

Shellie Johnson (pseudonym) - Initial Assessment by Video

P High School for Girls

Date of birth: 01/01/1985

Referral received: 18/09/2023

Assessment: 22/09/2023

Report sent: 22/09/2023

From: Referrer Name

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Organisation: High School for Girls

Report recipients

This report contains confidential information. The recipients named below have a responsibility to process, secure and store this information in accordance with data protection law.

Name	Organisation	Email
Referrer Name Status: Consent given	High School for Girls	email@email.com
Additional Recipient Status: Consent given	High School for Girls	email@email.com

Dear Referrer,

Thank you for referring Shellie.

I can offer an opinion on this case based on my assessment of the individual and the information provided, and I have their consent to release this report to the agreed report recipients.

Reason for referral

I understand Shellie is currently attending work and the referral indicates that you would like advice and guidance regarding provision of workplace support relating to her health conditions.

Health background

Shellie advised that she was diagnosed with asthma in early childhood, which was considered severe, and this subsequently improved as she got older. In early 2023, she became unwell and experienced an exacerbation of her asthma symptoms. She was later advised that she likely had Long-Covid and that this was the cause of her asthma symptoms becoming severe again. She is currently under the care of her general practitioner (GP) and the respiratory team at the hospital, and she takes prescribed medication to help manage her asthma symptoms.

She tells me that she was never diagnosed with Covid-19 and never had a positive Covid test; however, considering her ongoing symptoms, the doctor advised that she must have previously been infected with the covid virus and just did not experience any symptoms.

Shellie was referred to a Long-Covid clinic by her asthma nurse and the respiratory team and she had an online consultation with a Long-Covid specialist GP in July 2023. He advised that she had Long-Covid and Myalgic encephalomyelitis (ME).

Long Covid is a term to describe the effects of Covid-19 that last for several weeks or months beyond the initial illness and is considered to be a form of post-viral fatigue syndrome.

ME, also called chronic fatigue syndrome (CFS) is a complex chronic disease that presents with symptoms in multiple body systems. ME is a relapsing-remitting condition where individuals experience significant fluctuations in their well-being from day to day, week to week, and month to month. There are currently no diagnostic tests for ME, and the diagnosis is generally made based on symptoms. Shellie experiences fatigue, breathlessness on exertion and talking, and she is sleeping much more than normal, which is impacting on her work/life balance. In addition, she is experiencing symptoms of brain fog and memory problems which are impacting on her in the workplace.

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ME/CFS can cause a host of ongoing physical and cognitive symptoms that can result in long-term disability. These symptoms can be particularly distressing because they do not improve with rest. People with ME/CSF are often advised by health practitioners to use pacing techniques. Pacing refers to spacing out an individual's activities during the day so that they're able to stay within the limits of what their body can handle without exacerbating their symptoms.

Treatment for ME/CFS aims to relieve the symptoms. The treatment will depend on how the condition is affecting an individual.

While there is currently no cure for ME/CFS, there are treatments that may help manage the condition.

Treatments include cognitive behavioural therapy (CBT), energy management where an individual is given advice about how to make best use of the energy they have without exacerbating their symptoms, and medication to control symptoms such as pain and sleeping problems, if required. Most people with ME/CFS will improve over time, especially with treatment, although some people do not make a full recovery.

Shellie has undergone blood tests, a chest x-ray, and spirometry (lung function testing) which have all shown no indication of permanent lung damage. Her blood tests did show that she has anaemia, and she is being treated for this. She has also been referred to a ME/CFS clinic and she is waiting for an appointment to attend.

Impact on work

Shellie is currently experiencing symptoms associated with ME/CFS that are impacting on her daily life and she is intermittently struggling with aspects of her substantive role.

In my view, this is the main thing impacting on Shellie in the workplace at this time.

Recommendations and responses to questions raised

In your view is it likely that the member of staff's condition and/or effects could be considered within the scope of the disability provision of the Equality Act 2010? If so, are there any specific adjustments for management to consider?

In terms of compliance with the Equality Act 2010, you will be aware that ultimately this is a legal, not medical, decision. To provide guidance in this matter, however, it is my opinion having considered the definition of disability that Shellie is likely to be considered within the scope of the act. This is because she has a health condition (asthma) which amounts to an impairment on a historical basis, and that would have a significant impact on daily activities without the benefit of treatment.

In terms of adjustments, management may wish to consider alteration to hours, flexible working, including start times and home working, changing tasks or the pace of work, and allowing time for appointments and treatment if these cannot be arranged outside working hours.

It may be beneficial for her line manager to schedule regular meetings to discuss and review workloads to offer opportunity to discuss any further concerns or difficulties going forward.

Management may wish to consider adjustment to absence scorings given her medical history.

Adjustments are at management's discretion, and dependent on operational feasibility.

What adjustments and accommodations can we make to support Shellie at work temporarily. And are

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any longer term adjustments needed.

In addition to the recommended adjustments above, Shellie would benefit from flexibility to take short rest breaks throughout the day to conserve her energy and lessen her fatigue.

Some useful tips for Shellie based on medical guidance are:

Managing fatigue is one of the main symptoms affecting individuals with post covid symptoms and pacing may be beneficial when undertaking activities. A key component of pacing is ensuring that rest periods become a regular part of the schedule, thus preventing any symptoms from escalating, and avoiding complete exhaustion. Consider the best time of the day to do certain activities based on energy levels.

Frequent short rests are better than a few longer ones, so rest before becoming exhausted.

Try to break tasks which feel difficult down into smaller chunks, and alternate easier and harder activities.

Don't stop doing things that make you feel breathless. If you stop using your muscles, they will get weaker, which can increase breathless when you try to use them.

For some individuals with ME/CFS, memory problems might be managed to some extent by using memory aids such as organisers or portable notebooks to record information, like to-do lists, appointments, and people's names. Electronic devices such as smartphones and tablets can offer an additional bonus of setting reminders for medications and appointments.

Please provide details of medical diagnoses, medication (and side effects).

Shellie has been diagnosed with asthma, Long-Covid, and CFS/ME, and the details of these are explained above. She is taking appropriate prescribed medication to help manage her symptoms and she reported no side effects from any of her medication.

Review

I have not arranged to speak with Shellie again, but I would be happy to do so at any stage. If we can be of any further assistance, please do not hesitate to contact us.

I hope you find this report helpful. We are open office hours Monday to Friday and we can be contacted on 0800 862 0142 if you require any further assistance.

Clinician Name

Occupational Health Nurse

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