



## **EMPLOYMENT TRIBUNALS (SCOTLAND)**

**Case No: 8001075/2024**

**Held in Edinburgh on 18 August 2025**

**Employment Judge Sangster**

**Mr A Logan**

**Claimant  
In person**

**Centrica plc**

**Respondent  
Represented by  
Ms A Bennie  
Advocate**

### **JUDGMENT OF THE EMPLOYMENT TRIBUNAL**

The judgment of the Tribunal is that:

- The claimant was a disabled person, for the purposes of the Equality Act 2010, in the relevant period, as a result of Essential Tremor;
- The claimant was not a disabled person, for the purposes of the Equality Act 2010, in the relevant period, as a result of Generalised Anxiety Disorder.

### **REASONS**

#### **Introduction**

1. The claimant brings a number of complaints, including direct disability discrimination and failure to make reasonable adjustments.
2. The case was listed for an open preliminary hearing to determine disability status. The claimant relies on two impairments, namely Essential Tremor and Generalised Anxiety Disorder.
3. It was agreed at the start of the preliminary hearing that the relevant dates, for determining disability status, were 15 May 2022 to 17 July 2024 (the **Relevant Period**).

**E.T. Z4 (WR)**

4. A joint bundle of documents was agreed, extending to 125 pages. The respondent also provided copies of some of the pleadings, to be referred to at the preliminary hearing, at the commencement of the hearing.
5. The claimant gave evidence at the preliminary hearing. No further witnesses were called.

### **Findings in fact**

6. The Tribunal found the following facts, relevant issues to be determined, to be admitted or proven.
7. The claimant is 45 years old.

### ***Essential Tremor***

8. The claimant noticed, around the age of 14, that his thumbs would tremor when his arms were outstretched. This was initially unproblematic and restricted to that particular movement. Over time, however, the tremor became gradually worse. By 2021, it also involved the fingers on each hand, when he was holding his hands in certain positions, with certain movements and when holding objects, such as when he was writing, eating or drinking - each of which had become increasingly difficult tasks for him to undertake. His handwriting was illegible. He was unable to use tools, such as a screwdriver, for DIY. By the start of 2023, his whole hand would shake when his arm was raised. The tremor prevented him, for example, lifting a kettle and writing (he would, by that stage, only type rather than write things by hand, and even that presented challenges for him, in that he was slower at using a keyboard than he had been previously). Eating and drinking also now presented particular challenges: eating anything with a spoon (such as soup) required two hands, but would still result in spillages, as would, drinking and eating small items, such as peas.
9. The claimant was formally diagnosed as having Essential Tremor, by a Neurologist, on 8 February 2023. His condition is exacerbated by strenuous exercise, coffee and psychological stress.

### ***Generalised Anxiety Disorder***

10. The claimant consulted his GP on the following occasions:
  - 10.1. On 6 & 19 September 2007, when he reported that he reported stress and anxiety, which was linked this to having recently being made redundant.
  - 10.2. On 28 January 2010, in relation to an '*acute anxiety episode*', where on examination it was noted that he was '*emotional and anxious. keen to go back to work as sees benefit of keeping occupied. no sign major psychiatric illness*'. His employment with Ryanair ended in January

2010, in circumstances where the claimant believed he had been constructively dismissed.

