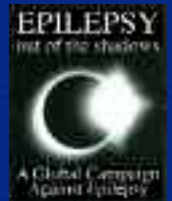


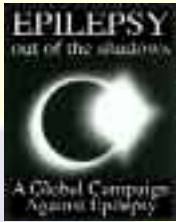


Employment and Epilepsy

An Employers Information Resource



B R A I N W A V E
THE IRISH EPILEPSY ASSOCIATION
www.epilepsy.ie



The Global Campaign Against Epilepsy “Out of The Shadows”, is a joint initiative by the International League Against Epilepsy (ILAE), the International Bureau for Epilepsy (IBE) and the World Health Organisation (WHO). It was launched in Dublin at the 22nd International Epilepsy Congress in June 1997. The joint mission is to improve the acceptability, treatment, services and prevention of epilepsy worldwide. Brainwave, as the Irish Chapter of the International Bureau for Epilepsy, is playing its part in promoting the Global Campaign against Epilepsy.

The campaign objectives may be summarised as follows:

- To increase public and professional awareness of epilepsy as a universal treatable brain disorder
- To raise epilepsy on to a new plane of acceptability in the public domain
- To promote public and professional education about epilepsy
- To identify the needs of people with epilepsy on a national and regional basis
- To encourage governments and departments of health to address the needs of people with epilepsy, including awareness, education, diagnosis, treatment, care, services and prevention

To achieve these objectives, the campaign will develop two parallel and simultaneous programmes:

- A global public awareness programme
- A programme of practical assistance to governments and departments of healthworking through the worldwide network of ILAE/IBE Chapters and Epilepsy Organisations, and the WHO network.

Practical assistance will take the form of encouragement, guidance, advice, information and assistance, especially in identifying the needs of people with epilepsy, and in the education and training of public and professionals.



International Bureau for Epilepsy



World Health Organisation



International League Against Epilepsy

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About Epilepsy

What is epilepsy?

Epilepsy is defined as the tendency to have recurring seizures. Seizures occur as the result of a brief disturbance in the electrochemical activity in the brain, they can be described as a brief and temporary malfunction of normal brain activity. Epilepsy is a common condition, representing 30,000 to 40,000 people in Ireland and 50 million worldwide. It is estimated that 1 in 20 people will have a single seizure at some time in their lives.



Epilepsy is not a mental illness, a psychiatric disorder, nor is it infectious. It is a physical condition, and as such, it affects a wide range of people from all social backgrounds, age and ability.

Why is epilepsy a hidden condition?

Epilepsy, even though it is common, is a well-hidden condition. This can be attributed to two reasons:

- a) It does not physically manifest itself continually in the way that other physical disabilities do (like cerebral-palsy, blindness, etc.)
- b) Many people choose not to inform others about their epilepsy due to the stigma and discrimination that people can attach to the condition.

Why are people reluctant to disclose their condition?

The main reason is a fear of discrimination. As the majority of people with epilepsy lead normal active lives, why should they run the risk of being unfairly considered for a job just because they disclose they have a 'disability'?

Many feel it would be better to get the job on their own merit and then disclose their epilepsy. Again the fear of how a future employer might react can still prevent them disclosing their condition.

It is also worth noting that many people with epilepsy do not fully understand their own condition. Sometimes they have been brought up in a very protective environment, parents and family may be reluctant to discuss the issue. The family may think it better to avoid the subject as it might lead to others knowing their situation and the fear of possible discrimination can then be avoided.

When a person with epilepsy chooses to disclose their condition, often they are placing a great trust in the person to whom they disclose. The person receiving this information should bear this in mind when responding. They should do their utmost to reassure the individual that epilepsy is something the person has, it does not define them. They should also communicate that the individual is respected and accepted for who they are.

Are there different forms of epilepsy?

Yes. Epilepsy is divided into categories according to seizure type:

Generalised seizures: these occur when seizures involve the whole brain.

Partial seizures: these occur when seizure activity starts in one part of the brain.

What happens during a seizure?

There are many different types of seizures. These can range from simple twitching in one limb to a full-blown convulsion. There are four main types of seizure:

- **Tonic-Clonic seizure:** (once known as the major or 'grand-mal' seizure), involves convulsions and loss of consciousness, the person becomes rigid, falls to the ground and jerking can be seen in all limbs. It usually lasts a few minutes.

- **Absence seizure:**
loss of consciousness also occurs in an absence seizure (once known as a minor or 'petit-mal' seizure), but it is so brief that it appears like daydreaming and the person does not fall or convulse.
- **Simple Partial seizure:**
seizure activity will depend on which part of the brain is affected, consciousness is not interrupted and the seizure is limited perhaps to the rhythmical twitching of a limb, or to unusual sensations, such as pins and needles in a specific part of the body.
- **Complex Partial seizure:**
the person although appearing fully conscious will not be aware of surroundings.

The seizure is sometimes pre-empted by a strange feeling welling up from the stomach and/or some other sensory disturbance - known as an Aura. This may be followed by a change in awareness, erratic movements and general confusion.

Although a tonic-clonic seizure can be disconcerting to see, the person having the seizure is not in pain and will have little or no memory of what has happened. A major seizure will last a few minutes. The attacks cannot be stopped or altered so you should not try to rouse the person until the seizure ends.

What are the causes of epilepsy?

