



Social Security
Scotland

Tèarainteachd Shòisealta Alba

Equality impact assessment booklet

Purchase and provision of
specialist workstation equipment

February 2025

Dignity,
fairness,
respect.

About The Business Area

Division: People and Place

Branch: People Support

Team: Health and Safety team

Deputy Director Responsible: Ally MacPhail (Interim People and Place)

Equality Impact Assessment Owner: [REDACTED, Health and Safety team]

Name of Officials Involved: [REDACTED]

Date Equality Impact Assessment Booklet:

Commenced: July 2024

Completed: February 2025

Planned for review: February 2026

Stage 1: Overview

1. Purpose

The purpose of stage 1 is to demonstrate and explain to a wider audience, the new or revised product, policy or service looking to be introduced.

2. About Your New or Revised Product, Policy, Process or Service

Name of new or revised product, policy or service being subjected to an Equality Impact Assessment

Internal service of specialist equipment supplies for Social Security Scotland colleagues.

Is this new or a revision to an existing?

This is a revision of the established service. It mainly issues equipment related to display screen equipment, however this is not exhaustive and case-by-case.

When this exercise was undertaken in 2021, an Equality Impact Assessment was started, including impact research and a first version report written. This was due to guidance around this process being developed. Although findings from the workshops were included as part of specification of a supply contract when it went out to tender, the Equality Impact Assessment was not published.

Findings from this previous exercise are included within this assessment process. This detail was also used to inform the tender documents and subsequent supplier contract for the existing supply chain.

Start Date: August 2024

What is the purpose of your new or revised product, policy, process or service?

Social Security Scotland's Health and Safety team provide an internal advisory service to colleagues and line managers on a range of health, safety and wellbeing matters. Within this remit is the facilitation and issue of specialist equipment. This internal service supports people with tailored interventions, such as additional equipment to work and interact with their role safely.

The need and issue of equipment most commonly relates to the use of display screen equipment but may relate to any other item that can be used to support colleagues whilst at work. The key principles of this activity reflect:

1. Ensuring standards of compliance with the Health and Safety (Display Screen Equipment) Regulations 1992. Colleagues are required to self-assess their display screen equipment. The outcome of this assessment may indicate a need for additional equipment, local arrangements or workplace adjustments. These arrangements are documented within Social Security Scotland's display screen equipment self-assessment or Employee Passport scheme.
2. Access to a supply chain allows the Health and Safety team to purchase items such as, but not limited to, chairs, ergonomic mice, desks and computer accessories. To enable this to take place Social Security Scotland must have access to a catalogue of suitable equipment through a reliable and ethical supply chain.
3. All equipment is currently delivered free of charge to our colleagues' homes and our office locations across the whole of Scotland including the Highlands and Islands. A service to reuse and recycle equipment has been developed alongside the leavers process to ensure best value for money and to promote sustainability within Social Security Scotland.
4. Meeting the needs of a hybrid workforce, this support and equipment will create support when working both in the office, and remotely, in a home working environment. The physical accessibility of our buildings is not within the scope of this Equality Impact Assessment.
5. Provision of specialist non-standard equipment is available throughout a colleague's continuous employment, supporting their journey within the organisation from onboarding to final offboarding point. This service extends to face to face chair fittings and assessments to ensure bespoke equipment can be provided.
6. The current contract will run until the 24th October 2025. This exercise is expected to be complete before the invitation to tender is published in Spring 2025.

What are the outcomes you are looking to achieve?

The main outcomes of this service are:

1. The provision of a specialist equipment supply chain
2. Intervention to support outcomes of colleague display screen equipment self-assessments
3. Intervention to support reasonable workplace adjustments as implemented locally, and recorded in an Employee Passport
4. Compliance with the Health and Safety (Display Screen Equipment) Regulations 1992, and Equality Act 2010, to support colleagues work safely at home and in the office.

7. Gather the Relevant Secondary Evidence Base

Proposal for desk-based research

Research aims to demonstrate a need for a supply chain service of specialist equipment. This will consider internal management information from a range of sources such as:

- analysis of equipment purchases within a period between 2021 - 2024 (via Procurement data)
- email traffic and data from Social Security Scotland's Health and Safety mailbox
- themes and key trends identified within existing display screen equipment self-assessments
- review of workforce equality monitoring data i.e. people who are more likely to require assistance of specialist equipment such as disabled workers. [Social Security Scotland Equality Impact Assessment \(sharepoint.com\)](https://sharepoint.com)

External evidence

Desk based analysis of the external environment will:

- review literature relating to musculoskeletal disorders (MSD)
- identify how MSD correlates with protected characteristics (Equality Act 2010) and Social Security Scotland internally recognised diversity groups.

