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| <b>Document Type:</b><br>Guideline  |  | <b>Unique Identifier:</b><br>CORP/GUID/070  |  |
| <b>Document Title:</b><br><br>Dyslexia in the Workplace   |  | <b>Version Number:</b><br>2.1   |  |
|   |  | <b>Status:</b><br>Ratified  |  |
| <b>Scope:</b><br>All Trust employees  |  | <b>Classification:</b><br>Organisational  |  |
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| <b>Replaces:</b><br>Version 2, Dyslexia in the Workplace, Corp/Guid/070   |  | <b>Head of Department:</b><br>Lyn Hadwin, Workforce Manager   |  |
| <b>Validated By:</b><br>Staff Side Policy Document Group<br>Joint Working Group   |  | <b>Date:</b><br>10/03/2017<br>05/04/2017  |  |
| <b>Ratified By:</b><br>Procedural Documents and Information Leaflet Group   |  | <b>Date:</b><br>17/05/2017  |  |
| <b>Review dates may alter if any significant changes are made</b>   |  | <b>Review Date:</b><br>01/03/2020   |  |
| <b>Which Principles of the NHS Constitution Apply?</b><br>Please list from principles 1-7 which apply<br>1,2,3<br><a href="#">Principles</a>  |  | <b>Which Staff Pledges of the NHS Constitution Apply?</b><br>Please list from staff pledges 1-7 which apply<br>1,3,4<br><a href="#">Staff Pledges</a> |  |
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| <b>Document for Public Display: *Yes</b>  |  |   |  |
| <b>Evidence Search Completed by...N/A Joanne Shawcross.....Date.....03/05/2017.....</b>   |  |   |  |
| To be completed by Library and Knowledge Services Staff   |  |   |  |

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## BEHAVIOURAL STANDARDS FRAMEWORK

To help create a great place to work and a great place to be cared for, it is essential that our Trust policies, procedures and processes support our values and behaviours. This document, when used effectively, can help promote a workplace culture that values the contribution of everyone, shows support for staff as well as patients, recognises and celebrates the diversity of our staff, shows respect for everyone and ensures all our actions contribute to safe care and a safe working environment - all of which are principles of our Behavioural Standards Framework.

### Behavioural Standards Framework – Expectations ‘at a glance’

|   |  |  |
|---|--|--|
| Introduce yourself with #hello my name is...<br> | Value the contribution of everyone                                     | Share learning with others   |
| Be friendly and welcoming   | Team working across all areas  | Recognise diversity and celebrate this   |
| Respect shown to everyone   | Seek out and act on feedback   | Ensure all our actions contribute to safe care and a safe working environment            |
| Put patients at the centre of all we do   | Be open and honest   | For those who supervise / manage teams: ensure consistency and fairness in your approach |
| Show support to both staff and patients   | Communicate effectively: listen to others and seek clarity when needed | Be proud of the role you do and how this contributes to patient care                     |

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## 1. SUMMARY

To provide help and advice to managers supporting employees with dyslexia and staff who are dyslexic.

## 2. PURPOSE

This guide is to provide help and advice to managers supporting employees with dyslexia and staff who are dyslexic.

It describes what dyslexia is, outlines our legal responsibilities and provides actionable advice to support staff and comply with the Equality Act 2010<sup>1</sup>.

## 3. SCOPE

All Trust employees

## 4. GUIDELINE

### 4.1 What is Dyslexia?

Dyslexia is

- a specific and persistent learning difference (SpLD) that affects 10% of the population
- a combination of abilities and difficulties which affect the processing of information
- covered under equality legislation as a disability
- inherited or can be acquired through brain injury
- often associated with other difficulties such as dyspraxia
- often referred to as a hidden disability due to its lack of visual characteristics
- often perceived by employers as problematic, consequently staff may be reluctant to disclose they are dyslexic for fear of discrimination or bullying

A dyslexic individual may experience difficulties in developing skills in reading, writing, spelling and numeracy. Accompanying weaknesses may be identified in areas of speed of processing, short-term memory, sequencing, auditory and or visual perception, spoken language and motor skills.

Dyslexia does not affect everyone in the same way.

Many adults do not know they are dyslexic and have developed effective coping strategies to compensate for their learning differences. However the demands of a changing workplace or new job may cause these strategies to fail. This may explain why colleagues who appeared to have no difficulties in the workplace subsequently struggle with different responsibilities.