Just as there are many different forms of epilepsy, there are also many different causes e.g. brain infection, tumour, stroke, and head injury. However in most cases, there is no actual brain damage or brain disease, and the cause of the condition is unknown.

What causes seizures to happen?

Seizures are usually spontaneous events without a clear cause. In a few people, seizures can be triggered by specific stimuli, such as strobe lights etc. Lack of sleep, boredom, anxiety, abrupt cessation of anti-epileptic treatment and drinking too much alcohol may also bring on a seizure. However it is important to state that up to 70% of people can have their seizures controlled.

Treatment

In most cases epilepsy is treated with medication, and over the recent decades new drugs for epilepsy have become available which allow many people with epilepsy to live virtually seizure-free lives.

First Aid /Healthcare

It is not necessary, usually, to call a doctor or an ambulance for a person with epilepsy having seizure, which generally ends within a few minutes.

The following measures are recommended for tonic-clonic seizures accompanied by falling and unconsciousness:

- Do not panic - Do not move the person unless there is danger.
- Do not put anything in the person's mouth
- Put something under the person's head to protect him/her from injury.
- Stay with the person and observe the process and length of the seizure. (This information should be recorded)
- If the person is still unconscious after the convulsions have stopped, his/her body should be turned into the recovery position.
- After regaining consciousness the person can be asked if, or what type of, help is desired.
- Professional medical help during a seizure is only necessary when
 - a) The seizure lasts longer than 5 minutes.
 - b) Seizures come in a series and the person does not regain consciousness between the seizures.
 - c) The person has injured him/herself during the seizure and needs medical treatment.

If seizures are likely to occur at work, the employer should help the employee to talk about his/her epilepsy to workmates, and some first aid training or other information should be provided for those who might be involved should a seizure occur.

Case Study

An organisation recruited Mary who had epilepsy. On her application form and at the interview stage she declared that her epilepsy was under control and that she had not experienced a seizure for more than a year. However, within the first two weeks of her employment, Mary had numerous seizures. The case was referred to the Company Doctor who said that she must have lied about the status of her epilepsy during the recruitment procedure. At this point the employer did not know what to do and called for advice.

Reply:

There were several issues to consider here:

- It does not necessarily follow that she lied about her epilepsy. Many factors can trigger seizures, including stress, anxiety, tiredness, shift work or factors in the workplace such as flickering lights. Medication that previously controlled her epilepsy may have become ineffective or she may be taking new medication.
- It is vital that the employer talks to her about her epilepsy. These discussions should be handled sensitively. She should be reassured that she is not being disciplined, or the stress could trigger further seizures.
- The employer should ask if any reasonable adjustments would help. If Mary remains at work, she should be encouraged to tell someone when a seizure is imminent. As a reasonable adjustment she could be provided with the use of a quiet room to which she can go if she feels a seizure coming on. It may also be appropriate for someone who works with her to be trained to take first aid action when she has a seizure.
- The Company Doctor should ask for her permission to gain medical reports from her GP and in particular from her specialist regarding her previous and current situation and to obtain a prognosis.

Why Employ Someone With Epilepsy

People hold many misconceptions about the condition of epilepsy. It is important to remember that most people with epilepsy have been able to stabilise their condition through a medical regime. However employers may have a number of concerns when considering whether or not to employ a person with epilepsy.



Employer concerns.

1. Job performance - sick leave and reliability.

It is natural for an employer to be concerned about the issues of reliability and sick leave if a job applicant or employee discloses he/she has epilepsy.

Sick leave: Research has shown that, on average, people with epilepsy have fewer accidents at work than other employees, take less time off work and have good job loyalty records. A common cold or flu is likely to account for more sick leave than any time taken off due to seizures.

Accidents: Epilepsy does not usually force the employer to take extra safety precautions in the work place. People with epilepsy usually do not have seizures at work. They are generally very careful about their own well-being and are no more prone to accidents than anyone else. Research indicates that workers who have epilepsy are, in fact, more aware of potential hazards and so are less likely to have an accident at work.

Productivity: People with epilepsy, being aware of employers' concerns over productivity, are often keen to prove that they are productive, reliable and valuable employees. The difficulty for them is securing the job in the first place. If an employee has a seizure at work, they usually only need a short rest, after which they can resume work as normal. However, people rarely have seizures at work.

2. Risks and safety precautions.

Epilepsy does not usually force employers into taking extra safety precautions in the workplace, and several notable studies have shown the risk of employees with epilepsy having an accident is low.

It is important to note that an epileptic seizure does not reduce the employee's contribution to overall productivity or to his/her position within the workplace. However, it is important to inform workmates who will be directly affected about the employee's condition. The employer should help the employee with epilepsy to disclose his/her condition. Some first aid training or other information should be provided for those who might be involved should a seizure occur.

In the case where seizures occur for the first time in an employee the employer should respond fairly by giving the employee adequate opportunity to receive proper medical treatment before making any decisions about their job suitability.

If any particular job restrictions are needed, there should be clearly stated policies about how they are to be implemented, reviewed or lifted in terms of set time periods. Appropriate vocational guidance and rehabilitation services should be made available at an early stage.

