The Musculoskeletal (MSK) Health Toolkit for employers and further education institutions

HOW TO SUPPORT ADOLESCENTS AND YOUNG ADULTS TO A BETTER FUTURE
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## KEY POINTS FOR EMPLOYERS:
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## KEY POINTS FOR FURTHER EDUCATION INSTITUTIONS:
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It is crucial to create an environment – whether that be university, school or the workplace – which prevents MSK conditions from developing and allows people who are living with MSK conditions to meet their full potential.

Not only does it allow people to thrive and succeed, but it limits the impact that MSK conditions have on our ability to live life exactly how we want to.

Ultimately, MSK conditions should not dictate what we want to learn, study or practise and that is why this toolkit is vital for employers and educators to consider.

– Jasmine Davey, young person living with an MSK condition

Success – a feeling, experience and accomplishment we all long for in some sense, and often what we search for within education or careers.

Finding the right environments for success for young people with an MSK condition can be a challenge, but taking the time to address personal needs, adapting to the surroundings and welcoming conversation only opens doors for them to thrive regardless of the difficulties they may be facing.

The drive and commitment from young people with these conditions must be accompanied by the dedication from employers and higher education providers to participate in honest conversation about the needs of their employees, understanding how drastically daily life with MSK conditions can change and provide equal opportunity to succeed.

The guarantee of this will only encourage young people to find their passions, be fruitful in their roles within companies and flourish as individuals.

– Georgia Bishop, young person living with an MSK condition
HELPFUL DEFINITIONS

- **MSK** – musculoskeletal
- **FE** – further education
- **Adolescent** – defined as those aged 16 to 19
- **Young person** – defined as those aged 18 to 25
- **Chronic MSK conditions** – musculoskeletal (MSK) conditions affect the joints, bones, muscles and spine. Common symptoms may include pain, joint stiffness and a loss of mobility and dexterity.

Examples include back and neck pain, arthritis, muscular dystrophy, systemic lupus erythematosus, skeletal dysplasia, chronic musculoskeletal pain and osteogenesis imperfecta (brittle bone disease).

Many MSK conditions are preventable if risk factors are identified early and interventions to reduce risk are implemented at work, at home and in the wider environment.

It is vital to support young people with MSK conditions to manage pain early and try to prevent future problems, including at work and in FE.
ABOUT MUSCULOSKELETAL CONDITIONS AND WHY THEY ARE RELEVANT TO YOU

There are over 200 types of musculoskeletal (MSK) conditions affecting about a third of the population, so you probably know someone living with one.

MSK conditions don’t just affect older people.

In the UK, 2.8 million people under the age of 35 live with an MSK condition – it impacts their physical and their mental health, and they manage pain and discomfort every day. Around 400,000 have conditions that start before the age of 16.

We now understand teenage and young adult brains better than perhaps at any other time in our history. An enormous amount of change and adaptation happens during those years to behaviours and decision-making patterns.

Our evolving understanding underpins the importance of developmentally appropriate approaches to all aspects of care, education and employment.

Navigating the world of further education (FE) or transitioning to the workplace as a young person is challenging. Those challenges are further complicated if that person manages a long-term MSK condition like arthritis, muscular dystrophy or osteogenesis imperfecta (brittle bone disease). Moreover, those experiencing inequalities such as poverty often have a higher level of MSK conditions.

These conditions can be unpredictable and therefore difficult to manage.

The teenage years are a critical time for establishing self-care habits which often go on to influence later health outcomes. Changes to a young person’s location or physical and social environments can serve as a disincentive when considering potential educational and employment opportunities.

This is why the role of employers and FE institutions is so vital in supporting those entering further education and the workplace for the first time.

Individual experiences and needs are different, unpredictable and may change over time, but there are core things every employer or FE institution can do to support our young people and their MSK health.

This toolkit was developed by clinical experts, patient representative groups, college and university representatives and, of course, adolescents and young people themselves.

Its main aims are to:

1. help employers and FE institutions understand the part they play in preventing MSK conditions
2. set out how employers and FE institutions can support young people with chronic MSK conditions to realise their potential, thrive and remain in work or education.

This toolkit sets out practical advice for employers and FE institutions to help adolescents and young people maintain good MSK health and help those with existing MSK conditions to thrive in their environment.

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2. Ibid.
WHAT ARE THE FACTS?

- 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.

- MSK conditions include arthritis, fractures, hip conditions, knee conditions, lower back pain, osteoporosis and spinal conditions.

