

WORK & FINANCE:

# BEFORE, DURING AND AFTER **A STEM CELL TRANSPLANT**



**#BMTsupport**

**ANTHONY  
NOLAN**

saving the lives  
of people with  
blood cancer

## Disclaimer

At Anthony Nolan we take great care to provide up-to-date and accurate facts about stem cell transplants. We hope the information here will help you to look after yourself.

Each transplant centre will do things differently, so this booklet is just a general guide and isn't intended to replace advice from your doctor or transplant team. Please speak to your transplant team for more details on your own situation as they will be able to give you personalised specific advice.

This information is not a substitute for legal advice. If you need legal advice, please contact a solicitor. While we do everything we can to provide the highest quality information, Anthony Nolan will not accept any liability for the use, or inability to use any information provided in this booklet.

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of people with  
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**ANTHONY NOLAN**  
PATIENT SERVICES  
TEAM

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# WHAT'S IN THIS BOOKLET?

Working after a stem cell transplant may be a big milestone for you on your road to recovery.

It can be an important part of making you feel 'normal' again and a different focus away from the medical world of a transplant.

Some people find that going back to work helps prevent them feeling low, and means they feel more confident and less bored.

Returning to work isn't always straightforward. You'll be recovering physically and emotionally from major treatment. As you recover you might be dealing with a number of side effects, such as fatigue and graft versus host disease (GvHD). You'll need to adjust to these - you may need to make changes to the way you work, and take things gradually. Going back to work isn't always possible or right for everyone.

The good news is that there are things that can help - practical support, advice and financial help is available for you, your family and partner.

We've put together this booklet to help you prepare for and manage work - whether you're just about to have a transplant, you're recovering from one or if you had one a long

time ago but still need some support. It will also be useful if you're a carer, family member or supporter of someone going through a transplant.

We've included the experiences of other patients who've been where you are now, as well as guidance from specialist health professionals and the latest information on your rights at work.

You can use this booklet alongside our **Work and Stem Cell Transplants: An In-Depth Guide for Employers** which you can give to your line manager, employer or HR department to help them understand more about stem cell transplants.

If you ever need to ask questions, or you need more support, please get in touch with the Anthony Nolan Patient Services team at [patientinfo@anthonymolan.org](mailto:patientinfo@anthonymolan.org) or call **0303 303 0303**.



# 1 YOUR EMPLOYMENT RIGHTS



It's important to know that there are laws in place to support you at work. As someone with blood cancer or a blood disorder you are protected under the Equality Act 2010 in England, Scotland and Wales, or the Disability Discrimination Act 1995 in Northern Ireland. This means that it's illegal for your employer to discriminate against you or treat you less favourably for reasons relating to your ill health.

## REASONABLE ADJUSTMENTS

Your employer should consider making 'reasonable adjustments' to your role to support you in work both before and after a transplant, to make sure that you aren't at a disadvantage in your workplace. What counts as a reasonable adjustment varies and will depend on the type of work you're doing.

### Examples of support could be:

- A reasonable amount of time off work for hospital stays or appointments.
- Flexible working
- Reduced hours
- Changing your duties
- Working from home
- Workplace adaptations
- Allowing for regular breaks

There are more suggestions on pages 23-29.

## WHAT DOES A DISABILITY MEAN UNDER EQUALITY LAW?

In the Equality Act a disability means a physical or a mental condition which has a substantial and long-term impact on your ability to do normal day-to-day activities. You are also covered by the Act if you had a disability in the past. Or if you continue to experience debilitating effects, as a result of treatment for a past disability, for example chronic graft versus host disease (GvHD) or fatigue. This applies even if you had your transplant many years ago (even as a child), and you are still experiencing debilitating effects as a result of the treatment.

‘FOR MY PARTNER, IT WAS A STAGGERED RETURN – HE HAD DAYS WHEN HE COULD JUST FLOP AND REST. AS I SAW HE COULD MANAGE IT, I WAS LESS ANXIOUS.’

