

# Briefing

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## Employment adjustments for people with Epilepsy

## **Employment adjustments for people with Epilepsy**

**This briefing is not an authoritative statement of the law. While we have made every effort to ensure that the information we have provided is correct, Business Disability Forum cannot accept any responsibility or liability.**

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# Introduction

## What is epilepsy?

Almost one in every 100 people in the UK has epilepsy; this means that there are approximately 600,000 people in the UK with some form of epilepsy.[1]

Epilepsy is a generic term used to describe the tendency a person has in experiencing 'seizures' that originate in the brain. Seizures occur when there is a momentary disturbance in the electrochemical activity of the brain, causing a temporary disruption to the way the brain works. A seizure will generally last no more than a few seconds or minutes, after which the brain cells will return to their normal state.

Epileptic seizures can take many forms, since the brain is responsible for such a wide range of functions including: personality, mood, memory, sensations, movement and consciousness. Any of these functions may be temporarily disturbed in the course of a seizure. Sometimes an epileptic seizure will affect the brain's control of the body; however, not all epileptic seizures involve convulsions.

Some seizures are easily recognised, whereas others are less obvious. More details on the different type of seizures and their associated symptoms can be found on Epilepsy Action's website.[2]

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[1] Epilepsy Action, 2018

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[2] Epilepsy Action

### **Simple partial (focal) seizures<sup>[3]</sup>**

During a simple partial (focal) seizure, consciousness is not impaired, but the person may experience strange feelings in one part of their body, e.g. rhythmical twitching of one limb, unusual tastes or sensations like pins and needles in a specific part of the body. Simple partial seizures may develop into other sorts of seizures and so they may be referred to as a 'warning' or 'aura'.

### **Complex partial (focal) seizures**

Complex partial seizures differ from simple partial seizures in that consciousness is affected and so the person may have limited or no memory of the seizure. The seizures may be characterised by a change in awareness as well as automatic movements such as fiddling with clothes or objects, making chewing movements or wandering about in general confusion. The person may respond if spoken to.

Some partial (focal) seizures can develop into tonic-clonic seizures.

### **Tonic-clonic seizures**

Tonic-clonic seizure, formerly called grand mal seizures, are formed of a tonic stage, when the person loses consciousness and may fall; and of a clonic stage where the limbs jerk quickly and in rhythm. During a clonic stage, breathing may become laboured and the person may lose control of their bowels and/or bladder. After the seizure the person may feel tired and confused. They may have a headache and need time to recover fully.

Some people will recover after several hours and some will need several days to fully recover.

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[3] NHS UK

### Other type of seizures

In the seizures below, there can be a focal onset, when only one side of the brain is affected, or the whole brain is involved and consciousness is lost (generalised onset). With generalised onset, seizures often occur with no warning and the person will have no memory of the event.

- **Tonic seizures** – these involve a general stiffening of the muscles without rhythmical jerking movements. The person may fall to the ground with consequent risk of injury but generally recovery is quick.
- **Atonic seizures** – these involve a sudden loss of muscle tone, causing the person to fall. Again, there is consequent risk of injury but recovery is generally rapid.
- **Myoclonic seizures** – involves brief and abrupt jerking of one or more limbs. These often happen on their own but some people have myoclonic seizures in clusters of several seizures over a period of time.
- **Absence seizures (formerly known as petit mal)** – the person experiences a brief interruption of consciousness and becomes unresponsive. They may appear 'blank' or 'staring'. Absence seizures often last for only a couple of seconds and as they are subtle they may go unnoticed or be mistaken for daydreaming.

Some seizure patterns may not fit into any of the above categories or may include elements of different seizures. These are called 'unclassifiable seizures'.

Some people experience seizures whilst sleeping, which may cause them to feel exhausted when waking up.

### Todd's paralysis

After a seizure, some people will be unable to move all or part of their body. This is called Todd's paresis or Todd's paralysis. This can last from a few minutes up to several days before going away.

### Photosensitive epilepsy

Photosensitive epilepsy is a form of epilepsy in which seizures can be triggered by flickering or flashing light, either natural or artificial or by certain geometric shapes and patterns. Photosensitive epilepsy is relatively rare. Only an estimated 3% of people with epilepsy have photosensitive epilepsy.