- MSK conditions are the greatest cause of disability at any age because of the impact they have on physical activities.\(^3\)

- MSK conditions are more common in areas of greater poverty and among women, and may affect some ethnic groups more than others.\(^4\)

- MSK conditions are very common in people with multiple long-term conditions, and those with MSK conditions often have other comorbidities.\(^5\)

- The pain and fatigue caused by arthritis and related MSK conditions result in a substantial reduction in quality of life.\(^6\)

- Pain is a key symptom of many MSK conditions.\(^7\)

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MSK conditions don’t just affect older people. Of the **20 million** people in the UK living with MSK conditions, **2.8 million** are under 35 years of age, and around **400,000** have conditions that start before the age of 16 (i.e. they started in childhood).

Depression is four times more common among people in persistent pain compared to those without pain.

68% of people surveyed with MSK conditions say the fatigue they experience impacts on their daily activities (28% report a significant impact).

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9. Ibid.
MSK HEALTH AND WELLBEING

The MSK system includes bones, joints, muscles and the spine. They all work together to support your body weight and help you move.

This means your balance, coordination, functional mobility, dexterity, muscular strength and endurance are all affected by the quality of your MSK health.

Good MSK health enables people to stay physically and mentally fit and can reduce the chances of other health conditions occurring, so it is essential for a full working life.

Adolescence and young adulthood are key life stages when it comes to establishing health-promoting behaviours which have a longer-term impact on health. There is therefore a window of opportunity to promote better self-care and health for young people, as they take responsibility for their lives through their careers or education.

PREVENTION OF MSK CONDITIONS

Most MSK conditions – like lower back pain – are preventable, and it is in the interests of any employer or FE institution to invest in a person’s functional capacity, particularly when they are young, to ensure they can learn, contribute and take part in the fullness of the workplace or academic experience.

Employers and FE institutions have both a duty of care and a legal requirement to support young people and adults living with disabilities, including MSK conditions.

The primary responsibility for prevention in the workplace lies with the employer. That is why reducing workplace risks and having the correct assessment procedures in place are critical when managing MSK health.

Beyond that, supporting staff and students to reduce their lifestyle risk factors will help further reduce the risk of MSK harm at work as well as at home.

The bottom line is that inactive people are at increased risk of developing certain painful MSK conditions.

With one in four people in the UK doing less than 30 minutes of physical activity per week, how can employers or FE institutions help prevent MSK conditions? Many of the support measures that employers and FE institutions have in place are rightly centred on increased movement and better nutrition. But there are other ways to support staff and students and help prevent MSK conditions.

A lack of physical activity significantly raises the risk of developing MSK conditions, and those problems can themselves be a barrier to young people being more physically active. There are many ways you can help employees/students be more active, from encouraging screen breaks to providing secure bike racks, from stand-up desks to changing facilities for people who cycle to work. Evidence shows that a workplace culture is the most important factor in the success of a physical activity promotion programme. Resources for getting active can be accessed here: https://www.nhs.uk/better-health/get-active/

I’m all too aware that things could have turned out very differently, and on a number of occasions when my condition was at its worst, I could have let it get the better of me and turned my back on work. I’m glad I didn’t and I’m thankful to those who helped me along the way. I’ve known far too many people over the years who would have loved to have stayed in employment but either gave up on the system or the system gave up on them.

– Young person living with an MSK condition

14 Activity levels see partial recovery from Covid-19 | Sport England
WHAT CAN EMPLOYERS OR FE INSTITUTIONS DO TO HELP PREVENT MSK CONDITIONS?

• Prevent workplace accidents and injuries through better health and safety procedures and risk management.
• Design offices and FE institutions with positive infrastructure – like secure bike racks and stand-up desks.
• Encourage students or staff to increase physical activity through wellbeing programmes or funding equipment like bikes.
• Provide healthy food or information about nutrition to help people make better choices.
• Encourage employees and students to stop smoking and reduce alcohol consumption, perhaps with related incentives.
• Normalise conversations about, and support for, mental health – particularly around identifying and reducing stress.
• Ensure employees or students are consulted on health and wellbeing programmes and, where possible, make them reflect on the feedback garnered.
• Signpost to relevant networks dealing with counselling, health, mental health, etc.
• Create general awareness about the prevention of MSK conditions and other health problems.
• Support employees and students to manage their condition in order to reduce the impact.

For further information, see the Musculoskeletal Health Toolkit for Employers: https://www.bitc.org.uk/toolkit/musculoskeletal-health-toolkit-for-employers/
IMPACT OF CHRONIC MSK CONDITIONS ON YOUNG PEOPLE

MSK conditions are not always visible, nor are the symptoms and impact wholly predictable. The impact on young people can vary widely from a short-term experience of an MSK condition like a sprained ankle or a fractured wrist to a long-term or chronic condition such as arthritis, muscle disease or chronic MSK pain, which can have a very different pattern of presentation.