Caroline's partner had a transplant in 2012

**Macmillan Cancer Support** produces a **Guide to Reasonable Adjustments** that has more information.

You may also be able to get an **Access to Work** grant to pay for practical support to start working, stay in work or move into self-employment. Find out more at [gov.uk/access-to-work/overview](https://www.gov.uk/access-to-work/overview)

### **IF YOU THINK YOU'RE BEING TREATED UNFAIRLY**

If you feel like you are being treated less favourably or unfairly due to your transplant or current health condition, then there are steps you can take to try and resolve this:

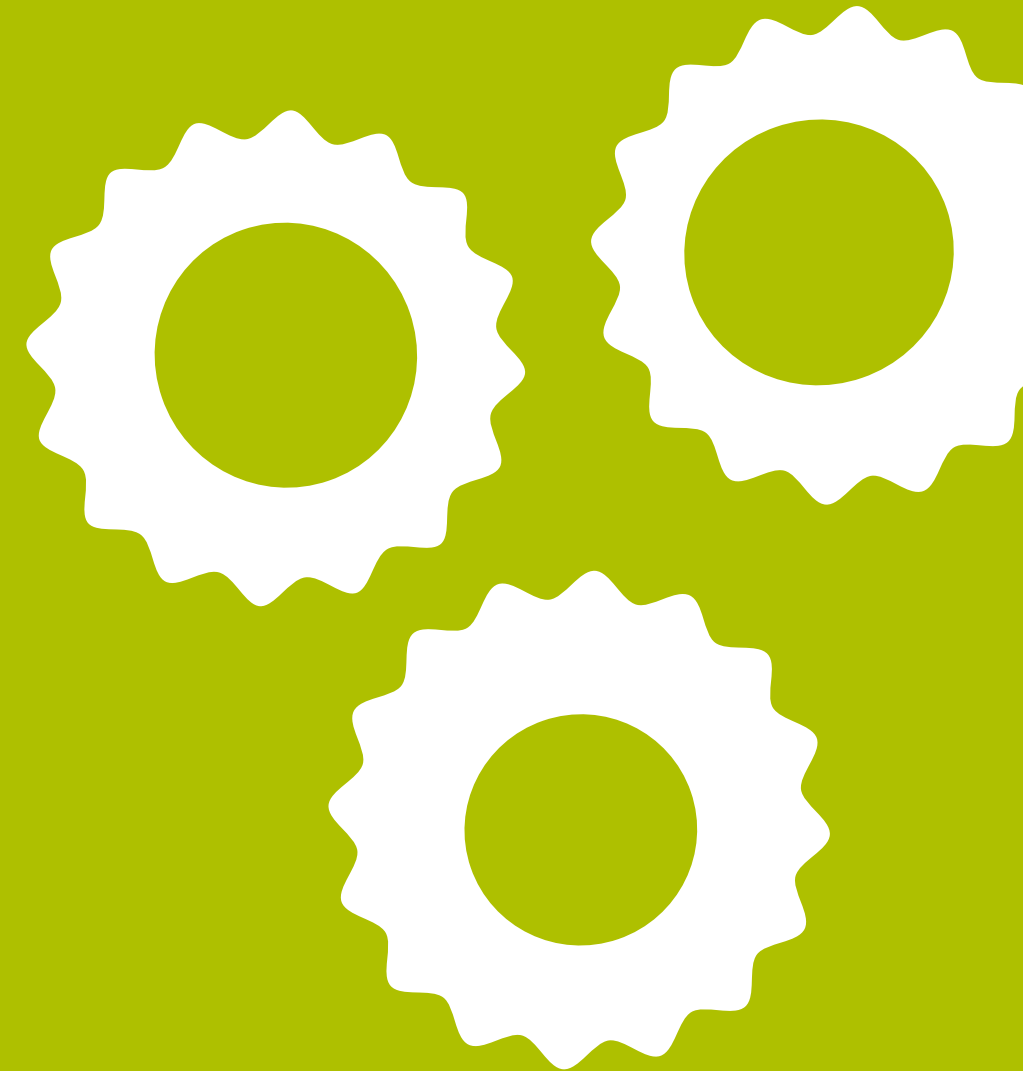
- If you can, try and start with informal talks with your employer. Use your staff handbook or policies as a guide to any internal 'grievance' processes.

- Get support from someone neutral and independent from your work who can help resolve problems and repair relationships (you may hear this called mediation, conciliation or arbitration). Find out more from **ACAS**.

### **MORE ADVICE**

For more information on equality law, contact the **Equality and Human Rights Commission, Equality Advisory and Support Service, Macmillan Cancer Support** or **ACAS**. Or if you or your organisation are members of a trade union, contact your local trade union official.