### 4.2 What to look for?

There seems to be a general lack of understanding of dyslexia and its characteristics, this may in part relate to it being a “hidden” disability. There are misunderstandings such as ‘all dyslexics have difficulty with spelling’. However dyslexia can affect people in many different ways. In the workplace the most commonly reported difficulties are:

#### **Memory difficulties - People with dyslexia may**

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- take longer to 'fix' information into their long-term memory
- require information to be presented more than once
- often find it more difficult to discard irrelevant or redundant information which could lead to 'memory overload' and confusion
- have problems remembering colleagues, patients or drug names and medical conditions
- find it difficult to remember phone messages or other information to pass on to colleagues
- find it difficult to learn procedures and routines
- find it difficult to transfer learning into a new setting
- have poor visual memory e.g. may find it difficult to copy from one page to another

**Organisational difficulties - People with dyslexia may**

- appear to have a short attention span and be easily distracted
- have difficulty following written and spoken instructions
- have difficulty ordering their ideas
- have problems sequencing the order of tasks correctly
- have problems with filing and looking up information alphabetically or sequentially
- find it difficult to react quickly in busy environments
- find it difficult to multitask as this requires a good memory, time management skills, the ability to work sequentially and be organised

**Time management – People with dyslexia may find it difficult to**

- plan ahead or plan their work schedule
- estimate how much time is needed for a specific task
- complete tasks on time
- keep track of appointments or meetings
- organise work and meet deadlines

**Reading – People with dyslexia may**

- feel embarrassed about reading aloud
- misread unfamiliar words
- read very slowly and find scanning or skimming difficult
- find text is distorted, particularly black print on white
- find it difficult to read with noise distractions
- have difficulty understanding medical and pharmacological language particularly those words which look or sound similar
- have difficulties with abbreviations
- have difficulty reading information from whiteboards
- have difficulty reading information on charts
- need to re-read things several times to get the meaning

**Writing, spelling and numeracy – People with dyslexia may have difficulty with**

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- legibility
- writing in an appropriate language
- writing concisely
- writing accurately, their work may contain frequent grammatical and spelling errors
- writing under time pressure, some individuals may write very slowly needing to re-draft their work
- spelling technical terms such as drugs and medical terms, especially those which look or sound similar
- identifying letters and numbers and/or getting them in the correct order
- reversing letters, numbers or words
- filling in forms, especially when required to do so at speed
- structuring letters, memos or reports clearly and precisely
- numerical skills

### **Language – People with dyslexia may**

- feel embarrassed about language
- struggle to find the right word to say
- mispronounce unfamiliar words
- find it difficult to express themselves orally and talk in a disjointed way
- find it difficult to give clear instructions and/or information and have a tendency to ‘go off on a tangent’
- sometimes experience a ‘mental block’ and be unable to express ideas clearly, particularly under stress
- take everything ‘literally’ or at face value (beware of words with double meanings)

### **Motor skills - People with dyslexia may**

- may have right and left co-ordination difficulties
- take much longer to learn to follow a sequence (for example, wound dressing).
- have difficulty with typing on a computer or calculator

### **Screening and Diagnosis**

Some people with dyslexia may have a certificate confirming their diagnosis, however many people do not. It is not essential to have a formal diagnosis in order to provide support/action plan for members of staff with dyslexia. Where there is lack of clarity regarding diagnosis, a formal assessment procedure is available via an educational psychologist or a specialist teacher who holds a “practicing certificate”. This is not a medical assessment. There is a fee for formal assessment currently in the region of £500. Screening /self-assessment tools are available. Whilst often free and generally regarded as a broad indicator of dyslexia, these are not as detailed nor as accurate as formal assessment. An example of a screening tool in the British Dyslexia Association’s Code of Practice for Employers<sup>2</sup> is in Appendix 1

### **4.3 Legal Responsibilities**

All organisations have a legal requirement to support employees with dyslexia under the Equality Act 2010<sup>1</sup>. Under the terms of legislation, individuals are entitled to receive “reasonable adjustments” to help them overcome their difficulties.

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Whilst legislation requires us to not discriminate against an individual with a disability, it does recognise that organisations need to set and control professional/competence standards. This means that staff who have declared their disability will still need to demonstrate they are fit for practice. They must meet all standards and competences required of other employees, the fundamental difference is that reasonable adjustments must be in place before competence/performance is assessed.

#### 4.4 Individual Responsibilities

The Trust expects all employees to work safely and competently and as such individuals have a responsibility to acknowledge if they have any limitations.

The decision to disclose dyslexia is a personal one. Legally employees have no obligation to disclose their disability to their employer however health and safety legislation take precedence e.g. an employee must disclose latex type 1 allergy. Therefore, whilst they have a right to not disclose, the individual needs to be aware that unless they do, they will not be able to receive the reasonable adjustments they require and are therefore putting themselves at a disadvantage.

Appendix 2 suggests practical self-help strategies and tips for individuals

#### 4.5 Actionable Advice

The most important step to take when making reasonable adjustments for people with dyslexia is to talk to the individual concerned. Discuss their specific difficulties and then discuss some potential solutions – it is important to remember to discuss what helps and what doesn't with the individual member of staff.

As the severity of dyslexia varies so do the strategies that help people overcome problems in employment. Many of these are inexpensive and uncomplicated.

