to help organisations, HR and line managers think about the steps involved to ensure a smooth transition for returning-to-workplaces post Covid-19 for employees living with overweight and obesity.**
>
> The toolkit will highlight the legal responsibilities that employers have for providing a safe workplace, as well as detailing a 6-step plan which aims to understand both organisational and employee needs as workplaces begin to plan for the future.

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Covid-19, Obesity and Work

OBESITY AND WORK

Obesity is a challenging and complex health condition, and over the past few decades the number of people worldwide classified with overweight or obesity has increased.

Research into the causes of obesity have suggested that these are multi-factorial, including (but not exhaustively) biological factors, an obesogenic environment (most notably access to physical activity facilities and the food environment), social and economic inequalities, employment and mental health.

However, alongside this rise in prevalence of people living with overweight and obesity, has been the associated increase in stigma and discrimination that employees living with overweight and obesity experience in the workplace. Employers need to be aware of situations in the work environment where weight-based stigma can occur and be sensitive to the needs of employees living with overweight and obesity. This is of increasing importance in discussions about returning to work following the Covid-19 lockdown.

COVID-19 AND OBESITY

During the Covid-19 pandemic it has been found that people living with overweight and obesity were at higher risk of hospitalisation, advanced level of treatment (including ventilation, or admission into intensive case/critical care units) and death as a result of contracting Covid-19.[1]

This may be as a result of living with overweight or obesity itself, or because of a weight-related health condition that people living with overweight or obesity may also have, including Type 2 diabetes, cardiovascular and respiratory conditions, cancer and an impaired response to infection. As people living with overweight and obesity also experience negative stigma in both healthcare and employment settings, this can also delay interaction with health care professionals which may also have contributed to the increased risk of severe complications arising from Covid-19.

Employees living with overweight and obesity may therefore have additional concerns about returning to the workplace if it will increase their likelihood or risk of contracting Covid-19. They may also be concerned about the associated stigma that has occurred as a result of the associated link between obesity and Covid-19 and how this may affect their employment.

> **This toolkit will help HR, line managers and organisations think about how these concerns can be best managed when planning and discussing the return to the workplace.**

1. Blackshaw, J et al. (2020), 'Excess Weight and COVID-19: Insights from new evidence', Public Health England. [Online]. Available at: https://assets. publishing.service.gov.uk/government/uploads/system /uploads/attachment_data/file/907966/PHE_insight_Excess_weight_and_COVID-19__FINAL.pdf

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Health, Safety and Wellbeing at Work

ALL ORGANISATIONS HAVE A LEGAL OBLIGATION TO ENSURE THE HEALTH AND SAFETY OF EMPLOYEES AT WORK, UNDER THE HEALTH AND SAFETY AT WORK ACT (1974).

The summary of key points of health and safety regulation that workplaces need to comply with (in addition to any specific Covid-19 government regulations that are being developed and updated) include:

- The provision of adequate training of staff to ensure that health and safety procedures are understood and adhered to by all staff.

- To provide a safe working environment that is properly maintained and where any workplace operations within it are conducted in a safe manner.

- The suitable provision of relevant information, instruction and supervision.

- Having a prepared and regularly revised written health and safety policy that all employees are informed of and notified when any changes or modifications to it are made.

- Employers conducting risk assessments to identify risks to health and safety to employees and taking steps to remove these risks.

- An obligation to provide employees with information of any identified risks, any preventative measures that have been taken, procedures in place to reduce any danger and information about who is responsible for implementing them.

This legislation applies to all business sectors and size, but the approach taken should be proportionate to the nature and size of the business, as well as level of risk from the business activity.

It is also worth mentioning here, that although obesity is not yet a protected characteristic under the 2010 Equality Act, some health conditions that are associated with obesity are, and employers are still required to implement workplace adjustments to provide suitable support for individuals where this is the case.

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Returning to the Workplace

AS A RESULT OF THE COVID-19 PANDEMIC, MANAGING THE HEALTH, SAFETY AND WELLBEING OF STAFF NOW SEEMS MORE CRITICAL THAN EVER.

However, just because lockdown is easing, it is still important to urge caution, take time for effective planning and ensuring that robust risk assessments and risk management processes are in place. When discussing return to the workplace options, employers must consider undertaking a detailed 're-opening pathway' to both minimise the risk of infection transmission and to ensure the health, safety, and wellbeing of all staff is maintained.

Organisations, line managers and HR need to be sensitive to the needs and wishes of their employees when planning a return to the workplace and must consult and collaborate with health and safety representatives, Occupational Health teams, GPs/clinicians, and Trade Unions where applicable.

Regular communication and consultation with employees will also be critical, highlighting that their health and wellbeing is seen as a priority during this time, and that diversity and inclusion is being considered in any decisions or plans.

It is important to remember that no two employees would have had the same pandemic experiences, and groups of employees would have been affected differently according to their job role, employment contract, caring responsibilities, and health conditions. Employees living with obesity may have similar concerns to those who were shielding or on the clinically extremely vulnerable list. Any returning to the workplace plans must be careful not to discriminate or stigmatise any employee group.

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A Note about Mental Health

THE CHANGES IN WORK AND SOCIAL ACTIVITIES RESULTING FROM THE COVID-19 PANDEMIC HAS ALSO HAD AN IMPACT ON INDIVIDUAL MENTAL HEALTH.

Employers have a responsibility and duty of care to enhance employee health, including attention to mental health. People living with overweight and obesity may also have comorbid emotional and psychological conditions, which could lead to a negative cycle of behaviours, including binge eating, low confidence and social isolation.