People often assume that visual display units (VDUs) will cause a problem for people who have photosensitive epilepsy but this is not normally the case. VDUs usually operate at a high frequency that will not provoke seizures. However, there are cases of people with a rare type of epilepsy who experience seizures, triggered by such things as VDUs, TVs, monitor screens, low frequency or flashing light, bright glaring light, stripes or checks.

It is always best not to assume the cause of a seizure but to be guided by the person. Often they will have identified what triggers a seizure and adopted coping strategies, for example wearing dark glasses in bright light and listening to, rather than watching, TV or videos. Computers and televisions with LCD or LED screens are less likely to trigger seizures; however, the brighter colours they emit may trigger seizures as well. Always speak with the person to identify the best type of equipment to use for them.

Although still rare, photosensitive or light sensitive epilepsy is more common amongst children and adolescents. As it becomes less frequent with age, working age people are less likely to be affected.

### What to do if a seizure happens

Although dealing with seizures is often included in first aid training, make sure your first aiders are familiar with them. The employee with epilepsy should be asked to advise you if they have any particular requirements and if they carry a medical alert card or bracelet.

The key action points when someone loses consciousness when experiencing a seizure are simple first aid procedures.[4]

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[4] [epilepsy.org.uk](http://epilepsy.org.uk), [redcross.org.uk](http://redcross.org.uk), [sja.org.uk](http://sja.org.uk)

## Employment adjustments for people with Epilepsy

Do not try to move the person, unless they are in a dangerous place, e.g. at the top of a flight of stairs or in a road.

- Do not attempt to restrict or restrain the convulsive movements.
- Do not try to wake them.
- Do not place any objects in their mouth.
- Move any objects that may cause injury.
- Loosen any tight clothing around their neck, if possible.
- Cushion their head.

Once the seizure is over, place the person in the recovery position and stay with them until they recover. When the person regains consciousness they may be confused and may need to be reassured or helped to a quiet room to recover.

Often no further medical support will be required but call an ambulance if:

- The person has seriously injured themselves during the seizure.
- They have trouble breathing after the seizure.
- One seizure immediately follows another without recovery in between or the person fails to regain consciousness after about five minutes.
- You know it is the first time they have had a seizure.

If someone experiences a partial seizure with no loss of consciousness, try to guide them away from danger whilst being reassuring and stay with them until they have recovered.



# Employment and people with epilepsy

People who have epilepsy will be protected under the Equality Act 2010 but may not consider themselves to be disabled.

Nevertheless, employers have a legal obligation to make reasonable adjustments and not discriminate against employees who might be facing barriers at work because of a disability or health condition – even if it has not been diagnosed as a disability or accepted as such by the individual.

Employers should be aware that non-visible disabilities such as epilepsy might mean that specific barriers can be less obvious. This means adjustments may be harder for employers to determine and put in place.

It is important that employers have an honest conversation with new and existing employees about the barriers that may be present in the workplace and what simple measures might help. The best practice approach is to make adjustments for anyone who needs them in order to work effectively and contribute fully to the organisation.

Most employers will want to know what is 'reasonable'. Doing what seems fair for the individual and others who work for you given the size and resources of your organisation is a good place to start.

## Employment adjustments for people with Epilepsy

This guidance will help you deliver best practice. Remember:

- You might need to treat people differently in order to treat them fairly.
- Don't make assumptions about what people can and can't do.
- Ensure that everyone knows who is responsible for doing what and when it must be done.
- Involve the individual in generating solutions and respect their right to confidentiality.

For more detail on the law and making reasonable adjustments contact **Business Disability Forum's Advice Service** on telephone number **+44-(0)20-7403-3020** or by email **advice@businessdisabilityforum.org.uk** or see the Briefing on The Equality Act 2010.

# Reasonable adjustments and best practice

Epilepsy can affect anyone at any age. If no one in your current workforce has told you already that they have epilepsy it is likely that someone will in the future do so and has not shared this.

Epilepsy is often feared and misunderstood. Decisions about suitability for employment, promotion or retention are too often based on general assumptions or misconceptions, rather than a factual assessment. This can lead to discrimination against existing or potential employees. Consider the skills, abilities and aspirations of each individual and implement appropriate and reasonable support so that everyone can maximise their potential; this can have a positive effect on an organisation as it unlocks different ways of tackling problems and making decisions.