Each individual with dyslexia will have specific needs requiring support tailored to these needs. However, Ten Reasonable Adjustments in appendix 3 provides a starting point for compiling a personalised action plan.

Appendix 2 suggests practical self-help strategies and tips for individuals

If more specialised support is required the Trust recommends contacting Access to Work. A self-referral should be undertaken by the staff member with dyslexia, either via the Trust's Workforce Futures Advisor - ext. 46605, email: [gillian.day@mbht.nhs.uk](mailto:gillian.day@mbht.nhs.uk) or directly to **Access to Work** Telephone number - 0345 268 8489

Contact with Access to Work must be made by the individual with a view to them referring themselves.

More details can be found on the website –

[http://www.direct.gov.uk/en/DisabledPeople/Employmentsupport/WorkSchemesAndProgrammes/DG\\_4000347](http://www.direct.gov.uk/en/DisabledPeople/Employmentsupport/WorkSchemesAndProgrammes/DG_4000347)

#### Useful Contacts

|  |                              |                                  |
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See Appendix 5

| <b>5. ATTACHMENTS</b> |  |
|-----------------------|--|
| <b>Number</b>         | <b>Title</b>   |
| 1                     | British Dyslexia Association Screening Tool              |
| 2                     | Overcoming Difficulties: self help strategies and tips   |
| 3                     | Ten Reasonable Adjustments for Dyslexia in the Workplace |
| 4                     | Additional Support for Reasonable Adjustments            |
| 5                     | Useful Contacts  |
| 6                     | Equality & Diversity Impact Assessment Tool              |

| <b>6. OTHER RELEVANT / ASSOCIATED DOCUMENTS</b> |  |
|---|--|
| <b>Unique Identifier</b>                        | <b>Title and web links from the document library</b> |
|   |  |
|   |  |
|   |  |

| <b>7. SUPPORTING REFERENCES / EVIDENCE BASED DOCUMENTS</b>  |  |
|---|--|
| <b>References in full</b>   |  |
| <b>Number</b>   | <b>References</b>  |
| 1   | Great Britain (2010) <a href="#">Equality Act 2010</a> (accessed 22/05/2017)   |
| 2   | British Dyslexia Association Code of Practice Employers: Good practice guidelines for supporting employees with dyslexia in the workplace. 5 <sup>th</sup> ed. |
| <b>Bibliography</b>   |  |
| British Dyslexia Association (2002) <a href="#">Becoming a dyslexia-wise employer: A framework for action</a> (accessed 22/05/2017) |  |
| <a href="#">Right 2 Write</a> website (accessed 22/05/2017)   |  |
| RCN (2010) <a href="#">Dyslexia, dyspraxia and dyscalculia: a toolkit for nursing staff</a> (accessed 22/05/2017)                   |  |

| <b>8. DEFINITIONS / GLOSSARY OF TERMS</b> |                   |
|---|-------------------|
| <b>Abbreviation or Term</b>               | <b>Definition</b> |
|   |                   |
|   |                   |
|   |                   |

| <b>9. CONSULTATION WITH STAFF AND PATIENTS</b>   |                  |
|--|------------------|
| Enter the names and job titles of staff and stakeholders that have contributed to the document |                  |
| <b>Name</b>  | <b>Job Title</b> |
| Disability Staff Network   | Network Members  |
| Joint Working Group  |                  |
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| <b>10. DISTRIBUTION PLAN</b>                                    |   |
|---|---|
| Dissemination lead:   | Joint Working Group   |
| Previous document already being used?                           | Yes<br>(Please delete as appropriate)   |
| If yes, in what format and where?                               | Trust Procedural Document Library   |
| Proposed action to retrieve out-of-date copies of the document: | Previous version will be archived   |
| <b>To be disseminated to:</b>                                   |   |
| Document Library  |   |
| Proposed actions to communicate the document contents to staff: | Include in the Friday Round Up email – New documents uploaded to the Document Library |

| <b>11. TRAINING</b>   |                 |                     |
|---|-----------------|---------------------|
| Is training required to be given due to the introduction of this policy? / No * Please delete as required |                 |                     |
| Action by   | Action required | Implementation Date |
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| <b>12. AMENDMENT HISTORY</b> |               |                        |                        |             |
|------------------------------|---------------|------------------------|------------------------|-------------|
| Version No.                  | Date of Issue | Page/Selection Changed | Description of Change  | Review Date |
| 2                            |               | throughout             | New format and contact | 01/03/2020  |
| 2.1                          | 03/10/2017    | Page 3                 | BSF page added         | 01/03/2020  |

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## Appendix 1: British Dyslexia Association Screening Tool

### The Adult Dyslexia Checklist

Look at the questions in the checklist. The questions are related to different areas of dyslexia. Read the questions carefully and be as honest as you can when answering them.

