



STAFFORDSHIRE
POLICE

Reasonable Adjustments Passport

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Produced by Staffordshire Police
for FOI 230888

Individually tailored reasonable adjustments

This 'Reasonable Adjustment Passport' (RAP) is a living record of the reasonable adjustments agreed between a disabled employee (officer or staff) and their line manager. The document can also be used as a record of the reasonable adjustments agreed between a person with a condition not covered under the Equality Act or someone with caring responsibilities. The document needs to be completed with reference to the Reasonable Adjustments Guidelines.

Agreement between	
Name	
Line Manager	

The purpose of this agreement is to:

- ensure that both parties, the individual and the employer, have an accurate record of what has been agreed
- minimise the need to re-negotiate reasonable adjustments every time the employee changes jobs, is re-located or assigned a new manager within the organisation
- identify the impact on others from the agreed adjustments
- provide employees and their line managers with the basis for discussions about reasonable adjustments at future meetings

This is a living document and should be reviewed regularly by both the employee and manager and amended as appropriate. An ideal time to do this would be during the "Check-In" and regular one-to-one sessions throughout the year. Remember, however, that expert advice from third parties, such as Occupational Health Advisers, Access to Work or IT specialists may be needed before changes can be agreed and implemented. **Managers who need help in deciding whether or not an adjustment is reasonable will find it helpful to contact their HR Officer, their Head of Department or the force's Disability and Carers Network for advice. All contact details can be found on the intranet.**

New managers of employees who have an existing RAP in place must accept the adjustments outlined in the agreement as reasonable and ensure that they continue to be implemented. The RAP may need to be reviewed and amended at a later date but this should not happen until both parties have worked together for a reasonable period of time to be able to properly assess the effectiveness of the adjustment(s). It is recommended that this should be for a minimum of three months.

As the employee the agreement allows you to:

- explain the impact of your disability/condition/caring responsibilities on you at work
- suggest adjustments that will make it easier for you to do your job
- offer further information from your doctor, specialist or other expert
- request an assessment by Occupational Health (OH), Access to Work (ATW) or another expert to identify possible reasonable adjustments that may be suitable in their specific role
- review the effectiveness of the adjustments agreed

- explain any change in your condition or circumstances
- be reassured that your manager knows what to do if you become unwell at work and who to contact if necessary
- know how and when your manager will keep in touch with you if you are absent from work because of illness or a disability related reason

As the manager the agreement allows you to:

- understand how a particular employee's disability/condition/caring responsibilities affect them at work
- explain the needs of the business within the Force
- explain the Force attendance policy and reasonable adjustments
- recognise signs that an employee might be unwell and know what the employee wants you to do in these circumstances including who to contact for help
- know how and when to stay in touch if the employee is off sick
- consider whether or not the employee needs to be referred for an assessment by Access To Work (preferred), Occupational Health or another adviser to help both parties understand what adjustments are needed
- review the effectiveness of the adjustments already agreed
- explain any change in the employer's circumstances

Reviews

The maximum period between any RAP is no longer than 12 months. It is the responsibility of the employee to ensure that reviews are carried out unless otherwise agreed.

This RAP may be reviewed and amended as necessary with the agreement of both parties:

- at any regular one-to-one meeting
- at a return to work meeting following a period of sickness absence
- at six monthly and/or annual appraisals or as agreed
- before a change of job or duties or introduction of new technology or ways of working
- before or after any change in circumstances for either party.

This document is in six parts:

- Part 1 – Employee Wellness at Work
- Part 2 – Absence from work
- Part 3 – Return to Work
- Part 4 – Declaration
- Part 5 – Emergency Contacts
- Part 6 – Managers Supplemental

Help completing the RAP

You should have a copy of the Reasonable Adjustments Guidance containing a number of flowcharts. This document will help assist you throughout this process.

We have tried to include as much guidance as we can in this document to assist both parties to complete it effectively. However, if you require any assistance completing your Reasonable Adjustments Passport, then you can contact any of the following for advice:

- HR Officer
- Unison or the Police Federation
- Disability & Carers Network
- Other Staff Associations

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Part 1 – Employee wellness at work

If you are happy to do so, please state the nature of your disability/condition/caring responsibilities and how this affects you. The more information you can volunteer will help ensure we give you the best possible support:

1.1 My Disability/Condition/Caring Responsibilities

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1.2 Is this the first time you have completed this form or is this a review of an existing one?

First Time		Review	
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1.3 If this is a review, what has changed to prompt the review?

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Thinking of your principle working environment, please consider the challenges your disability/condition/caring responsibilities may cause you in respect to the following:

1.4 My disability/condition/caring responsibilities has the following impact(s) on me at work	
Transport & parking	
Your desk environment	
Your workplace/office	
Vertical movement e.g. using stairs, lifts, lifting, carrying etc.	
Horizontal movement e.g. moving around workstation, work environment etc.	
Facilities e.g. kitchen, rest areas, toilets, clean room/space etc.	
Other locations e.g. moving/traveling between work locations	
Other physical obstacles	
Equipment	
Documents / Print e.g. size, format	
Communication and Relationships	

Awareness e.g. do you wish other colleagues to be aware of your disability/condition/caring responsibilities. If yes, what do you wish them to be told?	
Working Hours	
Other obstacles/boundaries	
Other	

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1.5 Medication (optional)

Type of medication		Frequency	Symptom	Impact if not taken
1				
2				
3				
4				
5				

If you require additional space, please continue on a blank page.

Advising what medicine you are on is voluntary

- Consider what the risks are to you in the workplace if you are unable to meet your medicine regime
- If you need a clean room then recommend this under Question 9 – Reasonable Adjustments

1.6 On a 'good day' my disability/condition/caring responsibilities has the following impact on me at work:

My Symptom		What you should notice
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		

If you require additional space, please continue on a blank page.