It is acknowledged there may be limited data available in relation to some of organisationally recognised characteristics i.e. Veterans and Armed Forces. External sources of information are accessed both via the Social Security Scotland website and other reputable sources such as the Health and Safety Executive and other local bodies.

8. Using Evidence to Inform Decision Making

Evidence gathered in section 3 is used to consider whether the new or revised product, policy, process or service will impact in a:

- positive way (enabling)
- negative way (barriers)

Secondary Desk Based Research

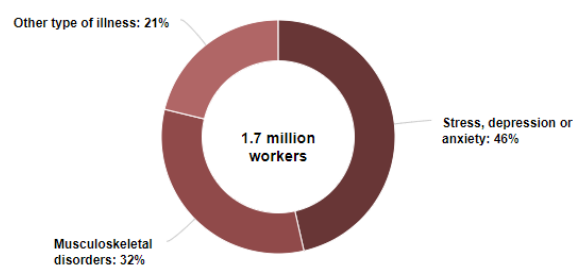
Introduction

29% of the population in Scotland, across all ages, report some degree of musculoskeletal conditions. By contrast, 20% of people in the UK as a whole are seeking the advice of a medical professional for musculoskeletal disorder-related ill health.

Good musculoskeletal health can be associated with numerous factors such as provision of a safe workstation when using display screen equipment. This is essential to reduce the risks associated with work activity.

Labour market

Between 2023 and 2024, musculoskeletal disorders were a significant cause of illness in the workplace at 32% of the labour market (Health and Safety Executive, 2024).



Percentages do not sum to 100% due to rounding.
Source: Labour Force Survey (LFS) self-reported estimates

Civil Service

The UK Civil Service conduct an annual People Survey. This asks questions relating specifically to health and wellbeing, including physical health.

Key themes identified in the report highlighted:

In 2023, over 70% of civil servants self-reporting excellent, very good or good levels of health. This had fallen marginally year-on-year.

In the same year, 25% of civil servants experienced musculoskeletal problems (MSD) for a second reporting year.

Within Social Security Scotland, just a quarter of civil servants reported musculoskeletal problems rising gradually from 2022 to 2023.

Age

By 2025, there will be an estimated 9.1 million people living with one or more long-term conditions in the UK. Four out of five people with osteoarthritis have at least one other long-term condition such as hypertension, cardiovascular disease or depression. Among people over 45 years of age who report living with a major long-term condition, more than 3 out of 10 also have a musculoskeletal condition.

[Musculoskeletal health local profiles: short commentary, January 2024 - GOV.UK \(www.gov.uk\)](#)

[Musculoskeletal health: applying All Our Health - GOV.UK \(www.gov.uk\)](#)

Within Social Security Scotland we can use our workforce information to analyse the distribution of age across the workforce noted below.

[Social Security Scotland - Social Security Scotland – workforce information: March 2024](#)

Published June 2024

Social Security Scotland directly employed staff, by age:

March 2024

Age 20-29	16%
Age 30 to 39	31.6%
Age 40-49	26%
Age 50 – 59	21.3%
Age 60 – 64	4%
Age 65 and over	0.9%

According to the workforce information 2023, Social Security Scotland workforce is predominantly made up of colleagues ages between 30-39 but spread evenly in other age ranges. There is a potential for impact in later years as these colleagues age and move into an older category where we know that there is a higher proportion of colleagues with musculoskeletal disorders or issues with physical health.

As people age, evidence demonstrates that those in the age categories 45 and over are more likely to experience musculoskeletal disorders (Health and Safety Executive, 2024) [Work-related musculoskeletal disorders statistics in Great Britain, 2024](#)

An aging workforce may impact the equipment contract as those in the 40-49 and 50-59 age groups age over the period of the contract. Where there are only 4% in the 60-64 age group it is possible that this percentage will increase. This may also impact our budget as there may be an increase in need for more specialist equipment as colleagues age.

Provision of equipment will be provided to all colleagues who have a need, irrespective of their age, however those in older age categories are clearly impacted more by musculoskeletal disorders and therefore at greater risk if their workstations are not set up correctly.

The ageing workforce [24735.pdf \(unison.org.uk\)](#)

Gender

According to our workforce information, our workforce was divided into 61.1% female and 38.9% male (however no further categorisation by gender was available therefore excluding colleagues who may identify as Trans or other status.) [Social-Security-Scotland-Workforce-Information-to-March-2024-485476255211.xlsx \(live.com\)](#)

A report by the Health and Safety Executive (2024) on musculoskeletal disorders statistics across Great Britain identifies skilled trades occupations including keyboard or repetitive work being cited as causing work related musculoskeletal disorders by age and gender.