3. Insurance and pension issues.

Sometimes myths about extra insurance in the workplace and problems with pensions or other related issues prevent employers from taking on people with epilepsy. There should be no problems with these issues, provided that everyone concerned is made aware of the facts:

Insurance: It is often assumed that employing someone with epilepsy is ultimately going to result in an increased premium. This is not the case. No special insurance is required for a worker with epilepsy. They are covered. At a basic level, employers should ensure that they are covered by Public Liability Insurance and Employers' Liability. Premiums are only affected by claims, and there is no evidence to suggest claims increase by employing someone with epilepsy.

Pensions: In relation to pensions, it is a general policy that if someone is fit enough to be an employee, they are acceptable to Life Assurers for the pension scheme, if one exists.

Adaptations to machinery: Machinery must be adequately guarded in order to comply with safety regulations covering all workers. If this policy is implemented, it should prevent injury in the unlikely event of

a seizure happening in the vicinity. However, if special guards are required, grants for workplace equipment adaptation are available. *(See Supports for Employer's page)*

4. Jobs people with epilepsy can/cannot perform.

(See 'About Epilepsy' page 2)

People with epilepsy can perform the vast majority of jobs; e.g. they can operate machinery, drive cars and use visual display units and computers. Their job performance depends on their own innate ability and is independent of their condition.

Operating VDUs:

Unnecessary limitations should not be placed on people with epilepsy in working with VDUs. Only a small proportion of all people with epilepsy (estimated at 3-5%) have photosensitive epilepsy: that is they are sensitive to flashing or flickering lights. It's most common in children, usually occurring between 6 and 15 years of age. Therefore, most people of working age will not be predisposed to photosensitivity. In addition most PCs flicker at a much lower rate than at the rate where people are sensitive to seizures.

The small minority of people whose seizures are not completely controlled may have problems working with young children or near open water or at heights. However, it is important to emphasise that blanket restrictions should be avoided.

Driving: *(see 'Employers Rights and Obligations' page 13)*

Most countries adhere to the Recommended European Principles (1996) with regard to driving. In general, people with epilepsy need to be seizure free for one year to drive Group One vehicles (private cars and motors). With regard to Group Two licences (i.e. heavy goods vehicles, buses etc.), on experiencing their first seizure, the person is subject to an unconditional driving ban.

Finding the most suitable employee for the job.

Most people with epilepsy have effectively stabilised the condition and can lead full and active lives. People with epilepsy can also perform the vast majority of jobs.

Despite this many people with epilepsy are still reluctant to disclose their condition for fear of discrimination. They may also feel inadequate in effectively communicating their condition.

Should a person choose to disclose, they may do so:

- a) On the application form.

- b) At the interview.
- c) Having been offered the job.
- d) After starting work.

An employer of course may never discover a person has epilepsy until after the person has a seizure.

Care must be taken in handling this delicate issue of disclosure.

a) On the application form

When assessing whether someone with epilepsy should be considered for interview, an employer should consider first and foremost whether the person is a suitable candidate for the job.

- Does the person have the right training/qualifications?
- Does the person have previous relevant work experience and/or the necessary skills?

b) At the interview.

While continuing to assess the above an employer must also consider:

- Is the person competent?
- Is the person motivated?
- Does the person demonstrate a capacity for work?

In other words employers should apply the same criteria to assess a person with epilepsy as are used to assess every other candidate for the job.

Interviews should focus on the capabilities of the individual with epilepsy and not on his/her real or assumed limitations. This means that suitability for the job should be decided before any implications arising from the job applicant's epilepsy are considered.

A person with epilepsy will sometimes wait to disclose:

c) Having been offered the job.

Feeling they have got the job on their merits and ability.

d) After starting work.

Having proven their ability by their performance.

There are of course people who never disclose, believing that they will still be discriminated against, despite having a proven work record.

When job applicants decide to reveal that they have epilepsy, or the person's condition has been revealed as a result of having a seizure, the following questions will help an employer assess the severity of the individual's condition and how seriously it might affect their work.

1. What kind of seizures does the person have?
2. How often do they occur?
3. What exactly happens when the person is having the seizure?
4. Do the seizures occur randomly or is there a pattern?
5. Is there anything in particular which triggers the seizure?
6. After the seizure how long does it take before the person can carry on with their work?
7. What should be done if the person has a seizure at work?

The details revealed through this line of questioning will also help establish the support measures that an employer may need to put in place to ensure the well being of the person with epilepsy, their colleagues and of course the company's clients.

Reasons for employing a person with epilepsy:

People with epilepsy make just as good (if not better) employees. Studies show that because they can find it difficult to obtain employment, they tend to be more motivated in seeking and retaining jobs.

At present, employers will need to re-examine their own hiring policies as discrimination has been addressed through the introduction of anti-discrimination laws and policies (Equal Status & Employment Act 2000). To protect their own legal standing, employers will need to ensure that people with disabilities (such as epilepsy) enjoy the same rights as other workers in job seeking and in employment.

It will lead to a better and more tolerant working environment if employers are seen to be inclusive of all sections of the population. At present, many people with epilepsy do not inform their employers or indeed their prospective employers about their condition. They fear they will not be called for an interview or that their employer's view of their disability may hinder them in the workplace. These fears are often well founded - many employers with little experience of the disability are concerned that it will lead to absences, a fall in productivity and additional safety, insurance and legal issues. As shown in this section, this is not the case.

