



Royal College  
of Nursing

# Dyslexia, dyspraxia and dyscalculia:

## a summary guide for managers

### Background

For many years the Royal College of Nursing (RCN) has recognised the impact of dyslexia, dyspraxia and dyscalculia on its members, and has sought ways of supporting individuals with these conditions to help them to reach their potential in whatever role or setting they work. In 2009 RCN Congress accepted a resolution which called on RCN Council to “influence employers to recognise and provide for the needs of nursing staff with dyslexia and similar conditions.”

This led the RCN Nursing Department to commission an in-depth guide for managers and practitioners and an accompanying toolkit, both of which are available via the RCN website. This summary contains excerpts from the more detailed guide, and is designed as a quick point of reference.

### Overview of dyslexia, dyspraxia and dyscalculia

All three conditions are a type of specific learning difference (SpLD) – an umbrella term used to describe a condition where the brain processes information in a slightly different way. Detailed explanations of each condition and its specific areas of associated difficulty are provided in the guide and toolkit, which also suggest strategies to help overcome the difficulties they may cause. One key factor to be considered is that each individual affected by one or more of these conditions will

have a very unique personal profile. This means that no one individual is likely to experience difficulties in all of the potential areas, and recognition of their specific areas of need and how to support them will need to be individualised.

Dyslexia is probably the most well known of the three conditions. At first it was viewed as a literacy problem as it is known to have an effect on reading, spelling and writing. However as our understanding has developed its effects on processing information have become apparent, leading to recognition of potential difficulties with speed of processing information, memory, organisation and sequencing of tasks.

Dyspraxia is a developmental co-ordination disorder (DCD) which results when parts of the brain fail to mature properly as they develop, leading to motor coordination difficulties which affect both gross and fine motor movements. These may lead to problems with balance, causing the person to appear clumsy (gross movement), or result in poor manual dexterity causing them to frequently drop things or struggle to manipulate instruments (fine movement). Furthermore, due to the brain frequently using extended and less efficient neural pathways, individuals with dyspraxia may experience difficulties with organisation. In adults it is often these weak organisational skills, either related to the formulation of ideas or general planning that create the most significant difficulties.

Dyscalculia is probably the most controversial of the three conditions covered in the guide and



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toolkit. There is widespread debate surrounding its true nature, which makes it difficult to both diagnose and to estimate its incidence. It is much more than being bad at maths and is linked to a much more fundamental problem, namely a total inability to conceptualise numbers. As such it is unlikely that people with ‘true’ dyscalculia would be able to perform drug calculations. It is therefore imperative that staff are correctly diagnosed and not incorrectly ‘labelled’ as having dyscalculia when they have weak maths skills, something that is much easier to address.

## Disability discrimination – your legal responsibilities

In 1995 the Government passed the Disability Discrimination Act to ensure that those suffering from any accepted disability were not discriminated against in any way. Under the terms of the act a person has a disability “if he has a physical or mental impairment which has a substantial and long-term adverse effect on his ability to carry out normal day-to-day activities.” (HMSO, 1995, p1), Specific Learning Differences (SpLD) such as dyslexia, dyspraxia and dyscalculia are all classified as a ‘disability’ under this definition.

In 2005 the Act was updated and required organisations to “*promote equality of opportunity and positive attitudes; eliminate unlawful discrimination and encourage disabled people’s participation*” (HMSO, 2005). More recently all of the existing legislation related to equality and diversity has been brought together under the Equality Act (HMSO, 2009) which became law in April 2010. This aims to clarify key terminology and make the responsibilities of both individuals and organisations much easier to understand. It is classed as a ‘Consolidatory Act’ and will come into effect from October 2010, replacing

previous legislation including the Disability Discrimination Act which will be repealed <sup>1</sup>. In view of the legislation it is imperative that everyone working with staff who have dyslexia, dyspraxia or dyscalculia, whether as an employer, manager, colleague or mentor/preceptor are fully aware of their legal responsibilities.

Under the terms of disability legislation individuals are entitled to receive “reasonable adjustments” to help them overcome their difficulties. However there is no legal definition of what constitutes a ‘reasonable’ level of adjustment, and managers/employers may be required to defend any decisions they have made. This is particularly so when a request for an adjustment has been refused. In order to receive adjustments it is normally expected that an individual will have been formally diagnosed with one or more of the conditions. Further advice regarding formal identification of these conditions is included in the guide.

Once adjustments have been put in place, the individual will be expected to demonstrate that they are “fit for practice”. This means that they must meet all of the competencies and skills that are required for that role. Nurses on the register have an ongoing professional responsibility, through the NMC code of conduct (2008), to work within the limits of their abilities. There is therefore an assumption that nurses will only seek employment in areas in which they feel able to practice safely.

## Author

### Michelle Cowen

Lecturer/Academic Lead for Disability and Dyslexia at the Faculty of Health Sciences, University of Southampton. Consultant in dyslexia, dyspraxia and dyscalculia

<sup>1</sup> Except in Northern Ireland where the Disability Discrimination Act remains on statute.



## Recommendations

The detailed guide and toolkit are designed to raise awareness of the impact of dyslexia, dyspraxia and dyscalculia on an individual, particularly in relation to the workplace. Whilst these three conditions no doubt present challenges for those affected it must be remembered that in themselves they are not a barrier to achievement, merely an obstacle which needs to be overcome. In order to help our colleagues to succeed there is a need for the following recommendations to be considered.

1. Employers need to recognise the contribution that those with dyslexia, dyspraxia and dyscalculia can make, whilst acknowledging the areas which might pose a particular challenge.
2. Employers need to listen to their staff when they identify areas of difficulty and base support on the member of staff's unique needs and not stereotypical ideas of what dyslexia, dyspraxia and dyscalculia are.
3. The RCN toolkit should be freely available and staff encouraged to use the strategies suggested within it, whether for themselves or to support others.
4. Staff involved in recruitment and selection have diversity awareness training.
5. Employers should consider providing staff development sessions to inform all staff of their responsibilities towards colleagues/students with disabilities. In addition, content related to dyslexia – the condition they will encounter most often – should be included, along with a brief overview of dyspraxia and dyscalculia.
6. Clear processes are developed to identify staff who are struggling in their current role as a result of a specific learning difference. Where issues are identified, the employer should attempt to obtain specialist advice as to how to best support their employee.
7. Staff are given advice to help them to select appropriate career options.
8. Effective partnerships are established with HEI's to ensure that student nurses are appropriately supported both during campus based learning and whilst on placement.
9. All mentors, but particularly sign-off mentors, receive appropriate training and support to help them to make appropriate judgements relating to fitness to practice where students have a disability. This needs to inform mentors about the requirement to ensure that reasonable adjustments are implemented, but stress that if the student is still not reaching the required standard that it is then appropriate to fail the student.
10. Newly qualified staff with formally identified dyslexia or dyspraxia are supported for an agreed period of time by a named preceptor to help them make the transition into their new role.

## References

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