<https://www.hse.gov.uk/statistics/assets/docs/msd.pdf>

Although no job profile is available for Social Security Scotland it is clear that the majority of our colleagues carry out keyboard or repetitive work.

This report demonstrates that overall both males and females did not have statistically different rates for work-related musculoskeletal disorders.

Compared to all workers:

- Males aged 16-34
- Females aged 16-34

had significantly lower rates of work-related musculoskeletal disorders.

By contrast:

- Males aged 45-54
- Males aged 55+
- Females aged 45-54
- Females aged 55+

had significantly higher rates.

Disability

According to our workforce information [Social Security Scotland - Social Security Scotland – workforce information: March 2024](#) Table 5 Social Security Scotland directly employed staff: by disability, shows the distribution of colleagues with disabilities.

Disabled 10.3%
Not disabled 39.1%
Unknown 49%

According to the workforce information 2023, whilst nearly 40% of colleagues consider themselves not to have a disability, nearly 50% have not disclosed this information.

Whilst provision of specialist equipment will impact all colleagues, there could be either a positive or negative impact on both the 10% of colleagues who have declared a disability, and those who are unknown and not declared.

Impact workshops will explore internal evidence relating to purchases over the last three years of the existing contract. This will provide an indication of the types of disabilities and scenarios that have so far required additional support through specialist equipment. Internal purchasing records demonstrate chairs, desks and audio equipment to be among high purchased items.

Gender Reassignment

No existing data was held to indicate representation of colleagues who had undergone gender reassignment. However studies relating to LGBTQIA+ workers do draw a link between these groups and a higher prevalence of musculoskeletal disorders

[Preventing musculoskeletal disorders in a diverse workforce: risk factors for women, migrants and LGBTQIA+ workers | Safety and health at work EU-OSHA \(europa.eu\)](#)

[workforce-diversity-en.pdf \(europa.eu\)](#) information about impact of MSDs on different groups i.e. women, migrant workers and LGBTQIA+ colleagues.

[EU-OSHA publishes report on preventing MSDs in at-risk groups | IOSH magazine](#) Published 2021

- women, migrant workers and LGBTQIA+ staff can be disproportionately at risk of MSDs and other work-related health issues.

Pregnancy & Maternity

There is no data within this workforce information that tells us the numbers of colleagues who are expecting.

Based on data gathered by the Health and Safety team 12 colleagues were in contact with us during the period 2023/2024 to carry out a new and expectant mothers assessment.

Pregnant and new mothers could be more prone to injury such as musculoskeletal disorders and therefore could be either positively or negatively impacted by this service. [Protecting pregnant workers and new mothers - Common risks \(hse.gov.uk\)](https://www.hse.gov.uk/pregnant/)

Colleagues who are pregnant or new mothers are supported through the risk assessment process and identified through referral by line managers to the Health and Safety team.

Race & Ethnicity

According to the workforce information 2023, over half of colleagues class their ethnicity as White with over 40% unknown.

Religion or Belief

According to the workforce information 2023, data informs that colleagues are either mainly non-religious or their belief is unknown. (75%)

Sex

According to the workforce information 2023, our workforce is known to have a split of 60/40 Female to Male ratio.

As noted above, although no job profile is available for Social Security Scotland it is clear that the majority of our colleagues carry out keyboard or repetitive work.

[Work-related musculoskeletal disorders statistics in Great Britain, 2024](#)

This report demonstrates that overall both males and females did not have statistically different rates for work-related musculoskeletal disorders.

Sexual Orientation

According to the workforce information 2023, nearly half of colleagues have not disclosed their sexual orientation but with information available can tell that the majority of colleagues class themselves as heterosexual. As noted above studies relating to LGBTQIA+ workers do draw a link between these groups and a higher prevalence of musculoskeletal disorders

[Preventing musculoskeletal disorders in a diverse workforce: risk factors for women, migrants and LGBTQIA+ workers | Safety and health at work EU-OSHA \(europa.eu\)](#)

[workforce-diversity-en.pdf \(europa.eu\)](#) information about impact of MSDs on different groups i.e. women, migrant workers and LGBTQIA+ colleagues

[EU-OSHA publishes report on preventing MSDs in at-risk groups | IOSH magazine](#) Published 2021

- women, migrant workers and LGBTQIA+ staff can be disproportionately at risk of MSDs and other work-related health issues

Marriage or Civil Partnership

According to the workforce information 2023, 75% of colleagues have not disclosed this information meaning that the overall picture is largely unknown.

