**Workplace Adjustment Plan **

The Workplace Adjustment Plan provides a framework within which to discuss, agree and review any support that may be required at work due to a disability or health condition. This includes visible and non-visible disability, mental health conditions, neurodivergence, fluctuating conditions and menopause transition.

A workplace adjustment is a change or support unique to your individual circumstances that will enable you to do your job such as:

* A different start and finish time
* Ways of communicating at work
* More regular breaks at work
* A specific seat at your desk
* Modifications to your workstation
* Any appointments you regularly need to attend to stay well at work

**You (the person needing adjustments) own this Plan. It should be held by yourself and your current line manager in the department you work in.**

Please complete **Section 1** of the Plan before sharing and discussing this with your line manager. Agreed adjustments and subsequent reviews should be recorded in **Section 2**. It is suggested that the line manager should complete **Section 2**. The text boxes show where to edit the Plan (these can expand to fit your answers).

**SECTION 1: About me**

**Your name:**

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**Nature and impact of disability/health condition:**

For example:

* What your symptoms are day-to-day and how you manage them.
* If you have a fluctuating condition, how often you experience issues and what, if anything, triggers them.
* Times of the day when your disability/health condition impacts you differently.
* Any work tasks/job requirements that you struggle with.
* Any diagnosis you feel would be helpful for your manager to know, for example, rheumatoid arthritis, dyslexia, cancer, menopause transition.

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**Things that support me at work:**

Include any information about support you require at work, either all the time or as conditions fluctuate. This could include:

* Equipment such as voice activated software, or noise cancelling headphones.
* A different start and finish time.
* Ways of communicating at work.
* More regular breaks at work.
* A dedicated workstation when you are on campus.
* Changes to the work environment, such as altered lighting.

It might be helpful to refer to any support you had when you were in education or a previous job and/or recommendations from other sources, such as the [University Occupational Health Service](https://www.bristol.ac.uk/safety/occupational-health/) or [Access to Work](https://www.gov.uk/access-to-work). Don’t worry if you are not sure what could support you, as you can discuss this further with your line manager and come up with ideas together.

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# **SECTION 2: Agreed adjustments**

Discuss the information provided in **Section 1** with your line manager and record agreed adjustments and responsibilities here. Focus on what is practicable, reasonable in the circumstances and likely to be effective. Detail clearly each action and who will do what. If there is uncertainty about how to take an adjustment forward, detail who will look in to this and when.

This Section should be developed within the context of [University guidance on reasonable adjustments](https://www.bristol.ac.uk/inclusion/disability/workplace-adjustments/), with specialist advice from your [HR Business Partnering Team](https://www.bristol.ac.uk/hr/contact/#HR-Operations) if required.

Record what you agree below (you can add more rows to the table if needed):

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| **Agreed adjustment** | **Actions** | **Person responsible** | **Timescale** |
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**Date adjustments were agreed:**

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**Will details of the adjustments in Section 2 need to be shared with others**? Yes [ ]  No [ ]

**If yes, please provide further details of how you have agreed to share this:**

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# **Reviewing the Plan**

The Workplace Adjustment Plan should be periodically reviewed to ensure that the support is having the desired impact. Reviews can also be arranged by either your, or your line manager’s, request for reasons such as:

* Changes to your role.
* Changes to your work location.
* Changes required due to the progressive nature of the disability or health condition.
* Concerns from you or your line manager that the adjustments are not effective.

**Date of first review:**

You and your line manager should set a date for the first time you will review this Plan and record this below.

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**Record of reviews:**

This should be used to create a record of reviews and any changes made.

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| **Date of review** | **Review participants** | **Summary of discussion** | **Date set for next review** |
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**Confirming agreement to the Plan**

It is vital that this plan is agreed by both you and your line manager. You should each confirm this by entering your name and the date in the boxes below.

**Name of person needing adjustments: Date:**

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**Name of line manager: Date:**

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# **Data and Privacy**

The information contained in this document is for yours and your line manager’s use to discuss, agree and review any support that may be required at work due to a disability or health condition. You do not have to provide this information if you do not wish to do so. You and your line manager will have access to the information. It will not be shared with anyone else, although you may agree that you will share details of reasonable adjustments with other people. The plan will be retained by your manager until you next review it, until you agree it is no longer needed, or you leave your role.

Health information is ‘special category data’ under the General Data Protection Regulation 2018 (GDPR) and managers must take additional precautions when recording and storing this information. The line manager and employee should retain a password protected electronic copy of the Workplace Adjustment Plan.

For further information, please see the University’s [staff fair processing notice](https://www.bristol.ac.uk/secretary/data-protection/policy/staff-processing-notice/).