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Supporting staff with Endometriosis and Chronic Pelvic Pain in the workplace

A Toolkit for Supervisors

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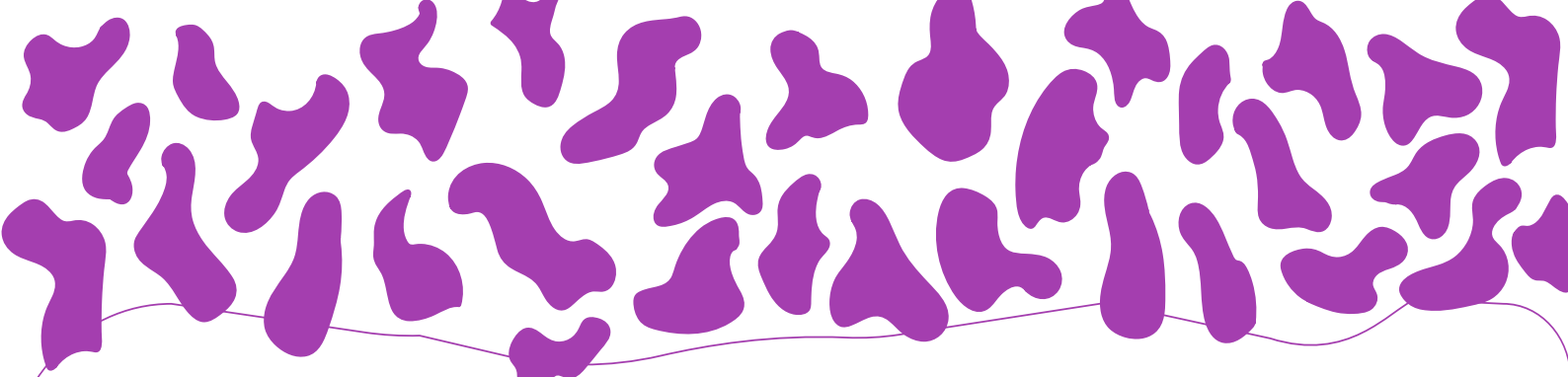
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Introduction

University

practices that promote equal opportunity in employment and education while delivering the best health, safety, and wellbeing outcomes. This includes providing support for employees with a diagnosis of chronic pelvic pain and related chronic illnesses such as (but not limited to) endometriosis, adenomyosis, and polycystic ovarian syndrome

Why have a toolkit for endometriosis and chronic pelvic pain?

This toolkit was developed to enable people with endometriosis and chronic pelvic pain to engage fully and productively in work while also supporting their own wellbeing.

- **one in ten** people with endometriosis will lose their employment due to managing the disease.
- **one in three** will be overlooked for a promotion.
- **70%** need to take unpaid time off work to manage symptoms.

Our recent research demonstrated those with endometriosis who gain and keep jobs attribute their success to flexible and reasonable workplaces, understanding and empathic managers and colleagues.

These employees are significantly more productive and take fewer sick days.

This toolkit is a practical resource to assist supervisors on how best to support staff with chronic pelvic pain and endometriosis in the workplace. This initiative is grounded in evidence that has demonstrated improvement in productivity and wellbeing for staff and their workplaces.

The intention of this toolkit is to meet the needs of the employer and support employees with endometriosis. The proposed guidelines and processes are to complement existing internal policies; and introduce new tools, language, and education specific to people with endometriosis and chronic pelvic pain living and working at University.

The Toolkit for Supervisors is underpinned by the:

- [Disability Discrimination Act 1992 \(Cth\)](#) (DD Act)
- [Fair Work Act 2009](#) (Cth)
- [Workplace Gender Equality Act 2012](#)
- [Work Health and Safety Act 2011 \(NSW\)](#)

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Why does [university] consider this condition fall within disability?

University recognises chronic pelvic pain (CPP) and endometriosis as a disability under the DD Act for the purposes of protection against unlawful discrimination.

It is important to note that the meaning of disability in the DD Act is not confined to the present existence of a disability, but extends to disabilities that previously existed, may exist in the future, or is imputed to the person. Applying this to CPP and endometriosis, the definition of disability extends to where a person is not presently experiencing the symptoms of CPP/endometriosis, if they had CPP/endometriosis symptoms in the past, or if they are believed to have CPP/endometriosis by a GP or Health practitioner.

Employers are generally prohibited under the DD Act from engaging in direct or indirect discrimination against employees (including prospective employees) because of the employee's disability. Workplace discrimination under the DD Act includes a failure to make reasonable adjustments to the working arrangements of the employee with the disability, where the failure to make those adjustments would result in the employee with the disability being treated less favourably than a person without the disability in circumstances not materially different.

Such reasonable adjustments could include, for instance, access to flexible work, access to appropriate workplace amenities or modification of specific task demands. In addition, under the Fair Work Act 2009 (Cth) a person with a disability may be eligible to request a flexible work arrangement from their employer.