- **Pain** – Musculoskeletal pain is debilitating. It causes discomfort, and movement is often restricted, making participation in everyday activities and routines very difficult. Those with MSK conditions might experience inflammatory stiffness in the morning and the pain can get worse as the day goes on. This pain, whether acute or chronic, can impact all aspects of young people’s physical and mental wellbeing.

- **Medications** – Many young people with MSK conditions take regular medications that treat their underlying conditions and their symptoms directly. These medications, although helpful to ease the symptoms themselves, can have side effects including nausea, drowsiness, suppressed immune system, low energy levels and low mood.

- **Fatigue** – Young people with an MSK condition can experience a persistent feeling of tiredness, weakness or lack of energy. Both physical and cognitive abilities can be affected, making concentrating or completing physical tasks difficult.

- **Reduced mobility and fitness** – MSK conditions can limit young people’s ability to move around freely, which has a secondary consequence of causing reduced fitness.

- **Altered sleep patterns** – Young people can struggle to achieve restful and restorative sleep while they cope with increased pain levels. The knock-on effect can be that the altered sleep patterns they fall into aren’t compatible with working or college hours.

- **Emotional wellbeing** – Living with an MSK condition not only impacts physical health but has a significant impact on emotional wellbeing and mood. Feeling isolated and worrying that they will be treated differently or not being understood can lead to young people experiencing increased levels of stress and anxiety. Managing symptoms alongside the demands of their job or studies can leave them feeling overwhelmed.

- **Missed days from work or higher education** – When a young person is living with an MSK condition and having trouble with pain and fatigue, it is reasonable to assume their condition will lead to increased sickness and absence.

- **Participation in occupation-related tasks** – Having an MSK condition can cause difficulties while completing specific work or study tasks. For example, prolonged periods of writing, prolonged sitting or standing, or lifting heavy objects may worsen symptoms.

- **Wider health considerations** – MSK conditions can impact other areas of health such as eyesight and cause uveitis – an inflammation of the eye.

- **Isolation, exclusion and stigma** – Living with an MSK can really impact young people’s ability to engage and experience a positive work and FE environment. They might feel excluded, stigmatised and isolated because of the difference between them and their peers.

**MSK conditions and mental health**

MSK conditions and mental health problems are the greatest causes of work loss in the UK and are often interrelated. The chronic disabling pain that besets those who live with ongoing MSK conditions is strongly associated with depression and stress and can lead to increased absence from work.

SUPPORTING YOUNG PEOPLE TO MANAGE CHRONIC MSK CONDITIONS

Having chatted to a few friends with similar conditions, there is one buzzword that continually crops up, and that's flexibility. And in truth that’s all many people want. A bit of flexibility in the workplace gives us the chance to compete on a level playing field. For too long, I tried to bend my work life around my condition. Around the hospital appointments, around pain management, around the anxiety. I quickly learned that if I did that, the game is rigged against people with arthritis. Ask us to do a 9 to 5 job on the same terms as someone without arthritis and you’re setting us up to fail.

– Young person living with an MSK condition

Young people living with an MSK condition worry about the impact their pain will have on future careers or the ability to learn in an FE setting. It is important to proactively support them and help them manage these worries as they move into the workplace or educational setting.

If an employee or student has a chronic MSK condition, awareness – at least at the management level – is very important. Information regarding the condition and how the young person should be supported can be obtained directly from the person or from Occupational Health.

Persistent and chronic MSK conditions can affect people throughout their daily routine, not only at work or in the educational setting.

They find ways to work around their MSK condition when they are in their own environment, but they may require adaptations – and it is a legal requirement to consider and make reasonable adjustments to their new environment, be it a workplace or classroom.

Employers and FE institutions need to note that even when adaptations and adjustments are made, chronic pain or discomfort can flare up without much warning. This may result in sleep deprivation, mental fog or absence. Your awareness and understanding of the unpredictable nature of their condition will make a real difference to their ability to manage it.

There are four core steps you can take to support those with MSK conditions:

1. Understanding MSK health – MSK conditions affect individuals in a variety of ways. They can cause pain, stiffness and limited movement. Recognising the impact of these issues is the first step. The second is working with the individual to measure the extent of the impact the condition has on their work or learning. Once you understand the issue, and how it affects that person, you can build a tailored approach to support them. On a broader level, demonstrating your organisational or institutional understanding of MSK health through wellbeing initiatives and information will help all employees and students, not just those with chronic conditions.