## 2 PREPARING FOR YOUR STEM CELL TRANSPLANT



If you're preparing for a transplant, it's useful to know what to expect so you can make arrangements with your employer and also start looking into any financial support you might need.

## BEFORE YOUR TRANSPLANT

You might have already been off work for a while before your transplant or you could be working up to the point you go into hospital. Either way, talking to your employer as soon as you can and keeping them updated about your situation will be really helpful.

During the run up to your transplant, a conversation about your work and the time you need off should be part of your planning. If this doesn't happen, ask your transplant team to let you know how much time they think you'll need off and arrange to meet with your manager or human resources (HR) department.

Giving your employers information about your current health, as well as keeping them up-to-date about any medical appointments will help them support you during this period, as well as if you return to work after your transplant.

You'll be able to let them know about your health at the moment, but it's important for your employer to know that recovery varies from person to person and can sometimes be hard to predict.

You'll probably need to be in hospital for about three to four weeks for the actual transplant. That's from the time you are admitted to hospital for your pre-transplant treatment, to the time you are well enough to go home afterwards. But recovery afterwards can take six months to a year, or sometimes longer.

Your medical team can provide you with medical certificates and 'fit notes' to cover the time you are off work.

**'I think it's useful to apply for benefits as early as possible. I was helped by a Macmillan financial advisor, which made it all a lot easier.'**

**George**, had a transplant in 2014

## RECOVERY

Some people find that recovery is relatively straightforward, for others it can be physically and emotionally demanding. It's also quite common for people to need to go back into hospital after their transplant. This might be because of an infection, a side effect that needs treatment or for other reasons.

For most people it's at least six months after a transplant before your activity levels start to get back to normal.

Many people find that they can return to work after the first year of a transplant. This can vary, if you've had a transplant from an unrelated donor you may have more long-term side effects and need more time off than people who've had a transplant using their own stem cells (autologous transplant). And side effects such as fatigue or graft versus host disease (GvHD) might make going back to work harder, although there are things that can help (see pages 23 to 29).

Having regular check-ups mean any side effects can be picked up sooner rather than later. Your transplant team should be able to advise you about your job and how your side effects might impact on it. You can ask them to write a letter for your GP and employer outlining what you can and can't do.

**'I worked in an environment where I had constant contact with members of the public and because of this my consultants were reluctant for me to return too quickly after my transplant due to the risk of infection. So by the time they were happy to sign me fit to return, I had been off work for over a year.'**

**Nilush**, had a transplant in 2013

## WHAT IS A FIT NOTE?

A fit note (or Statement of Fitness for Work) is a form your GP, hospital doctor or nurse can give you if your health affects your fitness for work. You can show the fit note to your employer to arrange your sick pay. It also allows your doctor or other healthcare professional to give you more information on how your condition affects your ability to work. This will help your employer understand how they might help you return to work sooner or stay in work.

Fit notes may also be called medical statements or a doctor's note.

## LOOKING AFTER YOURSELF

For some people, taking a break from work can have an emotional impact. Perhaps your job is a big part of your identity, gives you independence or allows you to provide for your family. It's also natural to feel worried about money matters. Other people might not think about work at all and feel totally focussed on dealing with their diagnosis and having a transplant, especially if it's all happened suddenly. It's normal to have lots of emotional ups and downs before, during and after a transplant. Read our leaflet **Life After Transplant: An Essential Guide to Dealing with Emotional Wellbeing** for more information about what could help.

Taking some practical steps to tackle work or money worries might help ease any pressure, and mean you can focus on yourself and your recovery. If this seems overwhelming, see if a family member, friend or professional can help with things like form filling or getting advice.

## IF YOU'RE CARING FOR OR SUPPORTING SOMEONE THROUGH A TRANSPLANT

If you're a partner or family member and you need to take time off work before, during or after the transplant then you may be entitled to take compassionate or unpaid leave. It's important to speak to your manager if you can. Requesting flexible working

may help you balance your roles – everyone has the right to request flexible working, not just carers, so you'll be no different to your colleagues in this entitlement.

**Macmillan Cancer Support** produce a useful booklet called '**Working while caring for someone with cancer.**' **Carers UK** also offer more support and advice.