This could have been further exacerbated by the Covid-19 pandemic in various ways that employers and managers should be aware:

- The uncertainty and unknowns surrounding Covid-19, changes in restrictions and the anxiety about catching Covid-19 have all been a major source of stress over the last year, which can be linked to both physical and mental ill-health. This could have negative implications for health behaviours and lead to negative coping behaviours.

- Lockdown may have exacerbated pre-existing health conditions or comorbid health conditions. This is especially the case if employees have not been able to access treatment or therapy programmes because of Covid-19 restrictions and demands on NHS staff. This may result in further impaired physical and mental ill-health.

- The enforced social isolation may have led to reduced access to usual sources of support and changes to routines, which could enhance feelings of loneliness and sadness that people living with obesity can already experience. Employers or managers may have to make decisions about what is best for both the mental and physical health of their employees and could try to encourage employees to return to work to reconnect with colleagues and improve mental health.

- Governmental and media focus on obesity since the link between Covid-19 and increased risks in people living with obesity resulted in stigmatising images and the subsequent messaging that people living with obesity should 'eat less and do more'. This focus has not helped to reduce any stigma aimed at people living with overweight and obesity and encourages 'blaming' attitudes. Employees living with obesity already experience a high prevalence of weight-based stigma at work and may have additional concerns about how these perceptions may further effect work-based stigma. This can be negative and overwhelming, having implications for their mental health and physical health behaviours.

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Re-Opening Pathway:
A Step-Wise Approach

THE AIM OF THIS TOOLKIT IS TO HELP ORGANISATIONS, HR AND LINE MANAGERS THINK THROUGH ALL THE KEY FACTORS TO BE CONSIDERED FOR EMPLOYEES LIVING WITH OVERWEIGHT AND OBESITY WHEN MAKING THE DECISION TO OPEN-UP THE WORKPLACE.

The key steps are presented below and will be discussed in more detail in the following section.

01 Planning

02 Risk Assesments

03 Employee Consultation

04 Return-to-Workplace Conversations

05 Opening Up

06 Review

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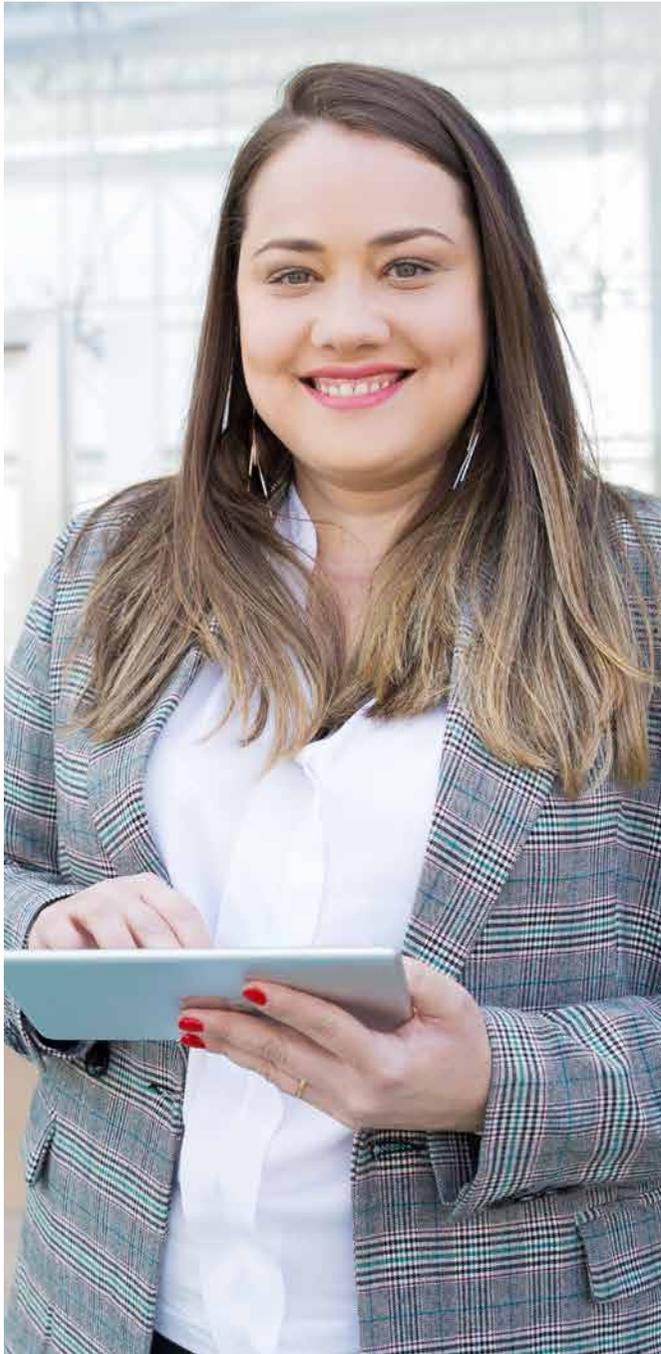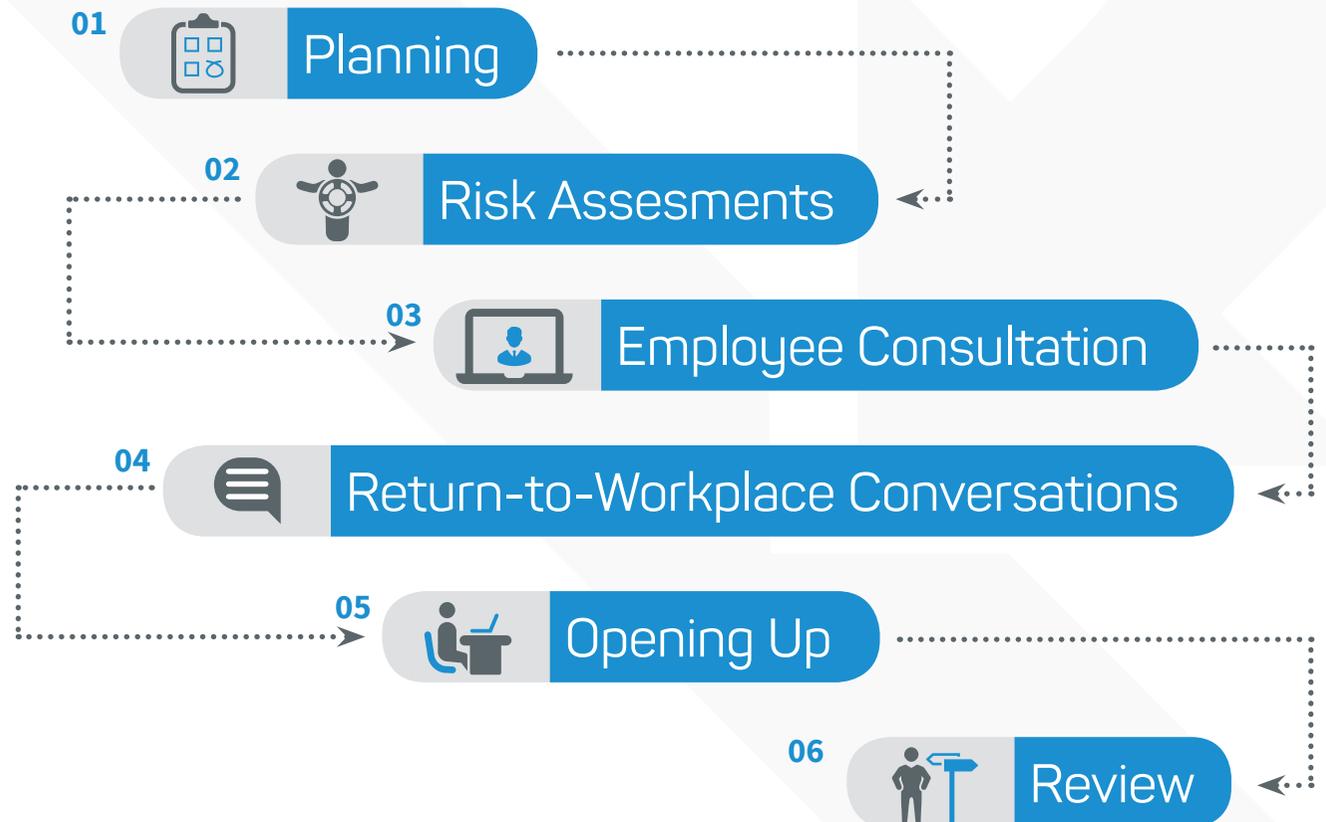
1.1 Planning