University has used the above legislation to make internal policies which should be read with this toolkit, including:

- [Disability Policy](#)
- [Health Safety and Wellbeing Policy](#)
- [Gender Equity Policy](#)
- [Equal Opportunity and Diversity Policy](#)
- [Workplace Flexibility Policy](#) and other flexible work options as set out in the University's [Flexible Working Options web page](#)
- Processes set out in the [Workplace Reasonable Adjustment plans \(Employee\)](#) and [Academic Reasonable Adjustment Plans \(Student\)](#).

Definitions & Prevalence



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Chronic Pelvic Pain

Chronic pelvic pain (CPP) is recognised as one of the top five health issues affecting girls, women and those presumed female at birth in Australia, and is highlighted as a [National Women's Health Priority in a Federal government report](#).

Chronic pelvic pain is characterized by persistent pain lasting longer than 6 months or recurrent episodes of abdominal/pelvic pain, hypersensitivity or discomfort often associated with elimination changes, and sexual dysfunction often in the absence of organic etiology. Some people have no demonstrated pathology despite detailed surgical investigation or imaging, leading to a diagnosis of Chronic Pelvic Pain Syndrome.

There are a variety of causes for CPP including (but not limited to):

- Endometriosis
- Adenomyosis
- Polycystic ovary syndrome (PCOS)
- Chronic infection
- Vulvodynia
- Irritable bowel syndrome or Bladder pain syndrome.

Endometriosis

Endometriosis is the most common cause of CPP, accounting for 24-40% of all CPP diagnoses and has a prevalence between 11-14% in Australia.

Diagnosis definition of Endometriosis:

A surgical diagnosis is made through laparoscopic identification of endometriotic lesions with histological verification.


A clinical diagnosis is made when a GP, gynaecologist or other health professional has identified symptoms of endometriosis.

An imaging diagnosis is when clinicians use imaging [Transvaginal ultrasound (TVUS) or Magnetic Resonance imaging (MRI)] in the diagnostic work-up for endometriosis.



¹ Doggweiler R, Whitmore KE, Meijink JM, Drake MJ, Frawley H, Nordling J, Hanno P, Fraser MO, Homma Y, Garrido G, Gomes MJ, Elneil S, van de Merwe JP, Lin ATL, Tomoe H. A standard for terminology in chronic pelvic pain syndromes: A report from the chronic pelvic pain working group of the International Continence Society. *Neurourol Urodyn* 2017, 4:984-1008.

² See ESHRE Guideline Endometriosis for more information around diagnosis and caring for people with endometriosis.



**How CPP and
endometriosis
symptoms can impact
someone at work**

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It feels like my internal organs are **wrapped in barbed-wire**, then squeezed



Living with CPP and endometriosis can feel like being on a rollercoaster, especially when it comes to managing symptoms while juggling work responsibilities. The unpredictable nature of pain and fatigue associated with endometriosis can significantly affect someone's ability to thrive in the workplace.

Persistent pain can be debilitating, and makes it difficult to concentrate and stay focused on tasks. The pain can range from a dull ache to extremely sharp cramps, often radiating to other areas of the body such as the lower back or thighs. This can make it challenging to sit for long periods or engage in physically demanding work.

Fatigue, another common symptom, adds an extra layer of difficulty. Fatigue can be overwhelming, making it hard to summon the energy needed to perform tasks efficiently. Simple activities that others may take for granted can become daunting hurdles for someone battling the constant drain of fatigue.

The unpredictability of symptoms can also create anxiety and stress for individuals with endometriosis and chronic pelvic pain. Fear of sudden pain flares or debilitating fatigue can impact their mental well-being, affecting their confidence and ability to handle work pressures effectively.

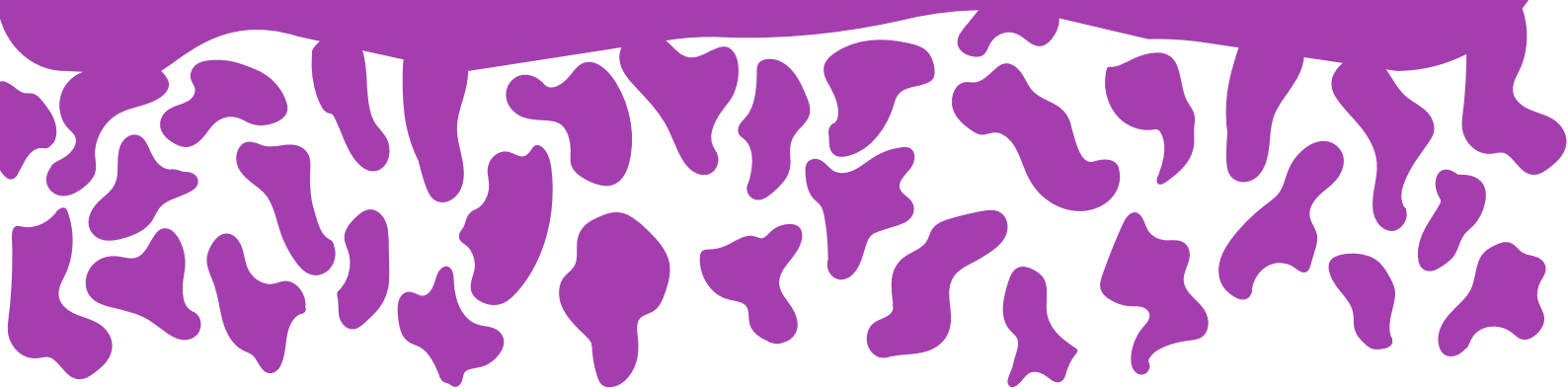
These symptoms can result in increased absenteeism and reduced productivity. Missing workdays due to severe pain or overwhelming fatigue becomes a frustrating reality for many individuals with endometriosis. This can lead to feelings of guilt, as they strive to balance their health needs with their professional responsibilities.

