

Briefing

Employment adjustments for people with Epilepsy

Abridged content for sample purposes

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.

Contents

Introduction	4
Employment and people with epilepsy	9
Reasonable adjustments and best practice	11
Induction, training and development	17
Health and safety	18
Harassment	21
Further sources of reference	22
Contact us	24

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]

[1] Epilepsy Action, 2018

[2] Epilepsy Action

Simple partial (focal) seizures^[3]

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.

[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]

[4] epilepsy.org.uk, redcross.org.uk, 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.

Content has been removed for sample purposes. Pages 11 to 23 are available in the full booklet.

© 2018 This publication and the information contained therein are subject to copyright and remain the property of Business Disability Forum. They are for reference only and must not be reproduced, copied or distributed without prior permission.

Business Disability Forum is committed to ensuring that all its products and services are as accessible as possible to everyone. If you wish to discuss anything with regard to accessibility, please contact us.

**Company limited by guarantee with charitable objects.
Registered Charity No: 1018463.
Registered in England No: 2603700.**



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

Web: businessdisabilityforum.org.uk