## TOP TIPS

- Talk to your line manager, employer and HR department. You can give them our booklet **Work and Stem Cell Transplants: An In-Depth Guide for Employers** so they can understand more about stem cell transplant and your recovery.
- Find out about your entitlements to Company and Statutory Sick Pay (see page 17). Find out about other benefits, financial support or grants you may be eligible for as early as possible, ideally before your transplant (see page 16-19).
- Decide how you will keep in touch with your line manager and keep them updated as much as you can. It might be a good idea to introduce a family member to your manager so they can update them on your behalf.
- Remember you are protected by equality law (see page 9). It's illegal for your employer to discriminate against you because of your ill-health, and they need to consider making reasonable adjustments to your job to support you.



# 3 FINANCIAL SUPPORT WHILE YOU'RE OFF WORK



We've listed some basic financial information here, but the benefits and support you may be able to get depend on your age, your income and where you live. So it's best to get some advice based on your particular circumstances.

**These organisations should be able to give you more detailed advice:**

- Macmillan Cancer Support
- Citizens Advice
- Money Advice Service
- Turn2us
- Gov.uk
- Sick pay

You may be able to claim company sick pay if your employer provides it. This is normally set out in your contract of employment, or staff handbook. You can ask your line manager or human resources department (HR) about what you're entitled to, it may be based on your length of service.

You are entitled to Statutory Sick Pay (SSP) if you're too ill to work. If your employer does not provide company sick pay, or if your company sick pay has run out. SSP is paid after the third consecutive day of sickness and is paid by your employer for up to 28 weeks (7 months).

You'll need to ask your doctor or nurse in the hospital to give you a fit note covering the time you are not fit to

work (see page 14). You can find out more about SSP, including amounts, by visiting [gov.uk/statutory-sick-pay](https://www.gov.uk/statutory-sick-pay)

## OTHER BENEFITS

There are financial benefits you may be entitled to if your income has dropped while you are off work.

### Employment and Support Allowance

(ESA) offers financial support to people who are ill or disabled, and unable to work. You can apply for ESA if you're employed, self-employed or unemployed. It's means tested or it can be paid based on your National Insurance contributions (called 'contribution based').

The means tested benefit is affected by your household income whereas contribution based ESA isn't. For example, if you have a partner who is working, you wouldn't be able to apply for means tested ESA as their income would be taken into account, but you would be able to apply for contribution-based ESA if you'd made enough National Insurance Contributions.

You must have a Work Capability Assessment while your ESA claim is being assessed. This is to see to what extent your illness or disability affects your ability to work. If you're recovering from, or awaiting chemotherapy then you will automatically pass it and qualify for ESA at the highest rate.

### Universal Credit

Instead of certain benefits, you may be able to claim Universal Credit if you're on a low income or out of work. If you are advised to claim Universal Credit, seek independent advice as it can affect your existing benefits.

### Other benefits

If you need additional help because of health problems, you may also be able to apply for:

- Personal Independence Payment
- Disability Living Allowance
- Attendance Allowance

Remember that you may be able to get other benefits as well, depending on your circumstances.

### GRANTS

Anthony Nolan Grants are available to people affected by transplant who have limited savings. Grants are typically under £150 and can help with the practical needs arising from a stem cell transplant. To find out more, email [patientinfo@anthohnolan.org](mailto:patientinfo@anthohnolan.org)

**Macmillan Cancer Support** and other charities or organisations also offer grants.

### IF YOU'RE SELF-EMPLOYED

There is also financial and practical information available for you if you're self-employed. For example you are also entitled to certain financial benefits. For more detailed information, contact the organisations listed on page 17.

## TOP TIPS

- Get help with applying for benefits and filling in forms. You may have a welfare advisor, social worker, **Macmillan Cancer Support** or **Maggie's Centre** at your hospital. Start looking into what other benefits you may be entitled to at least three months before your SSP runs out, to make sure you are supported.
- If sick pay is your only income whilst you are off work, you may be able to claim other benefits such as Housing Benefit, and you may be able to apply for a Council Tax reduction.
- You're also entitled to free prescriptions if you have cancer, are having treatment for cancer or the consequences of cancer. Ask your doctor for a medical exemption application form.
- If you're a carer and providing 35 hours of care or more, and the person you're caring for is getting benefits relating to their disability, then you may also be entitled to Carer's Allowance.
- You may have policies such as house insurance, health insurance or life assurance that you can draw on. Speak to the companies you took the policies out from.
- Check in with your mortgage company and see if they can give you a mortgage break.
- Get some general financial advice about what options you have from one of the organisations on page 17.
- If you feel that a decision that has been made about how much benefit support you're getting isn't right – then you can appeal against it. You can get support with this from the organisations listed on page 38.