- 10.3. On 24 June 2013, when his GP recorded that he had '*some anxiety symptoms and low mood re ongoing situation*'. The 'ongoing situation' was recorded as being 'workplace bullying' and that the claimant was, at that time, suspended from his work. A medical certificate was issued confirming that he was fit to work. The claimant was employed by Vodafone at the time, and was suspended for a period of 18 months.
- 10.4. On 25 March 2014, where the GP noted that he was fit to work and no mention was made of anxiety.
- 10.5. On 22 May 2014, when his GP recorded that the claimant had '*ongoing concerns re his 'isolation' as he is being 'prevented' from working – also ongoing concerns re widespread dissemination [redacted section] offered NHS psych ref – [redacted section] – anxious today...*'. The claimant remained suspended from Vodafone at the time of this consultation.
- 10.6. On 10 May 2024, when he was certified as unfit to work for two weeks, due to 'stress at work'. The claimant had been suspended from his role with the respondent on 3 May 2024.
- 10.7. On 23 May 2024, when it was noted that he was experiencing '*stress at work and anxiety*'. He was certified potentially being fit to work taking into account advice that workplace adaptations may be required for 4 weeks. The comments noted were that '*patient's anxiety significantly worsened with current workplace environment/uncertainty. Would benefit from stable environment and work interaction for mental health.*'
11. At the times when the claimant consulted his GP, he was generally experiencing sleep disturbances, anxiety, difficulty concentrating, ruminating thoughts, worry and feeling overwhelmed.
12. The claimant did not consult his GP in relation to symptoms of anxiety other than as stated in paragraph 10 above. He accordingly did not consult his GP in relation symptoms of anxiety in the 10 year period from May 2014 to May 2024. He was not, at any point, prescribed any medication or other treatment for anxiety.
13. The claimant raised Employment Tribunal proceedings against BAE Systems Surface Ships Limited in October 2016, having been employed by them from 23 March 2015 to 20 July 2016. The hearing took place over 12 days in the period May to July 2017. The Judgment, dated 12 January 2018, records that the complaints included complaints of disability discrimination, on the basis that the respondent perceived the claimant to be a disabled person. The Judgment

recorded that, at a preliminary hearing for case management, *'it was agreed that during the claimant's employment he did not have a disability envisaged by section 6 of EqA.'* The findings of fact of the Tribunal, recorded in the Judgment (at paragraphs 53 & 54) state that during the claimant's employment with BAE, he *'denied any symptoms of psychological ill health'* and that the claimant stated that *'he had no significant underlying medical conditions'*. This, it is recorded in the findings in fact, was supported by the findings of an occupational health practitioner at that time, who concluded that *'there was no evidence of a psychological illness at that time.'*

14. During his employment with the respondent, the claimant expressed the following:
  - 14.1. In May 2023 that he was stressed by the way he was being treated;
  - 14.2. In January 2024, that he was finding a particular task stressful;
  - 14.3. On 13 February 2024 that he was *'unable to cope with my ongoing treatment...I am taking time off ill to protect my health'*; and
  - 14.4. On 7 May 2024 that he was *'unable to work due to incidents and treatment at the workplace that had affected my health. My symptoms include, but are not limited to, acute elevated blood pressure, headaches, racing heart, hyperventilation, sleep disturbances and anxiety.'*
15. The claimant's employment with the respondent terminated on 17 July 2024. He has since commenced alternative employment.
16. On 28 February 2025, the claimant's GP wrote a letter addressed to *'To whom it may concern'* which referenced the claimant in the header and stated *'The above gentleman suffers from Anxiety Disorder. I would be grateful if you could take this into consideration when discussing Alastair's return to work with reasonable adjustments.'* No further details were provided.

### **Submissions**

17. The claimant made submissions with reference to an 8 page skeleton argument, which he spoke to. He also responded orally to the respondent's submission.
18. Ms Bennie, for the respondent, gave her submission with reference to a 20 typed skeleton, which she spoke to.
19. While not replicated here, both were carefully considered, as were the authorities referenced and produced.

### **Relevant law**

20. Section 6(1) EqA provides:

*'A person (P) has a disability if —*

*P has a physical or mental impairment, and*

*the impairment has a substantial and long-term adverse effect on P's ability to carry out normal day-to-day activities.'*

21. Schedule 1 EqA contains supplementary provisions in relation to the determination of disability. Paragraph 2 states

*'(1) The effect of an impairment is long-term if -*

*(a) it has lasted for at least 12 months,*

*(b) it is likely to last for at least 12 months, or*

*(c) it is likely to last for the rest of the life of the person affected.'*

22. The Equality and Human Rights Commission: Code of Practice on Employment (2011), at Appendix 1, sets out guidance on the meaning of disability. It states at paragraph 7 that *'There is no need for a person to establish a medically diagnosed cause for their impairment. What is important to consider is the effect of the impairment, not the cause.'*

23. The 'Guidance on matters to be taken into account in determining questions relating to the definition of disability' (the **Guidance**) does not itself impose legal obligations, but the Tribunal must take it into account where relevant (Schedule one, Part two, paragraph 12 EqA).

