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**Confidential When Complete**

**Health & Wellbeing Passport**

**Document owner:**

**Name:**

**Line manager:**

**Name:**

**IMPORTANT please note:** This passport should be regularly reviewed with your line manager or as circumstances change.

**Areas for Discussion and Agreeing Actions**

This passport is designed to reduce barriers within the workplace.

The questions below should be discussed and based on responses, the line manager and the individual should record discussions, agree actions and responsibilities relating to the individuals personal circumstances.

This document has been designed to prompt discussions around key areas relating to:

* Disability
* Neuro Diversity
* Health Condition(s) including underlying conditions
* Physical or Mental Impairment
* Welfare Need

The Health and Wellbeing Passport is a live document and can be updated at any time to reflect changes in personal circumstances. It is recommended that this document is reviewed every six months, if circumstances change or as requested by the individual.

If the individual changes job or is assigned a new line manager, the individual should provide a copy so that the new manager can understand their circumstances and the reasonable adjustments that have been made.

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| 1. **Can you provide a summary/history of your personal circumstance?**   E.g. For a disability or health condition;   * What is the history of your disability or health condition? * Is it stable, relapsing, remitting or recurrent? * Does it have defined ‘episodes’? * What difficulties do you have on an average day? * Side effects of medication, recovery time post-treatment? * Are there any resources you can share that may support an improved understanding of your issues (e.g. GP, Consultant formal diagnosis, NHS pages) | |
| Notes, action points and owner(s): |  |

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| --- | --- |
| 1. **My personal circumstances create the following impact(s) on me at work.**  * How does it impact on your work? * How does it affect you practically, physically, emotionally & behaviourally? * Consider the practical elements of your role that are relevant to your discussions e.g. travel, dispersed working, physical environment, workstation, etc. * Do you have an up to date personal emergency evacuation plan (PEEP)? | |
| Notes, action points and owner(s): |  |

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| 1. **Have you ever had an Occupational Health assessment?**  * If yes please share it with your line manager and identify points relevant to your discussion. * If no please discuss the need for an Occupational Health referral\*.   \*Please note: Where work place adjustments are being discussed, Occupational Health Unit and HR Advisory support may be necessary. | |
| Notes, action points and owner(s): |  |

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| --- | --- |
| 1. **Do you already have agreed reasonable** [**workplace adjustments**](http://intranet.ea.gov/peoplematters/help/50589.aspx) **in place to support you in fulfilling your role?**   Yes/No (if yes please detail in the box below, if no please move to Q5) | |
| Notes, action points and owner(s): |  |

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| --- | --- |
| 1. **Would reasonable workplace adjustments help and support you to fulfil your role? If yes, please discuss.**   (Is this based on advice from Occupational Health, GP or specialist? – please refer to question 3) | |
| Notes, action points and owner(s): | **Please note** - Line managers may need to discuss specific workplace adjustments with their manager, and/or HR before they are agreed. This is to ensure they are in line with any related policies and procedures, and to make sure they are compatible with our business needs. |

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| 1. **Sharing of Information and Storage, for example;**  * Where the document will be stored? * Who will have access to the document? * Who will the information be shared with?   (This document will not be passed on to anyone automatically, so you have control of the information and who it is passed to.) | |
| Notes, action points and owner(s): |  |

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| --- | --- |
| 1. **Agreed actions to be undertaken** | |
| **Individual** |  |
| **Line Manager** |  |
| **HR Advisory (if applicable)** |  |

**Document completion & review**

The above notes are confirmed as a full and accurate account of the discussion held. It is recommended that this document is reviewed every six months, if circumstances change or as requested by the individual.

The passport is not stored or recorded centrally, therefore it’s the individual’s responsibility to keep it safe and provide it when necessary. The current line manager should also keep a copy for their own records which will be held securely.

***I consent to my line manager keeping a copy of this record and where necessary sharing some details with relevant colleagues, such as those responsible for agreeing and implementing specific reasonable workplace adjustments.***

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| **Completed** (date): |  |
| **Review** (Please set a date of next review): |  |
| **Document owner** (print and sign name): |  |
| **Line manager** (print and sign name): |  |

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