Please tick Yes or No to each question. Don't miss any questions out. If in doubt tick the answer that you feel is true most often

|  | Yes | No |
|--|-----|----|
| 1. Do you find difficulty telling left from right?   |     |    |
| 2. Is map reading or finding your way to a strange place confusing?  |     |    |
| 3. Do you dislike reading aloud?   |     |    |
| 4. Do you take longer than you should to read a page of a book?  |     |    |
| 5. Do you find it difficult to remember the sense of what you have read?                                   |     |    |
| 6. Do you dislike reading long books?  |     |    |
| 7. Is your spelling poor?  |     |    |
| 8. Is your writing difficult to read?  |     |    |
| 9. Do you get confused if you have to speak in public?   |     |    |
| 10. Do you find it difficult to take messages on the telephone and pass them on correctly?                 |     |    |
| 11. When you say a long word, do you sometimes find it difficult to get all the sounds in the right order? |     |    |
| 12. Do you find it difficult to do sums in your head without using your fingers or paper                   |     |    |
| 13. When using the telephone, so you tend to get the numbers mixed up when you dial?                       |     |    |
| 14. Do you find it difficult to say the months of the year forwards in a fluent manner?                    |     |    |
| 15. Do you find it difficult to say the months of the year backwards?                                      |     |    |
| 16. Do you mix up dates and times and miss appointments?   |     |    |
| 17. When writing cheques to you frequently find yourself making mistakes?                                  |     |    |
| 18. Do you find forms difficult and confusing?   |     |    |
| 19. Do you mix up bus numbers like 95 and 59?  |     |    |
| 20. Did you find it hard to learn your multiplication tables at school?                                    |     |    |

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**The 12 best items in order of importance are:**

| Order | Item |
|-------|------|
| 1     | Q17  |
| 2     | Q13  |
| 3     | Q7   |
| 4     | Q16  |
| 5     | Q18  |
| 6     | Q10  |
| 7     | Q19  |
| 8     | Q14  |
| 9     | Q20  |
| 10    | Q4   |
| 11    | Q1   |
| 12    | Q11  |

If the majority of these items are ticked, this is a strong indication of dyslexia.

Nine or more **Yes** responses on the questionnaire as a whole is therefore a powerful indicator of a difficulty. The items ticked should be compared with the 'best twelve' shown above.

**Reference**

Michael Vinegrad: A revised Dyslexia Checklist. Educare, No 48 March 1994

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## Appendix 2: Overcoming Difficulties: self-help strategies and tips

There is evidence which acknowledges how adults with dyslexia are often able to develop very successful coping strategies. However, it is also well documented that these may have only been developed up to a certain level and as the task becomes more complex, they may not be sufficient.

It is therefore likely that individuals with dyslexia will need to continue to develop strategies throughout their working life.

### Some self-help strategies and tips

It is important to remember that every individual will have a unique profile so no individual will have difficulties in all of the areas listed. The key is for you to develop strategies to overcome your personal areas of difficulty. The majority of the suggestions included are at the level which would be considered a “reasonable adjustment”. Where suggestions potentially exceed this they are highlighted as a strategy which would need to be discussed on an individual basis.

### Reading documentation

- Give yourself enough time to read things and re-read them if necessary
- Use a small alphabetical notebook (or card system) to record difficult words and remind you of their meaning
- Carry a list of common abbreviations and their meaning
- Use an electronic dictionary to look up unfamiliar terms
- Use a coloured overlay, if appropriate
- Print things on cream/off white paper
- Set up your computer screen to use a coloured background (choose the colour that is best for you)
- If appropriate (i.e. if you have a personal copy) highlight key points to emphasise them

### Writing notes

- Give yourself enough time to write up notes and other paperwork
- Try and find somewhere quiet where you are less likely to be interrupted
- Divide your ideas into sections and tackle one section at a time
- Create a personal list of difficult words to check when required. (see section on spelling)
- Familiarise yourself with the layout of different forms and charts – ideally take home a blank copy to look at when you are less rushed
- Devise ‘templates’ or checklists for different types of documentation, for example patient assessment, letters or daily/weekly job lists
- Use an electronic dictionary if possible
- Develop effective checking procedures and proofreading skills
- Use a laptop or PC to write notes on if one is available
- If your writing looks messy, experiment with different types of pen (chunky/standard/slim) until you find one that helps
- Consider using a handheld recording device to record your ideas verbally. You can then copy it into the notes but you don’t have to think and write at the same time (This may need to be negotiated with your manager, see Appendix 4 Additional Support for Reasonable Adjustments)

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## Spelling

- Keep a notebook containing the correct spelling of words that you need to use regularly. This could be divided into sections on drugs/medical terms/chemicals
- When you need to spell an unfamiliar word – check with a colleague or in a dictionary then add it to your list
- Devise mnemonics (a rhyme or something) to help you remember difficult words
- Write words that you are trying to learn on post it notes or small cards and stick them up around the house or office, the more you look at them the quicker you will learn them
- Ask if you can have an electronic dictionary which copes with medical terminology (see Appendix 4 - Additional Support for Reasonable Adjustments)