# 4 WORKING AFTER A TRANSPLANT



Once you are on the road to recovery you may want to think about making preparations for going back to work. This can feel exciting, but also daunting, especially if you've been away a long time.

*'For me the main issue when returning to work was confidence. So in order to build this up it was essential to establish a rapport with my line manager. The key was flexibility. It's not always easy to admit that you are not coping and can't do as much as before.'*

**Ariane**, had a transplant in 2011

## **PREPARING TO GO BACK**

Whilst you're preparing to go back it will be useful to think about what will help with your return. We've given some more specific suggestions on pages 23-29, but you know your own job and yourself best, so think about what could make things easier for you. It's normally best to try and take things gradually - you might not be able to go back full time to start with, or to exactly the same duties.

'At times I was ecstatic that I was being treated 'normally' - and at other times I was affronted that they seemed to have forgotten everything I had been through! But it's important to remember that some people have had little experience of cancer in general and don't know how to react.'

**Ariane**, had a transplant in 2011

## WHAT HELPS?

Speak to your transplant team about your plans, and any changes they think you might need to make. They could speak or write to your GP or employer if you think that will help. See page 14 for information about fit notes.

Arrange a meeting with your employer or HR team to agree a return to work plan. You may want to consider a phased return to work and flexible working to ease you back into things.

An occupational health adviser can also help, these are health professionals who specialise in workplace health issues. They can support you in making adjustments at work and make an assessment of your fitness for work. Your employer may be able to refer you to occupational health. If they can't, then the government's **Fit for Work** service can offer impartial advice on returning to work. Visit [fitforwork.org](http://fitforwork.org)

## TOP TIPS

- Keeping in touch with your employer about your return should make things easier when you do go back.
- Boost your confidence by looking for training courses you could do at work, or arranging catch-up meetings with colleagues.
- Get financial support if you need it - if you're back at work, but on a low income you may still be able to get some benefits and tax credits.
- Stem cell transplants are still rare so you could give out our leaflet, **Supporting your Friend Through a Bone Marrow or Stem Cell Transplant** to help your work colleagues better understand what you've been through.

# 5 DEALING WITH THE EFFECTS OF A TRANSPLANT AT WORK



After a transplant the road to recovery is different for everyone, but it's likely you'll be dealing with psychological and physical effects that could impact your job. Getting treatment and support from your transplant team will help you feel as well as possible.

The information on the following pages might help you in thinking about what adjustments could help with managing common side effects at work. Don't forget that your employer should consider making reasonable adjustments to your role to support you in work.

### APPOINTMENTS AND GOING BACK INTO HOSPITAL

It's common for people to have some setbacks and need to go back into hospital after a transplant. Although it's frustrating, it might be reassuring to know that it is part of a normal process of recovery.

Giving you time off for hospital appointments or stays are part of the reasonable adjustments your employer must make under equality law (see page 9).

### INFECTIONS

Your immune system will be recovering in the first year to 18 months after your transplant, which means your risk of getting an infection is higher during this time. This risk lasts longer if you are taking important medication to suppress your immune system because you have chronic graft versus host disease (GvHD). While your immune system is still recovering you should try and take extra steps to protect yourself from infection. Read our leaflet, **Life After Transplant: An Essential Guide to Dealing with Infections** for more advice.

**'My haematologist was reluctant for me to go back to work in the airport. He advised I start another project from home.'**

**Nilush**, had a transplant in 2013

### TOP TIPS

- You may be able to discuss varying your duties for a while if your job puts you at higher risk of infections. For example could you work in an office rather than interacting directly with the public?
- Starting or finishing slightly earlier to avoid the rush hour or working from home reduces the time you have to spend mixing with crowds.
- Remind your manager or employer that because you've had a transplant you might be prone to more coughs and colds than other people.
- Eating a healthy diet and exercising may help you generally feel well in yourself.
- Make sure you get all your childhood vaccinations again as soon as your transplant centre recommends them.

### FATIGUE

Fatigue is a common problem after a bone marrow or stem cell transplant. It can make you feel both physically and mentally drained, leaving you with little energy or motivation, and it can be hard to concentrate.

Fatigue can have a big impact on your everyday life – making it hard to carry out your normal activities, including work. It's important for the people around you to recognise that your fatigue is different to just being tired.