2. Maintaining MSK health – The support a young person needs to manage their condition will change and evolve as their condition does. As an employer or educational institution, you should regularly review individual needs and make reasonable adjustments and adaptations. Particularly when it comes to young people, you will need to be proactive and demonstrate your willingness to support them, as they make this transition to work or FE. For the rest of the staff, continue to assess the risks to MSK health in your workplaces or further education institutions and take steps to minimise those risks. Throughout the year, you should encourage and support staff or students to self-manage emerging MSK conditions but also be aware of – and promote – the external support and resources they can access.

For any young person living with a long-term health condition or disability, such as arthritis/MSK, having access to early interventions, support with planning and implementing adjustments, will ensure they are in the best position to successfully complete their course, taking control of their condition as they embark on their career.

– Maureen McAllister, Workplace Health Development Manager, Versus Arthritis
3. **Knowledge and training** – Line managers of young people with MSK conditions or those who directly liaise with students with MSK conditions should be given support, guidance and information – specifically around their duty of care and legal requirement to provide reasonable adjustments. These people are the front line of your organisation on MSK conditions. It is important that they feel empowered and enabled to support those they have a duty of care towards. Make sure you incorporate training on MSK health into any health and wellbeing strategy, with particular inclusion of specific aspects which relate to young people. This is a great first step towards creating an open culture where people feel confident in talking about and disclosing their condition.

4. **Going further** – Good practice should be shared and recognised. Consider becoming an ambassador for good MSK health in young people by sharing the successes and learnings from your approach with other businesses, higher education institutions or organisations in your sector. Additionally, to showcase your commitment to employing young people, you could sign the Good Youth Employment charter (https://www.youthemployment.org.uk/the-good-youth-employment-charter/), the Disability Confident employer scheme (https://www.gov.uk/government/collections/disability-confident-campaign), or gain the Youth Friendly Employer Badge. All of these are great ways to recognise the impact of your work in this area.

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**CULTURE BY DESIGN, NOT DEFAULT**

The culture in your organisation makes a huge difference to the experience a young person will have. A positive, open culture where disclosure and support are encouraged will be far more reassuring and appealing than one which sees the condition, and by extension, the young person, as a problem.

Culture should be by design, not by default. In the pro-active design of your go-to culture, make it one which attracts and develops the best talent – regardless of the conditions they manage on a day-to-day basis.
KEY POINTS FOR EMPLOYERS:
MSK HEALTH AND SUPPORT FOR YOUNG PEOPLE IN THE WORKPLACE

In addition to the legal and ethical reasons for supporting young people to prevent MSK conditions, and support those with MSK conditions, in the workplace it makes good business sense.

You can reach the pool of talented young people who might not otherwise be able to work for you. Retention and commitment to your company will increase if they have a good experience.

PREPARATION FOR ENTERING THE WORKPLACE

Young people who have a chronic MSK condition may have additional needs that employers should take into account when recruiting and onboarding new staff.

This section sets out what those needs may be, how they can be met, and how a new member of staff – who has a chronic MSK condition – can be onboarded into the organisation well.

GET IT RIGHT – CO-PRODUCE EXCELLENCE!

Involve young adults living with long-term conditions such as MSK conditions in co-producing and reviewing your organisation’s working practices and policies around recruitment, onboarding and working with people with long-term health conditions. This ensures they work for potential employees – as well as you, the employer.

Taking the time to discuss my illness from the interview stage created open and honest communication rather than feeling it was something that would hinder my progress in the role and I had to hide from my future employers. This led to an understanding that appointments and time away from work were frequent, but I could still be a productive member of the team with this support. Opting for a work-from-home job enabled me to adapt my work conditions for my flare-ups by limiting travel and being comfortable at home, and having flexibility in my day-to-day responsibilities especially when my symptoms were at their most difficult.

– Young person living with an MSK condition

I always disclose my health condition on my application form for jobs as there is usually some kind of maths/written test during the interview that I require reasonable adjustments for. I usually include some of my experiences as a patient as part of my application for jobs as I feel this demonstrates I can bring a different perspective to the role. My current workplace looked at additional support that could be put in place for me when I had a flare-up to allow me to continue to work. My current role allows me to complete some of my work from home, and be flexible in managing my diary so I can plan my visits, meetings and admin time. I no longer have to handwrite notes as in my current workplace it is all completed electronically.

– Young person living with an MSK condition
RECRUITMENT: FAIR AND EQUAL ACCESS TO OPPORTUNITIES

1. **EVP** – Be clear on your Employee Value Proposition (EVP). What are you offering new staff, regardless of whether they have an MSK condition or not? Once you know that, you can pick out relevant pieces of the employee offering during the process, should you need to highlight the company’s commitment to hiring the whole person.