EVEN THOUGH LOCKDOWN IS EASING, AND THERE HAS BEEN AN INCREASE IN FOCUS REGARDING ENCOURAGING EMPLOYERS TO RETURN TO THE WORKPLACE, DECIDING EXACTLY WHEN TO RE-OPEN THE WORKPLACE WILL TAKE A SIGNIFICANT AMOUNT OF PLANNING AND CONSULTATION FROM AND WITH A RANGE OF STAKEHOLDERS.

Organisational leaders have an important role in managing and shaping this process, making sure that clear decisions are made, and information is shared in a credible, honest and timely manner to reduce any additional employee stress.

Any plans and decisions that are made must take into account that during the Covid-19 lockdowns employee personal and health circumstances may have changed, which could have implications for their job role, health and wellbeing and productivity. Some employees may have also been asked to shield by the government or have shielded voluntarily because of the increased risks to their health if they contracted Covd-19.[2] Attention should therefore be turned to how the health, safety and wellbeing of all staff will be maintained in ensuring a smooth transition to returning to the workplace.

Consequently, when planning the re-opening of the workplace an emphasis should be placed on employee health and wellbeing, making sure that any decisions that need to be made are undertaken in full consultation with staff and Trade Unions (if applicable), are conducted sensitively recognising individual experiences and needs, and implemented in a non-stigmatising or discriminatory way. The planning needs to be inclusive and employees should feel supported enough to be able to disclose any concerns.
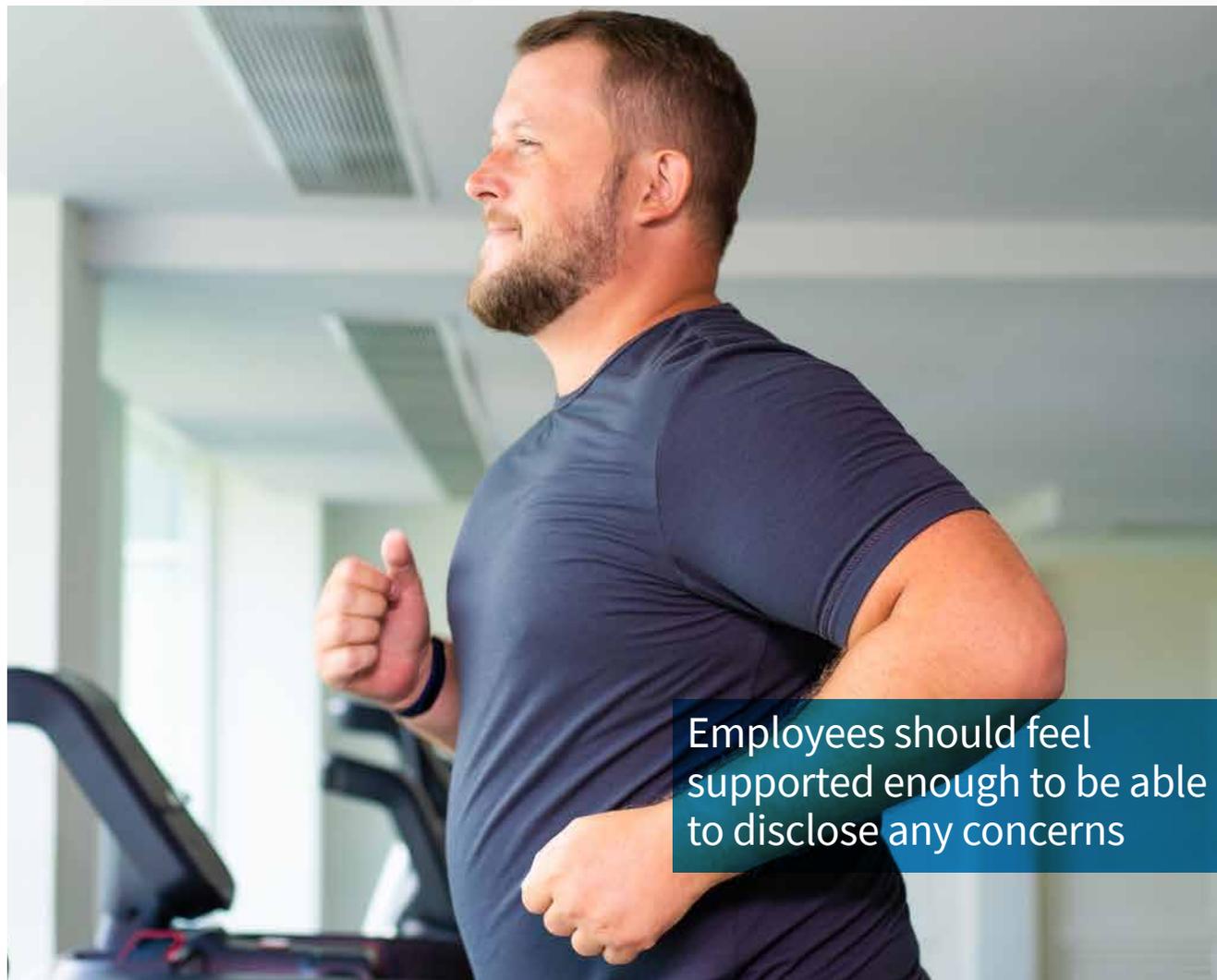
Employees should feel supported enough to be able to disclose any concerns

2.   These will have been classed under the government's definition of vulnerable workers, which include employees with underlying health conditions, covering those instructed to get the flu vaccine every year on medical grounds, and would have been in the priority groups for the Covid-19 vaccine. The government has listed in this group people living with diabetes, chronic lung, liver or heart conditions, a neurological condition, a weakened immune system and those with a BMI of over 40.

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1.1 Planning (continued)

A RANGE OF STAKEHOLDERS NEED TO BE INVOLVED IN THIS PLANNING STAGE, INCLUDING:

Organisation Directors: Directors will have an important role in overseeing the process, ensuring that a co-ordinated approach is taken before any decisions about returning to the workplace are made, and that the approach used means that all staff have equal access to support.

Questions they may wish to consider in the planning stage include:

- When is best to start the planning, to allow all staff an opportunity to be involved in any consultation process before workplaces are re-opened?

- If any staff have been 'key workers' and have been in the workplace throughout the pandemic how can you make sure they are also consulted?

- Is an inclusive approach being used when discussing return to workplace plans, including people first language?

- Are government and local guidelines/updates being checked regularly?

HR: It will be necessary for HR to review current policies and practices in relation to return to workplace guidelines, health and safety and wellbeing, sickness absence and flexible working to make sure that these are fit for purpose or if they need updating in light of Covid-19 and resultant risks.

Other questions for HR to consider during this planning stage include:

- Are policies centrally located for all staff to access?

- Are policies and other internal communications written in non-stigmatising, people-first language, and do not discriminate against certain employee groups?

- Are all line managers aware of relevant procedures related to sickness absence, employee wellbeing, rules about Covid-19 and work and local government guidance?

- What is the current level of communication to employees about returning to the workplace after lockdown, and who is this from?

- Are line managers aware of contingency plans and how to discuss any concerns that may be arising from concerned employees or those in a vulnerable group?

Line Managers: Throughout the lockdown, line managers had a critical role of remaining in contact with those they manage to see how they have been feeling throughout lockdown, and if anything further could be done to support employees when working from home. In planning a return to the workplace, managers will have a key role in engaging and consulting with employees.

Questions for line managers to consider at this stage may include:

- Have you been in frequent contact with your employees?

- Are you aware of any challenges (both personal and health related) that they may have had during lockdown that could have an impact on their return to the workplace?

- Are you aware of organisational policies and practices related to any of these concerns?

- Do you know of organisational and/ or external support services that may be helpful for employees to contact for further information or support?

Employees: Individual employees are just as important as any other stakeholder in this planning stage, and throughout the re-opening pathway.

You may want to think about:

- Do you know how and to who in your organisation you can raise any concerns with?

- What extra steps can you take to protect your health and wellbeing at this time (e.g. continuing to shield, getting the vaccine when offered, ensuring you know government guidelines)?

