



# Workplace Adjustment Passport Example— long COVID

## Personal When Completed

The purpose of the passport is to record all your workplace adjustment requirements that are agreed with your line manager. Sharing and discussing your passport regularly with your line manager can enable them to provide you with tailored support and appropriate workplace adjustments.

Please complete this passport by providing any information that may help your line manager to understand the impact your disability, health condition or gender reassignment has on your life. Please note you do not need to provide any information you are not comfortable sharing.

This passport will belong to you, and can be shared with line managers in your current/new department to help facilitate any workplace adjustments you may require. This passport should be reviewed annually with your line manager but may be reviewed more frequently due to changes in your health circumstances/environment.

Name:
Line Manager:
Department:



### Details Of Your Disability Or Workplace Barriers That You Currently Experience:

Please provide a description of your disability or any workplace barriers that you currently experience that may impact your wellbeing or work. Please do not provide any information that you do not feel comfortable discussing with your line manager.

My GP has diagnosed me with long Covid which is affecting me in a number of ways and causing me to remain absent from work. My symptoms include fatigue, shortness of breath and brain fog. To support my recovery, my GP has referred me to a long Covid recovery clinic for advice and support.

The impact of the fatigue from long Covid is making me extremely tired. I want to return to work but I know that I will be unable to return on a full-time basis but feel that I could work some reduced hours, which would increase over the next few weeks. Due to my shortness of breath, it would also be helpful if I could have a desk with other team colleagues that is near the lift to reduce the amount of walking I need to do.

The brain fog means that I will need more written information rather than verbal updates about work and the tasks I need to deliver.

My appointments at the long Covid Recovery Clinic are at 2pm every Thursday for 6 weeks. To enable me to attend these appointments I would like to avoid working Thursdays for 6 weeks.

To support you in your role, please provide any information relating to workspace, working hours, communication, equipment and technology that may be impacted by your disability, health condition or circumstances. Please do not provide any information that you do not feel comfortable discussing with your line manager.

### Workspace

Do you require any adjustments to your workspace to support you?

YES

If yes, please provide further details. Information may include:

I would like to have a desk near the lift.



## Working Hours

Do you require any adjustments to your working hours to support you?

YES

If yes, please provide further details. Information may include:

I would like a phased return to work with a later start in the morning and earlier finish to avoid the rush hour. This will ensure that I get a seat on the bus.

I would like to avoid working Thursdays for six weeks to attend my clinic appointments.

## Communication

Do you have a preferred method of communication that may support you/any methods of communication that you may find challenging/

YES

If yes, please provide further details. Information may include:

I would like to receive more written communications about work rather than relying on verbal updates.

I will need to have breaks between meetings to allow me to time to recharge.

## Equipment And Technology

Do you require any specialist equipment or technology to be provided to support you in your role?

NO

If yes, please provide further details.



### Additional Information

Please provide any additional information that may not have been covered in the sections above

My GP has advised me that my condition could fluctuate over the next few months, which may mean that arrangements I have over my working hours, could need changing at short notice.

I will ensure that I keep in touch and let you know how I am feeling and if I need additional support.

### Summary Of Agreed Workplace Adjustments:

Workplace Adjustment	Date Identified	Date Implemented
Phased return to work over six weeks, gradually increasing hours. No attendance on a Thursday. Working hours to be arranged with a start time no earlier than 10.30am with the latest finish to be 2.30pm. This arrangement will be regularly reviewed.	1 September	12 September
Moving to a desk near the lift.	1 September	12 September
Written updates from meetings and work tasks/objectives.	1 September	Ongoing
Breaks between meetings.	1 September	Ongoing

The following table is used to keep a written record of when the passport is reviewed and/ or amended. **The passport should be reviewed at least annually.**



<b>Review Date (DD/MM/YYYY)</b>	<b>Amendments Made</b>	<b>Reason For Amendment</b>	<b>Employee Signature</b>	<b>Line Manager Signature</b>
19 September and weekly thereafter for a minimum of six weeks to review working hours and other adjustments.				

<b>Employee Signature And Date:</b>	<b>Line Manager Signature And Date:</b>
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