“I want to work”, and trying to ‘push through’.

Samantha, Senior Lecturer

I love my job and I am passionate about my role teaching students. But if I take on too much and don't build rest into my week and my day then my symptoms can become more difficult to manage. Sometimes it can be difficult with teaching as it's really frowned upon to cancel a class, but I'm the only academic teaching my subject so I don't have any back up if I can't make the class. I don't want my students, colleagues or supervisor to think I'm lazy or not up to the task, because I am up to it. But, I just need to plan carefully to be sure that I don't overextend myself and then pay for it later and need even more time off. People think if you're not at work you're slacking-off and having a great time, but it's not a great time, I would rather be at work than at home sick. The mental load of a chronic illness is a lot and I don't think people appreciate that side of things.

How Supervisors can improve participation in the workplace



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When unsupported at work, people with endometriosis often end-up taking more sick leave for symptom-management, doctor's appointments, or surgeries. This can often negatively impact with their careers, pushing them into part-time work. But this also has negative consequences for the workplace - it's not cheap for a company to cover sick leave or hire and train new staff.

But the good news is that recent studies show that relatively simple and low-cost accommodations, like flexibility, and a supportive culture have been shown to decrease the number of sick days and improve productivity for people with endometriosis.

How a supportive environment can positively impact work

Farah, Professional full-time staff

I work in a really supportive team with a great boss who just gets it. I know how lucky I am, as even though all employees are technically employed under the same policy framework and working conditions, I've heard about colleagues in other teams being treated in a less supportive way who feel resentment from colleagues or supervisors if they need flexibility. In my team I know my boss and my colleagues trust that I'll get the work done and there's never any eye-rolling or sideways glance if I say I need to work from home or start later or take a day off. And I do always get the work done. My working conditions aren't a stress. It's hugely helpful to my ability to manage my symptoms and maintain my career that it's not a source of angst, or something I need to put a lot of emotional energy into managing other people's perceptions or misinterpretations of me working from home. If I didn't have access to flexible working conditions, I wouldn't be able to be work as much as I do, which would really hurt me financially.

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Tips for cultivating a supportive work culture

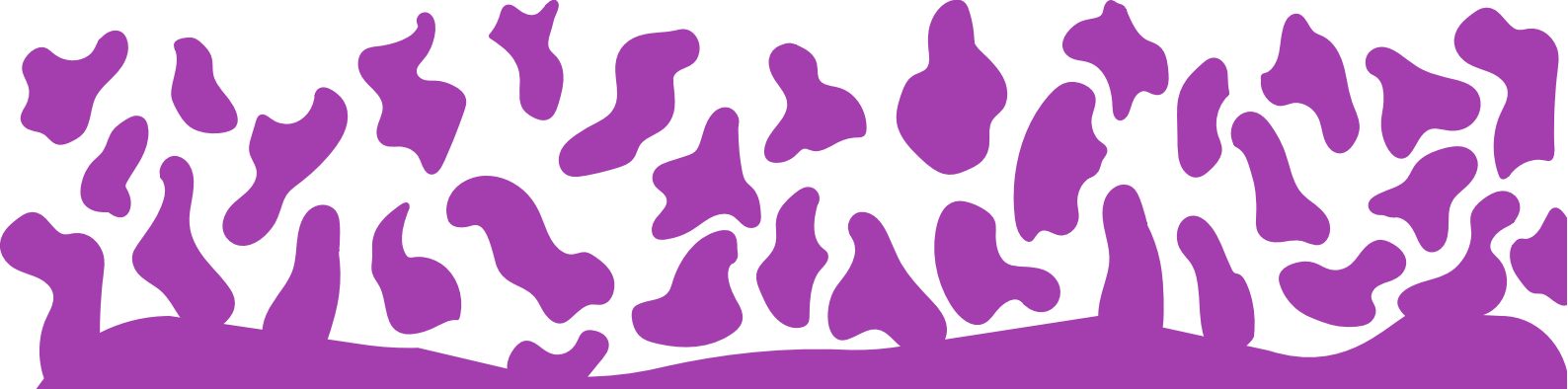
- CPP and endometriosis is not experienced the same.
- Symptoms caused by CPP and endometriosis can vary person to person and can fluctuate across one's lifespan.
- Create a culture which is open to listening and understanding people's experiences of with the disease.