Adjustments may well be simple and inexpensive and make good business sense. Without adjustments, good candidates may not apply for jobs and good employees could be lost. Precise requirements vary from one individual to another. Always ask the person with epilepsy what they need.

Many people with epilepsy have no problems at work. The employer may not even be aware that they have epilepsy. However, for some people a few adjustments could be needed.

## Recruitment and selection

Candidates with epilepsy may be prevented from demonstrating their abilities and potential by conventional recruitment processes.

You need to make sure you do not discriminate against a disabled job applicant during the recruitment process. You may also have to make reasonable adjustments. It is important not to make assumptions about what the applicant can or cannot do; instead, ask applicants about reasonable adjustments they may require during the recruitment process. If you use external recruitment agencies, ask for evidence that they make reasonable adjustments for disabled applicants and work to the standards that underpin this guidance.

Further information on best practice for recruitment and selection is also available from the Government's Disability Confident scheme; for further information, visit: [disabilityconfident.campaign.gov.uk](https://disabilityconfident.campaign.gov.uk) or contact **Business Disability Forum's Advice Service** on telephone number +44-(0)20-7403-3020 or by email [advice@businessdisabilityforum.org.uk](mailto:advice@businessdisabilityforum.org.uk).

**Remember it is unlawful to ask questions about health or a disability prior to job offer under the Equality Act 2010 unless the question relates directly to an intrinsic aspect of the role for which the person is applying, or is for the purpose of making reasonable adjustments to the application or interview process. Questions about disability can still be asked on equal opportunities monitoring forms, provided they are not part of the selection process.**

### Job descriptions

When drawing up job descriptions and candidate specifications:

- Be specific about what skills are needed and what the job involves.
- Be flexible. Very often minor changes can make a significant difference, e.g. reallocating an inessential task that a candidate with epilepsy finds difficult to someone else in the team.
- Do not needlessly exclude someone with epilepsy. Concentrate on what is to be achieved in a job rather than on how it is achieved, e.g. stating that an applicant must have a driving licence when the requirement is about being able to travel, will exclude some candidates with epilepsy who are able to demonstrate how they will be able to travel using alternative means of transport.

### Advertising and attracting applicants

When advertising a job:

- Use positive wording like “we welcome disabled applicants” or, for Partners and Members of BDF: “We are a Member of Business Disability Forum and committed to becoming a disability-smart employer.”
- Provide a point of contact for people who are concerned about the recruitment process, using a range of contact methods, e.g. email and telephone.
- Display or mention the Disability Confident symbol if you have signed up to the scheme.
- Be clear that you are willing to make reasonable adjustments.
- Consult your local Jobcentre Plus which can help you make the recruitment process accessible. Work Coaches and Disability Employment Advisers at Jobcentre Plus will also know of individuals with epilepsy who may be suitable candidates. Business Disability Forum Members and Partners can contact us for help.

### Application forms

Adjustments may need to be made to the shortlisting process because an applicant may:

- Apply for a job for which they are over qualified because they need to regain confidence.
- Have gaps in their CV due to their epilepsy.
- Have gained experience outside of paid employment, e.g. work experience and voluntary work.

### Interviews, tests and assessment centres

Ensure that candidates who have epilepsy are able to demonstrate their ability to do the job and to show what they can contribute to the organisation. Focus on the person's abilities not on their epilepsy. If you have any doubts about their ability to do an intrinsic function of the job, simply ask how they would do it.

When you invite applicants for an interview make sure you ask them if they require any adjustments to be made for the interview. With adjustments, the interview allows you to assess more accurately the ability of applicants with epilepsy.

Adjustments might include extra time during interviews and tests. This is particularly important if the candidate experiences lapses in awareness which can worsen under pressure.

## Post job-offer

Once someone has been offered a job you may need to put in adjustments to ensure they can perform to their highest capability. Start getting the adjustments in place as soon as practicable after you have made an appointment – it may take time to set up adjustments and, in some instances, to secure Access to Work funding. Consult the individual and make sure the employee's manager or supervisor understands the agreed adjustments. Disability awareness training can be useful for the candidate's team but only if the individual is comfortable with this.