- What would be best for you at this time for both your physical and mental health?

For all stakeholders, during this planning stage, it could be a useful time to think more widely and creatively about what will be both best for the organisation and employees for the future of the workplace. Is it necessary for the workplace to re-open fully, or will hybrid working, or a phased re-opening be a more appropriate strategy for certain workplaces. How can this be achieved keeping the health, safety, and wellbeing of all a main priority?

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1.2 Risk Assessments

UNDERTAKING A RISK ASSESSMENT IS A WAY FOR AN ORGANISATION TO STRATEGICALLY CONSIDER WHAT YOU MUST DO TO PROTECT EMPLOYEES FROM HARM.

The Health and Safety Executive (HSE) highlighted several reasons why conducting a Covid-19 risk assessment is important, including:

- Identifying what work activity or workplace situation might cause or increase the risk of virus transmission.
- Thinking about whether there may be some employees who could be at an increased risk (be that because of their role or underlying health condition).
- Deciding how likely it is that someone could be exposed to Covid-19.
- Acting to remove the activity or situation, or if this is not possible, controlling the risk or implementing adjustments.

Questions to think about when considering undertaking a risk assessment could include:

- What are the current community levels of infection?
- What is the level of transmission risk in the workplace and on the commute to work?
- Are there certain roles/individuals who could be at more risk?
- What is your communication strategy to ask for engagement in the process?

Risk assessments for returning to the workplace after the Covid-19 lockdowns are of particular importance as research has indicated that some groups of employees may be at a higher risk of being infected and/or having more adverse outcomes if they do become infected.[3] People living with overweight and obesity, and some related comorbid conditions are within this group. As the UK government has changed its advice on shielding for the clinically extremely vulnerable, an added responsibility falls on employers to ensure that all workers, including those living with obesity, associated comorbid health conditions and others in high-risk groups can access all the necessary protections and adjustments necessary to remain safe at work. For some, this may mean still working from home where possible.

Who undertakes risk assessments may vary dependent on the depth of knowledge and the level of questioning required. Ideally, risk assessments should be done in consultation with Health and Safety reps/Trade Union colleagues who may be best placed to understand risks in the workplace and will have views on how to make the workplace Covid-19 secure.

The HSE has developed a risk assessment template outlining some of the main hazards for organisations to identify, which could be adapted or added to, dependent on individual organisational concerns.[4]

However, for those living with obesity or any other long-term health condition, additional consultation with experts may be required to consider whether further adjustments are required. In such circumstances, and especially where confidential medical knowledge would be necessary to understand the full risks to some employees, Occupational Health (OH) professionals should be involved. An OH professional may be able to determine further information regarding the history of the long-term condition and if there are any comorbid conditions that may increase any risks or require extra adjustments. Discussions with OH may also be helpful to determine the psychological wellbeing implications of Covid-19, that could have an impact on physical health, or lead to additional practical considerations.

3. Public Health England (2020), 'Disparities in the risk and outcomes of COVID-19', PHE publications. [Online]. Available at: https://assets.publishing.service.gov.uk/government/uploads/system/uploads/ attachment_data/file/908434/Disparities_ in_the_risk_and_outcomes_of_COVID_August_2020_update.pdf

4. Health and Safety Executive (2021), 'What to include in your COVID-19 risk assessment', Crown Publishing. [Online]. Available at: https://www.hse.gov.uk/coronavirus/assets/docs/risk-assessment.pdf

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1.2 Risk Assessments (continued)

EMPLOYEES LIVING WITH OVERWEIGHT AND OBESITY ALREADY EXPERIENCE WEIGHT-BASED STIGMA IN THE WORKPLACE AND IT IS THEREFORE EXTREMELY IMPORTANT TO UNDERTAKE SUCH RISK ASSESSMENTS SENSITIVELY.

Although obesity is not yet a protected characteristic under the Equalities Act, but related health conditions might be, and employers need to be aware of this.

Additional risk assessment questions to consider could therefore include:

- How will employees in vulnerable groups be identified?
- How will organisations encourage them to engage in the risk assessment process?
- How will individual risk assessments be undertaken in a non-stigmatising or discriminatory way. What extra measures are needed to ensure that these are conducted sensitively?
- How will you deal with the varied potential fears of employees?

The Society of Occupational Medicine (SOM) have also developed a risk assessment framework where it is possible to link an employee's vulnerability to Covid-19 and workplace risks.[5] It may be useful to use this type of risk assessment for individuals with long term health conditions, to judge what their level of risk of returning to the workplace is, and what could be done to minimise these risks, if continuing to work from home is not an option.

