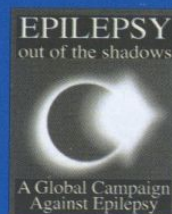


Employment and Epilepsy

An Employers Information Resource



BRAINWAVE
THE IRISH EPILEPSY ASSOCIATION
www.epilepsy.ie

1. ABOUT EPILEPSY

1. What is Epilepsy?

Epilepsy is a common condition, representing an estimated 40,000 people in Ireland and 50 million world wide. It manifests itself through a seizure in the brain that is triggered by an excessive electrical discharge from the brain cells. Anyone can experience a seizure if conditions are appropriate. Many people have a single seizure at some time in their lives, but this does not mean they have epilepsy. Epilepsy can be defined as the tendency to experience recurrent seizures.

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 and across the spectrum of ability.

2. 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.), and b) many people choose not to inform others about their epilepsy due to the stigma and discrimination that people can attach to the condition.

Are there different forms of epilepsy?

There are many different types of seizures. These can range from simple twitching in one limb to a full-blown convulsion. Epilepsy is divided into two general categories according to seizure type

1. Partial seizures: these occur when seizure activity starts in one part of the brain.
2. Generalised seizures: these occur when seizures involve the whole brain.

3. What happens during a seizure?

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.

Not all seizures involve convulsions or loss of consciousness. For instance, in simple partial seizures, consciousness is not interrupted and the seizure is limited to, perhaps to the rhythmical twitching of a limb, or to unusual sensations, such as pins and needles in a specific part of the body.

The one seizure that does involve convulsions and loss of consciousness is the tonic-clonic (once known as the major or 'grand-mal' seizure). During this type of seizure, the

person becomes rigid, falls to the ground and jerking can be seen in all limbs.

Loss of consciousness also occurs in an absence seizure (sometimes 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.

Although major epileptic attacks 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.

4. What are the causes of epilepsy?

Just as there are many different forms of epilepsy, there are also many different causes of the disability and it can begin at any age. In most cases, there is no actual brain damage or brain disease, and the cause of the disability is unknown.

5. 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 70-80% of people with epilepsy have their disorder under control and rarely experience seizures.

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.

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.

2. FINDING THE MOST SUITABLE EMPLOYEE

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 first of all 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.

Relevant questions that employers can ask:

What kind of seizures does the person have?

How often do they occur?

What exactly happens when the person is having the seizure?

Do the seizures occur randomly or is there a pattern?

Is there anything in particular which triggers the seizure?

After the seizure how long does it take before the person can carry on with their work?

What should be done if the person has a seizure at work?

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 these questions will help an employer assess the individual's condition and whether it could affect their work. Based on this assessment there may be a need to make accommodation for the person with epilepsy.

(These questions also apply for c) and d) below).

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.

3. FREQUENTLY ASKED QUESTIONS

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

The same questions used to assess other candidates.

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 anyone of your employees could become disabled in the future due to accident or illness.

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

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. See the Job Performance section below for more information.

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. Final analysis depends on seizure pattern & frequency, safety issues and also individual assessment.

6. Do people with epilepsy have more accidents?

No. There is evidence to suggest they have fewer accidents, because they are more aware of potential hazards.

7. Are people with epilepsy less productive?

No.

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

No. See the Insurance & Pension Issues section below for more information.

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

First Aid /Healthcare:

It is not necessary, usually, to call a doctor or an ambulance for an epileptic 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.
Put something under the person's head to protect him/her from injury.
Do not put anything in the person's mouth.
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 themselves 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 10 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.

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 the Job Accommodation section below for more information.

11. Are people with epilepsy allowed to drive?

Yes, with restrictions. [Click here for Driving Regulations.](#)

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 could be advantageous in the event of a customer have 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.

15. 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.

16. 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 their working life.

4. 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. 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.

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. Furthermore, employers rarely, if ever, incur extra costs through employing someone 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 employer's concerns over productivity, are often keen to prove themselves to be 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. 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 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.

4. Jobs People with Epilepsy Can/Cannot Perform.

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.

There are some restrictions e.g. a person with epilepsy cannot drive a heavy good vehicle, train or bus or become a pilot.

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.

People who have photosensitive epilepsy can use computers with safety precautions e.g frequent breaks, screens, lenses etc.

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:

Most countries adhere to the Recommended European Principles (1996) with regard to driving. In general, people with epilepsy need to be seizure free for up to 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. However there are exceptions to these prohibitions.

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 absenteeism, a fall in productivity and additional safety, insurance and legal issues. As shown above 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 across the board.

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.

5. EXAMPLES OF JOB ACCOMMODATION

Most people with epilepsy need no job accommodations. Occasionally, however a person with epilepsy may need an accommodation to ensure successful and safe job performance. The following are some examples. Remember that the need for any particular accommodation will depend on the individual and how epilepsy affects him or her.

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 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 ride sharing may be helpful.

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.

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 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.

Reassignment to another job if seizures interfere with current job.

Use of scaffolding with safety bars instead of a ladder.