Supporting Physical Disabilities
Supporting physical disabilities

This toolkit is a quick introduction into how disabilities can present in learners and, importantly, how you as a trainer can support them.

Tips for creating an inclusive learning environment

For a variety of reasons, tutors/trainers are likely to come across learners who have chosen not to notify them about their disabilities or difficulties, and learners who may not have a diagnosis or even be aware of their underlying disability.

Therefore, to ensure we are inclusive to all learners, it is vital to establish positive relationships with learners and to provide an inclusive working environment where all learners can succeed.

A great benefit of this approach is that learners with additional needs will have their needs met without feeling singled out, or that they are causing inconvenience. Furthermore, what works well for learners with disabilities or additional needs will likely work well for all learners.

"To ensure we are inclusive to all learners, it is vital to establish positive relationships with learners and to provide an inclusive working environment where all learners can succeed."
Planning and preparation

**Inclusive teaching**
Plan to deliver resources in a variety of formats that will be accessible to all learning styles and learning needs (eg all learners will benefit if a video is accompanied by a transcript).

Consider colour: for example, black board markers can be difficult for some learners to read, and both red and green are inaccessible for those with colour blindness.

**Organisation**
Provide all learners with guidelines on organising, dating and filing notes (eg colour code) at the start of their learning. Don’t assume they have this skill already.

**Prevention**
Create a safe and calm environment where mental health problems are less likely, thereby contributing towards positive mental health and well-being of all learners and helping them to be resilient so that they can manage the normal stress of life effectively. This will include informing learners about mental well-being through the syllabus and reinforcing this learning through practical activities and ethos.

**Advocacy**
Build in opportunities to promote awareness of the importance of accepting and celebrating difference, and incorporate diversity into everything you do.

**Flexibility**
Allow assessment and evidence of achievement to be performed in a variety of ways to give all learners the best opportunity to demonstrate their individual skills and knowledge.

**Physical environment**
Be proactive in seeking feedback from learners on how included they feel and how the learning environment could be improved.

**Feedback**
Be aware of and manage the physical environment – accessible spaces, sensory stimuli and distractions. Understand that having to put more effort into everyday tasks, experiencing high levels of anxiety and having to work harder to concentrate than other learners can be exhausting.
Personalise the learning

Inclusive approaches to support learners

**Identification**
It is important to recognise emerging mental health issues in learners as early and accurately as possible. Take appropriate steps, with the health and safety team, to help learners to access support and intervention services.

**Ask the learner**
Don’t assume you know what the implications of a difficulty or disability are; ask the learner what they find challenging and what their strengths and goals are. The learner is the expert.

**Advanced preparation**
Provide materials (meeting plans, documents, PowerPoints, etc) in advance, so that learners have the opportunity to become familiar with the materials, thereby reducing anxiety about the content and enabling them to make the most of the class.

**Technology**
Support the use of technology in the learning environment. For example, digital voice recorders allow learners to reflect, revisit content and independently take slower-paced, informed notes after the event.

**Clarity**
Maximise the clarity of instructions to all learners and deliver information in manageable sections. In whole-class discussions, repeat any questions asked by learners so that the whole class can hear and benefit from the question and the answer. Revisit and recap prior learning regularly to allow extra opportunities to reinforce learning.

**Relevant**
Make learning relevant to the learner using real life situations, current events and interests, to engage them.
Supporting physical difficulties

The term ‘physical disability’ indicates a limitation of a person’s physical functioning, mobility, dexterity or stamina.

These can include:

- permanent disabilities
- temporary illnesses
- a range of medical conditions.

The above conditions will impact individuals differently and potentially fluctuate in different environments. Different people’s experience of a physical illness can be vastly different. It’s important to work with each learner appropriately for their specific needs. Please always ensure that appropriate care plans and risk assessments are communicated across the relevant training team.

Learners with a chronic illness or temporary illness may miss a lot of class time. They could have hospital visits, regular appointments or be fatigued so need to recover at home.