By employing someone with epilepsy, employers will become better informed, not only about disability, but also about their own work place. Employers rarely have to implement any changes in their work practices, as the safety, legal and insurance structures needed for someone with epilepsy apply for all employees.

By including people with disabilities in their search to find the right employee, employers will gain access to a broader base of people with the specific skills that they will need for their work place.

Most employers find they do not need to make any adjustments in employing a person with epilepsy. However, if they do, the organisational, financial and legal supports are in place to help them do so.

Case Study

Tom works for a printing company, where he has been employed for 19 years. His employer and colleagues did not know he had epilepsy. He operates a heavy-duty printing machine. He recently had a seizure (tonic-clonic) at work, while in the staff canteen. No one knowing what had happened to him, the ambulance was called. Tom's employer learning that it was an epileptic seizure is now faced with the situation of assessing the risk factors in allowing Tom to continue in his present position seeks help.

Reply:

- It can be frightening to witness a seizure for the first time and not knowing that an employee has epilepsy can increase the concern and anxiety of an employer and colleagues. However it is vital that the employer approaches the situation calmly and first and foremost talks to Tom about his epilepsy. These discussions should be handled sensitively.
- In assessing the safety and suitability of the person for particular work the questions overleaf can provide a useful guide.
- On investigation it was learned that Tom has had only one seizure a year over the last 5 years. These have occurred in the period of November to January, all have occurred while he was at home. The increased financial pressure of the Christmas season proved to be a very anxious time for Tom and the stress produced, may have acted as the trigger for his seizures. The current seizure occurred while Tom was in the canteen not actually working on the machine.
- The company have ensured that all health & safety measures are in place including emergency stop buttons on all machinery. Tom should therefore be perfectly safe to continue working. As an extra precaution the employer could ensure that Tom is never left alone and that his colleagues receive basic first aid training.

Employer's Rights and Obligations



People hold many misconceptions about the condition of epilepsy. It is important to remember that most people with epilepsy have been able to stabilise their condition through a medical regime. Furthermore, for the majority of people with epilepsy, the condition is unlikely to impinge on their working lives. Sick leave and accidents at work are no more frequent among people with epilepsy than in other workers.

However, a number of myths have grown up around epilepsy, probably dating from times when medical treatment was not as successful in treating the condition and from common historical portrayals of epilepsy and seizures.

The purpose of this Information Booklet is to dispel many of these myths, particularly those relating to employment.

Contrary to popular belief, people with epilepsy can drive cars and use visual display units (VDUs). In fact, people with epilepsy can work in a vast majority of jobs, and have the same aspirations as other employees. Furthermore, employers rarely, if ever, incur extra costs through employing someone with epilepsy.

One of the most common myths concerns the belief that extra insurance is needed when employing a person with epilepsy. It is often assumed that employing someone with epilepsy is ultimately going to result in an increased premium. This is not the case. No special insurance is required for a worker with epilepsy. They are covered. At a basic level, employers should ensure that they are covered by Public Liability Insurance and Employers' Liability. Premiums are only affected by claims, and there is no evidence to suggest claims increase by employing someone with epilepsy.

Employers must also be aware of the implications of current legislation in relation to Employment Equality.

Employment Equality Act 1998

An act to make further provision for the promotion of equality between employed persons. (see summary below)

Equal Status Act 2000

An act to promote equality and prohibit types of discrimination, harassment and related behaviour.

Disability Act 2005

An act to make further and better provision for persons with disabilities in respect of accessibility to public buildings, public services and certain other services and to employment in the public services.

Equality Act 2004

An act to amend the employment equality act 1998, pensions act 1990 and equal status act 2000 for the purpose of making further and better provision in relation to equality of treatment in the workplace and elsewhere.

Copies of relevant acts are available from *Government Publications* and on the internet at www.irlgov.ie

Employment Equality Act

The Employment Equality Act, 1998 outlaws discriminatory practices in relation to and within employment. The Act prohibits direct and indirect discrimination and victimisation in employment on nine grounds.

- Gender
- Marital Status
- Family Status
- Sexual Orientation
- Religion
- Age
- Disability
- Race
- Membership of the Traveller Community

All aspects of employment are covered:

- Equal pay
- Access to employment

- Vocational training
- Conditions of employment
- Work experience
- Promotion
- Dismissal

The Legislation applies to:

- Public and private sector employment
- Employment agencies
- Vocational training bodies
- The publication of advertisements
- Trade union and professional bodies
- Full-Time and Part-Time workers
- Collective agreements

Discrimination

Discrimination is defined as less favourable treatment. A person is said to be discriminated against if he/she is treated less favourably than another is, has been, or would be treated on any of the nine grounds.

Harassment

Harassment is defined as any act or conduct, which is offensive, humiliating, or intimidating on a discriminatory ground, including acts of physical intimacy, spoken words, gestures, or the production, display, or circulation of written materials or pictures. An employer, an employment agency, or a vocational training body will be liable for harassment by their employees, clients, customers or other business contacts, if they do not take reasonable steps to prevent such harassment.

Redress

Discrimination occurs in the following examples:

Gender

A female employee receives less pay than her male comparator (and there is no justifiable reason).

Marital Status

A female applicant for a position is asked questions at an interview in relation to her marital status and the number of children. Male applicants are not asked these questions at the interview.

Family Status

An employee is not considered for shift work because she/he is a resident primary carer for someone with a disability.