**'Fatigue is a normal part of your recovery. It can come and go so don't be too hard on yourself – give yourself time to recover.'**

**Hayley**, Anthony Nolan Post-Transplant Nurse Specialist

For some people, fatigue is a short-term consequence of treatment that gets better over a few months. Others can be still living with it for years after their transplant. The good news is that there are treatments for the different causes of fatigue, and ways you can manage it and make the most of the energy you have.

**‘I put breaks in my day – like not having lunch at my desk – it’s up to me, but it makes an enormous difference.’**

**Jason**, had a transplant in 2011

## TOP TIPS

- Going back to work gradually (a phased return) and starting with reduced or part-time hours might help.
- Identify times when you feel most awake, energised and able to work. It may be that you could do different shifts or hours for a while.
- See if you can factor in regular breaks and time to stop and rest if you need it.
- If you’re on your feet all day or do very physical work, you may need to look at doing some different or more varied duties for a while.
- Ask your GP or transplant team to refer you to an occupational therapist who could help you maximise your energy levels and rest periods.
- There is a growing amount of evidence to suggest that doing light-to-moderate exercise can reduce treatment-related fatigue.

## MEMORY AND CONCENTRATION

**‘It’s a bit like brain fog. I often can’t think of the right words.’**

**Ceinwen**, had a transplant in 2012.

Some people find that they have problems with their memory, attention and concentration after a transplant. Often these problems get better in the year after your transplant, but some people find that these difficulties have an impact on their daily life and work for longer.

**‘I prepare in advance and allow for extra time when embarking on something arduous or time consuming.’**

**Ariane**, had a transplant in 2011

**‘I find that walking is a big help. I try to walk as much as I can, because it helps clear my head and gives me something nice to look forward to.’**

**Ceinwen**, had a transplant in 2012

**‘Another tip that I find helpful at work is taking 30 minutes at the end of each day to think about things and reflect on what I’ve done – looking back on the day. Just taking more time to think, I guess, allowing that space.’**

**Ashling**, had a transplant in 2012

There are more tips on our blog post, **Chemobrain – dealing with cognitive problems after cancer treatment**. Visit [blog.anthonynolan.org](http://blog.anthonynolan.org)

## TOP TIPS

- Making notes, lists, using diaries, calendars and phone apps could help with keeping track of tasks.
- Ask to be referred to an occupational therapist or psychologist.
- There’s some evidence that dealing with emotional issues like anxiety and depression can help improve your memory and concentration (see page 28).

## EMOTIONAL CHANGES

It's common to feel worried and down before, during and after transplant – you're dealing with a massive event in your life. The treatment itself can make you feel unwell, tired and low, and your normal life will have been disrupted. Often these feelings subside over time, but for some people, they hang around for longer. This could have an impact on your motivation and ability to work. But you're not alone, there are lots of things that can help and ways to get more support.

## GETTING MORE SUPPORT

There are some signs that might mean you need more support to cope with how you're feeling. Let your GP or transplant team know if during the last month you've often been bothered by:

- Feeling down, depressed or hopeless.
- Having little interest or pleasure in doing things.

## TOP TIPS

- Share what you're thinking – find someone you can talk to or connect with others who've also been through transplant. Visit our online transplant community [anthonymolan.org/transplantcommunity](http://anthonymolan.org/transplantcommunity)
- As well as working, take time out to look after yourself and have some downtime to relax. Meditation, massage and other relaxation methods could help you manage stress.
- Being active and thinking about what you eat and drink can have a positive impact on your mood.
- Get enough sleep or rest and have a relaxing night time routine.

Talking to your specialist nurse, GP or another member of your transplant team might help. They'll make sure you get the help and support that's right for you. You could ask for a referral to a specialist like a counsellor or a psychologist. Find out more in our leaflet, **Life After Transplant: An Essential Guide to Emotional Wellbeing**.

## GRAFT VERSUS HOST DISEASE

When you have a stem cell transplant, your growing immune system may harm some of the cells in your own body because it sees them as 'different'. This is called graft versus host disease (GvHD). About half of people who have a transplant will get GvHD. It's often very mild – for example, you might only get a mild skin rash, but for some people GvHD can be more severe. 'Chronic GvHD', can affect different parts of the body and cause a variety of symptoms that might have an impact on your daily life and work. Find out more in our leaflet, **Life After Transplant: An Essential Guide to GvHD**.

