

# EPILEPSY IN THE WORKPLACE

## Introduction

Published in April 2015, “Epilepsy in the Workplace: a TUC Guide,” makes claim that there are over 600,000 people with the condition in the UK. Of that number, approximately seven in every ten people can have their seizures controlled with the right dose of the right drug. Yet, uncontrolled seizures, or even a single breakthrough seizure, can have a huge impact on a person’s working life.

This Reps’ Bulletin is designed to highlight how epilepsy is a trade union issue and how action by TSSA reps can bring about a social model of disability.

## What is epilepsy?

If someone has epilepsy, it means they have a tendency to have epileptic seizures which are caused by a sudden burst of intense electrical activity in the brain. There are many different types of seizure, and each person will experience epilepsy in a way that is unique to them.

## Social and medical models of disability

Two of the main ways to understand disability are:

### 1). The social model

Used by the trade union movement, the social model of disability looks at the barriers that are put in the way of disabled people being able to

participate in society. As such, it aims to:

- *remove unnecessary barriers* that prevent disabled people accessing work and services and living independently;
- *identify problems caused by external factors* (eg, flickering lights in a workplace might trigger seizures in a person with epilepsy);
- *distinguish between impairment and disability:*
  - a). *Impairment* is described as a characteristic or long-term trait, which may, or may not, result from an injury, disease or condition (eg, a person with epilepsy may have some cognitive, memory or concentration problems)
  - b). *Disability* is the difficulty experienced by people with an impairment by society not taking sufficient measures to take account of their needs. (eg, an individual is not prevented from carrying out a sudden change in working practices by having epilepsy: but they may be prevented by an employer not giving enough consideration to how these changes could have an impact

on the working life of the person with epilepsy.

- *identify attitudes that may block disabled people's participation and equality* (eg, prejudice and ignorance around epilepsy. Also, workplace practices, procedures, cultures, unwritten rules and forms of communication that do not take account of people with epilepsy.

## 2). The medical model

This model dominates political and legal decision-making, attributing the impairment as the cause of a disabled person's disadvantage and exclusion. An example would be an employer who decided that a person could not work for them because they had epilepsy, rather than considering how to make the workplace suitable for them.

### **What can trade unions do about epilepsy in the workplace?**

Inevitably, trade unions and their reps will have members with epilepsy who they should be able to advise and represent as they do with any other member.

The most effective approach for reps, especially at a company council level, will be to negotiate with the employer to persuade them to adopt a social model approach to disability. In practice this means:

- Collective agreements  
Discuss all the steps that can be taken to make the employer's premises, services, provisions and practices free of

the barriers that may disadvantage disabled people.

- Identify obstacles  
The TUC advise that as part of the drive to secure collective agreements, the reps may identify the kind of obstacles that could impact adversely on workers with epilepsy and the measures needed to remove them. Methods identified by the guide include:
  - Work with the members who have the condition to understand their perspective
  - Carry out health and safety risk assessments
  - Identify (with the member) the appropriate reasonable adjustments
  - Using the advice in Chapter 6 of the Guide, seek agreements with the employer based on an audit of the firm's workplaces in order to create an epilepsy friendly environment
  - Reviewing working practices to enable workers with epilepsy or other impairments to continue to work.
- Training  
An important element of the strategy adopted by union reps will revolve around negotiating training:
  - For themselves so that they can improve their awareness of disability rights and how the social model should operate. In addition, there should be specific learning related to dealing with workplace issues associated with epilepsy.

- For managers, organised by the employer;
- With the work colleagues of an individual who is liable to have seizures at work (but this training should only take place with the agreement of the person with the disability).

- **Publicity**

The use of leaflets and posters from Epilepsy Action and arranging speakers for workplace or branch meetings

### **What happens when an agreement cannot be reached?**

The Equality Act 2010 (see section 11 of the Guide) offers protection from discrimination, including failure to make a reasonable adjustment. For further advice about specific cases or issues, TSSA members should seek advice from their union organiser or the TSSA Help Desk.

Reps will no doubt be aware that reminding employers of their legal obligations can help bring about a suitable outcome, not least to avoid the risk of exposure in an employment tribunal.

### **Rep action**

TSSA reps should familiarise themselves with the contents of the TUC guide and then conduct a sensitive, confidential survey asking members if they suffer from epilepsy or other disabilities. In some locations, members with epilepsy may already be known and they may be willing to share something of their experience in the workplace which could then go on to form the basis of

a strategy that seeks to promote a social model that overcomes barriers.

### **Acknowledgements and further reading**

This Bulletin was prepared using information from “*Epilepsy in the Work Place: A TUC Guide*” which is available online at:

<https://www.tuc.org.uk/Epilepsyintheworkplace>

Epilepsy Action can be contacted as follows:

- Helpline (freephone): 0800 800 5050
- Text: 0753 741 0044
- Email: [epilepsy@epilepsy.org.uk](mailto:epilepsy@epilepsy.org.uk)
- Website: [www.epilepsy.org.uk](http://www.epilepsy.org.uk)

The Epilepsy Action’s National Coordinator for Volunteers can be contacted in respect of training (on (0113) 210 8777).

The TUC Guide also contains other bodies that can be contacted.