**Well-Being Action Plan**

This is to be used by the line manager to record their discussion and agreed actions, with an employee, following ill health or as part of stress management. Please contact your HR Adviser for support in developing this plan or for guidance on putting reasonable adjustments into place.

**Section 1 – Employee details**

|  |  |  |  |
| --- | --- | --- | --- |
| **Employee Name** |  | **Date** |  |
| **Job Title** |  | **Manager’s Name** |  |

**Section 2 – Record of discussion and action points**

Discussions points listed below might consider aspects such as: work environment (e.g. desk adjustment or technical equipment/aids), phased return or use/frequency of breaks, workload management (e.g. temporary adjustment to duties), and training needs etc.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Discussion Points** | **Proposed Support/Actions** | **Action owner** | **Implementation Date** | **Review Date** |
|  |  |  |  |  |
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**Section 3 – Phased return to work schedule**

This is to be used where a phased return to work has been agreed, to outline the hours of work and activities to undertake each week. Please note a phased return consisting of reduced hours should be covered by a fit note.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Week Commencing** |  | **Monday** | **Tuesday** | **Wednesday** | **Thursday** | **Friday** |
|  | **Day Length** |  |  |  |  |  |
| **Activity** |  |  |  |  |  |
|  | **Day length** |  |  |  |  |  |
| **Activity** |  |  |  |  |  |
|  | **Day Length** |  |  |  |  |  |
| **Activity** |  |  |  |  |  |
|  | **Day length** |  |  |  |  |  |
| **Activity** |  |  |  |  |  |
|  | **Day Length** |  |  |  |  |  |
| **Activity** |  |  |  |  |  |
|  | **Day Length** |  |  |  |  |  |
| **Activity** |  |  |  |  |  |

**Section 4 – Employee and Manager confirmation**

|  |  |
| --- | --- |
| **Employee’s signature** |  |
| **Line manager’s signature** |  |
| **Date** |  |

**What to do next**

* A copy of the completed form should be offered to the employee
* The completed form should then be stored securely with the employee’s departmental file