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Mental health conditions	Depression	<p>Persistent sadness, hopelessness, and a lack of interest in things that previously made you happy, for weeks or months at a time.</p> <p>Depression affects 1 in 10 people over the course of their lives.</p> <p>Depression can be mild, moderate or severe. Some specific types of depression include Seasonal Affective Disorder, Dysthymia, Prenatal Depression and Postnatal Depression.</p>	<p>Some common psychological symptoms of depression include continuous sadness or low mood, loss of motivation, lack of enjoyment from life, feeling tearful, anxious, irritable, finding it hard to make decisions, feeling intolerant of other people, low self-esteem and in some cases thoughts of self-harm or suicide. Physical symptoms could include speaking or moving slower than usual, aches and pains that can't be explained, losing, or sometimes gaining, appetite or weight, disturbed sleep and loss of energy. People with depression may also withdraw socially, avoiding spending time with friends or neglecting interests/hobbies.</p> <p>Depression may manifest itself differently in different people, so consult with people who disclose depression about how it impacts them individually.</p>	<p>Depression is experienced differently by different people, so if an employee discloses depression talk to them about what accommodations would help them first. They will have the best understanding of what they need.</p> <p>Some general ways to support employees with mental health conditions include provision of counselling and occupational health support, flexible working, days off for mental health recovery.</p>
	Anxiety	<p>Anxiety is a natural human response to a feeling of threat. However, for some people feelings of anxiety are more constant and this can impact on their ability to live their lives as they would want to. Anxiety is the main symptom of several conditions, including</p>	<p>The physical effects of anxiety could include panic attacks, headaches, backache or other aches and pains, a fast, thumping or irregular heartbeat, sweating or hot flushes, sleep problems, grinding your teeth. Someone with anxiety may feel unable to relax, want lots of</p>	<p>Anxiety is experienced differently by different people, so if an employee discloses anxiety talk to them about what accommodations would help them first. They will have the best understanding of what they need.</p>

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		<p>generalised anxiety disorder, panic disorder, phobias, post-traumatic stress disorder and social anxiety disorder.</p>	<p>reassurance from others or worry that others are angry or upset with them, experience low mood and depression, rumination over previous negative experiences, or worry about things that could happen in the future. However, anxiety feels different for everyone so it's best to understand the impact it can have on a case-by-case basis.</p>	<p>Some general ways to support employees with mental health conditions include provision of counselling and occupational health support, flexible working, days off for mental health recovery, using preferred communication methods, allowing time out when employees feel distressed, or alternations to workspaces (to be lighter, or quieter for example).</p>
	<p>Eating Disorders</p>	<p>An eating disorder is a mental health condition where you use the control of food to cope with feelings and other situations. Unhealthy eating behaviours may include eating too much or too little or worrying about your weight or body shape. Common types of eating disorder include anorexia nervosa, bulimia and binge eating disorder (BED).</p>	<p>Having an eating disorder may have the effect of feeling anxious, depressed, or socially withdrawn. Someone with an eating disorder may have very strict routines and habits around food, exercise a lot, or experience physical symptoms such as dizziness, faintness, or poor circulation, among other effects. Not everyone with an eating disorder, even the same type of eating disorder, experiences it in the same way.</p>	<p>People with eating disorders often present little difficulty at work and excel at their job. They may make an effort to keep difficulties they face to themselves to avoid their illness being noticed at work. However, if someone does disclose an eating disorder, talk to them about how best they can be supported at work. Staff who have an eating disorder may require lengthy treatment or absence to attend appointments. Flexible working arrangements could better enable employees to meet their health needs. Staff with managerial or supervisory responsibilities will benefit from understanding how best to support someone with an eating disorder. Eating disorders are</p>

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				illnesses, so policies and procedures around staff illness will be relevant.
	Bipolar Disorder	<p>Bipolar disorder is a mental health condition which affects your mood. People with bipolar disorder have episodes of depression (feeling low and lethargic) and mania or hypomania (feeling high and overactive). The impact of depression is discussed above. Hypomania and mania are periods of over-active and excited behaviour that can have a significant impact on everyday life. Mania is more severe than Hypomania and lasts a week or more (where hypomania usually lasts a few days and tends to feel more manageable than mania). There are different types of bipolar disorder, some of these include bipolar 1, bipolar 2, Cyclothymia, and rapid cycling bipolar. Bipolar disorder type depends on the regularity and duration of periods of depression and mania or hypomania, among other factors.</p>	<p>Not everyone with bipolar disorder experiences mood episodes the same way or for the same amount of time. During an episode of depression, people with bipolar disorder may experience many of the same symptoms as those described in the section above on depression. Depressive episodes could last from two weeks up to months. During episodes of hypomania, someone may feel happy, excited, like they can't get their thoughts out quickly enough, agitated, easily distracted, they may also be more active than usual, speak faster, sleep very little, spend money excessively and lose social inhibitions. During episodes of mania, in addition to the symptoms of hypomania they may also feel very confident, like they're untouchable, like they can perform physical or mental tasks better than normal, or like they understand, see, or hear things others can't (occasionally this leads to an episode of psychosis), they may also say or do things that are out of character, behave rudely, or take</p>	<p>Since bipolar disorder is different for each person, if someone discloses bipolar disorder speak to them about how they can be best supported based on their experience of the condition and any triggers which they find induce a change or deterioration in their mood. Some forms of adjustment which may help include flexibility in working hours or patterns, such as mental health days, improvements to the physical working environment, support with workload, or support from others (e.g., a mentor, occupational health advisor etc.). It is also important to actively de-stigmatise mental health conditions like bipolar disorder, there remains a lot of misinformation and unfair treatment directed towards people with this mental health condition and employers should work to ensure their workplaces and workforce are educated allies to those with bipolar disorder.</p>