## Remembering things

- Invent and use mnemonics (a rhyme or something)
- Use to do lists
- Always carry something to write on and a pen
- Write important things to remember on sticky post-it notes and put them in key places where you will see them frequently, for example fridge door, office etc.
- Use visual methods such as diagrams and mind maps to help you remember
- Use flow diagrams where procedures need to be remembered in a particular order
- Set realistic targets for example to learn 1 new drug/word every 2 days
- Use auditory methods of learning i.e. record information on a digital voice recorder (or mobile phone) and listen to it when you can for example when driving, walking the dog
- Use a personal organiser, computer or mobile phone to set reminders for key tasks
- Chunk difficult numbers into smaller chunks they are easier to remember that way, e.g. telephone numbers, key codes
- Use repetition, the more you repeat something the quicker you remember it
- Use coloured pens and highlighters to help organise and prioritise
- Devise prompt sheets for frequently encountered activities for example a routine pre op admission, the deep cleaning of an area or preparing a meal

## Coping with distractions

- Be honest with colleagues, tell them you find interruptions difficult and ask them to avoid distracting you if possible
- Be honest with yourself, some clinical areas are more prone to interruptions than others so choose where you work
- Try to find a quiet area if you really need to concentrate on something like documentation but tell people where you will be
- Set realistic targets in terms of balancing different commitments for example when studying aim to read 1 article per day or write 250 words, it soon builds up

## Managing time

- Use timers/alarms to remind you of set time deadlines e.g. when a patient needs to be ready for theatre
- Keep a diary or wall planner to remind you of important dates (meetings/deadlines)
- Build up a list of how long certain procedures/tasks usually take (including preparation and clear up time) for example performing a bed bath 20- 30 minutes, a simple dressing 20-30

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minutes, typing up minutes 45-60 minutes (these are generous time allowances but it is better to allocate too much time than always be behind)

- Have a picture of a 24 and 12 hour clock to show the differences

### **Demonstrating manual dexterity**

- Practice handling instruments and equipment – if possible ask if you can borrow a piece of equipment to practice
- Investigate if other equipment is available which might be easier to use

### **Sequencing of tasks**

- Invent and use mnemonics (a rhyme or something) to help remembering sequences/routines
- Use visual methods such as diagrams and mind maps to help you remember
- Use flow diagrams where procedures need to be remembered in a particular order
- Use auditory methods of learning, record the steps of procedures or key information to listen to later when you are doing other things. For example, this could be used to help you learn the latest ratios for CPR or the equipment needed for a job
- Use repetition, the more you repeat something the quicker you remember it
- Use coloured pens and highlighters to help you remember/organise your thoughts
- Devise prompt sheets for frequently encountered activities, for example a routine pre op admission or the deep cleaning of an area. These can be added to/adapted if you move to a new area
- Use reflection to help you to transfer previous learning into new settings

### **Discussing work/clinical issues**

- If possible jot down your ideas of what you want to say and use these as prompts or a checklist
- Observe team meeting/ward rounds/ handovers before you need to actively participate
- Continue to build your awareness of medical/specialist terms and find out the correct pronunciation. Get someone to tell you how it should be pronounced it's much better than trying to work out pronunciation from a dictionary

### **Reading aloud**

See also the Section on 'reading documentation'

- If you know you will need to read something aloud try to get a copy in advance to practice
- If you can get an electronic copy (you might need to scan a hard copy) format it in a way that helps you. For example change the font style and size, create extra paragraph breaks to divide it up into smaller sections, or use bullet points
- Use highlighters or coloured pens to draw attention to key areas

### **Writing in front of others**

- Probably the best strategy would be to try to avoid doing this wherever possible. The advantage in a group situation is that there are others who might be very happy to be the scribe or note taker.
- Consider making your manager/team leader aware so they don't ask you to 'be the scribe' in front of everyone
- Provide typed minutes of meetings wherever possible

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## Reading drug charts

- Learn the names for drugs that you frequently administer and what they do
- Compile a list of drugs with similar names and find a way of clearly identifying the difference in spelling
- Know how to use reference materials such as the BNF to look unfamiliar drugs up
- Learn how to pronounce drug names, i.e. record the correct pronunciation on a digital voice recorder to listen to
- Practice reading drug charts, as a student ask for a blank copy to study or do a specimen chart with your mentor with some common examples

## Calculating drug doses

- Carry a cue card around with you to remind you of the formulae
- Look at one of the many books available to teach nurses a variety of types of calculation
- Practice, practice and practice until you feel confident
- Calculate your answer independently before checking with a colleague. If you don't agree bring in a third person – your colleague might have got it wrong not you
- Use a calculator to check your answer
- Consider enrolling on adult numeracy classes to brush up key skills

## Document adapted from

British Dyslexia Association: Code of Practice for employers – Good practice guidelines for supporting employees with dyslexia in the workplace<sup>1</sup>

British Dyslexia Association: Becoming a dyslexia – wise employer – framework for action<sup>2</sup>

Right to Write: What is Dyslexia?<sup>3</sup>

RCN document Dyslexia, dyspraxia and dyscalculia: a toolkit for nursing staff<sup>4</sup>

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## Appendix 3: Ten Reasonable Adjustments for Dyslexia in the Workplace

The most important step to take when making reasonable adjustments for people with dyslexia is to talk to the person concerned. Discuss their specific difficulties and then discuss some potential solutions.