Educate your team:

- Each School/Institute/Division will have a Chronic Pelvic Pain Coordinator
- Promote resources and education from your Chronic Pelvic Pain Coordinator to ensure all employees in your team understand endometriosis, its impacts on work, and are aware of the CPP and endometriosis guidelines.

Cultivating understanding and empathy among colleagues and supervisors can foster a supportive atmosphere where people feel comfortable discussing their needs and seeking necessary accommodations.

With appropriate support, understanding, and reasonable adjustments, they can contribute their skills and talents and thrive in the workplace while navigating the ups and downs of their symptoms.



Disclosure

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It's a personal Decision

Some people choose to disclose their disability to their supervisor/manager so that they may receive adjustments to enable them to undertake the tasks associated with employment. Others may choose to disclose in order to avoid misunderstanding or labelling by others, while some people may use disclosure to create an opportunity for educating others about CPP and endometriosis and its impact. Disclosure to a supervisor or manager, when safe to do so, can help foster trust through transparency. Disclosure can also provide an opportunity to find out about other related services, support, research and other information.

However, many people are wary of disclosing their CPP or endometriosis, believing they may be discriminated against, or denied opportunities, such as a job promotion they really want or being denied certain entitlements. Some people fear their CPP or endometriosis may provoke curiosity or unnecessary concern in others.

Responding to Disclosure

In accordance with University's disability policy and associated legislature, there is no legal obligation for an employee to disclose their CPP and/or endometriosis to an employer except where it is likely to affect their performance to meet the core requirements of the job and/or poses a serious and/or imminent risk. Once a disclosure has been made to you as a supervisor, you should offer to consider work-related adjustments to support the person with a CPP and/or endometriosis. It is important to remember that a team member with CPP and/or endometriosis can usually successfully perform their job with appropriate work-related adjustments.

At University, there is the opportunity for staff to choose to disclose information regarding their CPP or endometriosis to the Health & Safety Unit. Here, the information gained will be kept confidential in accordance to the Chronic Pelvic Pain and Endometriosis Guidelines and Disability Policy. Also the Chronic Pelvic Pain Coordinator at each School/Institute/Division can help inform supervisors and staff on support available for staff with chronic pelvic pain and/or endometriosis.

New staff at University have the opportunity to disclose their information during the interview process or onboarding paperwork. Also, new staff are able to complete Equal Employment Opportunity Survey if the staff member is not wanting to disclose to Human Resources but can be flagged with the Health & Safety Unit if they require assistance.

Remember, sometimes, staff disclose their CPP and/or endometriosis even though they don't require any specific adjustments at the time. This may be done to alert you to the possibility of future requirements, or to illustrate their resourcefulness or adaptability. It's important to ask whether the team member needs any support or adjustments and to be open to what is being requested of you, if anything. This is a critical opportunity to speak openly with the staff member and listen carefully to the information shared with you. Avoid making assumptions about the person's CPP and/or endometriosis and how it impacts their work life. If you feel unsure about how to support a staff member in response to a disclosure, the Chronic Pelvic Pain Coordinator and/or HR/WHS can help.

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The Decision not to Disclose

The decision to disclose CPP and/or endometriosis in the workplace is a highly personal matter. Disclosure is an individual decision, depending on the circumstances, the context and how comfortable the person feels about it. A staff member with CPP and/or endometriosis obliged to disclose to their employer only if it will affect their ability to perform the duties and/or there is a serious and/or imminent risk. But, disclosing CPP and/or endometriosis a critical step in receiving adjustments and support.

It is important to remember that at University, a staff member can confidentially disclose details of their CPP and/or endometriosis directly to the HR team. During this process the details of the person's diagnosis is kept confidential and only information about the workplace adjustments recommended by a health practitioner are shared with the workplace supervisor.

Generally, when, how and if disclosure is to occur is affected by factors such as:

- The type of chronic pelvic pain;
- The type of role and workplace culture;
- The need for workplace adjustments or supports;
- Whether the CPP and/or endometriosis is apparent or not;
- How the disclosure might affect the supervisor's perception of the person's ability to perform particular duties;
- The demonstrated attitudes of the supervisor and colleagues to people with CPP and/or endometriosis and broader equity, diversity and inclusion issues.

Challenges and psychological load in deciding to disclose

Anna, Research Fellow

I didn't want to tell my boss as I didn't want them to overlook me for opportunities. I like my boss and we have a good relationship, so I don't think they would exclude me from opportunities deliberately. But I worry that they might dismiss me for opportunities meaning to help me or do me a favour. I keep my pain, my difficulties, my struggles hidden behind a competent, "everything is okay, nothing to see here" smile so no-one thinks that I can't do my job properly. Because I can. But it takes a toll. I've disclosed at other jobs and it was an awkward conversation and my opportunities seemed to evaporate. But it's hard to know if my disclosure was why, or if something else was going on. As endometriosis has gained more visibility in the media I do waver and wonder if it might be safe for me to disclose now and if that would make my life easier. I imagine having that conversation and how it would be and I'm just too unsure of how it would be received, or how much I would want to say and then how they would respond. Thinking about all of that, I'm just not convinced it's safe yet.

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Why Employees Choose Not to Disclose

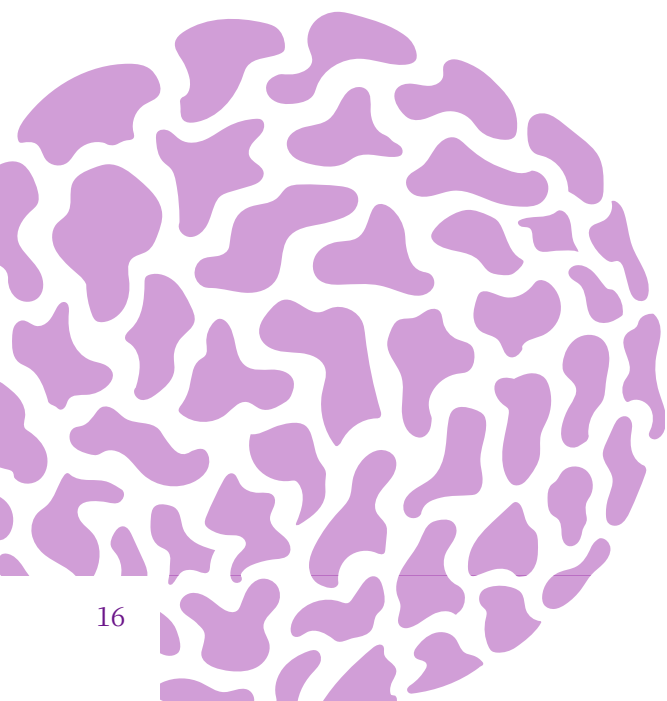
Employees may choose not to disclose information regarding their CPP/Endometriosis for a range of reasons such as:

- Fear that disclosure would result in discrimination or being denied opportunities such as a job promotion.
- Experiences of being discriminated against in past positions.
- Fear that the employer would focus on their disabilities rather than their abilities.
- Belief that their employer may have pre-set and unrealistic attitudes about people with CPP/Endometriosis.
- Fear of being treated differently compared to other employees.
- The person may not be accepting of their own CPP/Endometriosis.
- They do not require adjustments to work, or the symptoms caused by CPP/Endometriosis would not impact their performance.
- They have developed effective strategies in the workplace and therefore do not need to disclose their CPP/Endometriosis.

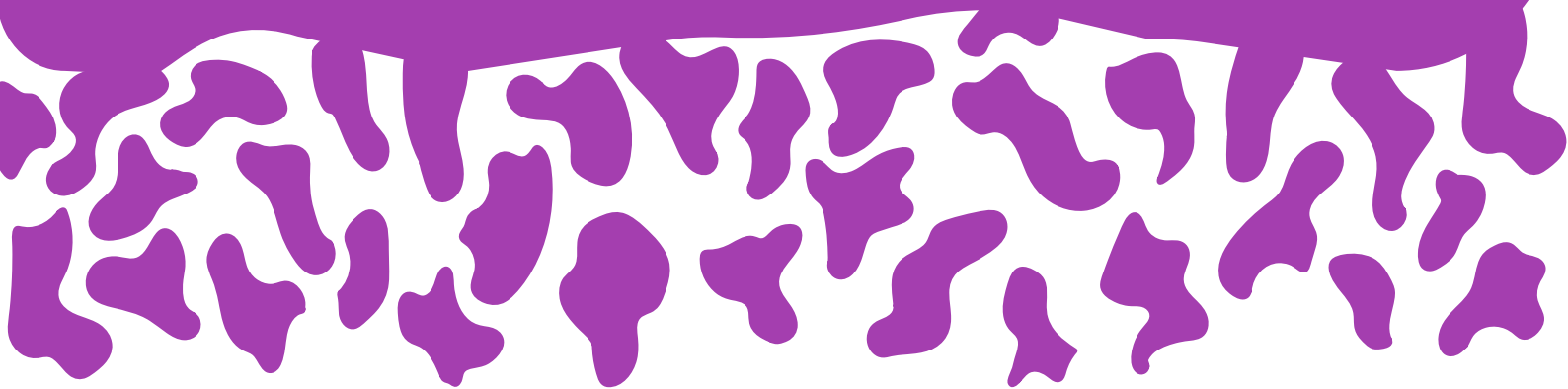
How Supervisors can assist with Employee Disclosure

Supervisors can assist their employees to feel safe and secure to disclose information by:

- Providing safe work environment for the employee to disclose information without feeling judged or different
- Listening to what the employee is saying and not make assumptions based on their diagnosis
- Providing resources about why information is collected and how the information will be stored securely.
- Referring the employee to appropriate services such as the Health & Safety Unit .
- Keeping information given by employee confidential.