Sexual Orientation

An employee is harassed within the work place because of his/her sexual orientation.

Religion

An applicant is not short listed due to information given on a pre-interview questionnaire as to her/his religious belief.

Age

An employee is considered to be too old and close to retirement to gain any benefit from training on I.T.

Disability

An employee is dismissed from employment based on the finding of a medical report.

Race

An employer persistently refuses to consider his/her staff for promotion because of their ethnic origin.

Traveller

An employment agency refuses to give career guidance and/or training to a member of the Traveller Community.

The above is taken from 'enforcing your rights' published by the Equality Authority.

Epilepsy & Driving

The Driving Regulations Commission of the International Bureau of Epilepsy (IBE) sees its role as promoting the adoption of fair evidence based regulations for granting of driving licences to people with epilepsy. Brainwave in its work as part of this Commission has been instrumental in successfully lobbying for changes in the Irish law governing driving regulations for people with epilepsy.

Brainwave hopes that these changes will continue and will reflect a greater understanding of the condition so ensuring fair and equitable treatment for people with epilepsy.

The traffic laws are based on principles set up by the Department of the Environment. These stipulate that a person with epilepsy must be seizure-free for one year, to qualify for a group one licence.

The Road Traffic (Licensing of Drivers) Regulations 15th. November 1999, sets out the revised conditions below, under which a person with epilepsy can obtain a driving licence:

In the case of an applicant for a licence to drive a vehicle of any category who suffers or has suffered in the past from epilepsy, fitness to drive:

a) may be certified for a limited period in relation to vehicles of category A1, A, B, EB, M or where the applicant has not suffered any epileptic attack during the twelve month period preceding the date of medical examination.

b) an applicant who suffers or has suffered in the past from epilepsy will not be certified in relation to vehicles of category C1, C, D1, D, EC1, EC, ED1, or ED (lorries, buses and heavy goods vehicles).

Amendments to the Road Traffic (Licensing of Drivers) Regulations 2004 became effective in November 2004. These amendments are in relation to fitness to drive cars, light vans and motorcycles for people with specific seizure types.

- Nocturnal/Sleep seizures: From now it will be possible for a person who has had sleep seizures only for two years to drive with a Consultant Neurologist's Certification.
- Provoked seizures: Under the certification of a Consultant Neurologist in certain circumstances where there has been a provoked seizure, the one year rule can now be reduced to six months.
- Simple Partial Seizures: People who only have seizures which are Simple Partial and where consciousness is fully maintained throughout all their seizures (e.g. auras alone) may now be allowed to drive provided this can be certified by a Consultant Neurologist.

Please note there are no changes to section (b) above where licences for lorries, buses and heavy goods vehicles will still not be

granted.

What counts as a seizure in respect of the law on driving?

All episodes of epileptic activity (including auras or seizure warnings in which consciousness is retained) count as seizures.

Applying for a Licence:

Every person applying for a driving licence, or a provisional licence, is asked on the application form if they have epilepsy, or if they had epilepsy in the past. If a person with epilepsy has been seizure free, night and day, for at least 1 year (preceding the date of the medical examination) even if they are still on medication, can be granted a licence to drive vehicles in categories A, A1, B, EB, M and W - motorcycles, cars, light vans tractors.

If a person with epilepsy is 1-year seizure free their application will have to be accompanied by a Medical Report Form D501 completed by their doctor. If the doctor is in doubt as to their fitness to drive, the person with epilepsy may be referred to a specialist for another opinion. Application must be made within ONE MONTH of having the medical report filled in by the doctor.

Case Study

€19,000.00 for woman who lost job over epilepsy.

A woman worked as a packer on a temporary basis for an Irish computer component factory. After several weeks, her supervisor said her work was very satisfactory and the company would like to employ her on a permanent basis. She filled in an application form, on which she stated she had epilepsy, which was controlled by medication. She was required to undergo a medical examination and the doctor told the personnel officer by phone of her epilepsy. She was dismissed with immediate effect. The Equality Authority on behalf of the woman subsequently took the case. The labour court found that there had been no discussion of the company's concerns with the woman and no safety assessment, which could have identified the extent, if any, to which the working environment presented a danger to the woman.

Nor did the company wait for a written medical report, which stated that the woman's epilepsy presented no problem for the type of work she was doing. The labour court awarded the woman €19,000.00 on the grounds of discrimination.

Frequently Asked Questions



This section contains the questions employers frequently ask about epilepsy and employment. In answering these questions we refer you to the different sections contained in the booklet.

1. What questions do I need to ask a job applicant who discloses that s/he has epilepsy?

The same questions used to assess other candidates. The focus should be on assessing the person's qualifications and experience i.e. their ability to do the job. Once this is established assessment of their condition can be made to ascertain if any job accommodation measures need to be taken.

See - 'Why employ someone with epilepsy' page 7

2. What do I do if I find out that a person I have recently hired has epilepsy?

Use the opportunity to inform yourself about epilepsy. You'll be amazed at how little it interferes with day-to-day living. Bear in mind that you or any one of your employees could develop a disability in the future due to accident or illness.

3. Are persons with epilepsy obliged to disclose their condition to employers?

As the law stands in Ireland, they are only obliged to disclose their condition if they are specifically asked.