As the severity of dyslexia varies so do the strategies that help people overcome problems in employment. The majority of these are inexpensive and uncomplicated. However, should additional costs be incurred, for example for voice activated software or reader (see Appendix 4), the employer can apply for funding through the Governments Access to Work Scheme, (see managers Guide to Dyslexia in the Workplace page 4).

The list below outlines some of the more common reasonable adjustments that are helpful for some people with dyslexia. They act as a starting point but it's important to remember to discuss what helps and what doesn't with the person member of staff.

Communication  
Instructions  
Time and Work Planning  
Working Environment  
Helping Written Work  
Helping Reading  
Helping with Directions  
Workplace Culture  
Recruitment  
Appraisal

### Communication

- Use plain English and be concise
- Give information verbally and in writing
- Provide written information on pastel coloured paper rather than white
- Use short words where possible. Keep written sentences to an average of 15-20 words
- Use lower case letters where possible
- Use bold rather than underlining or italic for highlighting points
- Keep text as 'left justification'
- Lists of dos and don'ts are more useful than sentences
- Use flow charts and where possible, diagrams/images/pictures
- Use a sans serif font. The Trust recommends Arial minimum size 12

### Instructions

- Give instructions clearly and one at a time
- Keep instructions simple and concise
- Demonstrate more complex tasks
- Encourage the person to repeat the instruction back to you
- Write down the plan of action as well as talking it through
- Where multiple instructions cannot be avoided use diagrams or pictures
- Do not hint or make assumptions

### Time and Work Planning

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- Ensure that the person feels able to take mini breaks to help refresh concentration and improve performance
- Provide a workspace where there are few distractions
- Be aware of stressful situations as stress can heighten effects of dyslexia, e.g. workload, noise
- Encourage the person to use a work plan to help them prioritise their work
- Encourage the person to use wall planners, diaries, p.c. or mobile phone as prompts/alarms to remind them of meetings and deadlines
- Create daily or dated to do lists and consider using whiteboards/flipcharts
- Build planning time into each day
- Seek and provide regular feedback from the person on their progress/difficulties
- Allow time for unforeseen occurrences

### **Working Environment**

- Encourage all staff to keep work areas neat and tidy, a place for everything and everything in its place
- Consider physical work space such as lighting and desk layout
- Consider colour code items
- Use numeric or date filing systems instead of alphabetic

### **Helping Written Work**

- Use spell checker provided on for PC
- Change background colour of screen to enhance readability
- Allow additional writing time. Usually 25% extra time is recommended
- Assign a colleague as a proof reader

### **Helping Reading**

- Highlight important text in documents
- Provide a summary/overview for long documents
- Allow additional time for reading and understanding. Usually 25% extra time is recommended

### **Helping with Directions**

- Always give a map with written details of how to get to destination
- Allow extra time for getting from A to B

### **Work Place Culture**

- Encourage disability awareness including dyslexia awareness training for line managers and staff

### **Recruitment**

- Where application forms are used offer applicants the opportunity to have a different format
- Avoid psychometric testing. If it is unavoidable offer candidates the opportunity to complete this alone in a quiet room and if the candidate has declared they have dyslexia give them additional time. Usually 20% extra time is recommended

### **Appraisal**

- Conduct one to one meetings in an informal environment
- Allow the person to verbally report their self assessment
- Allow the person to use a digital recorder during the meeting so that they can replay after the meeting to ensure that they heard and understood everything

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- Allow the person to be accompanied by another member of staff to act as note taker and another pair of ears
- Encourage the person to make their own notes
- Always provide a copy of notes taken, to the person
- Give plenty of advanced warning for a formal appraisal

**Document adapted from**

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British Dyslexia Association: Becoming a dyslexia – wise employer – framework for action<sup>2</sup>

Right to Write: What is Dyslexia?<sup>3</sup>

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## Appendix 4: Additional Support for Reasonable Adjustments

It should be noted that commonly used software packages such as Microsoft Windows or Apple Mac offer the facility to change background colours and the appearance of the screen. Even straightforward procedures such as changing font size and style can make a dramatic difference.