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			risks with their safety. There may be certain events or feelings such as stress for example, which could trigger a change in mood for someone with bipolar disorder.	
	Schizophrenia	Schizophrenia is a long-term mental health condition. It can be experienced through 'positive' symptoms (experiences or behaviours added to someone's life) such as hearing or seeing things, hallucinations, or believing something is true when it isn't, or 'negative' symptoms (experiences or behaviours which take away from someone's life) such as withdrawing from people, finding things less enjoyable, finding it harder to concentrate or having less motivation. Many people recover from schizophrenia, although they may have periods when symptoms return (relapses). Support and treatment can help reduce the impact the condition has on daily life.	As mentioned, schizophrenia has 'positive' and 'negative' symptoms. In addition to those already stated in the definition section, during periods of unwellness or a worsening of symptoms people with schizophrenia may feel disconnected from their emotions, hear voices, experience delusions, disorganised thinking and speech, or a lack of motivation to care for themselves. They may also have difficulty carrying out day-to-day activities, feelings of upset, confusion or suspicion towards other people, disagreement with those who think something is wrong and fear of seeking help.	As with other mental health conditions, schizophrenia is experienced differently by each person, so if a disclosure is made be sure to talk to the person about what adjustments could be made to support them. In addition to providing access to counselling/therapy and occupational health support, potentially useful adjustments could include the ability to work flexibly, or part time, allow for mental health days off and assistance with managing workload to ensure there is not too much pressure or stress on someone. It is also important to actively de-stigmatise mental health conditions like schizophrenia, there remains a lot of misinformation and unfair treatment directed towards people with this mental health condition and employers should work to ensure their workplaces and workforce are educated allies to those with schizophrenia. By

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				<p>destigmatising conditions like schizophrenia, it will become easier for people with the condition to declare it to their employers and get the support they need.</p>
	Hearing Impairment	<p>Someone with a hearing impairment may have partial or complete hearing loss. They may have had their impairment from birth, or it may have increased gradually over time. They may have a temporary or permanent hearing impairment. There are many conditions which could cause a hearing impairment. A hearing impairment can mean partial or complete loss of hearing. Some people may miss the occasional word, or need higher levels of volume or clarity, often they refer to themselves as hard of hearing and may use hearing aids in quiet situations. People who are partially deaf could have some useful hearing but may need a hearing aid or cochlear implant to help them hear well. Deafened (or late-deafened) people are those who have suddenly lost their hearing (usually in adulthood) as a result of an illness or injury. Deaf is often used as an umbrella term to</p>	<p>The extent of hearing loss is categorised by hearing specialists as mild, moderate, severe or profound. Even in mild or moderate cases, the impact on the individual could still be significant. For those with mild hearing loss, it may be difficult to follow speech especially in noisy conditions for a long period of time, making it potentially difficult to hear what's being said in a noisy office or in meetings. People with mild hearing loss may or may not use hearing aids. People with moderate hearing loss are likely to wear hearing aids, but may mishear words and struggle to hear when there's background noise and in group conversations. People with severe hearing loss are likely to find it difficult to hear speech in most situations, even with hearing aids. Your employees with severe hearing loss are likely to lipread and use assistive technology, such as a conversation listener. Some people</p>	<p>Due to the variety of experiences for people with a hearing impairment, consult with them about what adjustments would be most helpful. Workplace acoustics can be improved with soft furnishings, acoustic panels and rubber caps on chair and table legs. Hearing loops could be installed within the workplace, in meeting rooms, or provided to employees who need them as a portable device, as well as other forms of assistive products and technology such as a speech to text reporter, and provision of a BSL interpreter where needed (funding for this can often be covered by the government's Access to Work scheme). Alternative forms of communication beyond phone calls should be available. When communicating with someone with hearing loss, it may be beneficial to ask if they need to lipread you. If they do, then make</p>