Once the initial risk factors for the transmission of Covid-19 have been identified, organisations can begin to introduce ideas and control measures to reduce them. Government guidance states the organisations with more than 50 employees are expected to publish their risk assessments but suggests that all organisations should publish them on their websites. Doing so will also indicate to employees that you are making the health, safety, and wellbeing of all staff a key priority when planning the return to the workplace.
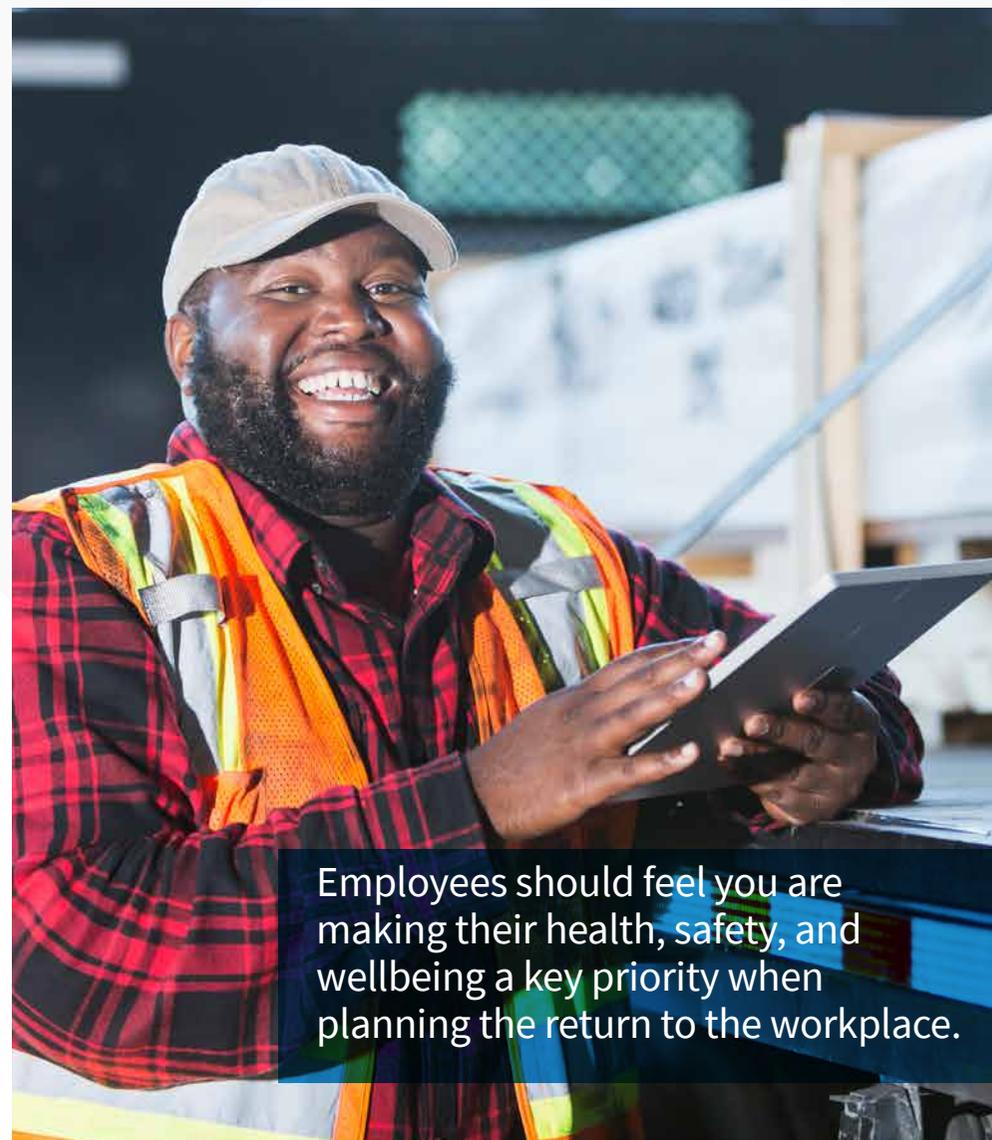
Employees should feel you are making their health, safety, and wellbeing a key priority when planning the return to the workplace.

5.   SOM (2020), 'Returning to the Workplace after the COVID-19 Lockdown : a Toolkit' [Online]. Available at: https://www.som.org.uk/Returning_to_the_workplace_COVID-19_toolkit_FINAL.pdf

1.3 Employee Consultation

EMPLOYERS DO HAVE A DUTY OF CARE TO CONSULT WITH THEIR EMPLOYEES ABOUT HEALTH AND SAFETY ISSUES IN THE WORKPLACE.

Where applicable, this can be done through health and safety reps, or Trade Unions.

However, as many organisations have closed their offices over the last year as workers if they have been able to work from home, have been doing so, organisations may find it beneficial to consult all employees on the issue of returning to the workplace. This may also identify additional risks that were not previously identified. Additionally, especially if undertaken anonymously, it may encourage employees living with overweight and obesity, and related comorbid conditions to be able to express concerns without being stigmatised or discriminated against in any way.

An anonymous questionnaire sent to all staff may be a quick and easy way through which an organisation can determine whether there is a desire to return to the workplace, and/or what issues or concerns that need to be addressed before employees return. This could help employers identify more hidden at-risk groups and arrange appropriate plans of actions.

A return to the workplace questionnaire can ask questions such as:
- Do employees want to return to the workplace?
- Is a hybrid-model of working preferable?
- When would it be preferable to re-open the workplace?
- What concerns do employees have about returning to the workplace?
- What can the organisation/line managers do about alleviating these concerns?
- Have any new workplace needs arisen as a result of the pandemic?
- Do employees have a long-term health condition that has meant they have had to shield, or put them in a vulnerable category? (employees do not have to name the condition)
- If employees are in a vulnerable category, what advice do employees need to help them, and what adjustments may they require?
- Do employees know who they can voice concerns with?
- Are there any other concerns that employees would like to highlight (e.g. vaccination status)?

Any employee consultation must be conducted in good time, allowing for an appropriate length of time for employees to respond, for responses to be analysed in detail, and for amendments to be made to any risk assessments or return to workplace policies, reflecting employee needs. Further consultations may be needed with health and safety reps and the Trade Union (where applicable).

Before this occurs, employers must be aware of two main issues:
- That the questionnaire is anonymous, and responses will be confidential. No employee should be identifiable, and the process should be managed sensitively.
- If key workers have been attending the workplace throughout lockdown, their concerns regarding further opening up also need to be addressed.