### Hardware available

- Computers, whether desktop, laptop or netbook
- Digital voice recorders can be used to record audio files which can then be uploaded into a computer (see also voice recognition software)
- Electronic dictionaries , standard or medical version
- Mobile phones, particularly the new style smart phones
- Personal Digital Assistant (PDA)
- Digital cameras, when used with appropriate software (see below), can be used to take pictures of text, select an area and have it read back to you
- Digital pens used to highlight areas of text. Depending on the software used, individual words can then be explained or even synthesised into speech to aid pronunciation. Areas of scanned text can also be uploaded into a computer
- Electronic note making devices such as Digiscribble or a tablet PC work with a digital pen and can be used to transfer a hand drawn mind-map into the computer

### Software available

- Note taking programmes such as Audio Notetaker (Iansyst) help students to organise recordings from a digital voice recorder and add annotation
- Reading programmes such as Texthelp Read and Write Gold, ClaroRead Plus or Kurzweil 3000 read scanned or typed text out loud
- Voice recognition software such as Dragon Naturally Speaking allows the person to dictate notes into a computer
- Some programmes also transcribe from a digital voice recorder. However as the software needs to be trained to recognise the individuals voice it does not always cope well with a variety of voices such as from lectures and meetings
- Claroview a coloured overlay feature for computer screens
- Mind mapping software such as Inspiration, Mind Genius, Claro Mindfull, Spark Learner and Mind Manager can be used to create mind-maps in a range of styles

### Other equipment

- Coloured overlays i.e. semi transparent tinted sheets can be used to reduced visual disturbances by placing them over a page of text
- Tinted glasses can also be used. These are the same principle as coloured overlays but in spectacle form

Further information on many of these products is available through the links included in Appendix 5 - Useful Contacts.

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## Appendix 5: Useful Contacts

### Dyslexia

The British Dyslexia Association

[www.bdadyslexia.org.uk](http://www.bdadyslexia.org.uk)

Dyslexia Action

[www.dyslexia-inst.org.uk](http://www.dyslexia-inst.org.uk)

The Helen Arkell Dyslexia Centre [www.arkellcentre.org.uk](http://www.arkellcentre.org.uk)

Independent Dyslexia Consultants

<http://www.dyslexia-idc.org/>

Professional Association of Teachers of Students with Specific Learning Differences (PATOSS)

[www.patoss-dyslexia.org](http://www.patoss-dyslexia.org)

The Dyslexia Teaching Centre

[www.dyslexiateachingcentre.co.uk](http://www.dyslexiateachingcentre.co.uk)

### General

Equality Act 2010 What do I need to know? Disability quick start guide

[www.equalities.gov.uk](http://www.equalities.gov.uk)

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Equality Act 2010 What do I need to know? Disability quick start guide

[www.equalities.gov.uk](http://www.equalities.gov.uk)

iansyst Limited (assistive technology)

[www.iansyst.co.uk](http://www.iansyst.co.uk)

Skill: National bureau for students with disabilities

[www.skill.org.uk](http://www.skill.org.uk)

Equality and Human Rights Commission

[www.equalityhumanrights.com](http://www.equalityhumanrights.com)

Employers Forum on Disability

[www.efd.org.uk](http://www.efd.org.uk)

Access to work: Information for employers leaflet

[http://www.direct.gov.uk/en/DisabledPeople/Employmentsupport/WorkSchemesAndProgrammes/DG\\_4000347](http://www.direct.gov.uk/en/DisabledPeople/Employmentsupport/WorkSchemesAndProgrammes/DG_4000347)

NHS Employers

[www.nhsemployers](http://www.nhsemployers)

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Royal College of Nursing: diversity and equality

[www.rcn.org.uk](http://www.rcn.org.uk)

[http://www.rcn.org.uk/data/assets/pdf\\_file/0004/333535/003834.pdf](http://www.rcn.org.uk/data/assets/pdf_file/0004/333535/003834.pdf)

[http://www.rcn.org.uk/data/assets/pdf\\_file/0006/333537/003833.pdf](http://www.rcn.org.uk/data/assets/pdf_file/0006/333537/003833.pdf)

[http://www.rcn.org.uk/data/assets/pdf\\_file/0003/333534/003835.pdf](http://www.rcn.org.uk/data/assets/pdf_file/0003/333534/003835.pdf)

The British Psychological Society (to obtain a list of chartered psychologists who can undertake a formal assessment for a SpLD)

[www.bps.org.uk](http://www.bps.org.uk)

Association of Educational Psychologists (to obtain a list of educational psychologists who can undertake a formal assessment for a SpLD)

[www.aep.org.uk](http://www.aep.org.uk)

### **Assistive technology**

Digiscribble

[www.scanningpensco.uk](http://www.scanningpensco.uk)

ClaroRead and Write, ClaroView, Screen Ruler

[www.clarsoftware.com](http://www.clarsoftware.com)

Dragon Naturally Speaking

[www.nuance.com](http://www.nuance.com)