GvHD is a side effect that can be particularly hard for others to understand as they've probably never heard of it and it isn't always visible. It's important to explain the impact of it to your employer, having a letter of support from your transplant team could help, as well as giving them our booklet **Work and Stem Cell Transplants: An In-Depth Guide for Employers**.

## OTHER SIDE EFFECTS

Your skin, joints, muscles, bones and eyesight can all be effected as a consequence of your transplant, or by GvHD. Depending on what work you do, you may need to change your duties or the way you work for a while.

*'I work for an organic horticultural charity, I work outdoors quite a bit, carrying things around. It's a physical job and because my wrists are so weak – wheelbarrows are one thing that I struggle with. Most people are aware that I have problems and I have to explain it quite a bit.'*

**Alexandra**, had two transplants, the first in 2005



## 6 MAKING A CHANGE





After a transplant, it's common to take stock and think about doing something different and making changes in your life. Take time to make these decisions and discuss your thoughts and feelings with family and friends. You can also speak to your transplant team.

### LEAVING WORK

Some people decide to give up work after a transplant. It may be that you resign from your job, take voluntary redundancy or early retirement.

Think about this carefully, get some independent advice and consider all your options before making any decisions.

### SOME THINGS TO THINK ABOUT:

- Have you looked into flexible or part-time working as an option? Could you continue to work if your employer made more reasonable adjustments (see page 9)?
- What is the financial impact of leaving work – will you be able to cover all your living costs?
- What's the emotional impact of leaving work? It can be a big step to take and you might find you need to get further emotional support.

### GETTING FINANCIAL SUPPORT

You might be offered voluntary redundancy as an alternative to early retirement, but you shouldn't feel pressured into this, it's important to think about the pros and cons of each.

If you have a personal or workplace pension, you may be able to draw on all of or part of your pension earlier if you have retired due to ill health.

If you give up work, you give up Company Sick Pay, Statutory Sick Pay, pension rights and occupation-linked private medical insurance. But you will be able to claim certain benefits and you may be entitled to an income tax refund.

### DISCRIMINATION

If you feel like you are being forced to leave work or dismissed because of your health issues then it may be classed as disability discrimination, as you are protected by equality law (see page 9). For example, if your employer has failed to make reasonable adjustments or dismissed you because of sickness absence related to your condition.

### MORE ADVICE

For more information on your financial options contact **The Money Advice Service** and the **Macmillan Cancer Support** or **Citizens Advice**.

For support if you feel like you're being discriminated against or want support on your rights at work contact **ACAS** or **Equality Advisory and Support Services**.

### LOOKING FOR A NEW JOB

Looking for a new job after a transplant can be exciting, whether it's a change in career or your first job, but it can also be nerve-racking. Some people worry about telling their employer about their medical history or you may feel that your confidence needs a boost after time away from the world of work.

### KNOW YOUR RIGHTS

When you're applying for a job, you are also protected from discrimination by equality law. You're under no obligation to tell them anything about your medical history, health or disability, but they may ask some questions during the recruitment process to make sure they are not discriminating against you in any way and check if there are any ways to support you during application or interview. For example, if you have sight problems, they must make sure that any application forms or tests you need to do at interview are available in different formats.

It's up to you whether you want to tell a potential or new employer about your medical history. It may be useful for you if you have any particular needs, and to give employers an understanding of why you've been off work. Perhaps you've taken part in activities during your recovery that will help them build a positive image of you. Going through a transplant in itself is a massive achievement.

**Macmillan Cancer Support** and the **Equality and Human Rights Commission** have more detailed information about your rights when applying for work.

### **BOOST YOUR CONFIDENCE**

The **National Careers Service** has information about returning to work after long term illness. It has tips and information about ways to update your skills and knowledge and boost your confidence.

### **VOLUNTEERING**

You may want a new sense of purpose or challenge, especially if you're no longer working. If you're interested in volunteering with Anthony Nolan, there are lots of ways you can support and help. Have a look at our website or contact [volunteering@anthonymolan.org](mailto:volunteering@anthonymolan.org)

You can also visit [do-it.org](http://do-it.org) to find other volunteering opportunities to suit you.

'I put my CV together. I contacted one of my company's previous competitors and said I was really looking for a job... within a week I had a phone call from one of the directors saying he was really interested.'