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		<p>describe people with all degrees of deafness. People who use sign language as their preferred language often refer to themselves as being 'Deaf' with a capital 'D' to emphasise their Deaf identity as part of a linguistic minority community, proud of its language, heritage, and culture.</p>	<p>who are profoundly deaf communicate through speech and lipreading, while others use sign language. Assistive technology and communication support can aid communication with hearing people. Some people who do not use sign language may choose to have a cochlear implant if it's a suitable option.</p>	<p>sure you have their attention before you start speaking to them, speak clearly facing the person and don't cover your mouth while speaking so that they can lipread you easily. In addition, if someone is using a hearing aid keep your voice down, as shouting is uncomfortable and looks aggressive. Use plain language, check that what you're saying is being understood and for longer conversations find a quiet, private place to talk with good lighting. It's crucial to create a workplace culture where prospective and existing employees can be open about their hearing loss and have equal access to opportunities at work.</p>
Visual Impairment		<p>This includes both blind and partially sighted people, with the majority having some useful vision. This does not include conditions which can be corrected by glasses or contact lenses. Some people may be born without sight or with partial sight, while others may have sight loss as a result of an accident or medical condition.</p>	<p>Those with a sight impairment may have significant vision loss but still functional vision. Those with a severe sight impairment (commonly known as blindness) may be completely unable to see or have severely limited vision or field of vision. Colour blindness prevents you from being able to distinguish between specific colours. The most common form of colour blindness affects how you see greens and reds, but other types affect other</p>	<p>Due to the variety of experiences for people with a visual impairment, consult with them about what adjustments would be most helpful. Examples of some potential adjustments which could be made include provision of modified equipment (from video magnifiers, large screen monitors and magnification software, to Braille displays or programmes that read text through headphones), provision of a</p>

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			colours. Night blindness, sometimes called nyctalopia, is where your eyes struggle to adapt to low-light conditions.	support worker e.g. a reader, adjusting the buildings where you work, being flexible about the hours you work, providing time off to have assessment, treatment or rehabilitation, providing training, or retraining, if you can't do your current job due to sight loss, making instruction manuals and / or work-related systems more accessible, reallocating some minor duties to another colleague.
	Physical Impairment	A physical impairment may impact someone's mobility, manual dexterity or speech. Someone may have a physical impairment as a result of physical, metabolic or neurological causes, e.g. Cerebral palsy or achondroplasia, degenerative conditions, e.g. Duchenne muscular dystrophy, severe trauma, e.g. as a result of an accident, amputation or serious illness, chromosomal disorder, e.g. Turner syndrome, TUBB4A or Ehlers-Danlos syndrome, acquired brain injury (ABI), muscular skeletal conditions, birth trauma and prematurity, upper limb differences affecting hand function and fine motor movement, lower limb differences affecting mobility, complex medical needs which	People with a physical impairment may use a wheelchair or other mobility aids some or all of the time, or not at all. The impact of a physical impairment may fluctuate over time for some people. Some physical impairments may not be visible, such as epilepsy or respiratory disorders. Some common challenges could include walking or travelling between different locations or venues, carrying equipment, taking notes or participating in online meetings or presentations (if manual dexterity makes using a keyboard or mouse difficult). However, due to the variety of experiences for people with a physical impairment, consult with them about the ways they are	Physical impairments are different for each person, so talk to the person about what particular adjustments could be made to support them. Some adjustments which may be useful for someone with a physical impairment could include providing assistive computer equipment such as modifications to hardware or voice activated software, agreeing an emergency evacuation procedure with them if they require assistance, making sure that the layout of the working environment is accessible and free from obstructions, modification of working patterns to allow for rest breaks and working from home, or assistance from a support worker with certain practical activities.

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		<p>impact on physical function, or persistent symptoms affecting mobility and physical function, even where there is no diagnosis.</p>	<p>impacted and what support would be most helpful.</p>	
Neurodiversity	<p>Autistic Spectrum Conditions</p>	<p>Autism is a developmental disability which affects how people communicate and interact with the world around them. Autism is a spectrum condition which means it affects people in different ways, and people with autism have a wide range of different experiences of the condition.</p>	<p>Though autism is experienced differently for people across the spectrum, some of the ways autism can manifest itself may be shared. Autistic people may have social communication challenges with interpreting verbal and non-verbal language like gestures or tone of voice. Some autistic people are unable to speak or have limited speech while other autistic people have very good language skills but struggle to understand sarcasm or tone of voice. In addition, social interaction can be a challenge for autistic people, as they may struggle to recognise or understand others' feelings and intentions, or express their own emotions. Autistic people may also exhibit repetitive and restrictive behaviour, preferring clear routines and feeling anxious about changes to routine. Some autistic people may also engage in repetitive movements like rocking, hand flapping, or twirling a pen for example. Many autistic people may experience over- or under-sensitivity to touch, light,</p>	<p>As autism is experienced across a spectrum, so each person will have different needs and it's important to consult with them individually about how they can best be supported. However, some generally useful workplace adjustments for autistic people could include: being explicit and clear about instructions, and expectations of the job role, provision of a structured work environment (e.g. timetabling activities weekly or monthly, routines for break & lunches etc.), provision of sensitive but direct feedback and reassurance in stressful situations, support employees to adjust to changes in advance, and try to reduce sensory distractions where they occur (e.g. providing a corner desk, screens around a desk, or noise-cancelling headphones etc.). In addition, it is important to make sure the wider staff are informed about autism (only inform wider staff of an employee's autism if they have</p>