There is no evidence to indicate further risks associated with MSDs and marriage or civil partnership.

Care Experience

No internal data available. To be explored in impact workshops.

Carers

No internal data available. To be explored in impact workshops.

Socio-Economic

No internal data available. To be explored in impact workshops.

There is much literature that highlights the negative impact of both sociodemographic and socioeconomic factors on prevalence of musculoskeletal disorders amongst the working population. Without further data it is not possible to correlate this with our working population however it has been noted.

[Work-related MSDs: prevalence, costs and demographics in the EU \(europa.eu\)](#)

[Musculoskeletal disorders among children and young people: prevalence, risk factors, preventive measures | Safety and health at work EU-OSHA \(europa.eu\)](#)

This study notes the link between development of MSDs and socioeconomic factors.

Veterans & Armed Forces

No internal data available. To be explored in impact workshops.

‘Each year approximately 14,000 personnel leave the Armed Forces, of whom about 2,000 are wounded, injured and sick (WIS) (1,2). Data suggests that the percentages for physical injuries leading to discharge are much higher than those attributed to mental health (1,3). Indeed, over the period from April 2014 to March 2019, musculoskeletal disorders (MSDs) alone accounted for 59% of discharges from both the Army and Navy, and 48% of discharges from the RAF (1).’

[bmjmilitary-2020-001759 unmarked anonymised version %284%29 jisc.pdf \(uclan.ac.uk\)](https://www.bmj.com/lookup/doi/10.1136/bmj.military-2020-001759)

9. Decision

Will your activity impact people or another activity that does?

Yes, all of our colleagues work at some point with display screen equipment in order to carry out their work for Social Security Scotland. The aim of this process is to comply with the Health and Safety (Display Screen Equipment) Regulations 1992 and provide the right equipment to colleagues to minimise the risk of musculoskeletal disorders whilst at work.

Although this equality impact assessment is focussed on the procurement exercise it will encompass the internal process to facilitate this as a service. Both procurement and service will impact colleagues. If Social Security Scotland's Health and Safety team have access to purchase the right equipment at the right time, this will have a positive impact on all of our colleagues. If not, it will create a barrier and may negatively impact someone as a result of a protected or organisational characteristic.

The greatest impact will be for our colleagues with specialist equipment needs as a consequence of their disability or necessary workplace adjustment where we are unable to source this type of equipment. It is however acknowledged that some conditions need bespoke equipment and may not be available through a large procurement exercise like this. Discussion with our Procurement team about previous purchases will help to influence lots that are needed for the tender, and thus reduce any negative impact there may be on those with more 'common' conditions.

Will your activity impact other products, policies, processes or services that could affect equality?

As an internal service, the Health and Safety team acts as a supporting function in the value chain of the organisation. This directly supports and enables Social Security Scotland's primary goal, to administer social security benefits to clients.

This activity (supply of specialist equipment) will align as a mechanism to deliver wider strategic goals as set out in the strategy of Social Security Scotland's Corporate and Business plans.

Will individuals have access or be denied access to your product, policy, process or service as a result of your activity or changes?

All colleagues across the organisation will have access to this service through the process which has been implemented to support all colleagues who need display screen equipment or a workplace adjustment.

This includes those with additional, specialist equipment needs either at home or in the office. As noted above some specialist or bespoke equipment may not be available through this contract however work will be done to identify any trends and minimise the risk, although there may remain a small number of colleagues where equipment has to be purchased outwith this contract.

Will the implementation of your activity directly or indirectly impact individuals being employed, a change in staffing levels, terms and conditions, employer or location?

Yes. Potentially both directly and indirectly if we are unable to procure the right equipment for our colleagues. They may be negatively impacted by not being able to come into the office or work from home safely.

They may equally be affected in a positive way as equipment provided will support a return to the office and/or provision of a safe workstation at home.

Will the implementation of your activity result in a change in the size of a budget, or impact on resources and will this impact on individuals?

Yes. Social Security Scotland continues to remain committed to provision of a budget to support our display screen equipment needs and for colleagues with specialist equipment needs and therefore this does not directly impact colleagues.

Does it relate to an area where there are known inequalities?

Yes. Those colleagues working with display screen equipment for long periods of time are known to suffer from musculoskeletal disorders and this can potentially impact all of our colleagues. This can have a disproportionate effect on some colleagues with protected characteristics, such as gender and age. It is therefore important to comply with legislation to reduce the risk of harm to colleagues.