Top Tip

As all learners will have differing needs, it is important to communicate with each learner as they are the best judge of how they are affected by their disability, and of what they need in terms of support.
How may it affect the learner?

**Physical symptoms:**
- Difficulty getting around the learning environment
- Difficulty participating in some activities (for example, physical education or excursions)
- Taking notes or undertaking practical tasks, as they may have limitations in their strength and/or dexterity
- Travelling short or long distances; they may use manual or power wheelchairs, crutches, walking frames, or may just need extra time and to use the lifts when moving around the environment
- Meeting their own personal daily needs independently, so they may be accompanied by a support worker.

How can you help?

**Physical support:**
- Be aware of any access arrangements and ensure these are in place to facilitate the learner’s normal ways of working in class
- Consider the access issues for your learner – if you are not based on the ground floor, is there lift access?
- Can they safely evacuate the building in an emergency? Is there an individualised personal emergency evacuation plan in place?
- Consider the class environment – does the learner require a height-adjustable table, alternative seating or specific positioning in class?
- For conditions such as cerebral palsy, people should be aware that the learner will likely present with repeated involuntary movements.
- If regular exercise is part of the normal routine, you may need to be aware of adjustments when planning activities.
- If you are arranging visits and trips, forward plan with your learner to ensure they have the same opportunities and access as the rest of the class, and take advice on risk assessments, if necessary.
### How may it affect the learner?

**Behavioural symptoms:**
- difficulty completing work on time or taking part in exams
- decreased academic performance
- difficulty keeping up relationships with friends
- difficulty communicating, due to speech and language issues.

**Emotional symptoms:**
- Feeling less confident and less motivated, potentially affecting self-esteem and body image.

### How can you help?

**Behavioural support:**
- When supporting a learner to complete practical elements of their learning, ensure the learner’s thoughts and ideas are put into practice so they are in control of the end result.
- Patience is important, to create and maintain a relaxed atmosphere.
- If learners have a condition/disability that affects their speech, always ask the learner to repeat what they have said, or re-frame the question if you have not understood. Never pretend. Don’t be embarrassed, they will likely be used to the situation and their speech pattern will become more familiar in time.
- Learners may require more time to answer questions or to contribute in class.
- Learners may become more tired in the afternoons, due to their condition, and need support to be aware of how to ‘pace’ their days at the workplace.

**Emotional support:**
- Be aware of the learner’s needs; for example, they may have a note taker, use a laptop or a digital voice recorder (DVR) in class to capture notes.
- Always address the learner and not the person with them, if they are accompanied by a support worker.
- Always position yourself in front of the learner when speaking and try not to have long conversations when pushing a manual wheelchair, where you are behind the learner.
- Try not to make too many assumptions before you have discussed an individual’s condition.
- Always ask and be discreet in your approach initially.
Epilepsy

Epilepsy is a neurological condition that affects about 1 person in every 100, causing recurrent seizures that originate in the brain.

Supporting epilepsy

Epilepsy is the most common long-term neurological condition of childhood and it affects an estimated 112,000 children and young people in the UK, although diagnosis is not straightforward.

People can experience many different types of epileptic seizures and you will need to find out what is normal for each individual. Seizures can last for different amounts of time. Once a seizure is over the individual may need to recover; this can take much longer than the seizure itself.

Most people with epilepsy respond well to treatment and can get on with their lives. However, some people with frequent seizures of any type may need constant supervision and support. Learners with epilepsy will usually have an individualised care plan.

Find out more about epilepsy here

Want to know more?

Find out more about seizures here
How may it affect the learner?

**Physical symptoms:**
- uncontrollable jerking and shaking, called a ‘fit’
- losing awareness and staring blankly into space
- becoming stiff
- strange sensations, such as a ‘rising’ feeling in the tummy, unusual smells or tastes, and a tingling feeling in the arms or legs
- collapsing
- passing out and not remembering what happened.

Source: Epilepsy - NHS (www.nhs.uk)

How can you help?