4. Is it true that people with epilepsy have more absenteeism?

No. Research has shown that, on average, people with epilepsy have fewer accidents at work than other employees, take less time off work and have good job loyalty records. A common cold or flu is likely to account for more sick leave than any time taken off due to seizures.

See 'Why employ someone with epilepsy' page 7

5. Can people with epilepsy work with machinery?

Yes. Epilepsy does not restrict a person from operating guarded machinery. If changes need to be made, there are grants available for adapting workplace equipment.

See 'Supports for Employers' page 24

6. Do people with epilepsy have more accidents in employment?

No. There is evidence to suggest they have fewer accidents, because they are more aware of potential hazards. Epilepsy does not usually force the employer to take extra safety precautions in the work place. People with epilepsy usually do not have seizures at work. They are generally very careful about their own well-being and are no more prone to accidents than anyone else. Research indicates that workers who have epilepsy are, in fact, more aware of potential hazards and so are less likely to have an accident at work.

See 'Why employ someone with epilepsy' page 7

7. Are people with epilepsy less productive?

No. People with epilepsy, being aware of employers' concerns over productivity, are often keen to prove that they are productive, reliable and valuable employees. The difficulty for them is securing the job in the first place. If an employee has a seizure at work, they usually only need a short rest, after which they can resume work as normal. However, people rarely have seizures at work.

See 'Why employ someone with epilepsy' page 7

8. Are there higher work cover premiums for people with epilepsy?

No. It is often assumed that employing someone with epilepsy is ultimately going to result in an increased premium. This is not the case. No special insurance is required for a worker with epilepsy. They are covered in the same way as any other employee. At a basic level, employers should ensure that they are covered by Public Liability Insurance and Employers' Liability. Premiums are only affected by claims, and there is no evidence to suggest claims increase by

employing someone with epilepsy.

9. What do I do if someone has a seizure at work?

Check First Aid/Healthcare.

See 'About Epilepsy' page 2

10. Is job accommodation for people with epilepsy expensive?

No. Most often, employers do not need to make any adjustments, and if changes need to be made, financial support is available.

See 'Supports for Employers' page 24

11. Are people with epilepsy allowed to drive?

Yes, but with some restrictions. *See 'Employers Rights and Obligations' page 13*

12. How do I reassure my customers if an employee has a seizure at work?

Although observing a seizure can be disconcerting, the customer is likely to appreciate an employer who reacts with understanding and fairness towards an employee with epilepsy. Indeed, providing staff with first aid information would be advantageous in the event of a customer having a seizure.

13. Are people with epilepsy able to handle management positions?

Yes, if they have the job qualifications and skills for doing so.

14. What do I tell co-workers if I employ a person with epilepsy?

Anything to be said should be done in the presence of the employee with epilepsy. It might be a good time to have an open discussion about epilepsy and other disabilities in general. First Aid measures should also be dealt with. Epilepsy Awareness Training is available from Brainwave.

See 'Supports for Employers' page 24

15. Is stress in the work place a particular risk for people with epilepsy?

No it's not. On the contrary boredom sometimes causes seizures. Everyone is affected by stress to some degree, and everyone has to learn how to cope with it in his or her working life.

16. Are there any guidelines or principles for employing people with epilepsy?

Yes, but they have more to do with good practice rather than employing someone with epilepsy per se. The Employment Commission of the International Bureau for Epilepsy (IBEEC) have produced a document entitled Principles for Good Practice in the Employment of People with Epilepsy.

Extract

The majority of people with epilepsy require no special help to become economically active. However, sometimes epilepsy can present considerable problems in getting and keeping jobs due to misunderstandings about epilepsy and the implications it has in the work place. Areas for good practice:

- Health Care - When assessing an employee or job applicant, the employer needs to understand some of the basic facts about epilepsy and its possible impact on work performance.
- Job Suitability - The vast majority of jobs are suitable for people with epilepsy.
- Recruitment and selection - It is easy to discriminate against people with epilepsy unintentionally.

The material in this information pack will help employers ensure that the principles of good practice outlined above are implemented. The IBEEC document is available from Brainwave.

Case Study

Louise attended an interview for a clerical position. She disclosed to the interviewer that she has epilepsy. Despite the fact that her CV shows she has excellent computer skills the interviewer believed that it would be unsafe for Louise to work at a computer and sought help.

Reply:

- As can be seen from the section '*Why employ someone with Epilepsy?*', only a small proportion of all people with epilepsy have photosensitive epilepsy: that is they are sensitive to flashing or flickering lights. It is most common in children, usually occurring

between 6 and 15 years of age.

- Therefore, most people of working age will not be predisposed to photosensitivity. Louise's diagnosis will state whether she is predisposed.
- In this instance it could be argued that the employer is being over cautious. However he could request a letter from Louise's GP which

would clarify the issue of photosensitivity as part of her diagnosis.



Supports For Employers

“People with disabilities are often confronted in the work place with pre-conceived ideas or myths about their disability, such as their ability to do the work, and what they might need to do the job. Often these misconceptions and myths disguise an underlying discomfort or embarrassment on the part of those without a disability, when they come into contact for the first time with people with disabilities”.

(IBEC’s Guideline on employing people with a disability)

For an employer who is interested in bringing people with epilepsy into the workforce or for those who have employees with epilepsy, Brainwave can offer the following support.