It is well documented that those with disabilities are often impacted by musculoskeletal disorders more than others however with the provision of display screen equipment this risk will be reduced again. With a facility to provide bespoke equipment this will help to reduce some barriers that our colleagues may face.

10. Recording of Decision

My business area has concluded that there is an impact on people from diverse backgrounds and further impact assessment is required.

Review Date: February 2026

Version: 1.0

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Stage 2: Impact

1. Purpose

The purpose of Stage 2: Impact is to enable our business area to probe deeper and build a better understanding of how our new or revised product, policy or service potentially or actually impacts diverse groups of people.

2. Workshops led by Business Areas

The aim of the workshop is to bring together people (colleagues and or clients) who have an interest in or who will be impacted by our new or revised product, policy or service.

3. Ahead of the Workshop(s):

Identify who should be involved

- As key existing stakeholders facilitating this service, Social Security Scotland's Health and Safety team were identified as a standalone group who could offer impact feedback. A separate team based workshop was created and team members invited directly.
- Scottish Government's learning experience platform, Pathways, was used to promote impact workshop to all colleagues. 30 spaces over two dates were released and made available. This provided maximum audience reach, to make impact workshops accessible and open to all people with access to Pathways.
- The Health and Safety team engaged its stakeholder networks to promote the events listed on Pathways directly. This included service users and other stakeholders who had previous lived experience of using the equipment supply service as a colleague or manager.
- The Diversity and Inclusion team assisted promotion of this event through the Equalities Network to maximise advertisement of these events and promote uptake.

Invite participants

- One week prior to the events, the desk-based research identified within this process was shared to all people booked to attend. This included a summarised information booklet outlining; scope and background of this assessment, desk-based research, and definitions of protected and organisational characteristics.
- Email invites were sent by Microsoft Outlook. These provided a written point of reference and point of contact to the meeting organiser. Email invite welcomed prior notification of any adjustments which may be required to support participation by colleagues. No reasonable adjustments were required.

4. During the Workshop(s):

An agenda and team roles were created to inform the running of each one-hour workshop.

1. Open and welcome by Host: 10 minutes
Included summary of service, characteristics and review of desk-based research.
2. Break out rooms (x2) with x1 Facilitator and x1 Note taker. Focus* on exploring impact: 40 Minutes

A focus order aimed to ensure spread of discussion within both rooms and was suggested to follow:

- Room 1: Age, Disability, Gender Reassignment, Race & Ethnicity, Sex, Marriage or Civil Partnership – then others (i.e. Veterans etc).
- Room 2: Disability, Age, Pregnancy & Maternity, Religion or Belief, Sexual Orientation, Care Experience – then others (i.e. Veterans etc).

3. Conclusion and summary by host: 10 minutes.

Date(s) workshop(s) held:

- Thursday 19 December 2024 (Health and Safety team only)
- Monday 20 January 2025 (All colleague bookable event 1)
- Thursday 23 January 2025 (All colleague bookable event 2)

Resource: Team and rooms

Workshop events excluding Health and Safety team workshop followed the format:

Host: (also Room 1 Facilitator)
Room 1: (Facilitator) (Note Taker)
Room 2: (Facilitator) (Note Taker)

People involved in these workshop(s) were:

- Workshop with Health and Safety team who are key stakeholders in facilitating this service.
- Existing service users with lived experience of specialist equipment use.
- Non-service users with lived experience of protected characteristics.

5. Time to Think and Act

During the workshops, attendees are taken through the different types of diversity recognised by Equality Act 2010 and Social Security Scotland.

The different types of barriers and aspects people from diverse backgrounds might encounter were considered in relation to our new or revised product, policy, process or service.

Impact results

The combined results of all impact workshops have revealed new evidence and key themes for consideration.

These findings inform both recommendations that will inform any procurement activity as well as internal process design by Social Security Scotland's Health and Safety team to mitigate any barriers when providing a specialist equipment service. Barriers will be assessed against the recognised characteristics in the Equality Act 2010 and defined organisationally by Social Security Scotland.

Themes of age and disability were most prominent throughout analysis. This was not unexpected and reflects the initial research which indicated both aging and disability often correlated with a need for specialist equipment.