2. **Culture** – Are you clear about what your company culture is? Can you articulate it? Specifically, what is it like for those managing long-term conditions? More and more, young people are drawn to culture and values than they are to salary and promotion. This is where you can stand out.

3. **Job descriptions** – You need to be very clear about the exact skill and experience level the role requires and anything else in the person specification that is necessary for the job applicant to be successful. For example, if standing or being able to navigate stairs several times a day is an essential part of the job, then include it in the job description. HR will be able to advise on what you can and can’t legally say around protected characteristics.

4. **Adverts** – Ensure you have clear wording regarding the work environment and equal opportunities for young people and those with long-term conditions. Allow ample time for applications to ensure those who may not be able to apply quickly are not disadvantaged.

5. **Applications and disclosure** – Be clear about what happens after ticking the disability disclosure box – is it for equality and diversity monitoring or will support be provided? A best practice suggestion is that if the box is ticked, the recruiting manager or HR will follow up to offer support and understand the applicant’s individual needs. Provide clarity on what is meant by disability or add a separate box for additional support required as many won’t identify themselves as disabled but may require support. Make it clear through the application process that you support applications to Access to Work for equipment and assistance that goes beyond reasonable adjustments.

6. **Advert placements** – Make sure that adverts are placed across a variety of mediums, and that they appeal to young people and those from diverse backgrounds.

7. **Interview** – Ensure access and reasonable adjustments are offered including appropriate flexibility with time. Mornings can be particularly hard for some inflammatory conditions. Accept that you may need to re-arrange if the interview coincides with a flare-up. If conducting a competency or practical aspect of an interview, ensure there is adequate time for those who might find the physical task more challenging. Make sure people are aware this is going to be conducted in advance as they may require adapted or ergonomic keyboards, for example.

8. **After interview** – If successful, offer the applicant early discussions with their new line manager and HR regarding capabilities and the possible accommodations required. This should be the same regardless of whether the work environment is at home or in an office.

**ACCESS TO WORK**

This is a demand-led grant scheme that supports people with a health condition or disability move into or sustain employment by contributing to extra disability-related costs over and above the cost of reasonable adjustments.

Through Access to Work, individuals can apply for:

- a grant to help pay for practical support with their work
- support with managing their mental health at work
- money to pay for communication support at job interviews

More information is available at: [https://www.gov.uk/access-to-work](https://www.gov.uk/access-to-work)
ONBOARDING A YOUNG PERSON WITH AN MSK CONDITION INTO THE WORK ENVIRONMENT

Without good onboarding, a young person coming into an organisation may struggle with a sense of place, belonging, or even a core understanding of their role. Done well, it can serve as an anchor and set them up to thrive in their new chosen career.

Onboarding, and especially getting workplace adaptations right for those with MSK conditions, is within the gift of the employer. Yes, it is your responsibility to get it right, but it is also in your interest.

What workplace adaptations and offers would help exemplify good onboarding?

1. Travel – Different start-finish times. Be clear on car parking facilities.

2. Flexible working – Increased number of shorter breaks, hybrid working, flexi-time.

3. Communication – Optimise manager meetings. Often an increased number of short meetings early in the post leads to a fuller understanding of needs and opportunities for both employer and employee. This improves job satisfaction and productivity and reduces absenteeism.

4. Signposting – Many young people with MSK conditions are not aware of who to turn to for support, particularly in the workplace. This can be overwhelming. Clear and early signposting to Occupational Health, HR, in-house disability support networks, specialist external charities or independent advice organisations can prove invaluable and reassuring.

5. Physical adaptations – Where you have in-house Occupational Health, ensure that Health and Safety have liaised with the young person and advised the young person and the employer on suitable adaptations, should they be required. Many young people will not have had to consider this as school and parents/paediatric services will have led previously. Accept that the need for physical adaptation may change over time.

6. Mental health support – Mental health is often affected negatively by change or unfamiliarity. It is key to provide access and signposting to several support services, both internal and external to the organisation. As a matter of course, line managers should be checking in regularly with new recruits, especially young people for whom the workplace is unfamiliar.

7. Strategies for managing planned and unplanned absence – Requesting time off for hospital appointments, surgery, therapy, etc. can be daunting, particularly for young people. We know that many do not attend their hospital appointments and this has a direct effect on their illness control, wellbeing and subsequent work attendance. Employers can positively impact this by future planning with their employees, ensuring clear boundaries for worktime appointments and providing flexible working solutions around significant events (such as surgery and a phased return).