Kurweil Reader

[www.sightandsound.co.uk](http://www.sightandsound.co.uk)

Mind Manager

<http://www.mindjet.com/mindmanager>

Mindgenius

[www.mindgenius.com](http://www.mindgenius.com)

Reading Pen and Oxford Dictionary

<http://www.techready.co.uk/Assistive-Technology/Reading/Reading-Pen>

Spark Learner

<http://spark-space.com/>

TextHelp Read and Write Gold

[www.texthelp.com](http://www.texthelp.com)

### **Free versions of software**

Some manufactures offer free versions of assistive technology software. These are usually a more basic format than those commercially available and they may therefore lack some of the advanced functionality. Nevertheless they are extremely useful and offer a valuable resource to those unable to secure funding. The following websites offer a range of assistive technology programmes – just follow the onscreen links or menus to access those that will help with identified areas of difficulty.

[www.techdis.ac.uk/getfreesoftware](http://www.techdis.ac.uk/getfreesoftware)

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### Equality Impact Assessment Form

|  |                                    |                                     |                            |                                     |
|--|------------------------------------|-------------------------------------|----------------------------|-------------------------------------|
| Department/Function  | Workforce                          |                                     |                            |                                     |
| Lead Assessor  | Gillian Day                        |                                     |                            |                                     |
| What is being assessed?  | Dyslexia in the Work               |                                     |                            |                                     |
| Date of assessment   | 01/05/2017                         |                                     |                            |                                     |
| What groups have you consulted with? Include details of involvement in the Equality Impact Assessment process. | Equality of Access to Health Group | <input type="checkbox"/>            | Staff Side Colleagues      | <input checked="" type="checkbox"/> |
|  | Service Users                      | <input checked="" type="checkbox"/> | Staff Inclusion Network/s  | <input checked="" type="checkbox"/> |
|  | Personal Fair Diverse Champions    | <input type="checkbox"/>            | Other (Inc. external orgs) | <input type="checkbox"/>            |
|  | Please give details:               |                                     |                            |                                     |

| 1) What is the impact on the following equality groups?   |  |   |
|---|--|---|
| Positive:   | Negative:  | Neutral:  |
| <ul style="list-style-type: none"> <li>➤ Advance Equality of opportunity</li> <li>➤ Foster good relations between different groups</li> <li>➤ Address explicit needs of Equality target groups</li> </ul> | <ul style="list-style-type: none"> <li>➤ Unlawful discrimination, harassment and victimisation</li> <li>➤ Failure to address explicit needs of Equality target groups</li> </ul> | <ul style="list-style-type: none"> <li>➤ It is quite acceptable for the assessment to come out as Neutral Impact.</li> <li>➤ Be sure you can justify this decision with clear reasons and evidence if you are challenged</li> </ul> |
| Equality Groups   | Impact<br>(Positive / Negative / Neutral)  | Comments<br><ul style="list-style-type: none"> <li>➤ Provide brief description of the positive / negative impact identified benefits to the equality group.</li> <li>➤ Is any impact identified intended or legal?</li> </ul>       |
| <b>Race</b><br>(All ethnic groups)  | Neutral  |   |
| <b>Disability</b><br>(Including physical and mental impairments)  | Negative   | Members of staff who have difficulties in reading and understanding the content of the policy may need additional support   |
| <b>Sex</b>  | Neutral  |   |
| <b>Gender reassignment</b>  | Neutral  |   |
| <b>Religion or Belief</b>   | Neutral  |   |
| <b>Sexual orientation</b>   | Neutral  |   |
| <b>Age</b>  | Neutral  |   |
| <b>Marriage and Civil Partnership</b>   | Neutral  |   |
| <b>Pregnancy and maternity</b>  | Neutral  |   |
| <b>Other</b> (e.g. caring, human rights)  | Neutral  |   |

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|  |      |
|--|------|
| 2) In what ways does any impact identified contribute to or hinder promoting equality and diversity across the organisation? | None |
|--|------|

|   |
|---|
| 3) If your assessment identifies a negative impact on Equality Groups you must develop an action plan <b>to avoid discrimination and ensure opportunities for promoting equality diversity and inclusion are maximised.</b> |
| ➤ This should include where it has been identified that further work will be undertaken to further explore the impact on equality groups  |
| ➤ This should be reviewed annually.   |

|                     |
|---------------------|
| Action Plan Summary |
|---------------------|

| Action   | Lead        | Timescale   |
|--|-------------|-------------|
| Any member of staff having difficulties reading and understanding the content of this policy will be offered support to explain the processes outlined in this policy by appropriate Personnel and alternative format can be made available. | Gillian Day | As required |
|  |             |             |
|  |             |             |

*This form will be automatically submitted for review for Policies and Procedures once approved by Policy Group. For all other assessments, please return an electronic copy to [EIA.forms@mbht.nhs.uk](mailto:EIA.forms@mbht.nhs.uk) once completed.*

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