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			<p>tastes, sounds, smells, colours, temperatures or pain. For example, background noises in a workplace which others ignore may be very loud or distracting to an autistic person, enough to cause anxiety or even pain. Many autistic people have highly-focused interests or hobbies, often becoming experts in their special interests and sharing their knowledge with others. This high focus can lead to professional or academic success but occasionally may also result in other areas of that person's life being neglected. Lots of autistic people face extreme anxiety, which can be triggered by changes to routine, or the difficulty of navigating social situations. It can sometimes be difficult for autistic people to recognise that their anxiety has been triggered, as they may have struggle to notice and regulate their emotions. Some autistic people experience meltdowns and shutdowns when they become overwhelmed by their current situation. In a meltdown someone may temporarily lose behavioural control, and in a shutdown, they may go very quiet and 'switch off'.</p> <p>explicitly consented to this). Further, to make the recruitment process more accessible for autistic people, it's important that job descriptions, application forms and adverts only list objectively essential criteria required of the role, provide clear guidance about what's required, and avoid jargon or unnecessary information. Interview adjustments can also be made for autistic candidates, for example, providing questions in advance, written information about accessing the interview, the schedule of events and who will be present, etc. Interview alternatives could also be provided such as work trials or having a supporter in attendance with the person at an interview.</p>
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	<p>Dyslexia</p>	<p>Dyslexia is a neurological difference that mainly causes difficulties with reading, writing, and spelling. Dyslexia can also affect the processing and retention of visual & audio information and can also impact organisational skills.</p>	<p>Each person's experience of dyslexia is unique so it's best to check with someone about how dyslexia affects them. Some people with dyslexia may read or write slowly or have difficulty with spelling and the ordering of letters for example. But dyslexia doesn't just have an impact on reading and writing, it can also have an effect on areas such as coordination, organisation, and memory. For example, remembering sequences or ordered instructions may be difficult for some people. Many dyslexic people show strengths in areas such as reasoning and in visual and creative fields.</p>	<p>Be sure to ask what kind of support would be most helpful for an individual, as dyslexia is not the same for everyone. Some examples of workplace adjustments which may be useful for dyslexic people include use of a variety of formats to convey information (e.g. audio or videotape, drawings, diagrams and flowcharts as well as written communication), assistive technology such as a screen-reader, scanning pen, text to speech or mind-mapping software, highlighting key points in documents, and allowing plenty of time to read and complete a task. For computer working, it may be useful to change the screen colour to suit individual preference, supply an anti-glare screen filter, allow frequent breaks at least hourly, and alternate computer work with other tasks, where possible. To support concentration, enable working in quiet spaces away from noise and distractions. Additionally, it may help for work areas to be organised, neat and tidy, and for the team to return important items to the same place each time.</p>

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	Dyspraxia	<p>Dyspraxia, also known as developmental co-ordination disorder (DCD), affects movement and coordination. Dyspraxia can affect fine motor skills and gross motor skills.</p>	<p>People with dyspraxia may struggle with gross motor skills (e.g. walking, running, jumping) or fine motor skills (e.g. writing, two-handed tasks such as typing, tying shoelaces, or using cutlery). Dyspraxia can also affect spatial awareness and may cause someone to have more trips and bumps than otherwise. Personal organisational skills, time management, concentration and short-term memory can also be affected by dyspraxia, such that these areas require more effort. Some people with dyspraxia find that it can also affect their speech (speed and pronunciation), sensory sensitivity, how they deal with their emotions, and how they function in social situations.</p>	<p>Each individual with dyspraxia will be affected by a particular set of difficulties, so adjustments needed are likely to vary for different people, so it's important to ask how an employee can best be supported. Some examples of possible adjustments employers could make to support an employee with dyspraxia could include: avoiding handwritten tasks, providing speech-to-text or other computer software, or a smartphone, allowing for adequate time to learn new tasks, support to break tasks down into small steps and demonstrate them, encouraging accuracy first and then increasing speed once a task has been accomplished, adapting or avoiding tasks requiring very good fine motor skills, providing guidance for organisation and planning where several tasks need to be completed to a deadline, adjusting the workplace to reduce sensory distractions, allowing for flexible working and breaks for fatigue, and providing clear instructions and timeframes.</p>

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Dyscalculia	Dyscalculia is a learning difficulty that affects the ability to use and acquire mathematical skills.	For some people, dyscalculia can affect how they see numbers; others may find it difficult to read symbols used in mathematics or might find using finance and numbers in everyday life challenging (e.g. for reading timetables). People with dyscalculia may also find it difficult to do mathematical equations or to retain numerical information, they may have a lack of confidence with numbers, and they might find it difficult to give or follow directions. Many people with dyscalculia find it easier to learn practically, by doing a task or copying someone doing it, rather than learning a task theoretically.	The effects of dyscalculia are unique to each person so it's important to be aware of the specific needs and support an employee requires in order to implement any adjustments for them. Some examples of adjustments that could be useful for someone with dyscalculia include presenting numerical data or information with a clear message/explanation, use of Visual Charts and diagrams (e.g., pie charts or bar graphs) to interpret/present data, provision of a clear table with conversions of measures/formulas which are relevant to the role, provision of Time Management Tools, and enabling opportunities for employees to learn by doing.
Attention Deficit Hyperactivity Disorder (ADHD)	Attention deficit hyperactivity disorder (ADHD) is a condition that affects people's behaviour. ADHD can make people feel restless, make it difficult to concentrate, and increase impulsiveness. Some people are diagnosed with attention deficit disorder (ADD), without hyperactivity.	Though ADHD affects different people in different ways, some people will find they are easily distracted, lose things easily or experience forgetfulness and restlessness, or may talk often, potentially interrupting others frequently. However, people with ADHD may also be able to hyper-focus on things they are interested in. Organisational skills, time management and ability to	Everyone with ADHD is different, and the condition affects people in different ways so it's important to ask an employee with ADHD how they can best be supported. Some examples of adjustments which people with ADHD could find useful include: flexibility in working hours, offering support with completing non-core tasks which someone with ADHD finds difficult (e.g.