Epilepsy Awareness Training, which can provide guidance on:

What is Epilepsy ?

- A look at the facts concerning the condition as opposed to some of the commonly held misconceptions.

What is a Seizure ?

- Epilepsy is a condition that is unique to each individual. This section looks at the major classifications of seizures.

Do’s and Don’ts

- This section looks at the things people should/should not do if they are in a situation where a person has a seizure.

Professional Issues

- Guidelines on assessing the suitability of a person with epilepsy to undertake specific jobs.

This presentation can be customised to address issues of specific audiences e.g.

Job Coaches dealing with a person with epilepsy.

Accommodation measures for people with epilepsy

For details of Brainwave's Epilepsy Awareness Training Contact Brainwave's Head Office - 249 Crumlin Road, Dublin 12. Tel: 01-455 7500

Workplace/Equipment Adaptation Grant

Most buildings, which have been designed recently, should conform to modern building regulations and provide, for example, good access for wheelchair users. However, if you wish to employ a person with a disability but think your workplace or equipment isn't suitable, a grant may be available towards the cost of making the necessary adaptations. You can apply for a grant if you are:

- About to employ a person with a disability.
- Continuing to employ a worker who has become disabled.
- A self-employed person with a disability.

A maximum grant of €6,350 will be paid on completion of the adaptations to premises or equipment.

FAS run a number of employment related schemes to assist people with disabilities:

- Back to work Allowance Scheme
- Employee Retention Grant Scheme
- Job Interview Interpreter Grant
- Wage Subsidy Scheme

Details of these schemes can be obtained from any FAS office.

Positive to Disability.

Organisations with equal opportunities policy and practices that include people with disabilities can earn accreditation as a Positive to Disability employer. This symbol can be used in company promotions and advertising. A resource pack to assist employers is available free of charge.

[\(IBEC's Guideline on employing people with a disability\)](#)

Examples of Job Accommodation Measures

Most people with epilepsy need no job accommodation measures. Occasionally, however, a person with epilepsy may need some changes made to ensure successful and safe job performance. The following are some examples.

- If an employee develops epilepsy there may well be concern as to their ability to continue with their normal work duties. Should this prove to be the case it might be advisable to consider how the individual's experience within the organisation could be utilised in other areas and so retain the experience that the person in question has developed.
- Restructuring a job somewhat so that the inability to do just one or two work tasks will not prevent a person from doing the job. For example, an employee with epilepsy working as a book-keeper was not able to take the deposit to the bank due to not having a drivers licence. Another employee in the firm took on this once-a-week duty.
- Having one team member drive for jobs in which driving is generally a shared responsibility (for example, survey team, highway crew, public sanitation, utilities), if the person with epilepsy is unable to do any driving.
- Reassignment to another job if seizures interfere with their current job.

Other Measures

- Regular shifts rather than rotating or split shifts (some people's

seizures increase with irregular schedules and fatigue).

- Allowing the employee sufficient time to become familiar and comfortable with the job and work environment (the stress of starting a new job may temporarily bring on a few seizures for a person who ordinarily has good seizure control).
- Flexibility in scheduling for people who use public transport may occasionally be needed. Many, though not all, people with epilepsy rely on public transportation. A system for putting them in contact with other employees for lift sharing may be helpful.
- Phones that ring instead of flash (for some people with epilepsy, strobe type flashing lights trigger seizures).
- Assigning the employee with epilepsy to work on machines equipped with "deadman" switches that turn off the machine automatically.
- Educating supervisors and co-workers about first aid for seizures and posting first aid instructions in the work area. In some situations, having a "buddy system" in which one employee in the same workplace is designated to assist the person having a seizure can be helpful in reducing panic, confusion and lost time.
- If necessary, allowing recovery time after a seizure (usually needed only for certain types of seizures and depends very much on the individual). This accommodation can be made with the understanding that sick leave will be used or that lost time will be made up. Having a cot/bed available (in a restroom or private place) for the employee to rest on and recover after a seizure has been used as a means of accommodation in some situations.
- Having a pillow available in the work area to place under the head of a person having a tonic-clonic ('grand-mal') seizure.
- Allowing an employee with epilepsy to take medication at required times, or working with the doctor to revise the medication schedule if it interferes with work.
- For those people with epilepsy who have memory problems due to brain injury, putting instructions in writing and taking more time for training may be helpful.
- Use of scaffolding with safety bars instead of a ladder.

These or similar measures may help an employer retain the services and contribution of a long-standing employee, albeit in a somewhat modified capacity, or help in the decision of employing a person with epilepsy.

Remember that the need for any particular accommodation measure will depend on the individual and how epilepsy affects him or her.

Case Study

Josephine works in a beauty clinic. She was not asked about any medical condition so did not disclose that she had epilepsy. She got the job and was a very confident, pleasant worker with excellent communication skills. Three months into the job Josephine's 'worst nightmare' situation occurred. She felt a seizure coming on and went to the rest area. She had the seizure, recovered and after a short rest resumed work. Her employer sought some advice before arranging to meet with Josephine to discuss and assess the episode.

Reply:

- As with all these cases discussions should be handled sensitively. It is vital that an employer discusses an employee's epilepsy with the view to establishing a better understanding of the condition and how it affects a particular employee.
- Josephine has a warning of her seizures and there is a rest area where she can remove herself from clients. Taking this into account, the employer might consider how Josephine could signal to her colleagues so that someone could take her place and so minimise the delay for clients.
- They might also consider, with Josephine's co-operation, how other staff might best be informed of her condition and what support she might need from them.