There has been a lot of discussion regards the need (or not) to reveal vaccination status. Employers may ask this question if they wish in surveys (subject to GDPR), but employees are not currently mandated to reveal their vaccination status, and employers have no legal right to demand an employee is vaccinated before returning to the workplace.

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1.4 Return-to-Workplace Conversations

COVID-19 HAS RESULTED IN AN EXTENSIVE AND RAPID SHIFT IN WORKING PATTERNS, AND IT IS ONLY NATURAL THAT EMPLOYEES MAY HAVE A RANGE OF QUESTIONS AND ANXIETIES ABOUT RETURNING TO THE WORKPLACE.

For employees living with obesity (who also may have associated health conditions), these may be further heightened because of the associated increased risk of more serious outcomes if they contracted Covid-19, and the pervasive stigma that people living with obesity experience.

It is therefore important for organisations to take an individualised approach when discussing returning to the workplace with their employees, considering the physical, emotional and wellbeing implications that this can have for their staff. Some initial concerns may have been raised in the employee consultation, but a return to the workplace discussion can allow for more in-depth conversations where further needs could be addressed.

Due to the potentially sensitive nature of these conversations, HR should have training and support in place for managers, so they can approach and conduct these without fear of causing offence, making the situation worse, or saying something that could be perceived as stigmatising. For many, disclosing and discussions about long-term health conditions can be very difficult, especially if the condition, such as overweight and obesity is commonly stigmatised and misunderstood. It may be helpful to ask line managers to plan these conversations.

Considerations should include:

- Are managers confident to have these conversations?

- Do managers understand the importance of using people first language? (e.g. an employee living with obesity, instead of obese employees)

- Are managers aware of what sources of help and support for employees are available in an organisation, and feel comfortable to signpost employees to these resources?

- When would be an appropriate time to have these discussions so that employees feel comfortable to discuss potentially sensitive topics?

It is important for organisations to take an individualised approach when discussing returning to the workplace

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1.4 Return-to-Workplace Conversations (continued)

WHEN ORGANISING RETURN-TO-THE WORKPLACE CONVERSATIONS, LINE MANAGERS NEED TO BE AWARE OF THE IMPACT THAT THE COVID-19 PANDEMIC HAS HAD ON BOTH PHYSICAL AND EMOTIONAL WELLBEING.

Consequently, when approaching employees on this topic, these conversations should be defined as supportive, two-way conversations, creating a safe space to understand employees' hopes and concerns about a return to the workplace, and what solutions or adjustments they may have that could help reduce any real or perceived risks when considering returning to the workplace.

As potentially sensitive information will be discussed, some employees may be hesitant or even reluctant to speak up. Due to the stigma surrounding obesity in employment, people living with obesity may not want to speak to line managers about their weight (or any comorbid conditions), especially if they perceive this may have negative consequences for work-based decisions. Line managers must highlight that the aim of the conversation is to help employees agree changes or adjustments and facilitate a return to the workplace. Line managers must also highlight the confidential nature of these conversations if this will help people living with obesity talk about any concerns they may have.

Questions to ask in these conversations could include:

- What are their main patterns of work, and how have these changed during lockdown?
- Are they happy with any changes in work patterns or work duties?
- What can be done to improve job satisfaction at this time?
- What are their thoughts about returning to the workplace?
- Do they have any concerns about returning to the workplace?
- Is there anything that a line manager/HR can do to help these concerns?
- Are there any specific adjustments that could be made to help them if they do wish to return to the workplace?
- What further requirements, if any, would they need?
- Are they aware of help available from EAPs/Trade Unions (if applicable)
- Would they appreciate a further opportunity to talk to HR or OH about any specific concerns that they have?

At the end of the conversation, line managers and employees should recap any actions points, or issues that need to be addressed or followed up and any decisions that have been made. It is important to know that at this stage managers do not have to know all the answers and can seek information and support before confirming any adjustments with employees.

> ℹ️ **Following the return to the workplace conversation, line managers need to remain in contact with their employees to keep them informed in a timely and sensitive manner about any decisions that have been made, or if further conversations are needed.**

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1.5 Opening Up

WHEN THE TIME COMES FOR EMPLOYEES TO RETURN TO THE WORKPLACE, THEY WILL WANT TO BE ASSURED THAT ALL RELEVANT PRACTICES AND ACTIONS HAVE BEEN UNDERTAKEN IN THE WORKPLACE TO PROTECT BOTH THEIR SAFETY AND WELLBEING.

There are a number of actions that employers may wish to consider:

- If the office has not been used for a long time, a deep clean may be necessary to protect hygiene measures, and to make sure that the premises are as clean as possible before employees return.

- How many people can safely work in the workplace at one time? If certain employees or roles are required to be in the office, how will the selection process occur and be communicated in a way that is not discriminatory or stigmatising or raise other issues of workplace unfairness?

- Will screening measures be used (e.g. temperature). If so, who will conduct the screening, and how will this be communicated so not to increase added anxiety to those who may be considering returning to the workplace. What will be the process for denying entry?

- How will contact track and tracing be implemented. Employers must make sure that processes related to such measures are properly adhered to, including training, date security/GDPR etc.

- Will there be a phased return to the office, both in terms of how many people are in the office, and phased starting and leaving times, to avoid entrances and exits being too busy and to maintain social distancing.

- Will one-way systems be implemented? And if so, will this have implications for the use of lifts or stair wells. This could be an adjustment that could affect accessibility for employees working with overweight or obesity, and so discussions about these plans need to be held sensitively and alternative adjustments may need to be made.