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		<p>manage stress can also be affected by ADHD. Some people with ADHD may also act impulsively or take more risks.</p>	<p>timesheets/paperwork), reducing distractions in the work environment (quiet individual workspaces if needed), use of visual prompts or reminders (e.g. checklists, reminder notes), allowing for regular breaks, offering increased supervision and frequent feedback, giving instructions in writing with clear steps, providing sessions with a work coach who can help with development of organisational and time management skills (Access to Work funding can sometimes be used to fund this).</p>
	<p>Learning disabilities</p>	<p>A learning disability affects the way a person learns new things throughout their life. Learning disabilities can be mild, moderate, severe, or profound. People with specific conditions may also have a learning disability, for example people with Down's syndrome and some people with autism may have learning disabilities.</p>	<p>Though a learning disability is different for each person, some people with a learning disability may take longer to learn and might need support to develop new skills, adapt to a new situation, understand complicated information, and communicate or interact with other people.</p> <p>Be sure to ask what kind of support would be most helpful for an individual, as learning disabilities are not the same for everyone. Some potential adjustments which may be useful to someone with a learning disability include: providing a job coach to help the employee learn new tasks (Access to Work funding can sometimes be used to fund this), providing a daily task list which clearly sets out what the employee needs to do in manageable steps, or consulting with the employee to find tasks</p>

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				<p>that they find easier and shaping their role to focus on these. In addition, to make the recruitment process more accessible to people with learning disabilities, it is important to provide information and applications in clear, plain language and in multiple formats (paper as well as online) and offer large fonts, provide alternatives to interview such as practical workplace assessments, or work trial periods, if interviews must be done allow candidates with a learning disability to have a job coach or supporter with them in the interview.</p>
	Epilepsy	<p>Epilepsy is a condition that affects the brain and causes frequent seizures. Seizures are intense bursts of electrical activity in the brain which affects how it functions temporarily. For approximately 60% of people with epilepsy, taking epilepsy medicine controls their seizures. Epilepsy can also have an impact on memory, concentration and thinking skills.</p>	<p>Epilepsy is experienced differently by each person, and often symptoms can come and go over time. This can mean there may be times when someone with epilepsy is fine, but at another point or after a seizure they may not be well enough to work. For people with epilepsy who experience seizures, there are many different types of seizures which present differently. Seizures can happen randomly, but can sometimes be triggered by stress, lack of sleep, weakened immune system, and medicines or alcohol, among others.</p>	<p>It's important to talk to employees with epilepsy about how it affects them and what adjustments would be useful, as the condition is different for everyone. Some measures that could be useful for someone with epilepsy include: developing a seizure action plan so that you know how to support them if a seizure occurs, including arrangements for first aid, a place to recover or assistance to return home after a seizure if needed, additionally a health and safety risk assessment should be undertaken with the employee,</p>

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				<p>these plans should be updated if there are changes to the nature of the employee's epilepsy over time. If employees experience memory problems as a result of their epilepsy, ensure they have a work environment where they can focus and avoid distractions, provide instructions in verbal and written formats, allow additional time for learning new tasks, highlight key information clearly, repeat instructions if needed, encourage use of checklists, or provide software for task reminders. Discuss with your employee if they have seizures which can be triggered, and if so work with them to make a plan to avoid and minimise triggers in the work environment.</p>
	Stammering	<p>Stammering, also sometimes referred to as stuttering, affects speech, resulting in repetition, prolonging, or getting stuck when trying to say sounds or words. Research is showing that stammering is neurological and is experienced across a spectrum, meaning that it is different for different people. There are 2 types of stammering, developmental stammering which begins in early</p>	<p>Stammering can be variable over time, so people who stammer may do so more on some days or over some periods than others. It may also not be obvious that someone stammers, as they may use methods to mask their stammering. Though everyone stammers differently, it often involves repeating or prolonging sounds or words, getting stuck without</p>	<p>Stammering is different for everyone, so it is best to talk to an employee who discloses a stammer about how they can be best supported. Some things that can help in the workplace include: actively listening to what the person is saying rather than their stammer, not finishing someone's sentence as this can be disempowering and unhelpful, don't tell the person to slow down</p>