24. The Guidance at paragraph B1 deals with the meaning of 'substantial adverse effect' and states *'The requirement that an adverse effect on normal day-to-day activities should be a substantial one reflects the general understanding of disability as a limitation going beyond the normal differences in ability which may exist among people. A substantial effect is one that is more than a minor or trivial effect.'*

25. Paragraphs B4 and B5 state that:

*'An impairment might not have a substantial adverse effect on a person's ability to undertake a particular day-to-day activity in isolation. However, it is important to consider whether its effect on more than one activity, when taken together, could result in an overall substantial adverse effect.'*

*For example, a person whose impairment causes breathing difficulties may, as a result, experience minor effects on the ability to carry out a number of day-to-day activities such as getting washed and dressed, going for a walk or travelling on public transport. But taken together, the cumulative result would amount to a substantial adverse effect on his or her ability to carry out these normal day-to-day activities.'*

26. Paragraph B1 should be read in conjunction with Section D of the Guidance, which considers what is meant by '*normal day-to-day activities*'.
27. Paragraph D2 states that it is not possible to provide an exhaustive list of day-to-day activities.
28. Paragraph D3 provides that:

*'In general, day-to-day activities are things that people do on a regular or daily basis, and examples include shopping, reading and writing, having a conversation or using the telephone, watching television, getting washed and dressed, preparing and eating food, carrying out household tasks, walking and travelling by various forms of transport, and taking part in social activities.'*
29. D16 provides that normal day-to-day activities include activities that are required to maintain personal well-being. It provides that account should be taken of whether the effects of an impairment have an impact on whether the person is inclined to carry out or neglect basic functions such as eating, drinking, sleeping, or personal hygiene.
30. In ***Goodwin v Patent Office*** [1999] IRLR 4, the EAT held that in cases where disability status is disputed, there are four essential questions which a Tribunal should consider separately and, where appropriate, sequentially. These are:
  - 30.1. Does the person have a physical or mental impairment?
  - 30.2. Does that impairment have an adverse effect on their ability to carry out normal day-to-day activities?
  - 30.3. Is that effect substantial?
  - 30.4. Is that effect long-term?
31. The burden of proof is on a claimant to show that he or she satisfies the statutory definition of disability.
32. In cases such as ***J v DLA Piper UK LLP*** 2010 ICR 1052, ***Herry v Dudley Metropolitan Council*** 2017 ICR 610, and ***Igweike v TSB Bank plc*** 2020 IRLR 267, the EAT have it clear that a distinction needs to be drawn between a mental impairment amounting to a disability under the EqA and an adverse reaction to life events (such as anxiety/stress brought on by allegations of misconduct or stress/depression triggered by a close family bereavement).

### Observations on Evidence

33. The claimant was clear there were 'peaks and troughs' in the symptoms he described which he attributed to Generalised Anxiety Disorder, but gave little/no detail on when he experienced those. He was however clear in his evidence that the workplace stressors, in various workplaces, caused his anxiety reactions. The Tribunal could see, from the excerpts of medical records and employment history produced that there was a clear correlation between

the workplace difficulties and the anxiety reactions. It was also very notable that the claimant did not produce any evidence of him consulting his GP in relation to anxiety, other than when there were particular workplace difficulties ongoing. The Tribunal concluded that, had the claimant been experiencing ongoing symptoms in the intervening periods, he would have consulted his GP at that time, and produced evidence of this to the Tribunal.

### **Discussion & Decision**

34. The Tribunal's conclusions in relation to questions posed in ***Goodwin v Patent Office***, in relation to each impairment relied upon, are set out below.