Building in regular reviews of adjustments, for example at the end of the probationary period, in supervision sessions and appraisals will help ensure that the adjustments are still effective.

Ensure that you take the same approach to adjustments when a person with epilepsy applies for promotion, again not making assumptions about what the employee can or cannot do.

Completing a 'tailored adjustment plan' with new employees who have a disability, mental health condition or with an employee who develops one is a good way of recording and reviewing adjustments that have been agreed and actions that will be taken if the employee is off sick.

To see an example of a tailored adjustment plan and to download a template, visit Business Disability Forum's website at [businessdisabilityforum.org.uk](https://businessdisabilityforum.org.uk) or contact **Business Disability Forum's Advice Service** on telephone number +44-(0)20-7403-3020 or by email [advice@businessdisabilityforum.org.uk](mailto:advice@businessdisabilityforum.org.uk).

### Working arrangements to retain employees

In most cases the only adjustment required is an increased understanding of epilepsy by those in the workplace. It is very important to involve the person concerned when considering or making any adjustment. If required, further adjustments may include:

- Allowing time off to attend medical appointments, rehabilitation or assessments, see our 'Managing sickness absence' briefing.
- Reallocation of inessential duties to other team members.
- Establishing procedures with the person for managing seizures.

Consider the following adjustments:

- Allowing time off work to attend medical appointments related to their conditions, e.g. GP appointment, treatment review etc.
- Flexibility wherever possible around working hours and workloads.
- Awareness that medication, or epilepsy itself, may occasionally affect memory, concentration or mood.
- Flexibility when an individual is adapting to a new treatment regime.
- Providing a safe, comfortable place for the individual to have a seizure or recover.
- Providing safety guards for machinery or other workplace features which might pose a hazard for an employee with epilepsy in the event of a seizure. NB: Standard health and safety regulations require an employer to take measures to ensure machinery and equipment is adequately guarded to protect all workers.
- Ensuring that fluorescent tube lighting are in good working order and not flickering – this should be considered as a general workplace issue to ensure a healthy environment.



# Induction, training and development

Disability and the need to make adjustments should be embedded in all policies such as those on sickness, training, and appraisals.

New recruits should be made aware of these policies during the induction procedure.

It is important that your standard induction and training programme is accessible, so an employee with a disability or long-term condition can access the same information as everyone else. You may also want to provide a workplace mentor to ensure supportive training. This can also provide another employee with valuable personal development experience.

Ensure that employees with epilepsy have equal access to further in-house and external training, meetings and career development opportunities.

# Health and safety

Most people with epilepsy pose no greater risk in terms of safety than any other employee. However, when conducting regular overall risk assessments, people with epilepsy may need to be assessed individually to determine whether there are, in fact, any increased risks either to themselves or their colleagues. See our 'Health and safety briefing' for more information.

Consider the following:

- Is the epilepsy controlled?
- What are the frequency, duration and type of seizures?
- Does the employee know when a seizure is imminent?
- Does anything specific trigger a seizure? E.g. stress, anxiety or tiredness?
- What is the usual recovery time?
- Is there any specific care that should be given either during or after a seizure?
- Do relatives need to be contacted?

Assessments should be on a case by case basis, i.e. relating to an individual with epilepsy in a particular job. Assumptions about people with epilepsy generally in particular types of jobs must be avoided.

## Restricted occupations

Nearly all jobs are open to people with epilepsy and most people with epilepsy are able to work in any area they choose.

There are statutory provisions preventing people with epilepsy, who still have seizures or are taking medication for seizures, from joining certain professions in the UK Armed Forces (army, navy, air force).[5]

Details on recruitment policies and guidelines should be obtained from the relevant governing body.

## Epilepsy and driving

Some people with epilepsy can, and do, hold valid driving licences. However, anyone who experiences a seizure must not drive until:

- They have been 'seizure free' for 12 months, either on or off medication or
- They have only experienced sleep seizures for at least 12 months and
- The Driver and Vehicle Licensing Agency (DVLA) is satisfied the person is not likely to be a danger on the road.

To obtain a licence to drive a bus, coach or lorry (class 2 licence), a person with epilepsy must have been seizure free, without taking anti-epileptic medication, for the last 10 years. The DVLA also need to be satisfied that there is no likelihood that the person will have further seizures.