1.7 On a 'bad day' my disability/condition/caring responsibilities has the following impact on me at work:

My Symptom		What you should notice
1		
2		
4		
5		
6		
7		
8		

If you require additional space, please continue on a blank page.

1.8 If I need assistance to evacuate the building the following people will help me / actions will be followed

Person		Action
1		
2		

If you require assistance to evacuate the building and do not have a Personal Emergency Evacuation Plan (PEEP) in place, please contact your line manager and request a PEEP be completed ASAP.

If you have a PEEP, please provide a brief summary below.

Part 2 – Absence from Work

Keeping in touch

If you are absent from work on sick leave or for a reason relating to your disability/condition/caring responsibilities and have followed the usual procedures for notifying the organisation of your absence, you and your manager will keep in contact with each other in the following way. **Please refer to the Sickness Absence Policy found on the Policy Database for information on the procedure for reporting sickness, etc. for both individuals and line managers.**

2.1 Agreed Number of days absent before contact is made

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2.2 Who will contact whom?

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Include any alternative contact in the event the employee member is unable to contact you directly

2.3 How will contact be made?

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e.g. email, telephone, text, letter.

2.4 Frequency of contact?

Agreed No. of days		Daily		Weekly		Monthly	
e.g. preferred day, preferred time							

Unauthorised absences from work

If you are absent from work you should contact your manager as soon as possible on the first day. Absences relating to a disability should be recorded on Origin. If you have not followed usual procedures for notifying your manager that you are sick or absent for a reason relating to your disability/condition/caring responsibilities, we have agreed that you will do the following:

2.5 What we have agreed

Conversations we will have while you are on sick leave

2.6 These are the topics we have agreed we will discuss while you are absent

Examples:

- How you are feeling or What I or the force can do to help
- Current work
- Planned phased return to work and dates
- Referral to occupational health
- Sickness Absence Policy
- "My colleagues won't understand"

Part 3 - Return to work

All employees will meet with their line manager after every period of sickness absence. We will meet to review this agreement and make any necessary adjustments when you are ready to return to work after a period of sickness or disability related absence.

Items to be discussed at the return to work meeting. Please refer to the Sickness Absence Policy found on the Policy Database for details in relation to the Return to Work Process and additional forms to be completed.

3.1 These are the topics we have agreed we will discuss at your return to work meeting:

For example:

- **Current work issues.**
- **A phased return/back to work plan, including what to tell the team**
- **Assessments to review existing reasonable adjustments**
- **Any concerns from either party**

Part 4 – Managers' Supplemental

As a manager you must consider the impacts that the agreed reasonable adjustments will have on the other members of your team and those who work locally to you.

As part of the process you will need to assess whether any identified impacts are acceptable.

4.1. What are the impacts of the reasonable adjustments on other members of the team or other staff working in proximity

Are any identified impacts considered acceptable

- **Possible conflicts between the agreed adjustments and the adjustments that may already exist for other employee?**
- **Do the reasonable adjustments include changes to working practices and have an impact on the environment of other staff?**
- **Do the reasonable adjustments mean some responsibilities or duties have been transferred to other members of staff.**

4.2 Managers Notes

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Part 5 – Declaration

I will let you know if there are changes to my disability/condition/caring responsibilities which have an effect on my work and/or if the agreed adjustments are not working.

We will then meet privately to discuss any further reasonable adjustments or changes that should be made.

If you notice a change in my performance at work or feel these reasonable adjustments are not working I would be happy to meet you privately to discuss what needs to be done.

I understand that information contained within this form may at times be shared with other Departments within the Force to ensure the relevant assessments can take place and adjustments can be made. This may include Occupational Health, IT etc.

4.1 Declaration Agreement

Signature of Employee		Date	
Signature of Manager		Date	

4.2 Date of Review

Date of next review	
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Review dates should be as and required but no greater than 12 months. The employee should put an entry into their Outlook calendar one month before the review date.

Remember to ensure any updated copies of this RAP are uploaded to your personal file. If you have any concerns regarding the sharing of the information within this form, please speak to your line manager and/or HR Officer.

4.3 Has a copy of this signed agreement been placed on the employees personal file?

Yes		No		If NO, give reason	
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4.4 What supporting documents have you attached to this agreement?

Supporting Document	Date Added
Supporting documents would be PEEP's, Occupational Health Reports, Medical Reports/Assessments, Access to Work reports etc.	

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Part 6 – Record of Assessments and Recommendations

During the completion of the Reasonable Adjustments Passport, in accordance with the Flowcharts in the Workplace Adjustments Guidance, certain assessments by specific Departments will be required and referrals may need to be made. In addition, as a result of any such assessments physical equipment may be recommended. The table below allows the employee and line manager to monitor these processes. If you or your line manager needs further information, please contact your HR Officer.

6.1 Assessment History						
	Agreed Assessment	Request By	Date of Request	Date Chased	Date of Assess	Report Rec'd
1						
	Notes					
2						
	Notes					
3						
	Notes					
For auditing purposes we need to monitor how long each assessment takes to be completed. Please use this page to record the type of assessment, who is responsible and the timescales so that we can accurately monitor how long they are taking. Please allow 10 working days before chasing.						

6.2 Reasonable Adjustment Tracking Record

6.2 Reasonable Adjustment Tracking Record						
Provide a brief description of each Reasonable Adjustment recommended and by whom. Please attach relevant report to this document:		Department	Department SPOC	Date of Request	Date Request Chased	Date Request Completed
1						
	Notes					
2						
	Notes					
4						
	Notes					
5						
	Notes					

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