#### *Essential Tremor*

35. **Does the claimant have a physical or mental impairment?** This was not in dispute in relation to Essential Tremor. The respondent conceded that the claimant had a physical impairment.
36. **Was there an adverse effect on the claimant's ability to carry out day to day activities as a result of the impairments?** The Tribunal's findings in relation to this are set out in paragraph 8 above. Eating, drinking and writing are all day to day activities. The Tribunal concluded that these findings demonstrate that there was an adverse effect on the claimant's ability to carry out day to day activities, as a result of Essential Tremor, in the Relevant Period.
37. **Was that effect substantial?** The Tribunal was satisfied that the adverse effects on the claimant's ability to carry out day to day activities, as identified in paragraph 8 above, were substantial. They were clearly more than minor or trivial.
38. **Was that effect long-term?** The Tribunal was satisfied that the substantial adverse effects were long term by the commencement of the Relevant Period: the fingers on each hand were shaking, as well as his thumbs, when his hands were held in certain positions, with certain movements and when holding objects. The claimant's ability to write, eat and drink were being adversely impacted, and had been since 2021. The adverse effects were becoming gradually worse, rather than improving. They were likely to continue for at least 12 months.
39. For these reasons the Tribunal concluded that the claimant was a disabled person, as a result of Essential Tremor, in the Relevant Period.

#### *Generalised Anxiety Disorder*

40. **Does the claimant have a physical or mental impairment?** The claimant asserted that he had Generalised Anxiety Disorder from at least 2005 to date. He relied upon excerpts from his medical records in relation to this (see paragraph 10 above), as well as his oral evidence.

41. Whilst the claimant produced a letter from his GP, dated 28 February 2025, stating that he '*suffers from Anxiety Disorder*', the letter post-dated the Relevant Period and there was no indication in the letter as to when the claimant started to experience this, only that, as at the date of the letter, he did so. The Tribunal accordingly concluded that the letter did not assist in determining whether the claimant had a mental impairment in the Relevant Period. Other than the GP letter dated 28 February 2025, there was no evidence before the Tribunal that referenced the claimant having, or being diagnosed with, Anxiety Disorder or Generalised Anxiety Disorder, or suggesting any underlying medical condition linked to anxiety.
42. Whilst the claimant consulted his GP, and mentioned anxiety, twice over a two week period in 2007 and on one occasion in each of the years 2010, 2013 and 2014, each episode was expressly linked to adverse circumstances he was experiencing in relation to his work at that particular time. Each episode could be seen as a normal reaction to the adverse circumstances which the claimant was experiencing at that particular time. The next time he consulted his GP, and mentioned anxiety, was 10 years later, when he was again experiencing adverse circumstances in relation to his work. The claimant did not consult his GP in relation to similar symptoms at any other time, was not prescribed medication for anxiety and did not receive any treatment related to anxiety. In 2017, his view, as expressed to the Employment Tribunal in relation to proceedings which were ongoing at that time (see paragraph 12 above), was that he did not have a disability envisaged by section 6 of EqA, and indeed, had no underlying medical conditions and no symptoms of psychological ill health.
43. The claimant stating to his employer that he was 'stressed' by treatment, or finding particular tasks stressful, does not support an underlying mental impairment. Nor does his statement that he was unable to cope with treatment on a particular date and was taking time off to protect his health.
44. Taking all of the above into account, the Tribunal concluded that the claimant did not demonstrate that he had the impairment of Generalised Anxiety Disorder from 2005 to date, as he asserted, or within the Relevant Period. There was no evidence before the Tribunal which suggested that the anxiety the claimant experienced was as a result of a mental impairment. Rather, the evidence pointed to this being isolated reactions to adverse circumstances he was experiencing at that time.
45. **Was there an adverse effect on the claimant's ability to carry out day to day activities as a result of the impairment? If so, was that effect substantial & long term?** The Tribunal accepted the claimant's evidence that he suffered adverse effects on his ability to carry out day to day activities when he was experiencing episodes of anxiety. The Tribunal accepted that those



adverse effects were substantial. However, for the reasons set out above, the Tribunal did not accept that the adverse effects were as a result of a physical or mental impairment. In addition, it is clear that the effects were not long term. As set out above, the claimant consulted his GP, and mentioned anxiety, twice over a two week period in 2007, on one occasion in each of the years 2010, 2013 and 2014 and then again in May 2024. The medical evidence presented did not support any findings that the episodes of anxiety were anything other than very short, isolated, reactions to adverse circumstances. There was no medical evidence which demonstrated that the effects lasted other than for very short periods, and none to suggest that they were likely to last 12 months, or were likely to reoccur.

46. For these reasons the Tribunal concluded that the claimant was not a disabled person, as a result of Generalised Anxiety Disorder, in the Relevant Period.

**Employment Judge: M Sangster**  
**Entered in register: 29 August 2025**  
**and copied to parties**