- Adaptations to the office layout may need to be made to allow for social distancing. This could include for example, spacing out workstations, or adjusting workstations so employees are working back-to-back, or side by side (instead of sitting face-to-face) to reduce transmission risks. However this is done, employers should be aware of how any adaptations could affect accessibility of getting to certain areas of the office within social distancing rules for employees living with overweight or obesity.

- What is the level of PPE provision required for the workplace to sufficiently safeguard employees? Will masks need to be worn in the workplace? Will hand sanitisers and anti-bacterial wipes be provided at major touchpoints?

- Employers should avoid the use of hot desks as these could become infection transmission risks if not adequately cleaned after successive use.

- Considerations need to be made regarding the use of communal spaces and meeting rooms. Can employees adequately socially distance in them? Will they be cleaned after each use? On some occasions it may be more appropriate to close some spaces altogether and to minimise in-person meetings.

- Is there adequate signage? Are the images and language used on the signage non-stigmatising?

- As Covid-19 can be spread by airborne transmission, the workplace must be well ventilated at all times, including opening windows where possible, the use of air conditioning and fans.

- Due to the level of changes necessitated by Covid-19 regulations to make workplaces safe, information about changes to policies, and new workplace adjustments should be available and easily accessible to all staff.

Purpose

Returning to the workplace after Covid-19: A toolkit to help employers establish a return-to-workplace plan for employees living with obesity

Institute for Employment Studies

1.5 Opening Up (continued)

EMPLOYERS RETURNING TO THE WORKPLACE WANT TO BE RE-ASSURED THAT IT IS AS HAZARD FREE AS POSSIBLE AND THAT ALL MEASURES HAVE BEEN CONSIDERED TO MAKE HEALTH, SAFETY, AND WELLBEING A PRIORITY.

For some, returning to the workplace could lead to new anxieties developing, potentially related to the use of public transport, developing a new routine after an extended period of working from home and concerns about adjusting to the new workplace.

All employees should therefore be fully briefed before their first day back in the workplace, including being updated on new risk assessments, health, safety and wellbeing policies, any new office Covid-19 protocols and what the first day back in the workplace might look like. It may also be helpful to signpost employees to any organisational support services, and for line managers to be sensitive to any needs or concerns they may have and provide the safe space for them to discuss these.

Even when the workplace does re-open, employers should remember that some employees with long-term health conditions, or employers whose situations may have changed throughout lockdown may feel safer and/or have a preference to continue to work from home. If this is the case, these employees will still need to be appropriately managed, have workplace assessments and have access to all the information and organisational communication that those in the workplace receive. Employees who chose to work from home will still have questions and anxieties that should be handled sympathetically and empathetically. Managers should continue to listen to concerns and include them in any further consultation about the workplace, encourage social connections and discuss work-life boundaries. The implications that working from home can have for an individual's mental health should not be underestimated, and this should be closely monitored.

Any messaging about why people are continuing to work from home should be communicated in a non-stigmatising way, and employees should not be discriminated against for their decision, by managers and colleagues alike.

The implications that working from home can have for an individual's mental health should not be underestimated, and this should be closely monitored.

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1.6 Review

IT WILL BE IMPORTANT THAT ONCE THE WORKPLACE HAS BEEN RE-OPENED, POLICIES AND PRACTICES CONTINUE TO BE REVIEWED AND UPDATED, MAKING SURE THAT THE MEASURES ARE BEING SAFELY IMPLEMENTED AND WORKING WELL TO REDUCE THE OPPORTUNITY OF COVID-19 TRANSMISSION, BUT ALSO THAT THEY ARE NOT DISCRIMINATORY OR STIGMATISING TO ANY EMPLOYEE GROUPS.

HR will need to ensure that all risk assessments and associated workplace plans are reviewed considering both government guidance and local levels of virus transmission.

Ongoing discussions should be held with both staff who have returned to work, and those who may have decided to work from home (because of their health and wellbeing or personal circumstances) to understand whether adaptations to the current work set-up or further changes need to be made. Conversations should seek to determine how employees have adapted, or if any further issues need to be addressed. Such discussions should be managed sensitively, understanding individual needs and avoiding stigmatising language.

Organisations may wish to review how wellbeing of all staff is monitored and review other health and wellbeing policies to ensure that they do not stigmatise or discriminate against employees living with obesity. It will also be important to continue to encourage safe and supported disclosure of changes to, or Covid-19 related work-limiting health conditions, including those related to overweight and obesity. This will help with early intervention that will benefit both the employee and the organisation. If further referrals to occupational health are required, this should also be arranged as soon as possible.

Employers and managers must also be aware that as people become more used to, or comfortable with a situation, they may have a tendency to relax from undertaking necessary Covid-19 precautions. It is important that this is well-managed in the workplace, as employers must ensure that all employees are protected whilst at work.

As people become more used to the situation, there may be a tendency to 'de-risk' – this should not happen, as all employees still need to be protected at work. Ongoing management of how prevention measures are being implemented at work needs to continue to ensure that risk assessed guidelines are being correctly implemented to reduce risks to staff.

Employees living with overweight and obesity should know what support, advice and adjustments that you are entitled to. If you have any concerns that Covid-19 policies are not right, or if you feel that you have been subjected to unfair or stigmatising treatment which you perceive to be attributed to weight-bias or stigma, it is important that you find a friendly advocate or supporter to discuss issues with, and to navigate policies to assess whether you have been unfairly treated. It may be helpful to have an informal discussion with your line manager, HR or trade union representative (if applicable) to voice any concerns you may have and come to a timely and friendly resolution.

Purpose

Purpose

Promoting Understanding & Research into
Productivity, Obesity Stigma & Employment