

Name: B. NESBITT.

DOB 12 / 01 / 70.

Works No: 8486.

Area: Admin.

Date	Comment	Sign
15.07.02.	Brian rang into O.H.D. at 8.30am will be late coming in. He states he is in casually dep states had fallen downstairs had's sweeping on (2) wheel awaiting for X-RAY. R.T.W. 10am X-RAY. N.A.D. strapping appliance to waist. States he can cope with his paper work.	JW
15.07.02.	Returned to O.H.D at 1400 hrs. States he attended hospital on Thursday. 16.07.02. after having dizzy attack was told by hospital that he was suffering from partial seizures due to stress and pressure. hospital apparently rang Hunter know Re-hab centre and advised them that Brian is still in need of re-hab. as he feels under pressure from work. he also stated he attended disability advice Employment Centre, Brian states that re-hab are having a meeting this afternoon to discuss his case and will ring him on the outcome. I asked Brian to give permission for me to discuss with Personnel. he refused. He tells me that he is still having trouble with his paper work and feels he under pressure. I have tried to reassure Brian and told him booked him in to see Company. G.P. on next clinic day.	J. Worthington
18/02.	Work - was feeling stressed about having to finish Monday work (from W/C) by Wed - now told doesn't have to. Fills in table on computer. 35 machines x 3 days x 3 = 300 sheets (should be) - if hasn't got 300 (y 150) can't work out abundance.	
variously filled in - not really their job.	Turns - had maybe 30 attacks last few months - - smell, st combustion / chemicals - thoughts / forces in head - male, indistinct may be stuff he heard off TV. Had no contact c John Groatman	
	Before shutdown, I sent on each machine - went to collect it (he is still filling those in himself) - mean to let him it would stress anybody.	
	Meeting c David Nelson - advised him to change Brian's name from himself (David) to John Groatman or another (Brian felt Dave Nelson was getting at him and gave a few examples)	

12/3/02

Plan (Cont'd) - Dave agreed & said rather than John (who was too busy) why not Richard - training manager. Agreed.

- re-examine job - are there parts of it which are stressful inherently or difficult to do because of system design.
eg sheets not being handled in.

- close liaison with me, every 2 weeks to ensure plan working.

Name: Brian Nesbitt D.O.B.: 12, 01, 70
 Works Number: _____ Area: _____

Date	Comment	Sign
16/8/02	Meeting C John Boatman, Dave Weber + Richard Have them advise about concern re DDA & at present company not providing good working environment. All agreed. Richard already reported to work with him - started 3 days ago - says Brian very bright, doing good computer work and already sorted out 1-2 areas with him. - John Boatman listened to my concerns about the job being difficult to do because of systems and have established that Brian was having to estimate machine downtime sometimes - John was concerned that system needs reviewing in that case because the info being gathered was not going to be useful if inaccurate. - he will examine this with supervisor. Richard reported Brian was happy going forward & he also had a bit of work done - just removed the cramps (1/2 hr per day) - David Shubb doing that now D/W Brian 12.15 - says a bit happy due to plan + not dealing direct with Dave Weber. many	
11/9/02	3 attacks (hms a day - small (del. side) followed by dizziness & fear & funny thoughts "mule voice" can't have exactly words lost in for sounds Today - pain in forehead + temple scalp sometimes over the fronto-parietal area. No tablets. Under neurologist - will get appointment + It's working down for now - advice not very	
18/12/02	One back RVI - epilepsy specialist appt Jan. Started tablets - about 3 1/2 yrs ago when went off sick. Thinks hasn't had the attacks since being off until 1 week ago after getting letter to attend here - had 2 attacks that night - 1 in bed, 1 at toilet that night - small, dizziness fearful Haven't had good sleep since letter "just want stuff sorting" SKI living alone. Both parents alive - had to live with them for 2 1/2 yrs after discharge - hospital wanted him to go back Plus his brother sometimes - lives nearby. Gets on OK. Good rel. to GP not Kepra for epilepsy & Codare & Abilimat for pain	