**Physical support:**
- Learners should disclose their needs at the application or enrolment stage; contact the health and safety team to ensure a care plan or further training in epilepsy is in place.
- The health and safety team will support you to decide how much information should be shared with staff, classmates and the wider school community.
- Get to know the learner and how their epilepsy affects them, and how they’d like to manage it.
- Be aware of their care plan and if you have any responsibilities within it.
- Know a learner’s triggers and ensure they are supported to avoid them, as far as possible, in the learning environment (eg missed meals, response to stress or anxiety, illness, flashing lights).

**Emotional support:**
- If learners miss coursework due to their epilepsy, support them by providing catch-up work and helping them to feel comfortable returning to the learning environment.
- If a learner has a seizure in the place of learning, work with them to ensure they feel comfortable returning.

**Basic seizure guidance:**
If you are with someone having a seizure:
- Only move them if they’re in danger, such as near a busy road or a hot cooker
- Cushion their head if they’re on the ground
- Loosen any tight clothing around their neck, such as a collar or tie, to aid breathing
- Turn them onto their side after their convulsions stop – read more about the recovery position
- Stay with them and talk to them calmly until they recover
- Note the time the seizure starts and finishes
- If the person is in a wheelchair, put the brakes on and leave any seatbelt or harness on; support them gently and cushion their head, but do not try to move them
- Do not put anything in their mouth, including your fingers; they should not have any food or drink until they have fully recovered.
Diabetes

Epilepsy is a neurological condition that affects about 1 person in every 100, causing recurrent seizures that originate in the brain.

Supporting diabetes

Diabetes is a fairly common health condition where a person’s pancreas does not produce any insulin, or not enough, or where the insulin that is produced does not work properly. This causes the amount of glucose in their blood (blood sugar level) to be too high because the body cannot use it properly.

There are two types of diabetes:

Type 1 diabetes:

Type 1 diabetes occurs when the body is unable to produce any insulin. Usually, it occurs before the age of 40 and especially in childhood. A common way of treating type 1 diabetes is through daily insulin injections.

Type 2 diabetes:

Type 2 diabetes develops when the body can still make some insulin, but it is either not enough or does not work properly. It is usually controlled with a healthy diet and exercise and, in some cases, insulin. Type 2 diabetes is far more common than type 1. In the UK around 90% of all adults with diabetes have type 2.

People with diabetes will be advised to eat healthily, exercise regularly and carry out regular blood tests to check blood glucose. Uncontrolled diabetes can lead to damage to the heart, eyes, feet and kidneys.
How may it affect the learner?

**Physical symptoms:**
- Excessive thirst
- Needing the toilet frequently
- Tiredness
- Wounds that do not heal very quickly
- Weight loss

**Low blood sugar symptoms:**
- Hypoglycaemia (hypo), when their blood glucose level is too low, and they experience physical symptoms of:
  - sweating
  - blurred vision
  - feeling shaky
  - behavioural responses of anxiety/irritability, hunger, difficulty with concentration.

**High blood sugar symptoms:**
- Hyperglycaemia (hyper), when their blood sugar is too high, and they experience feeling:
  - very thirsty
  - needing the toilet more often
  - Tiredness
  - blurred vision
  - fruity-smelling breath.

A hyper can be triggered by stress, illness, being less active or poor diet. This can be life threatening and develop quickly.

How can you help?

**Physical support:**
- People with diabetes must check glucose or blood sugar levels regularly, so allow the learner the time or space to do this if they request it.
- Be aware that learners may carry insulin pens – small needles in the form of a pen that can be carried around – to inject insulin at appropriate times, such as after eating.

**Low or high blood sugar support:**
- Watch out for signs of hypers or hypos. If the signs are spotted quickly enough, the hypo can be treated by taking something high in sugar, such as a non-diet fizzy drink.
- If the person is unable to swallow, seek medical help quickly. Do not try to force them to swallow.