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	<p>childhood, and acquired or late-onset stammering which is rarer and happens in older children and adults as a result of a head injury, stroke, or progressive neurological condition. In some cases, it can also be caused by certain drugs, medicines, or psychological or emotional trauma.</p>	<p>any sound, adding additional sounds or words and losing eye contact. Furthermore, the stigma around stammering (the inaccurate and biased perception of someone with a stammer as being nervous, comic, or less intelligent) can have an impact on self-esteem and confidence and can make some people with a stammer withdraw socially, adversely affecting their interactions.</p>	<p>or relax, if you are not sure, ask how you can make it easier or if they want to talk somewhere quieter, offer to introduce the person to colleagues and managers as it's common for someone who stammers to have difficulty saying their own name, if desired, offer to swap speaking work (e.g. phone calls) with written tasks. Make sure you speak to your colleague about what they would value most.</p>
<p>Crohn's Disease and Ulcerative Colitis</p>	<p>Ulcerative colitis and Crohn's disease are long-term conditions that involve inflammation of the gut, together they are often described as Inflammatory Bowel Disease. Ulcerative colitis specifically affects the colon (large intestine). Crohn's disease can affect any part of the digestive system.</p>	<p>There may be times when the symptoms are severe (a flare-up), followed by long periods when there are few or no symptoms at all (remission). In addition to digestive issues, Crohn's disease and ulcerative colitis can cause fatigue or exhaustion, a higher propensity for dehydration, in some cases, joint and bone problems, potentially affecting the energy levels and mental health of someone with the condition. There are a variety of medications and treatments for Crohn's disease and ulcerative colitis, though some of these can cause additional unwanted side effects, so it's important to check on an individual basis how someone is</p>	<p>Every person with Crohn's disease or ulcerative colitis is different and has unique needs so it is best to ask them how they can be best supported at work. Some adjustments which could help in the workplace for someone with Crohn's disease or ulcerative colitis include offering close proximity to accessible toilet facilities with sufficient privacy, flexible working arrangements with the ability to take frequent breaks or work from home if possible, time off to attend appointments or treatment, a knowledgeable and inclusive team environment or offering a car parking space close to the workplace. Access to work could</p>

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			affected by the condition and related medication.	help towards the cost of some adjustments.
	Restricted growth (Dwarfism)	Restricted growth, sometimes known as dwarfism, is a condition which causes short stature. There are over 400 medical conditions which can cause restricted growth (including, for example, achondroplasia, Pseudo achondroplasia, and Diastrophic Dysplasia). The two main types of restricted growth are proportionate short stature (PSS) and disproportionate short stature (DSS, where arms and legs are particularly short).	For some people with restricted growth, they may experience health problems as part of their condition, for example leg or joint pain or irregular breathing. However, for many people with restricted growth, the only impact of the condition is short stature.	Each person with restricted growth is unique so it is important to talk to them about how they can be best supported in the workplace. As restricted growth doesn't have an impact on learning or intellectual abilities, most workplace adjustments will largely focus on adapting the physical work environment. For example, some useful adjustments could include: a bespoke, adjustable chair and desk, lifts or smaller steps, disabled bathrooms with lower sinks and toilet, lower cabinets and drawers, stools to reach higher places in the kitchen and office. These adjustments could be funded by Access to Work.
	Menopause	Menopause is when periods stop as a result of lower hormone levels. This usually happens between the ages of 45 and 55 but it can sometimes happen earlier naturally or for other medical reasons. Perimenopause is a period of symptoms before periods have stopped. Menopause is reached when a period has not happened for 12 months.	Some of the possible symptoms of menopause or perimenopause include anxiety, mood swings, low self-esteem, brain fog (problems with memory or concentration), hot flushes, aches and pains, irregular (or no) periods, difficulty sleeping, and headaches or migraines. Symptoms can start years before periods stop and carry on afterwards. Hormone treatments	If someone discloses that menopause or perimenopause is affecting them at work, it's important to ask how best they can be supported in the workplace as the experience will be different for everyone. Be sure not to make assumptions or ask about menopause symptoms directly without the person initiating this conversation – if you

Health Condition	Definition	Manifestation of Health Condition	Possible Adjustments to Support Employee
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			<p>can relieve some of these symptoms. Symptoms can last months or years and may change over time.</p>	<p>are concerned about the person's wellbeing, it's best to ask general open questions as it is up to the individual to disclose any health conditions or symptoms. If someone does disclose menopause or perimenopause some potential adjustments that could help include allowing for flexible working patterns or ability to work from home, access to counselling through work, the option to take more regular breaks, more time to prepare before meetings or appointments, ensure there are ways to cool the working environment (e.g., fan, moving desk closer to open window, air conditioning), and provide easy access to cold drinking water and washrooms.</p>
	<p>Musculoskeletal (MSK) conditions</p>	<p>Musculoskeletal (MSK) conditions are a group of conditions that affect the bones, joints, muscles and spine, and are a common cause of severe long-term pain and physical disability. The three groups of MSK conditions are inflammatory conditions (e.g., rheumatoid arthritis), conditions of MSK pain, (e.g., osteoarthritis and back pain), and osteoporosis and fragility fractures, for example, a fracture</p>	<p>There are a wide variety of Musculoskeletal conditions which will have different effects, so it is important to understand how and employee who discloses an MSK condition is uniquely affected by it. Back pain, neck or arm strains, and joint pain are some common symptoms for some MSK conditions, but these won't be the same for everyone.</p>	<p>Everyone with an MSK condition has a unique experience, so it is best to talk to someone who discloses an MSK condition about how it affects them and how they can best be supported at work. Some adjustments that may be useful for someone with an MSK condition could include finding adaptive ways to complete a task, shortening the time spent on a task, allowing for regular breaks</p>