Age

Menopause

With a crosscutting link of disability and sex, the supply chain of specialist equipment will support people who are living with symptoms of menopause. Both a barrier and an enabler may be access to specialist equipment which can support people with menopause symptoms. Respectively, a sparse catalogue could result in not enough choice of intervention. Items associated with treating symptoms should form part of the contract i.e. suitably sized and accessible desk fans that can be operated and stored with ease. Discreet and innovative interventions will also provide a level of support to avoid spotlighting conditions. Mitigation may occur through a procurement exercise that is robust in developing a ranging catalogue and wide scope.

Empowerment of colleagues accessing a new labour market

A barrier may occur for young adults (aged under 25) based on a limited exposure to the workplace and awareness of this level of support. This can be mitigated with strong communications strategy to make accessible to all colleagues.

Trends of technology and young people

Age groups between 16-30 are more likely to have grown up with new technologies i.e. tablet computers, smart phones or gaming set-ups. These could otherwise accelerate musculoskeletal conditions that would commonly develop through using display screen equipment at a now earlier age i.e. under 40. A specialist equipment contract will enable groups across all ranges to work with the interventions required and react to new societal trends.

Attitudes to aging and need for physical support mechanism

A barrier to access may derive from self-belief to resist aging processes and avoid seeking help through assistance of equipment. This must be mitigated by line manager empowerment to normalise the issue of equipment where required.

Known age demographic of workforce and horizon scanning

Musculoskeletal or upper work-related limb conditions like Carpal Tunnel Syndrome, can be associated with age and developed over a prolonged period of time i.e. years of interacting with display screen equipment without suitable equipment or with poor postural habits. For this reason, a workforce of people aged mainly 30-50 will continue to age, and require access to a sufficient supply chain of equipment to reduce and prevent musculoskeletal issues. Mitigation through continuous monitoring of workforce equality data to continue to understand our workforce and their needs. This will be actioned through review of this assessment.

Societal acceptance and diagnosis of neurodiversity

People of all ages who are neurodivergent are now accessing better medical treatment and diagnosis than once otherwise possible. This means a continued trend is likely to occur where workers of higher age groups, that are experienced in the labour market, may seek assistance from specialist equipment and be enabled by this service. Enablement from accepting culture, underpinned with kindness, by all colleagues and managers.

Disability

Access to bespoke equipment

Access to bespoke items, which offer inclusion and accessibility, will create solutions which are ergonomic and fit for purpose. This is a key enabler of people with disabilities. This service will facilitate colleagues with a level of support in relation to a disability or medical condition. This will also enable the service delivery needs of the organisation i.e. work activity to receive telephone calls, or work from our buildings.

Speed of access

Need for equipment may be reactive and not anticipated. A timeline equipped to ensure order to colleague is smooth and carried out timeously will enable people to work safely with the use of specialist equipment.

Scope of catalogue

The focus and scope of a specialist equipment contract is likely to focus greater attention on display screen equipment. It must be borne in mind that specialist equipment will be required to support people with ranging needs and not only display screen equipment activity. A catalogue that is flexible and offers commonly anticipated items, as well as scope to access bespoke case-by-case items will ensure that all colleague disabilities are supported with equity. A fixed catalogue would result in a most definite barrier to existing and new colleagues.

Trial of equipment

The ability to trial equipment, at no extra cost to the business or public purse, will ensure a service that is tailored and fit for purpose. This means that colleagues are empowered with solution focused equipment that might require time to explore available options. This would be an enabler for both colleagues, line managers and the Health and Safety team.

Ethical supply chain

An open, fair and transparent contract supply (following procurement governance) will ensure that people with disabilities are adequately prepared for, with equipment sourced from reputable means.

Intervention and support of line managers

A specialist equipment service will be enabled and driven by line managers. Line managers have the ability to use manager and colleague rapport to explore a range of support options which will be bolstered by equipment i.e. a mix of local arrangements and specialist equipment working together. Specialist equipment alone may be a barrier should there be a perception that this could resolve any challenges.

Transparency

Communication and clear knowledge of catalogue items will enable line managers and colleagues to source items that are required to support colleagues with disabilities i.e. resource list of availability for business areas to access.

Decision making

A formal process of scope and referral, to request equipment, will ensure that barriers are reduced. This will promote a consistent approach to decision making on what is reasonably practicable.

Storage and transportation

The storage and transportation of specialist equipment, relating to the office environment, can be a barrier due to a lack of locker space and non-compliance of signage indicating items are sole use. More dedicated space within buildings and better awareness on the impact of using other's specialist equipment could reduce these barriers. Similarly, a stock of more common specialist equipment being stored and widely available in the office will enable colleagues with disabilities to work safely in a hybrid environment.