Reasonable Adjustments



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What are reasonable adjustments or work-related adjustments?

Reasonable adjustments are essential for employers to avoid direct and indirect discrimination under the Disability Discrimination Act (1992) as it is important to put in place actions to help ensure equal opportunity for people with a disability (encompassing people with chronic pelvic pain and endometriosis) and those caring for someone who has a disability. At University, these actions are commonly referred to as “reasonable adjustments” or “work-related adjustments”.

The legislation does not specify the types of adjustments required to avoid discrimination. Each case needs to be considered in its own circumstance.

Some examples of reasonable adjustments and work-related adjustments may include:

- Changes in the physical environment, such as modified workstations
- Provisions of equipment
- Flexibility around hours of work and/or breaks
- Alternative working locations

Informal Arrangements

Informal arrangements can be made between a supervisor and staff without the involvement of the HR. However, a the Chronic Pelvic Pain Coordinator (if appointed) can be present at these meetings by request of either supervisor or employee.

Examples of informal arrangements can include:

- Flexible working arrangements e.g. starting times or remote working within the provisions of the Enterprise Bargaining Agreement and the University’s Flexible Working Policy.
- Timetabling adjustments e.g. room allocation or starting time
- Small or inexpensive equipment e.g. reusable heat packs or ergonomic chair
- Prearranged flexible hours e.g. leaving early for an appointment

Flexible Work

Flexible work arrangements are available for staff whether they have CPP and/or endometriosis or not. Western recognised that being able to balance our work and personal priorities matters. Research shows flexible workplaces have considerable benefits for all employees and for the performance of organisations at large. All staff at Western can apply to work flexibly as per the flexible work measures outlined in the relevant Staff Agreements and University policy.

Providing flexible working options at our University plays an integral role in developing opportunities for increased staff satisfaction, retention, engagement, and sustained organisational knowledge. A flexible workplace is one that recognises the competing demands of its employees in balancing work commitments with personal priorities. Our university has many options available for staff who require flexible working arrangements, and I encourage staff to discuss these options with their Manager or HR Advisor. When properly managed flexible working arrangements serve to benefit the overall productivity of our University.

We encourage you to look at the following information:

Internal Information:

External Information

- [Fair Work Flexible Work Options](#)
- [Australian Human Rights Commission](#)

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Reasonable Adjustment Plans and Staff Workplace Adjustment Fund

University is committed to creating an equitable and inclusive environment for all staff including those with a disability, medical condition or chronic health condition. For staff with CPP and/or endometriosis, this definition of disability extends to where a person is not presently experiencing the symptoms of CPP/endometriosis, if they had CPP/endometriosis symptoms in the past, or if they are believed to have CPP/endometriosis by a GP or Health practitioner. Staff with diagnosed CPP and/or endometriosis are entitled to reasonable adjustments to help accommodate their needs in the work environment in order to meet the inherent requirements of the role. Inherent requirements of the role may include time availability, location, and task specific. Staff who require adjustments should discuss these with their supervisor or HR advisor and seek advice from the Health & Safety Unit and/or Chronic Pelvic Pain Coordinator from their School/Institute.

The University provides a Reasonable Adjustment Plan where a staff member with disability requires formal workplace adjustments to accommodate their disability-related needs, in accordance with its legal responsibilities under the Disability Discrimination Act. A RAP outlines the specific workplace adjustments the University commits to undertake in order to help enable staff to make their fullest workplace contribution while maintaining health, safety and wellbeing. This arrangement is similar to the Academic Integration Plans (AIPs) used for our students with a disability.

The Health & Safety Unit can assist supervisors with understanding their obligations as per the Disability Policy and discuss available options. Some staff have requirements for adjustments, however, may not meet the eligibility criteria for a RAP and therefore may benefit from engaging in a flexible working arrangement put in place by you as their supervisor.

The University also has a centralised Fund which is dedicated to funding services and equipment needed for staff with disability with a RAP in place. The RAP process and SWAF is administered by the HR.

All equipment purchased by HR remains the property of HR for exclusive use of the staff member being supported. The staff member is responsible for returning equipment or for larger items advising HR so that a removal can be arranged.