- Training would also help staff deal with the situation of a client having a seizure while on the premises.

Support for employers is available from a range of national organisations:

Equality Authority,
2 Clonmel Street, Dublin 2
Tel: (01) 4173336 Fax: (01) 4173366
Email: info@equality.ie
Web: www.equality.ie

The Equality Authority is an independent body set up under the Employment Equality Act 1998. The Equality Authority replaced the Equality Agency and has a greatly expanded role and function.

FÁS,
PO Box 456,
27-33 Upr. Baggot Street,
Dublin 4
Tel: (01) 6070500 Fax: (01) 6070600
Email: info@fas.ie
Web: www.fas.ie

The National Training and Employment Authority, FÁS, provides an extensive range of services to businesses in Ireland. These services cover small, medium and large firms, indigenous and foreign, and those in all sectors of service and industry.

FÁS runs specific programmes to assist businesses and also provides a training advisory service on a regional basis.

In some sectors training initiatives are in operation, which encourage the development of training in those sectors.

IBEC, Confederation House,
84-86 Lr. Baggot St., Dublin 2
Tel: (01) 6601011 Fax: (01) 6601717
Email: info@ibec.ie
Web: www.ibec.ie

The Irish Business and Employers Confederation (IBEC) represents and provides economic, commercial, employee relations and social affairs to some 7,000 companies and organisations from all sectors of economic and commercial activity.

ISME,
Irish Small and Medium Enterprises Association
17 Kildare Street,
Dublin 2
Tel: (01) 662 2755 Fax: (01) 662 2157 or (01) 661 0517
Email: info@isme.ie
Web: www.isme.ie

The Irish Small and Medium Enterprises Association, formed in 1993, guarantees that Small and Medium Enterprises in Ireland have an independent voice. The Association is unconstrained in this mission because it relies uniquely on the resources of its members and not those of big business.

Membership is comprised exclusively of entrepreneurs who own and manage competitive businesses, the employees of whom constitute up to 70% of those employed in the private sector.

NDA,
25 Clyde Road,
Ballsbridge, Dublin 4
Tel: (01) 6080400 Fax: (01) 6609737
Email: nda@nda.ie
Web: www.nda.ie

The National Disability Authority is an independent statutory body operating under the aegis of the Department of Justice, Equality and Law Reform. Its mission is to promote and help secure the rights of people with disabilities by influencing public policy and legislation and working to ensure that services for people with disabilities are of the highest standard and quality.

SFA, Confederation House,
84-86 Lr. Baggot Street, Dublin 2
Fax: (01) 6612861
Email: info@sfa.ie
Web: www.sfa.ie

The Small Firms Association represents and provides economic, commercial, employees relations and social affairs advice and assistance.

Epilepsy and Employment

Useful Publications

TITLE	DATE OF PUBLICATION	PUBLISHED BY
A Practical Guide to Employment Adjustments for People with Epilepsy	2002	Employer's Forum on Disability Nutmeg House 60 Gainsford Street London, SE1 2NY England
Epilepsy and Employment	2002	National Society for Epilepsy Chalfont St. Peter Gerrards Cross Bickinghamshire SL9 0RJ England
Proceedings of the Employment Sessions, 23rd International Epilepsy Conference, Prague 1999	2000	International Bureau for Epilepsy (IBE) P.O. Box 21 2100 AA Heemstede The Netherlands
Principles for Good Practice in the Employment of People with Epilepsy	2000	International Bureau for Epilepsy (IBE) P.O. Box 21 2100 AA Heemstede The Netherlands
Guidelines on Employing People with a Disability	2000	Irish Business & Employers Confederation (IBEC) Confederation House 84-86 Lower Baggot Street Dublin
Frequently Asked Questions on the Employment Equality Act 1998	2000	The Equality Authority Clonmel Street Dublin 2
Code of Practice for the Employment of People with Disabilities in the Local Authority Sector	1999	Department of the Environment & Local Government The Custom House Dublin 1

Epilepsy and Driving -
A European View

1997

International Bureau for
Epilepsy (IBE)
P.O. Box 21
2100 AA Heemstede
The Netherlands



B R A I N W A V E

THE IRISH EPILEPSY ASSOCIATION

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1 Roden Place, Dundalk, Co. Louth.

Tel/Fax: (042) 933 7585

35 Washington Street, Cork.

Tel: (021) 4274774 Fax: (021) 4272672

Unit 4 Russell Centre, Russell St., Tralee, Co. Kerry.

Tel: (066) 7119507

Ozanam House, St. Augustine Street, Galway.

Tel: (091) 568180

Chamber of Commerce House,

40 Port Road, Letterkenny, Co. Donegal.

Tel: (074) 9168725

The Northside Community Centre, Forthill, Sligo.

Tel/Fax: (071) 9146255

Social Services Centre, Henry Street, Limerick.

Tel: (061) 313773 Fax: (061) 314069

Offaly Historical Society, Bury Quay, Tullamore,
Co. Offaly.

Tel: (057) 9328631

The Tower, St. Canices Hospital, Sion Road,
Kilkenny.

Tel: (056) 7784496