Health Condition	Definition	Manifestation of Health Condition	Possible Adjustments to Support Employee
		<p>after a fall from standing height. MSK conditions can range from minor injuries to long-term conditions.</p>	<p>and flexible working patterns, or rotating tasks with other colleagues. MSK conditions can originate in the workplace, from heavy lifting, repetitive physical tasks, or use of equipment which doesn't support healthy posture and working. So, taking preventative measures to ensure that workplace conditions are conducive to healthy and safe working is crucial.</p>
	<p>Long Covid</p>	<p>Long COVID (also known as post COVID-19 syndrome) is when Covid symptoms last longer than 12 weeks, and even after the initial infection is resolved. New health problems may also emerge as a result of long Covid. This is a new condition which is still being studied.</p>	<p>Though long Covid is different for each person, some common effects include extreme tiredness, shortness of breath, loss of smell and muscle aches. Long Covid can also have an impact on memory and concentration (causing 'brain fog'), chest or joint pain, dizziness, depression, or anxiety, and can cause many of the usual symptoms of Covid, i.e., cough, temperature, sore throat, headaches etc. Long Covid symptoms can come and go over time, or sometimes get better and other times worse.</p> <p>Long covid is different for each person with the condition, so it is best to talk to the person who discloses long Covid about how they can be best supported. Some adjustments which may be useful for someone with long Covid could include accommodating time off needed for recovery and agree how to make contact during an absence and ways to support them as they return to work where and when possible, adjustments to working hours or provision of flexible working, offering wellbeing and counselling support programmes, and continuing to check in with employees that have long covid about whether there are other</p>

Health Condition	Definition	Manifestation of Health Condition	Possible Adjustments to Support Employee
			adjustments they would find useful.

Source links:

Supporting staff with a mental health condition:

<https://www.mind.org.uk/media-a/4661/resource4.pdf>

<https://www.mind.org.uk/information-support/tips-for-everyday-living/how-to-be-mentally-healthy-at-work/getting-support-at-work/#WhatAreReasonableAdjustments>

https://www.nhshealthatwork.co.uk/images/library/files/Government%20policy/Mental_Health_Adjustments_Guidance_May_2012.pdf

Depression:

<https://www.nhsinform.scot/illnesses-and-conditions/mental-health/depression/>

<https://www.mind.org.uk/information-support/types-of-mental-health-problems/depression/about-depression/>

Anxiety:

<https://www.nhsinform.scot/illnesses-and-conditions/mental-health/anxiety/>

<https://www.mind.org.uk/information-support/types-of-mental-health-problems/anxiety-and-panic-attacks/about-anxiety/>

Eating Disorders:

<https://www.nhs.uk/mental-health/feelings-symptoms-behaviours/behaviours/eating-disorders/overview/>

<https://www.beateatingdisorders.org.uk/get-information-and-support/support-someone-else/worried-about-a-colleague/>

Bipolar Disorder:

<https://www.mind.org.uk/information-support/types-of-mental-health-problems/bipolar-disorder/about-bipolar-disorder/>

<https://www.mind.org.uk/information-support/types-of-mental-health-problems/hypomania-and-mania/about-hypomania-and-mania/>

<https://www.nhs.uk/mental-health/conditions/bipolar-disorder/overview/>

Schizophrenia:

<https://www.nhs.uk/mental-health/conditions/schizophrenia/overview/>

<https://www.mind.org.uk/information-support/types-of-mental-health-problems/schizophrenia/about-schizophrenia/>

Hearing impairment:

<https://www.royaldeaf.org.uk/about-us/what-is-deafness/>

<https://www.derbyshire.gov.uk/site-elements/documents/pdf/social-health/adult-care-and-wellbeing/disability-support/hearing-impaired/british-deaf-association-definitions-of-hearing-impairments.pdf>

<https://rnid.org.uk/wp-content/uploads/2020/05/Employers-Guide.pdf>

Visual impairment:

<https://www.guidedogs.org.uk/getting-support/information-and-advice/eye-conditions/blindness-and-visual-impairment/>

https://media.nib.org.uk/documents/Lets_Work_Together.pdf

<https://www.nib.org.uk/living-with-sight-loss/equality-and-employment/information-for-those-in-work/staying-in-work/>

<https://www.gov.uk/government/publications/guidance-on-supporting-colleagues-with-visual-impairments/guidance-on-supporting-colleagues-with-visual-impairments>

Physical impairment:

<https://www.kirkleeslocaloffer.org.uk/information-and-advice/a-z-of-specific-conditions/physical-impairment/>

<https://www.gov.uk/government/publications/employing-disabled-people-and-people-with-health-conditions/employing-disabled-people-and-people-with-health-conditions>

<https://edu.admin.ox.ac.uk/physical-impairments-and-mobility-difficulties>

Autistic Spectrum Conditions:

<https://www.autism.org.uk/advice-and-guidance/what-is-autism>

<https://www.nhs.uk/conditions/autism/what-is-autism/>

<https://www.autism.org.uk/advice-and-guidance/topics/employment/employing-autistic-people/employers>

Dyslexia:

<https://www.nhs.uk/conditions/dyslexia/>

<https://www.bdadyslexia.org.uk/dyslexia/about-dyslexia>

<https://www.bdadyslexia.org.uk/advice/employers/how-can-i-support-my-dyslexic-employees/reasonable-adjustments-in-the-workplace>