For more information, consult medical guidance:

- Having a hypo | Guide to diabetes | Diabetes UK
Chronic fatigue syndrome

Chronic Fatigue Syndrome (CFS) is a debilitating disorder characterised by extreme fatigue or tiredness, that doesn’t go away with rest and can’t be explained by an underlying medical condition.

Supporting CFS

CFS can also be referred to a Myalgic Encephalomyelitis (ME) or Systemic Exertion Intolerance Disease (SEID). People are sometime affected by CFS in cycles, with periods of feeling worse and then better again.

To manage their condition a person with chronic fatigue syndrome will need to manage their exertion (physical and mental) throughout the day and week to ensure they rest accordingly and respond to how they are feeling.
### How may it affect the learner?

<table>
<thead>
<tr>
<th>Physical symptoms:</th>
<th>Emotional symptoms:</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Fatigue after physical or mental activities – this can last for more than 24 hours after the activity and is severe enough to interfere with daily activities</td>
<td>• The learner may feel left out and misunderstood and therefore be more likely to experience anxiety and low mood.</td>
</tr>
<tr>
<td>• Chronic insomnia (and other sleep disorders), therefore feeling unrefreshed after a night’s sleep</td>
<td>• Emotional energy is often easy to overlook, eg emotional distress, rows, anxiety and ‘over-thinking’. Although this can be difficult to control, it needs to be factored into the available amount of energy.</td>
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<tr>
<td>• Muscle pain and multi-joint pain without redness or swelling</td>
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<td>• Frequent headaches</td>
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<tr>
<td>• Frequent sore throat</td>
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<td>• Tender and swollen lymph nodes in the neck and armpits</td>
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### How can you help?

<table>
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<tr>
<th>Physical support:</th>
<th>Emotional support:</th>
</tr>
</thead>
<tbody>
<tr>
<td>• The learner may need support with note taking; handouts can be provided, to reduce the exertion of note taking.</td>
<td>• Additional mental health support may be required in learning environment. Learning support services may need to signpost them to seek help with their mental health via their GP or specialist services.</td>
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<td>• Plan for rest periods during class/during the day or plan the day to fit with the learner’s support needs. A person with CFS may find mornings or long days more challenging.</td>
<td>• Young people with CFS/may benefit from maintaining a sense of belonging and connection with their class during absences. This could be achieved from things such as organising contact from classmates (eg reaching out on a messaging system).</td>
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<tr>
<td>• Be open to the idea of combining the main learning environment and home learning, and alternative delivery methods that the learner can access in their own time when they are feeling well.</td>
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<td>• Allow for extended time for assignments (special allowance) and ensure access arrangements are in place for exams.</td>
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### Further Information

Please visit the Education & Training Foundation’s [Communities of Practice (CoP) page](#). The CoP are open to anyone working in Education and Skills with an interest in improving experiences for learners with an inclusion need (SEN).
Hearing impairment

Hearing loss can be temporary or permanent, present since birth or developed at a later age.

Supporting hearing impairment

Learners who have notified you that they have a hearing impairment could range from British Sign Language users to those who have become deaf and use speech and lip-reading, from profoundly deaf readers who do not use hearing aids, to those who have hearing aids or a cochlear implant.

It is vital to understand individual learner needs as different people will be affected in different ways.

Top Tip

It is vital to establish positive relationships with learners so they feel equally valued and comfortable asking for help when they need it.
How may it affect the learner?

**Comprehension:**
- Challenges to hearing the verbal input of the lecture
- Can miss information or instructions when taking notes while also listening to or watching other information
- They may need to lip-read
- Poor lighting and the trainer’s position will affect lip-reading ability
- English metaphors, jokes, etc, might be misunderstood
- Working in a room with background noise can be a distraction (for example the ‘hum’ of a computer, or other machinery)

**Participation:**
- Difficulties with written English
- Might not want to join in class discussions
- Mixing with their peers becomes more challenging
- May find it difficult acquiring subject-specific vocabulary

How can you help?

