



CNWL Employment Services

Form 6

In Work Support Plan

Principals we follow:

- Co-produced with the individual with input from the clinical team and employer/personal networks as appropriate
- An emphasis on working with all parties to support the individual to develop a range of self-management strategies, enabling them to start and sustain employment
- Will change over time, as and when circumstances change
- Is a live document, reviewed and updated over time

| | |
|--|----------------------------|
| Client Name: | Company Name: |
| Address: | Address: |
| Tel/ Mob: | Tel/Mob: |
| Email: | Email: |
| Emergency Contact details: | Manager/Supervisor: |
| Start Date: | |
| Working week pattern (if applicable) (Please state if these are planned to change throughout) | Times: |
| Monday | |
| Tuesday | |
| Wednesday | |
| Thursday | |
| Friday | |
| Saturday | |

| | |
|---|-----------|
| Sunday | |
| Has surviving and Thriving Booklet been discussed? Yes | No |

There are 4 key areas for the In Work Support Plan to consider, each may require input from the client, ES, clinical team, employer and personal networks, and will change over time.

| | |
|--|--|
| <p>1. Preparing for the return to work date Prompts to consider: Benefits, childcare, travel to work, budgeting, housing issues, negotiating any reasonable adjustments, clothes for work, managing personal information in relation to discussions with the employer/line manager/colleagues, negotiating reasonable adjustments.</p> | <p>2. MDT Support – before the return to work and afterwards Prompts to consider: Medication reviews, symptom management strategies, managing anxieties about going back to work, managing any sleep issues, depot clinics/ other medication, legal restrictions, managing risk and safety issues and any physical health issues.</p> |
| <p>3. Managing self at work Prompts to consider: Managing health at work (physical and mental), cognitive/memory, mood and energy management, sleep, relaxation and work/life balance, managing the social demands of the workplace, dealing with conflict, taking instructions, dealing with change, time management, organizational skill, Surviving and Thriving Plan.</p> | <p>4. Employer support – both in helping the individual, but also support required by the employer Prompts to consider: Training, induction, buddy system, reasonable adjustments, induction, workload management, line management support, formal reviews and informal support.</p> |

In work Action Points

| Objective | Strategies/ Responsibility for each objective | Date Set & Achieved | Do you wish this information to be shared with the employer? |
|-----------|---|---------------------|--|
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CNWL Employment Services

Consent form 3

I give my consent for my Employment Specialist to liaise with my employer for the purpose of in work support **YES/ NO**

State name of contact if applicable

Employment Advance Statement

I agree for my Employment Specialist to contact my employer in the event that I become unwell, if I do not have capacity to contact them myself? **YES/ NO**

If yes, what would you like your Employment Specialist to say to your employer?

.....
.....
.....
.....

If no, then who would you like to contact your employer on your behalf? (i.e. family member)

.....

I agree for my Employment Specialist to maintain communication with the person nominated above?

YES/NO

Client Signature:

Date:

ES Signature:

Date: