

DISABILITY PASSPORT GUIDANCE

Contents

1. Introduction.....	2
2. Social model of disability.....	2
3. What is a disability passport?	2
4. Reasonable adjustments	3
5. The disability passport meeting.....	4
6. Agreeing the passport.....	5
Further support and associated policies, procedures and guidance.....	6
Appendix 1 - Disability Passport	7

1. Introduction

- 1.1 Keele University is committed to creating an inclusive environment that promotes equity across our University community and that enables colleagues who are disabled or living with a long-term health condition to be provided with reasonable adjustments that support them with their work commitments and career development.
- 1.2 This guide is for disabled employees and their line managers. Reasonable adjustments work best when accompanied by a supportive, positive attitude from colleagues and managers. For the Disability Passport meeting to go well, staff must feel able to be open and honest about their disability or health condition and without fear of detriment.
- 1.3 Employees also play a role in educating their line manager and colleagues about their condition. They should expect to be treated with dignity and respect but should not expect people to “just know” every aspect of their condition or what will help. Reasonable adjustments are often individual and therefore it is necessary to understand from the employee, what their experience of their disability is in the workplace and for employees to suggest adaptations wherever possible.
- 1.4 It is hoped that completing the passport together is an opportunity to begin or build upon a relationship of mutual trust and respect. It also allows colleagues to feel valued and gives them a platform to speak frankly about their situation. In addition, line managers have a chance to ask questions and gain an understanding of the colleagues’ impairment in a safe environment.

2. Social model of disability

- 2.1 Under the social model, individuals are disabled by environments and attitudes – not by their health condition or impairment. This is different to the approach traditionally used in the medical profession, where the individual’s impairment is the root cause of their problems.
- 2.2 Whereas some people might say that an individual “has a disability” under the social model we would say that they “are disabled” – by physical and attitudinal barriers – and the focus is therefore on removing these barriers. The disability passport conversation therefore facilitates a move towards a culture wherein the social model prevails.

3. What is a disability passport?

- 3.1 A Disability Passport (Appendix 1) is a document completed by a colleague who is disabled or has a long-term health condition and their line manager. It provides a framework within which discussion about a colleague’s health and what changes can be made at work to support them can take place.

- 3.2 Once adjustments have been agreed the document is signed by both parties to indicate that the adjustments will be made and upheld. This means that if the employee's line manager changes, they should not have to explain their requirements again in detail and that the current arrangements will not be withdrawn. If employee circumstances or line management changes, the sharing information contained within a passport is the responsibility of the employee. This is to ensure confidentiality regarding disability disclosure is maintained.
- 3.3 During the conversation discussion should take place and agreement reached regarding how often the passport is to be reviewed to check that adaptations remain appropriate and can be adjusted if the employee's needs or their role has changed. The review will also check that the adjustments are still reasonable and in line with the colleague's University role requirements and remain effective in enabling the employee to fulfil their duties.
- 3.4 The passport could also be used to document:
- A procedure, if the employee becomes unwell, particularly in the case of mental ill health, including whom to contact and when.
 - Behaviours to look out for that may indicate that health is declining, or an episode of illness is beginning.
 - Things that can trigger or exacerbate the disability or condition and how these can be minimised.
 - Recommendations from occupational health (if applicable)
4. Reasonable adjustments
- 4.1 The duty to make "reasonable adjustments" for people who are disabled is governed by the Equality Act 2010.
- 4.2 Someone is disabled when they have a physical or mental impairment that has a 'substantial' and 'long-term' negative effect on their ability to do normal daily activities.
- 4.3 Reasonable adjustments are anything that removes barriers to allow disabled people the best opportunity to do their jobs. Managers should objectively consider what is "reasonable" in terms of the role, effectiveness, practicability, impact on others, and resources of the University (not just the School or Directorate) when deciding what adjustments can be made. Further advice may be sought from HR, the Equity, Diversity and Inclusion (EDI) team, or Occupational Health if required. Health & Safety do not advise on reasonable adjustments. However, where adjustments may cross over into health and safety regulations or HSE guidance, such as DSE, for example, then health & safety can give advice on these specifics.
- 4.5 Adjustments may include, but are not limited to:

- Equipment - such as voice activated software, an ergonomic mouse, a specialist chair, footrest, fridge to store medication, space/water for an assistance dog.
- Changes to working patterns - such as start and finish times or break times, working from home.
- Changes to the workplace - such as automatic doors, altered lighting, hearing loops, seating next to a door or natural light.
- Training – on specialist equipment or to educate colleagues and change attitudes.
- Redeployment – if an employee can't continue in their current role following exploration of reasonable adjustments, redeployment options into another more suitable available role will be considered. Further information can be found in the University's [Redeployment Procedure](#).

5. The disability passport meeting

- 5.1 The disability passport meeting should be a positive meeting. It is not a disciplinary or formal performance management process and reassurance should be given if there are any concerns about either the meeting itself or completing the disability passport.
- 5.2 The meeting should take place in a confidential space that is free from distractions, and with sufficient time allowed to engage in a meaningful conversation.
- 5.3 Should they so wish, colleagues may be accompanied at the meeting by a Trade Union representative or work colleague. If the colleague wishes for their support worker to attend the meeting this should also be accommodated.
- 5.4 The meeting should be arranged with sufficient time for the colleague to make any preparations and arrangements to be accompanied. If the colleague has not been seen by Occupational Health and this would be helpful, this should be arranged, and the report obtained before the meeting takes place.
- 5.5 Openness is encouraged to facilitate the best outcome, and the colleague is encouraged to bring notes and any other records that would be helpful to the discussion. However, it is acknowledged that for some there may still be a fear of stigma associated with sharing a disability and **it is entirely up to the colleague how much information they wish to declare about their impairment or condition**. Although it should be communicated that the more transparent a colleague is able to be, the more adequate the conversation and agreed upon adjustment can be.

- 5.6 Colleagues should never feel pressure to declare medical information or other details of their condition they wish to keep private, and this should not prevent a conversation focussing on the required adjustments from taking place.
- 5.7 The manager should encourage the colleague to talk about their situation in their own words and prompt if they need clarification or if important elements have not been covered. Everyone has different ways of referring to their circumstances and it is good practice to use their preferred terms. The manager should reassure the colleague that they are not there to make assumptions, but to learn about how their condition presents and the best way to adjust their working environment to ensure they are able to perform and so questions asked are to gain an understanding within this context only.
- 5.8 Although the meeting is focussed on work, it may touch on other areas that the employee wishes to keep private or finds upsetting. It is never appropriate to force an issue, but if it is important and relevant, a further meeting may need to be arranged to give the colleague time to prepare.
- 5.9 In preparing for the meeting colleagues may wish to consider the following:
- What their symptoms are day to day and how they manage them.
 - If they have a fluctuating condition, how often they have episodes and what, if anything, triggers them.
 - Any existing aids or equipment e.g. parking on campus, walking stick.
 - How their health issue affects their mood and ability to concentrate.
 - Any side effects of treatments.
 - How their existing work environment affects their performance (positively and negatively).

6. Agreeing the passport

- 6.1 Try to avoid the final version of the document being handwritten. The final version should be shared with the employee for their records. Any handwritten or digital drafts should be shredded/destroyed via confidential waste.
- 6.2 The document should be reviewed by the employee and any amendments sent back to the line manager for agreement.
- 6.3 All adjustments must be identified as temporary (with an end date) or permanent.
- 6.4 If an adjustment cannot be implemented, the reasons for this will be discussed with the employee.
- 6.5 Both parties will sign the document and set a review date. This is an opportunity to check the progress of implementing adjustments and follow up if required. It is

also an opportunity to assess the effectiveness of adjustments once in place. Adjustments that are not working should be removed and other options considered.

- 6.6 A copy of the completed and signed passport should be forwarded to the HR employee relations team to be kept on the employee's personal file and a copy kept by the line manager (stored securely so that other people do not have access) and the individual.
- 6.7 The passport should be reviewed on an annual basis or before if circumstances change.
- 6.8 If there are any concerns about agreement or implementation of the adjustments further advice and support can be sought from the HR employee relations team or EDI team. [Human Resources - Intranet - Home](#)

Further support and associated policies, procedures and guidance

[Staff Sickness Absence Policy and Procedure - Keele University](#)

[Supporting Attendance Policy - Operational Staff - Keele University](#)

[Redeployment Procedure - Keele University](#)

[Link to Disability guidance](#)

Appendix 1 - Disability Passport

Sensitive & Confidential

Employee Name	Click or tap here to enter text.		
School/Directorate	Click or tap here to enter text.		
Job Title	Click or tap here to enter text.		
Date of Meeting	Click or tap to enter a date.		
Line Manager and names of others at the meeting	Click or tap here to enter text.		
Is this a review of an existing passport	Choose an item.	Date of original passport	Click or tap to enter a date.

Nature of disability (It is for the employee to decide how much information they wish to declare about their impairment or condition)
Occupational Health Recommendations (If applicable)
Click or tap here to enter text.
Adjustments you think would benefit you at work See clause 4.5 above. Consider equipment, working patterns, changes to the workplace, training, redeployment etc
Click or tap here to enter text.
Sharing information with your colleagues (What information you want to share with colleagues and how you would like it shared)
Click or tap here to enter text.
If applicable: Behaviours that indicate your health is declining or an episode of illness is commencing

Click or tap here to enter text.

If applicable: Details of person to contact due to concerns about a deterioration in your mental/ physical health (Name, relationship, and telephone number)

Click or tap here to enter text.

Additional information not covered elsewhere

Agreed adjustments and actions (additional rows to be added as required)

Action	Temporary/ Permanent	Date	Responsibility
Click or tap here to enter text.	Choose an item.	Click or tap to enter a date.	Click or tap here to enter text.
Click or tap here to enter text.	Choose an item.	Click or tap to enter a date.	Click or tap here to enter text.
Click or tap here to enter text.	Choose an item.	Click or tap to enter a date.	Click or tap here to enter text.
Click or tap here to enter text.	Choose an item.	Click or tap to enter a date.	Click or tap here to enter text.
Click or tap here to enter text.	Choose an item.	Click or tap to enter a date.	Click or tap here to enter text.
Click or tap here to enter text.	Choose an item.	Click or tap to enter a date.	Click or tap here to enter text.

Review Date:

Click or tap to enter a date.

Employee Signature:

Date:

Click or tap to enter a date.

Manager Signature:

Date:

Click or tap to enter a date.