A RAP can vary in time frame depending on the individual requirements. Flexible working arrangements tend to be shorter time frames to allow for negotiation and changes in operational needs. RAPs which provide for adjusted equipment tend to be for longer time frames. The policy provides for a period of up to 2 years before review.



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Unjustifiable hardship

The university is committed to developing and supporting an inclusive and diverse environment which provides equal opportunity for all staff with disabilities to access, participate and enjoy the benefits of employment.

As a public funded institution, the university has a pool of resources available to support and make reasonable adjustments to the working conditions of its staff with disabilities. However, in some circumstances, the adjustment requested may not be possible. For example, where the university is likely to experience unjustifiable hardship because of the adjustment.

As outlined in the university's disability policy, unjustifiable hardship is defined as;

An exception that allows an organisation to refuse to make an adjustment because the cost involved and the impact on the organisation and/or other people would be too great. In determining whether an adjustment would involve unjustifiable hardship, all relevant circumstances of the situation must be considered. The organisation must prove that an adjustment would cause it unjustifiable hardship, taking into account:

- The benefits of disadvantages that would be caused by making the reasonable adjustment
- The effect of the disability of the student or staff member
- The costs of making the reasonable adjustment in the context of the organisation's financial situation

If this is the case, the university has a responsibility to suggest a more viable alternative arrangement and discuss this with the staff member with disability. Where you believe that an adjustment requested may pose an unjustifiable hardship or is otherwise unreasonable, it is important that as a supervisor you seek advice from the Health & Safety Unit.



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Process of applying for a Reasonable Adjustment Plan (RAP)

- **Contact Health & HR to complete and return an application form:**
Our office can be contacted via email
- **The staff with disability is to obtain documentation from a medical provider which advises of the disability, medical condition, or injury and how this impact on them undertaking the inherent requirements of their role.**
The necessary document to be completed in part by the medical practitioner can be obtained from HR. This documentation is to be provided to H&S and will be treated confidentially.
- A conversation is to occur **with the staff with disability**, the supervisor **and** HR (where needed). This discussion may include:
 - the adjustments/supports which may be required
 - **recommended equipment** where **necessary**
 - if a **complex assessment**, relevant communication with the office for Infrastructure and commercial (I&C) if required **to recommend appropriate equipment**
 - A conversation related to **flexible working arrangements**
- HR **will work with the staff with disability, you as their supervisor, their medical and/or health practitioner, HR to design and document a set of reasonable adjustments to be implemented within the workplace** which meet their inherent requirements of the role and do not meet the clause of undue hardships.

Roles and Responsibilities

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Supervisor's Obligations

- **Work with** HR to work out the feasibility of suggested adjustments
- **Implement agreed adjustments** in a timely manner.
- **Work collaboratively** to implement agreed adjustments (this helps the individual feel supported).
- **Conduct a handover** where possible if there is a change of supervisor.
- **Sign off on the RAP** (you are agreeing to the terms of the RAP on behalf of the university).
- **Ensure** leave requests & workload agreements reflect the adjustments outlined in the RAP when authorising a staff member's timesheet.
- **Contact** HR for advice.
-

Staff member's Obligations

- **Contact your School/Institute/Division** Chronic Pelvic Pain Coordinator, through your **and/or**
- **Contact the HR**
- **Make a request** for reasonable adjustment
- **Request** from your treating doctor **documentation** which outline diagnosis and any recommendations for adjustments to be made in the workplace, provide a copy to HR.
- **Work collaboratively** to implement agreed adjustments
- **Advise your supervisor** and the HR if circumstances change and the existing RAP no longer meets your needs.
- **Advise** HR via our email at if the supervisor or workplace location/contact details change.

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HR Obligations

- Meet with staff at an agreed time in person or via Zoom.
- Arrange a specialist assessment if required.
- Consider the medical advice and adjustments of the treating doctor.
- Facilitate an ergonomic assessment if required.
- liaise with supervisors regarding recommendations and reasonable adjustments.
- Liaise with other university units.
- Arrange the purchase and delivery of equipment.
- Advise the university and staff regarding reasonability of adjustments requested.

Our office is located ...

Frequently Asked Questions



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Who can make a referral for a Reasonable Adjustment Plan (RAP)?

Referrals for a RAP can be made by the staff member themselves, the supervisor, colleague, HR

How long does a RAP last for?

A RAP can last from anywhere **from 2 weeks up to 2 years** in accordance with University policy. Although, the RAP can be reviewed in the case of significant work or disability-related changes, or the adjustments are no longer effective.

Who is aware that a staff member has a RAP?

The supervisor who is supervising the staff member with a RAP and, where necessary the HR O, is aware that the staff member has a RAP in place. But **people outside HR are not privy** to the details of the diagnosis or condition, unless the staff member expressly allows this information (or specific details) to be shared. The employee will be contacted for consent to share the information if this is ever necessary. To maintain confidentiality, the HR has on file the nominated staff members who are aware of the disabilities. Of course, where there is a serious and/or imminent risk HR may need to share relevant details with necessary contacts. If this is required, only the absolutely essential information will be disclosed and to only those vital to managing the urgent situation.

