

THE DECISION AUDIT

Three Real Cases. What ANCHOR Would Have Changed.

Each case below reached an employment tribunal. Each involved a manager making a judgment call without structured support. In each case, the adjustments that would have prevented the claim were straightforward and low-cost. The failure wasn't intent. It was the gap between knowing the right thing and doing it at the moment the decision was being made.

This document shows what ANCHOR would have surfaced in each scenario - in under three minutes - and how that framing would have changed the trajectory.

The pattern across all three cases:

The employer knew about the disability. Occupational health made recommendations. The manager didn't implement them - not because they refused, but because there was no structured support at the point the decision was being made. No one prompted them to consider what was invisible. No one framed the decision before action was taken.

That's the gap ANCHOR fills.

CASE 01

The ADHD Employee Whose Manager Didn't Respond

THE SCENARIO

A senior cloud technologist with ADHD joined a major IT consultancy on a six-month probation at a salary above six figures. She disclosed her ADHD diagnosis early on. An occupational health assessment recommended several adjustments: ADHD awareness training for colleagues, coaching sessions focused on time management, and setting achievable, realistic tasks.

The employee emailed her line manager suggesting he attend ADHD training with her. He didn't respond.

WHAT THE MANAGER DID

- The line manager received the occupational health recommendations but did not implement them.
- When the employee invited him to ADHD training, he did not respond to the email.
- The employee took sick leave. Her probation was extended.
- A probation meeting was held in her absence. She was dismissed the following day for 'ongoing concerns about performance.'
- Her grievance about bullying and discrimination was not resolved before termination.

WHAT ANCHOR WOULD HAVE SURFACED

- **Decision framing:** You're deciding how to respond to occupational health recommendations for an employee who has disclosed ADHD. One assumption worth examining: is 'performance' being interpreted through a neurotypical lens?
- **Invisible barriers:** ADHD affects executive functioning - ambiguous tasks, unstructured deadlines, and multitasking create disproportionate disadvantage. The employee may be working significantly harder to produce the same output.
- **Prompt:** Have the OH recommendations been actioned? If not, what is the reason for delay - and how does that delay affect your legal position?
- **Prompt:** Is this a performance issue or a support gap? What would change if the recommended adjustments were in place?
- **Risk flag:** Proceeding to a probation decision before implementing recommended adjustments creates a direct failure-to-adjust liability. Consider sequencing.
- **Metadata:** Type: Adjustment implementation. Urgency: High (probation timeline). Reversibility: Low (dismissal is irreversible).

THE GAP

The manager wasn't hostile. He just didn't act on the recommendations. There was no system prompting him to consider what the OH report actually required, no framing that connected 'performance concerns' to the unimplemented adjustments, and no flag that moving to dismissal before actioning adjustments would create legal exposure. The training that could have changed the outcome would have cost a few hundred pounds. The tribunal found the cost was 'not a prohibitive difficulty' and there was 'no plausible reason why it wasn't implemented.'

OUTCOME

Tribunal upheld the claim for failure to make reasonable adjustments under sections 20 and 21 of the Equality Act 2010. Damages still being assessed. The employee had been earning a six-figure salary. The reputational impact for the consultancy has been covered by Personnel Today, HR Magazine, HRZone, and multiple employment law firms.

Source: Khorram v Capgemini UK Plc [2025] - Employment Tribunal judgment published July 2025

CASE 02

The Dyslexic Chef Who Suggested His Own Solution

THE SCENARIO

A chef with dyslexia was hired at a pub owned by a major chain. He disclosed his dyslexia at interview, telling the kitchen manager he could not read or write. The manager said this wouldn't be a problem and offered him the job.

The kitchen used screen-based ordering. The chef couldn't read the orders.

WHAT THE MANAGER DID

- The kitchen manager told the chef it 'wouldn't be a problem' without considering how screen-based ordering would work.
- When the issue became apparent, a more senior manager told the chef the company would have to 'lay him off' if he couldn't come up with a reasonable adjustment himself.
- The chef suggested a Bluetooth earpiece that would read screen orders aloud - a simple, low-cost solution.
- The company referred him to occupational health, which also recommended a wireless headset.
- Despite both the employee and OH recommending the same solution, the company did not implement it.
- The chef was taken off the rota, then told the company 'could not find a way forward.' His employment was terminated.

WHAT ANCHOR WOULD HAVE SURFACED

- **Decision framing:** You've hired someone who has disclosed dyslexia and difficulty reading. Your kitchen relies on screen-based orders. Before starting them, consider: what adjustment would remove the barrier between their skills and the task?
- **Invisible barriers:** The employee was described as having 'very positive' work capabilities by his supervisor. The barrier isn't ability - it's the format of information delivery.
- **Prompt:** The employee has suggested an adjustment (Bluetooth earpiece). OH has recommended the same. What is the reason for not implementing it?
- **Prompt:** If you proceed to termination without implementing the adjustment both the employee and OH recommended, what is your defence?
- **Risk flag:** Telling an employee they need to come up with their own adjustment or face dismissal reverses the legal duty. The duty to adjust sits with the employer.

- **Metadata:** Type: Adjustment (assistive technology). Urgency: High (employee unable to work without it). Reversibility: High (earpiece is low-cost, easily trialled).