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[5] [epilepsy.org.uk](http://epilepsy.org.uk)

## **Employment adjustments for people with Epilepsy**

The regulations encompass all seizure types including auras/warnings and where consciousness is not impaired. It is the license holder's responsibility to inform the DVLA of any medical conditions or changes to medical conditions.

Due to the possibility of seizures recurring when medication is changed or withdrawn, the DVLA recommends that anyone who is undergoing medication changes or withdrawal, stops driving during this process and for six months afterwards. If a breakthrough seizure does occur the person may be required to surrender their licence.

If a person remains free of seizures for seven years, they may be entitled to hold a full licence that is valid until they are 70. In all cases information from their GP is required.

For more details on driving regulations, please contact Epilepsy Actions' helpline<sup>[6]</sup> or contact the DVLA.

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[6] Epilepsy Action helpline: +44-(0)808-800-5050

# Harassment

A person who has epilepsy may be vulnerable to harassment from their colleagues.

As an employer, you must take all reasonable steps to deal with harassment. Harassment includes not only physical or verbal abuse but also anything which violates a person's dignity or creates an intimidating, hostile, degrading, humiliating or offensive environment.

Harassment stems from stereotyping, lack of understanding, intolerance of difference and fear. To prevent bullying and harassment of anyone you should:

- Ensure your organisation has clear policies on workplace bullying and harassment and that complaints are investigated promptly and effectively. Ensure these policies are communicated across the organisation through campaigns and awareness raising initiatives.
- Make it clear that any harassment, including on grounds of disability, will not be tolerated and that offenders will be dealt with through your disciplinary procedures.
- Ensure management understands that people with epilepsy experience increased risk of harassment, and provide training for line managers to help them to identify and manage incidents connected to bullying and harassment in the workplace.
- Make the employee aware of their right to equal treatment, their entitlement to make a complaint and to initiate a grievance.
- Allow employees access to support networks internally or externally from work. If possible ensure employees who have experienced bullying or harassment have access to professional and confidential counselling.
- Ensure disability awareness training is implemented across your workforce to challenge stereotyping.

# Further sources of reference

## Useful organisations

### Business Disability Forum

Nutmeg House, 60 Gainsford Street,  
London SE1 2NY

Tel: +44-(0)20-7403-3020

Website: [businessdisabilityforum.org.uk](http://businessdisabilityforum.org.uk)

Business Disability Forum (BDF) is a not-for-profit membership organisation that supports businesses to recruit and retain disabled employees and serve disabled customers.

Business Disability Forum provides pragmatic support, expertise, advice, training and networking opportunities between businesses. Our aim is to transform the life chances – and experience – of disabled people as employees and consumers.

### Epilepsy Action

New Anstey House, Gate Way Drive,  
Yeadon, Leeds, LS19 7XY

Tel: +44-(0)113-210-8800

Email: [epilepsy@epilepsy.org.uk](mailto:epilepsy@epilepsy.org.uk)

Website: [epilepsy.org.uk](http://epilepsy.org.uk)

Epilepsy Action provides information about any aspect of living with epilepsy and seizures. Provides free help and advice through the use of email and telephone helplines.

Business Disability Forum gratefully acknowledges the help of Kathy Bairstow, Senior Advice and Information Officer at Epilepsy Action with the advice and guidance included in this Briefing.

## **Epilepsy society**

Chalfont Centre,  
Gerrards Cross,  
SL9 0RJ

**Tel: +44-(0)149-460-1300**

**Email: [enquiries@epilepsysociety.org.uk](mailto:enquiries@epilepsysociety.org.uk)**

**Website: [epilepsysociety.org.uk](http://epilepsysociety.org.uk)**

Leading national epilepsy medical charity working for everyone affected by epilepsy, through research, awareness campaigns and care.

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# Contact us

**Business Disability Forum**  
**Nutmeg House**  
**60 Gainsford Street**  
**London**  
**SE1 2NY**

**Tel: +44-(0)20-7403-3020**

**Fax: +44-(0)20-7403-0404**

**Email: [enquiries@businessdisabilityforum.org.uk](mailto:enquiries@businessdisabilityforum.org.uk)**

**Web: [businessdisabilityforum.org.uk](http://businessdisabilityforum.org.uk)**