**Comprehension:**
- Consider a range of ways of explaining activities or giving instructions so that misunderstanding is avoided.
- Particular attention needs to be paid to safety, wherever you are. Warnings that rely on hearing, such as fire alarms, shouted instructions or car horns, may be ineffective. You may find it useful to pair the person up with a hearing ‘buddy’.
- Ensure the individual can see the person speaking as they may find it helpful to read lips or body language.
- For lip-reading to be effective, make sure you have good lighting, avoid putting your hands in front of your face or looking away from the learner.
- Give adequate breaks, to enable the deaf learner to learn at their best ability.
- During many activities, visual clues may be necessary; you will need to make sure that these are clear and, when changing from one speaker to another, that the learner is directed to face whoever is talking.

**Participation:**
- Some people may need to use other aids, such as signing, to help their communication; examples are Makaton or British Sign Language.
- Some people may become inattentive when others are speaking, due to a difficulty with following speech.
- Try to avoid noisy conditions, eg when a lot of people are talking at the same time.
- Depending on the type of hearing loss, the learner’s speech may be difficult for the trainer to understand. This will become easier as you get to know the learner.
- Do remember that lip-reading and/or watching the interpreter is very tiring. Allow time for breaks or sections of reading in the class.
A visual impairment is an eyesight difficulty that is not correctable by wearing glasses or contact lenses.

Supporting visual impairment

Up to 80% of what we learn is thought to be gained through our vision. Vision is the coordinating sense, reinforcing information gained from the other senses, and provides us with a wealth of information instantaneously.

How may it affect the learner?

- Mobility:
  - Mobility and orientation around campus and to and from the workplace
  - Judging distance and/or speed, depth perception, moving in crowds
  - Difficulty reading signs, therefore increased risk of falls or bumping into things
  - May use a cane or guide dog for support

How can you help?

- Mobility:
  - Always find out what aids are required for each individual; everyone will have different needs. For example, it is important not to just produce Braille documents when the person requires something in large print or audio format
  - Some people will use white canes for mobility and orientation, so others need to understand and be aware of them.
  - Arrange a guided walk around your meeting place and any new venues, and inform them of any subsequent changes to layout.
### How may it affect the learner? (Continued)

#### Participation:
- Practical tasks may require more effort, time, planning, concentration and/or adaptive skills/requirements or technology to compete; for example, travelling, cooking, etc.
- Social interaction, may be difficult, including department work participation and making friends.
- The learner may struggle with recognising non-verbal and visual features, expressions and behaviours.
- It may be difficult for the learning to know when to speak and to understand or follow turn taking activity.
- The learner may have difficulty adapting to the physical environment, eg changing light and weather conditions, coping in busy, chaotic areas.

#### Mobility:
- Reading and writing tasks, eg books, handouts, signs, proofreading, copying and seeing from the board, etc
- Accessing information: will likely have a reduced opportunity to access incidental learning

### How can you help? (Continued)

#### Participation:
- Always discuss the impairment/condition with the learner, and the extent to which help is needed. Ask for any advice or practical tips they may have to offer.
- Don’t worry about causing offence by using phrases such as ‘nice to see you’. Blind and partially sighted people often use these phrases too.
- When you are leading or guiding, ask the person if they require help and then ask them to grip your arm, just above the elbow. Walk at their pace; tell them where you are going and point out any obstacles or key points on the way.
- Use touch appropriately when you meet and greet someone, to let them know you are there. Let them know your name and who you are so they know you are looking after them. Always verbally ‘sign on’ when you meet someone, and ‘sign off’ when you leave them.
- Always let them know who else is around and whether they are in a small or large group.

#### Mobility:
- There are a variety of aids available, such as magnifying lenses, large-print publications, Braille transcriptions, audio transcriptions, electronic reading aids and screen readers, all available from RNIB or local societies for the blind.
- Use lots of verbal descriptions and try to avoid phrases that rely on sight, such as ‘over there’. Use directional instructions, such as, ‘walk to your left’ or ‘towards me’.
- During many activities, verbal instructions and a running commentary from a work buddy or instructor could be helpful.
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