THE GAP

The chef knew what he needed. Occupational health confirmed it. The adjustment was low-cost and easily reversible. But nobody in the management chain was prompted to connect the dots: disclosure happened, the barrier was identified, a solution existed, and the duty to implement it sat with the employer. Instead, the burden was placed on the employee, and when the company 'couldn't find a way forward,' they terminated. The tribunal later noted that 'the way the respondent treated him made the claimant feel worthless, humiliated, suicidal and anxious.'

OUTCOME

The employer conceded it had failed to make reasonable adjustments. Tribunal awarded the employee a total of approximately 24,000 pounds in compensation for injury to feelings, financial losses, and interest. The tribunal found that had the adjustment been made, 'the claimant would have remained in employment.'

Source: Moore v Greene King Retail Services Limited [2025] - Employment Tribunal, Bury St Edmunds

CASE 03

The Administrator Whose Office Got Louder

THE SCENARIO

An NHS administrator had permanent impairments from a brain haemorrhage - including memory problems, concentration difficulties, and sensitivity to noise and light. She worked part-time in a quiet office. Then a new colleague joined who made frequent phone calls, significantly increasing the noise level.

The employee raised concerns repeatedly over more than a year. Eight occupational health reports were produced.

WHAT THE MANAGER DID

- The employee asked to move to a quieter desk. Her manager said he'd ask - but no action was taken.
- A clinical manager suggested a different desk, but not the one the employee requested. When the employee suggested ear defenders, she was told they 'would not be appropriate' because she needed to hear the phone.
- An occupational health report was 'very clear' that adjustments were needed. The employer told the employee 'there were no further adjustments that could be made.'
- A display screen equipment assessment was eventually conducted but the tribunal called it a 'pointless exercise' - no meaningful action followed.
- The employer discovered the employee was staying late to work in a quiet office after colleagues left - and interpreted this as a workload problem rather than a noise problem.
- After more than a year of inaction, the employee resigned, stating: 'The amount of time and effort for a small request is astonishing and exhausting.'

WHAT ANCHOR WOULD HAVE SURFACED

- **Decision framing:** An employee with documented noise sensitivity has reported that a change in office environment is affecting their ability to work. Before responding, consider: is the barrier the workload or the environment?
- **Invisible barriers:** The employee is staying late to complete work after colleagues leave. This suggests the work itself isn't the issue - the environment is. Interpreting this as a performance or workload problem misreads the situation.
- **Prompt:** Eight OH reports have been produced. How many of the recommendations have been fully implemented? What is preventing implementation?

- **Prompt:** The employee has made a specific, low-cost request (quieter desk). What is the operational reason this cannot be accommodated?
- **Risk flag:** Telling an employee 'nothing more can be done' when OH recommendations remain unimplemented creates direct liability. The duty is ongoing.
- **Metadata:** Type: Environmental adjustment. Urgency: Medium (employee still working, but deteriorating). Reversibility: High (desk moves are low-cost).

THE GAP

This case ran for more than a year. Eight occupational health appointments. Multiple managers involved. And the core request - a quieter workspace - was never properly addressed. Not because anyone was malicious. The tribunal noted the employer's 'intentions were not malicious.' But at no point did anyone connect the employee's late working to her noise sensitivity rather than a workload problem. No one was prompted to ask: 'Have the OH recommendations been implemented?' And when the employer said 'nothing more can be done,' nobody challenged that framing.

OUTCOME

Tribunal awarded approximately 27,000 pounds for injury to feelings and lost earnings, plus interest. The tribunal found the case involved 'serious conduct on the part of the respondent over a 13-month period.' The employee never returned to work. She later applied for a job elsewhere and was successful - but the NHS Trust's reference about her sickness absence cost her that job too.

Source: Davies v Gloucestershire Health and Care NHS Foundation Trust [2024] - Remedy hearing published October 2024

THE PATTERN

What These Cases Have in Common

- **The employer knew.** In every case, the disability was disclosed and occupational health had made recommendations. The failure wasn't awareness - it was action.
- **The adjustments were straightforward.** ADHD training. A Bluetooth earpiece. A quieter desk. None of these were complex, expensive, or operationally disruptive.
- **The manager wasn't malicious.** In each case, the tribunal found no hostile intent. The gap was between knowing and doing - at the moment the decision was being made.
- **The delay compounded the damage.** What started as a simple adjustment request became sick leave, grievances, dismissals, and tribunals. The cost escalated because nobody intervened upstream.
- **Training had already happened.** These organisations had policies. They had OH. They had HR. What they didn't have was structured support at the point the manager was deciding what to do next.

ANCHOR intervenes at the exact point these cases went wrong.

Not after the tribunal. Not as a training module managers forget. At the moment a manager is deciding how to respond to 'I'm struggling' - ANCHOR surfaces what's invisible, frames the decision consistently, and prompts the questions that would have changed the trajectory in every case above.

Three minutes. Before the decision is made. Before it becomes a grievance. Before it reaches your People team's desk.

What's your version of these cases?

Every organisation has them. The manager who hesitated. The adjustment request that stalled. The escalation that consumed your People team's week. The question isn't whether it's happening.

It's whether you have structured support at the point the decision is being made.

Start with the Pilot Readiness Sprint (7 days, 1,000 pounds). We take three of your real scenarios and show you exactly what ANCHOR would surface. If it doesn't change the conversation, you'll know in a week.

Book the Sprint: cal.com/ruth-ellen-danquah-orl6s0/anchor-sprint

Questions first: cal.com/ruth-ellen-danquah-orl6s0/anchor-demo

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