<https://www.bdadyslexia.org.uk/dyslexia/about-dyslexia/signs-of-dyslexia>

<https://civilservice.blog.gov.uk/wp-content/uploads/sites/86/2020/03/Dyslexia-Dyspraxia-Dyscalculia-and-Dysgraphia-Line-Manager-Toolkit.pdf>

Dyspraxia:

<https://www.nhs.uk/conditions/developmental-coordination-disorder-dyspraxia-in-adults/>

https://dyspraxiafoundation.org.uk/wp-content/uploads/2016/06/Employer_guide_to_dyspraxia_1.0.pdf

<http://www.movementmattersuk.org/dcd-dyspraxia-adhd-spld/developmental-disorders-documentation/dcd-and-employment.aspx>

Dyscalculia:

<https://www.cuh.nhs.uk/our-people/neurodiversity-at-cuh/dyscalculia/>

<https://www.bdadyslexia.org.uk/dyscalculia>

<https://cavuhb.nhs.wales/staff-information/toolkits/support-staff-in-dyslexia-dyspraxia-and-dyscalculia/support-staff-in-dyslexia-dyspraxia-and-dyscalculia-toolkit/support-staff-in-dyslexia-dyspraxia-and-dyscalculia-toolkit/>

ADHD:

<https://www.nhs.uk/conditions/attention-deficit-hyperactivity-disorder-adhd/>

<https://www.adhdfoundation.org.uk/wp-content/uploads/2022/03/An-Employers-Guide-to-ADHD-in-the-Workplace-Scottish-ADHD-Coalition-1.pdf>

https://www.adhdfoundation.org.uk/wp-content/uploads/2023/08/ADHD-F-Neurodiversity-at-work-and-Training-Guide_Business.pdf

Learning disabilities:

<https://www.nhs.uk/conditions/learning-disabilities/>

<https://www.mencap.org.uk/learning-disability-explained/what-learning-disability>

https://www.mencap.org.uk/sites/default/files/2019-11/2019.097%20LDWW2019_Factsheets_v2.pdf

Epilepsy:

<https://www.nhs.uk/conditions/epilepsy/>

<https://www.epilepsy.org.uk/info/what-is-epilepsy>

<https://employers.epilepsy.org.uk/>

<https://employers.epilepsy.org.uk/section/about-epilepsy/>

<https://employers.epilepsy.org.uk/section/supporting-employees/>

Stammering:

<https://stamma.org/about-stammering/what-stammering>

<https://www.nhs.uk/conditions/stammering/>

<https://stamma.org/sites/default/files/2023-01/Working%20with%20someone%20who%20stammers.docx.pdf>

Crohn's Disease and Ulcerative Colitis:

<https://www.nhs.uk/conditions/inflammatory-bowel-disease/>

<https://crohnsandcolitis.org.uk/info-support/information-about-crohns-and-colitis/all-information-about-crohns-and-colitis/understanding-crohns-and-colitis/ulcerative-colitis>

<https://crohnsandcolitis.org.uk/info-support/information-about-crohns-and-colitis/all-information-about-crohns-and-colitis/symptoms?parent=23151&page=1&tags=&category=23151&sort=newest>

<https://crohnsandcolitis.org.uk/media/is0pf05f/employers-ed5.pdf>

Dwarfism:

<https://www.nhs.uk/conditions/restricted-growth/>

<https://rgauk.org/medical-information#1474903963875-07d95a08-1d8c>

<https://www.careerswithdisabilities.com/disability-advice-hub/dwarfism/>

Menopause:

<https://www.nhs.uk/conditions/menopause/>

<https://www.nhsinform.scot/healthy-living/womens-health/late-years-around-50-years-and-over/menopause-and-post-menopause-health/menopause-and-the-workplace>

https://www.cipd.co.uk/Images/line-manager-guide-to-menopause_tcm18-95174.pdf

Musculoskeletal (MSK) conditions:

<https://www.gov.uk/government/publications/musculoskeletal-health-applying-all-our-health/musculoskeletal-health-applying-all-our-health>

<http://arma.uk.net/musculoskeletal-disorders-msk/>

<https://www.bitc.org.uk/wp-content/uploads/2019/10/bitc-wellbeing-toolkit-musculoskeletal-mar2017.pdf>

<https://www.hse.gov.uk/msd/workers-msds.htm>

Long covid:

<https://www.nhs.uk/conditions/covid-19/long-term-effects-of-covid-19-long-covid/>

<https://www.yourcovidrecovery.nhs.uk/what-is-covid-19/long-covid/>

<https://www.acas.org.uk/long-covid>

<https://www.england.nhs.uk/supporting-our-nhs-people/support-now/supporting-long-covid/>

Additional resources

[Shaw Trust](#): Help people with mental health conditions prepare and find work that suits them. Their co-created services include large scale employability programmes, specialist services for communities, residential care for children, targeted support for young people, on-the-job learning and training and individual guidance and support.

[Disability Confident](#): UK Government scheme which enables employers to become accredited as Disability Confident. The scheme aims to help employers make the most of the opportunities provided by employing disabled people. It is voluntary and has been developed by employers and disabled people's representatives.

[Access to Work](#): Through Access to Work, you can apply for: a grant to help pay for practical support with your work, support with managing your mental health at work, money to pay for communication support at job interviews.