Gender Reassignment**Internal behaviours and processes**

Assumptions or lack of awareness by people supporting colleagues (with display screen or equipment related workplace adjustments) may create a barrier i.e. assumed gender. Internal procedures for this service should be cognisant of diverse language and standards of communication.

Physicality

This theme shares cross cutting links with other protected characteristics. For example, physiological differences may create a barrier, both to people who have undergone gender-reassignment or who are impacted by their assigned sex at birth.

Pregnancy & Maternity

Temporary need for equipment

This reflects an event that has a specific time width i.e. pregnancy for nine months and then post-partum. This could create a barrier that sourcing equipment for a short period of time outweighs efforts to do so. Enablement to challenge this could be through sufficient flexibility to return items to a supplier i.e. renting equipment from a supplier with a contract to allow this.

Scope of catalogue

If a catalogue is focused within a scope of only display screen equipment, it may feel inaccessible to people who are pregnant that will benefit from support with equipment related to pregnancy. A well represented catalogue reflecting pregnancy will be a strong enabler.

Sensitivity of life event

Colleagues may feel reluctant to reveal pregnancy and could therefore face barriers in accessing the correct support. This will benefit from empowerment of confidentiality where a colleague discloses need for assistance.

Storage of equipment

New mothers may not have space to store equipment once on maternity leave as this is not being used for a period of time. Ability to return, have uplifted, any equipment by a supplier will enable colleagues during pregnancy.

Race & Ethnicity

No enabling or disabling factors identified.

Religion or Belief

Raw materials of equipment.

Materials of equipment could create a barrier if they were otherwise in accordance with beliefs i.e. Veganism is a belief, therefore equipment made with animal products or at a detriment to animals would be a barrier. Procurement scope will offer mitigation to any discrimination of religion or belief.

Sex

Anthropometry

A barrier may occur from dimensions of Anthropometry in how equipment is designed with for male and female anatomy i.e. design percentiles. Equipment catalogues with a range of items, meeting ranging size will enable people of any sex.

Sexual Orientation

No enabling or disabling factors identified.

Marriage or Civil Partnership

No enabling or disabling factors identified.

Social Security Scotland recognised characteristics.

Care Experience, Carers, Socio-Economic and Veterans & Armed Forces

Costs associated with equipment

People from lower socio-economic backgrounds or care experience may consider that there is a personal cost involved for equipment. Positive and empowering communication of this service.

Confidence to seek support

Care experienced colleagues may feel reluctant to ask for assistance and 'make do' with what conditions as presented. This will require strong empowerment and communication from the organisation to mitigate this feeling.

Constraints of home working environments

Not all colleagues may have a spare room or area to work from at home. Colleagues from lower socio-economic backgrounds or care experience may experience this more. A contract supply with equipment which is well designed for a range of space will enable all colleagues to work with ease.

Attitudinal barrier

Carers or veterans may feel a duty to others and not put themselves first. They can be empowered to make use of this service, as is available to all, through clear communication from the business and their line managers.

6. Next Steps

We have now undertaken secondary and primary research regarding the new or revised products, policies or services our business area is looking to introduce. Key trends, outcomes and areas for acknowledgement are detailed below.

Key trends outcomes and areas for acknowledgement

- **Develop and review communication strategy for service**
Strategy focused on empowering all colleagues to seek and make use of specialist equipment will promote this service. Key stakeholders may include: the Health and Safety team, senior leaders and line managers.
- **Maintaining professional development as a People Support colleagues**
The competence of health and safety professionals will enable suitable and sufficient issue and recommendation of specialist equipment where there is an accessible supply to obtain this.
- **Flexibility of Catalogue is key to ensure overall service reduces barriers**
The flexibility of an equipment catalogue is critically important to enable access to this supply chain. Without ability to source off-catalogue items, for case by case scenarios, colleagues may have to make do with the constraints of what is available. The option to trial equipment and return items will also ensure a robust process that enables all people impacted, regardless of individual characteristics.
- **Access, storage and transportation of equipment by colleagues**
The ability to store items in offices, or have large items delivered to homework area is key to support colleagues, mainly with disabilities or mobility needs. This will reduce the need to engage in manual handling and transport items during hybrid working

Stage 3: Sign Off

1. Purpose

The purpose of Stage 3 is to:

- establish and agree a pattern for monitoring and updating the Equality Impact Assessment;
- support good governance by obtaining support for decisions taken with Deputy Director sign off;
- arrange the final completed version of this workbook to be published on the Social Security Scotland website.