8. Signpost young people with MSK conditions to Access to Work at the start of their role – Funding is available to support them to get into, and stay in, work and for employers to ensure they get the most from their employees and that they can thrive in the role.

9. Mentor programmes – These can support young people with learning how to advocate for their needs and provide a space to discuss concerns.

Expect and accept change

Remember that the nature of many MSK conditions in young people is that they fluctuate in severity over time. For example, a young adult with childhood-onset arthritis may have full mobility for long periods (on or off medication), but then their disease may flare up and they will need time away from the workplace or limited mobility within it.

Make sure your new staff members know how to get support if some part of their condition progresses, flares up or develops after joining, i.e. they didn’t identify as disabled but now do.

Ensuring there are proactive strategies in place will reduce the impact of this, both for the young adult and the employer.
Once I had been offered the job, I explained my health situation to the HR team. They were very supportive and asked if I would like them to inform my team, keep it confidential or if I wanted to explain myself. I chose to explain my health conditions to them myself and I’ve been very open about it ever since. The endless hospital appointments would have given it away at some point and I feel that if you feel comfortable telling the people you work with, it opens up for them to be able to support you in the best way they can.

The main support I’ve needed in my current job is being able to be flexible with time off for hospital appointments and if I’ve been feeling unwell. I tend to try and work hospital appointments around quieter times in the office if I can, but my team are very flexible with me if I am not able to do this.

I had to leave my previous job due to my health getting pretty bad during my time there. I wasn’t doing a good job whilst I was at work because I was so tired from travelling back and forth. This employer also wasn’t so understanding of my health and was much less flexible when it came to having time off.

I previously had a workplace in which, during the winter, the shop floor would be freezing cold due to broken radiators and draughts coming in through the automatic doors. The freezing temperature meant that I was in so much pain after my shift I could barely walk. They also only allowed certain people to use the lift if they had a lift pass. Whilst I was allowed to use the lift, there could have been many other staff members living with an invisible MSK condition who who were denied access and then had to walk six flights of stairs to reach the staffroom.

My current workplace is extremely supportive of my condition, and whilst I work in a fast-paced environment, they always find ways to adapt if I am struggling. For example, finding jobs I can do sitting down to ensure I rest my knees.

When I started the role, I was placed in the refrigerator section of the store. However, I found that this area was really cold, and it was starting to affect my joints. Being cold made it difficult for me to place things on the shelves and to reach items down low or up high. I spoke to my manager at the store and told them about the difficulties I was having working in the fridge section. They asked me what area I would prefer to work in; I said I was happy to work anywhere other than the fridge or freezer areas. My manager was great and took on board how temperature can affect me and my condition. They moved me to the bakery section, as this area was warmer than the rest of the store – it also smells great! It was a lot easier for me to work in this area of the store and I found my joints were not affected as much. This small change made a big difference to me being able to continue with my role.

I told my employers I could only work part-time because of my hospital appointments and that I couldn’t work for long periods of time. I got referred to Occupational Health, who then helped my employer understand my conditions more and how they could help. For example, after that, I got extended breaktimes.

I found the shift pattern very physically demanding with my arthritis. At the end of a long shift, I struggled with pain and fatigue. I also struggled with handwriting notes. I decided I needed to seek support and ended up speaking to my manager and getting a referral to Occupational Health. They were able to put in adjustments for me such as working more frequent, shorter shifts instead of longer ones. I could split my break up so instead of having one full-hour break, I had two half-hour breaks throughout my 12.5-hour shift. I was able to work some of my shifts in less physically demanding areas. I’ve worked with supportive bosses. My condition was never a factor. And, crucially, they let me develop a work-life balance that fitted around what I was physically capable of doing. They showed faith in me, and I repaid them with hard work. I was able to survive and then thrive in employment.
For many years, FE has provided opportunities and formative experiences for young people. For many, it is very much a part of growing up and marks a transition to adulthood.

It can be daunting for any young person to leave the relative safety and familiarity of school and go to a new setting. Young people going into FE with an MSK condition need to be supported in this new, perhaps unfamiliar, environment. They need support to feel confident in raising their needs, disclosing conditions and flagging concerns.

This section sets out how FE institutions can help young people living with MSK conditions prepare for this experience and how they can help at the other end of transition, when they graduate.

Often young people don’t think they are disabled but they do have a health problem. Creating safe and supportive spaces for prospective and current students to talk about health conditions and disability is therefore vital.
PREPARING YOUNG PEOPLE FOR ENTRY TO FURTHER EDUCATION

Applying to FE when you are a young person with an MSK condition often comes with as much excitement as it does reservations.

PRE-APPLICATION: What can an FE institution do to help young people apply?