Does a RAP cover temporary disability/health condition?

Yes, staff can submit a request for a RAP if they have a disability or health condition of a temporary nature which impacts their ability to perform the required duties of their role. For example, a staff member has broken their leg and needs their office temporarily relocated to help with mobility onto and around campus.

Where are the documents provided to support a RAP stored?

Any medical documentation provided by a staff member to obtain a RAP will be kept confidential by the HR and remain only on file with HR.

Can staff with a RAP undertake work related travel?

Yes, however if they are required to travel as a part of their job their RAP must be incorporate the requirements associated with travel. A risk assessment may be required prior to travel and this may include consultation with HR.

How can I help a staff member to work flexibly?

1. Maintain clear expectations

- Establish and negotiate outputs and deadlines with the staff member as you would normally do. As a supervisor you should clearly and explicitly communicate what you expect from the person working flexibly, but remember to check in and ask what they need and want from you.
- An effective way to maintain expectations is for supervisors to have the staff member update them on the progress of longer-term projects. For example, as a supervisor you may have the staff member send a daily/weekly email with a list of projects that have progressed. This may be useful during the initial trial period of a flexible work arrangement, to be ascertain whether the arrangements in place are effective or need adjusting.

2. Encourage staff to stay connected

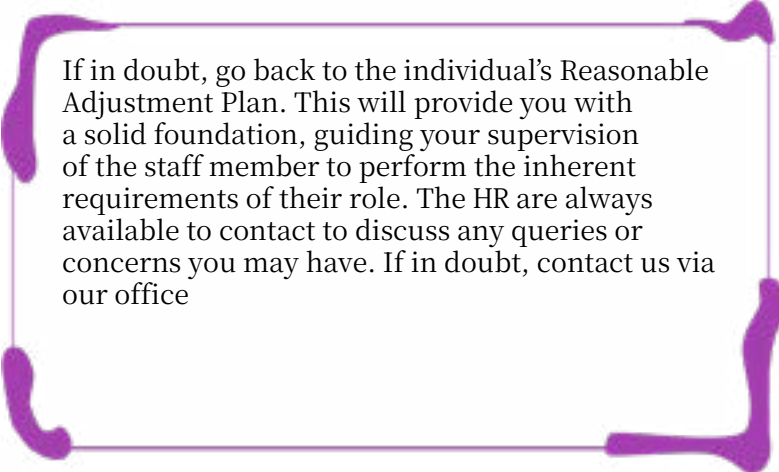
- When working from home some staff members will value a Zoom call on a regular basis to touch base, share and problem-solve, whilst others will view this as micro-management. A regular, optional Zoom catch up may cater well to most working styles. This strategy can be effective between the supervisor and staff or peer to peer, between the staff member working remotely and a workplace buddy or trusted colleague.
- Where a person is working away from the office, prioritise returning their calls and emails and show them that you are present, and just a quick Zoom chat or a phone call away.
- When staff are working different or less hours than usual, it is important that as a supervisor allow plenty of opportunity for those team members to stay connected with you and other colleagues. For example, consider when team meetings are scheduled to help include as many part-time staff or those who adjust their hours around caring responsibilities, disability needs, etc.
- Consider sharing Microsoft calendars so availabilities can be seen to assist scheduling meetings and synchronising other workplace activities.

3. Build and extend trust with staff

- Research has shown that trust is the most important leadership skill and the most highly valued quality by staff. Trust and good communication can actually result in increased engagement and productivity. In most cases, staff who have been performing members in the 'physical' office are very likely to remain strong performers in the 'virtual' office when working from home.
- Take time for informal conversations - although you are not working in the same physical location or on different work patterns, it remains important to maintain informal channels of communication that you would enter into in the staff lunchroom, hallways, or around the photocopier.

4. Be aware of your WHS obligations

- If working from home, liaise with the staff member to ensure that they have appropriate equipment & workspace in order to meet the inherent requirement of the role. If the person is starting or finishing later in the day, make sure that the workspace is safe at those times of day.
- An employer's duty of care under WHS laws apply to mental health too. Psychosocial hazards are anything in the design or management of work that cause stress. Stress is the reaction a person has when they perceive the demands of their work exceed their abilities or resources. At times, staff working flexibly can work beyond reasonable expectations and/or not disclose if they are struggling to cope with workload. This can be from fear or worry that they may be perceived as underperforming and therefore lose their flexible arrangements.



If in doubt, go back to the individual's Reasonable Adjustment Plan. This will provide you with a solid foundation, guiding your supervision of the staff member to perform the inherent requirements of their role. The HR are always available to contact to discuss any queries or concerns you may have. If in doubt, contact us via our office

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