2. Monitoring & Updating

To ensure our business area remains abreast of the ongoing impact and any changes that may occur for diverse groups, it is important that the Equality Impact Assessment is a living document that is routinely monitored and updated. To support our business area with this, the following questions have been considered:

- **Business Area and Individual tasked with monitoring and updating the Equality Impact Assessment**
[REDACTED], Health and Safety Team
- **Next Date for review and update of Equality Impact Assessment**
February 2026
- **How will your business area monitor the mitigating action(s) agreed and if any further changes are required?**
Stage 2, Section 6 of this booklet outlines next steps that will be actioned internally by the Health and Safety team and also form consideration during procurement activities.
- **How will your business area assess mitigating action(s) have worked or needs adapted?**
The review schedule of this assessment will be used to monitor progress.
- **How will your business area report on further changes and adaptations?**
The Health and Safety team will review this assessment in line with its schedule and continue to report to its key stakeholders, senior leaders, health, safety and wellbeing committee and trade union representatives.

3. Deputy Director Sign Off

The Deputy Director is the Senior Responsible Officer and is required to agree with decisions reached and formally sign off on the Equality Impact Assessment. This includes if any further changes or adaptations are proposed at a later stage.

We have gathered evidence and completed this booklet to conclude that an Equality Impact Assessment was required for any new or revised products, policies or services that our business area is proposing to introduce.

A summary of the evidence we have based our decisions on so far is as follows:

Social Security Scotland's Health and Safety team provide internal advisory services to support colleagues and line managers work safely. A routine area of focus is facilitation of arrangements supporting compliance with Health and Safety (Display Screen Equipment) Regulations 1992.

Interacting with display screen equipment is a key element of colleagues' day-to-day work activity. Ensuring people have safe and suitable set-up, both in office buildings and remotely to support hybrid working, colleagues must self-assess their workstation. Commonly, the outcome of this, or other discussion between colleagues and managers highlights the need for additional physical equipment, local arrangements or other workplace adjustments.

The Health and Safety team rely on access to a reliable cost-effective supply chain of specialist equipment, as one aspect of support and intervention. Internal management information highlights that, whilst the list is not exhaustive, equipment such as ergonomic chairs, headsets with noise cancelling properties or electrical equipment like portable heaters and cooling fans are often required.

To assess the impact of this internal service, and inform a procurement contract to establish a catalogue of items from a regular supplier, this Equality Impact Assessment was conducted. It identified the potential impact for service users with diverse backgrounds, as defined in the Equality Act 2010 and other areas of diversity that may impact our workforce of over 4000 colleagues.

A range of desk-based research commenced this process to learn more about the current workforce equality data that has been disclosed. For example, it demonstrated around 10% of colleagues consider themselves as disabled and that overall, our workforce is represented by more people who are aged 30-50 than not. In the external environment, data published by the Health and Safety Executive (HSE) highlighted musculoskeletal health conditions as a significant cause of workplace illness in the United Kingdom. With a direct link to using display screen equipment, and people aged within our majority workforce group, it highlighted a correlation between the effect of age, our workforce and a need for equipment. Likewise, colleagues who are disabled, pregnant or new mothers may also be more likely to request and need additional equipment both long or short term. The Civil Service People Survey data also confirmed correlation between this research both within Social Security Scotland and the wider civil service.

Internal management information of previous equipment issued allowed the team to invite stakeholders with lived experience and promote opportunity for all colleagues to attend stakeholder impact workshops. These enabled open discussions to learn more about themes identified in the desk-based research. This made it possible to identify how the service may create barriers, or enable people to work with the equity they are entitled to achieve, within an equal work environment.

Key findings throughout the assessment presented a need to develop and review communication strategies for this service. This should be met with the continued professional development of People Support colleagues to ensure they can provide the most appropriate support within their scope of practice.

A critical success factor of this service is a flexible catalogue of equipment that can reduce barriers to people who need this assistance. Finally, the access, storage and transportation of equipment by colleagues will be supported by the ability to trial items, receive intervention without delay and be able to access this both at home and in the office.

These success factors form part of the next steps to improve this service. This is further supported through an open and fair procurement exercise which is supported by professional colleagues in the Finance and Corporate Services Division.

For Deputy Director to complete:

I confirm that based on my review of the evidence provided, I am satisfied that the Equality Impact Assessment undertaken is to the required organisational standard (see Quality Assurance Standard for Equality impact assessments) and give my authorisation for the results (recorded in this booklet) to be published on the Social Security Scotland website.

Name: Ally Macphail

Deputy Director: Operational Strategy and Performance

Business Area: Social Security Scotland

Date: 4 March 2025