Before prospective students even apply, an FE institution can make the process more welcoming and assuring.

1. Inform students about health and wellbeing support services available on-site. This includes signposting to financial support such as the Disabled Students’ Allowance (DSA).

2. Make consent and information sharing policies clear from the outset (pre-application) so young people know exactly what happens with their disclosures and personal information.

3. Ensure there is specific information available – such as a subsection for young people with MSK conditions within the recruitment process. It is helpful for individuals to feel seen and catered to from the off.

4. Provide a dedicated liaison person who can confidentially answer other questions that may include signposting to relevant resources and organisations. Having a specialist assures potential students of your understanding of them and your commitment to supporting them.

STARTING STRONG: Preparing to start life at university or college

All the evidence shows that, in a supportive and flexible learning environment, young people with MSK conditions thrive both educationally and socially.

Your support package should be in place and visible beyond Freshers’ Week, ensuring touchpoints with supportive staff members is an intrinsic part of their FE experience.

The most effective support I have received both whilst a student at university and in my early career has come from having open and honest conversations with the people around me about my needs and the reality of living with arthritis. Support from universities at the enrolment stage is vital for discussing appropriate accommodation such as ground floor/adaptations, conversations with tutors around options for extensions if deadlines are affected by flare-ups or hospital visits and planning your day around medications if side effects are a struggle.

– Young person living with an MSK condition

How can you ensure that a new student arriving at your FE institution has the best possible start?

COMMUNICATION

a. Facilitate clear, confidential communication between disability services, support & wellbeing services and the teaching staff about the new student, and ensure everyone knows – and can adapt – to their needs.

b. Support communication with the student’s home health service and the FE health centre.

c. In any communication, make sure the student is in the loop and aware of what is being said and requested.

ENABLE

Enable personal tutors and academic advisors to be effective at signposting students and supporting regular meeting opportunities, particularly early on in the student’s educational journey.

FLEXIBILITY

Provide some flexibility around the structure and placement of exams and assessments. Include discussions and develop strategies concerning this within the regular tutor meetings to ideally avoid unnecessary last-minute adaptations.
WORK PLACEMENT
Provide an overview of support and information for employers as well as the students if they are going on placement. Focus on the positives: this is often a situation where the employers and young people with MSK conditions gain a lot.

FINANCIAL
Signpost the student to the DSA and support them with their application if they couldn’t access it before joining. Students with MSK conditions often have the added financial burden of NHS prescriptions (where applicable), dental needs and increased purchase of OTC medication. They are also less likely to be able to supplement student loans with a part-time job. Their pastoral care contact and tutor must discuss any financial challenges and potential solutions with the student. There is a variety of grants and support out there, including the DSA, and other scholarships, grants and bursaries specifically for disabled students.

DISCLOSURE
Not all young people wish to disclose their long-term health conditions. Some want to, but are unsure how; and if they do, they want to know their rights. It is a tricky and complex area. Staff involved with young people should be aware of this and be trained to support them through this process including, where necessary, educating them on their rights under current legislation.

SUPPORT PEER TO PEER INITIATIVES
Buddy/mentoring schemes, where an individual is paired up with a young person with a similar condition who has already been through this process and volunteered to support others, can be helpful. The volunteer should receive basic training and have someone more senior to go to if any problems arise.

SUPPORT SPECIFIC ASPECTS OF NEED
Examples might include:

1. **Physical** – Disability access plans (ideally before the student starts) should provide equitable access to all learning opportunities. This might include adapted seating and technology, access across campus, timetabling lecture rooms to be as near as possible and lift access. Given that teaching is likely to remain hybrid for quite some time, adjustments should be considered for the home environment, too.

2. **Accommodation** – Accessible rooms close to FE facilities and with adaptations if required.

3. **Medication management** – Provide fridges and sharp boxes in rooms.

4. **Understand the mental health impact of MSK conditions in young people** – This includes strategies such as flexibility in face-to-face attendance, provision of mental health support and travel support.

5. **Pain and fatigue support** – Experiencing a flare-up of the underlying illness while at university/college, and pain and fatigue, are significant challenges. Often ‘unseen’, it is vital that there is an understanding around pacing and the need to develop strategies around wellbeing (such as sleep). This is very challenging for all new students and particularly those with underlying MSK conditions. Facilitating safe rehabilitation from a flare-up, and maintaining subsequent good MSK health, should be the objective. Access to an informed student counsellor or other mental health support provider within the learning environment is essential, particularly when pain and fatigue are overwhelming.

6. **Other health challenges** – Nausea and fatigue associated with medication – or directly with MSK conditions such as visual disability and associated childhood-onset arthritis – requires good hygiene and shielding to be in place for those who are clinically vulnerable.