**Dermott**, had a transplant in 2013

'I took the difficult decision to leave the job that I had so looked forward to returning to. Things had changed, I had changed and my previous perfect job just wasn't for me any more. I wanted to do something for myself. So I was looking at small businesses for inspiration, and that's when I came across a Swedish pet food franchise. That was it, I decided; that was what I wanted to do. So I became a pet nutritionist.'

**Nilush**, had a transplant in 2013

'I had my transplant at 62 and my pension provider agreed to pay me my full pension as if I had worked till 65. I know quite a lot about this stuff but I didn't think I stood the slightest chance of it being approved and nearly didn't bother to ask. If I hadn't it would have cost me a reduction in my pension.'

**Martin**, had a transplant in 2014

# 7 WE'RE HERE TO HELP





If you or a loved one are affected by bone marrow or stem cell transplant, there are many ways we can support you.

### GET CONNECTED

Find support from other patients and their families by joining our online transplant community at [anthonymolan.org/transplantcommunity](https://anthonymolan.org/transplantcommunity)

You can also share stories and find out more about our work on our Patients and Families Facebook page: [facebook.com/anthonymolanpatients](https://facebook.com/anthonymolanpatients)

Visit our blog: [blog.anthonynolan.org](https://blog.anthonynolan.org)

### FIND INFORMATION

Our website has lots of helpful information about what it's like to go through a transplant. Download or order our booklets for free, and find links to other places where you can get support at [anthonymolan.org/patientinfo](https://anthonymolan.org/patientinfo)

*'I've had a lot of satisfaction from joining the Anthony Nolan online community. It has definitely helped in my recovery process to know there are others I can share my experiences with who understand. I would recommend it to everybody – patients, family and carers.'*

**Peter**, had a transplant in 2012

### NEED TO TALK?

Before, during and after transplant, the **Patient Services** team at Anthony Nolan are here for you. Call us on **0303 303 0303** or email [patientinfo@anthonymolan.org](mailto:patientinfo@anthonymolan.org)

### SHARE YOUR THOUGHTS

We work with a panel of people who've been affected by transplant to make sure we get our services and information right. And we'd love you to join them.

From sharing your experiences to coming up with new ideas and giving feedback on our resources and services: we need your ideas and insight. If you're interested in joining the panel, just get in touch!

## OTHER ORGANISATIONS THAT CAN HELP

### ACAS

Provide information, advice, training, conciliation and other services for employers and employees to help prevent or resolve workplace problems.

**0300 123 1100**

**acas.org.uk**

### CARERS UK

Advice, information and support for people looking after their loved ones.

**0808 808 7777**

**carersuk.org**

### CITIZENS ADVICE

Advice about benefits, work and money online and in local centres.

**citizensadvice.org**

### GOV.UK

Government services and information, including benefits and disability information.

**gov.uk**

### DO-IT

The UK's national volunteering database.

**do-it.org**

### EQUALITY ADVISORY AND SUPPORT SERVICE

Advises and assists on issues relating to equality and human rights, across England, Scotland and Wales.

**0808 800 0082**

**equalityadvisoryservice.com**

### EQUALITY AND HUMAN RIGHTS COMMISSION

Advice and guidance about your rights at work.

**0808 800 0082**

**equalityhumanrights.com**

### MACMILLAN CANCER SUPPORT

Practical, financial and emotional support for people with cancer, their family and friends.

**0808 808 00 00**

**macmillan.org.uk**

### MAGGIE'S CENTRES

A network of drop-in centres for cancer information and support. Includes free courses, emotional and practical support and an online support group.

**0300 123 1801**

**maggiescentres.org**

### MONEY ADVICE SERVICE

Free and impartial money advice, set up by the government.

**0800 138 7777**

**moneyadvice.service.org.uk**

### NATIONAL CAREERS SERVICE

The National Careers Service provides information, advice and guidance to help you make decisions on learning, training and work opportunities. The service offers confidential and impartial advice. This is supported by qualified careers advisers.

**0800 100 900**

### TURN2US

Turn2us is a national charity that helps people in financial hardship gain access to welfare benefits, charitable grants and support services.

**turn2us.org.uk**

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Patient and Families Panel



‘GOING BACK TO WORK  
HAS SO MANY BENEFITS  
– IT’S DIFFICULT TO  
QUANTIFY HOW MUCH  
I ENJOYED BEING PART  
OF A TEAM, BEING  
BACK AT WORK WITH  
MY MATES.’

**Crispin**, had a transplant in 2013

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saving the lives  
of people with  
blood cancer