7. **Exams and assignments** – Consider and discuss the need for additional time if required. Allowing students to briefly stand up and walk around during an examination would reduce stiffness and pain. Good communication among staff as well as students about students’ needs within FE can save students a lot of emotional strain and improve their engagement with studying.
What pro-active support could the further education institution provide?

Support offered may depend on the individual needs of the student but examples include:

- financial support
- extensions for essays
- extra time for exams
- support with exams arrangement – including rest breaks, computer access, someone to help read/write
- support with borrowing or buying equipment/technology – such as laptops, digital voice recorders, speech-to-text software, ergonomic chairs, wrist support
- financial support with travel
- support with carrying books and laptops, and providing lockers to leave heavy items in
- appropriate accommodation
- quality career advice
- accessible learning spaces
- fridges in bedrooms for medication
- buddy support
- mentors
- online lectures and recordings.

JIA impacted on me at university in a different way than I thought it would. Other than the typical physical pains from flare-ups or previous joint damage, the mental health aspect reared its head. It finally dawned on me what effect arthritis was going to have on my life. Thanks to my mentor I was able to discuss emotions like these, and through discussions with the university, I was allowed to take the rest of the academic year off to work on my mental health and come back next year. Having a mentor at university as a person with an MSK condition is, in my opinion, one of the best adaptations you can have. My mentor helped explain my JIA's current status to lecturers, ensured I was getting everything I needed disability-wise and helped me to keep on track with coursework hand-in dates. I don't think I would've made it without her!

– Young person living with an MSK condition

During my undergraduate degree I was assigned a one-to-one mentor for those with conditions that would affect their university life and learning. My mentor was crucial to my success; without her, I would not have completed my degree. In my first year, I struggled as an 18 year old who was independent for the first time, whilst also trying to manage my juvenile idiopathic arthritis (JIA). She not only assisted me with time management and organisation of my university work but also with tough social circumstances and extreme social anxiety. My mentor was also very helpful in conveying my arthritic needs to the university. Lecturers took her more seriously than they did me – some believed I was playing upon my disability. My mentor was crucial in helping me get the deadline extensions and support from the university that I needed to finish the degree.

– Young person living with an MSK condition
Living with arthritis faced me with a number of challenges and disruptions whilst completing my four years at university. Being immunocompromised, I was constantly having to take time off to attend hospital appointments, catch up after absences due to flare-ups and undergo assessment for my suitability to attend placements.

Personal examples of adaptations at university that made a difference to me:

- Within my first few weeks, I was assessed for an Individual Learning Plan (ILP) by the disability team. With my consent, this plan was shared with a group of staff members. It outlined any adaptations or recommendations to my learning and would stay with me throughout my four years at university (no need for re-assessment).

- Access to the disabled car park on the university grounds – this meant I only had to walk a very short distance to my lecture theatres.

- Extra time, rest breaks during my exams, which took place in a private room with an invigilator, and a comfortable chair for the long duration.

- Check-ins from my personal tutor to ensure I was genuinely OK and managing my work/hospital balance sufficiently.

- I was provided with 40 free taxi journeys per year so that when my joints were particularly bad, I could still attend university on my ‘bad’ days.

- I was provided with home equipment such as a large, comfortable adjustable chair, desktop table, laptop rest, bookrest and footrest.

- I was provided full access to any content and lectures I missed due to hospital appointments or flare-ups.

- The above all happened as a result of my ILP – a very valuable tool which made my university experience so much easier.

- Genuine caring lecturers who always took into consideration my situation and condition throughout every aspect of university.

- These adaptations meant that I could complete university to the best of my ability, I didn’t have to defer, and I could graduate on time with all of my friends and start my full-time job. Having these adaptations in place meant I did not experience any worsening health or flare-ups due to attending university – if anything, it only made it better.

- Young person living with an MSK condition
Preparation for leaving university/college

Applying for work during the last year of FE, often whilst studying for final exams, is extremely challenging for all students. For those with MSK conditions, many other aspects also have to be considered.

Ideally, by this stage, both the educational establishment and the young person will have a good understanding of what enables both social and learning success.

Taking the next step into the workplace should involve the careers counselling service alongside those key individuals who developed strategies with the student during their educational journey.

Career guidance to help young people make informed decisions about further study and career planning when they live with long-term health conditions should be provided.

Information on the support available around benefits and schemes such as Access to Work should be provided with case studies and stories from employers and alumni. Again, there may be an opportunity to put a buddy or mentoring scheme in place with a young person or former student with a similar condition who has already been through this process.
OUR REFERENCE GROUP

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