**You will need to ensure you REMOVE any paragraphs, wording or highlighted sections that aren’t relevant. If you need help on how to use the template letter please refer to the How to complete a Template Letter document on People First.**

[Letterhead Details]

***STRICTLY*** ***PRIVATE AND CONFIDENTIAL***

***Addressee (full Name)***

***Address 1***

***Address 2***

***Address 3***

***Address 4***

***Address 5***

***Ref: [Sender’s Initials]/[Employee’s Initials]/[Number]***

***[Date]***

***Dear [Employee Title, Employee Surname],***

**Re. Outcome of Stage 3 Final Review meeting**

I am writing to confirm the outcome of the Stage 3 Final Review meeting held in relation to your failure to reach acceptable levels of attendance at work.

The meeting was held on ***[Date, Time and Location]***. I chaired the meeting and was supported by ***[Panel name/s and job title/s]***. (\*Delete as appropriate) \*You attended and were represented by ***[Representative name]***, ***[Union name or job title if work representative]***. OR \*You were not represented and confirmed that you were happy to continue with the meeting without a representative being present.

***[Name of Manager and job title]*** and ***[Name of Manager support or HR support and job title]***  presented the management case.

The meeting was held under the Attendance policy \*and you confirmed you have received a copy.

The meeting was held to consider your continued persistent absence. We considered your attendance, the management process that had been followed leading to the Stage 3 Final Review meeting, the management case and the case put forward by you (\*and your representative). (\*delete if not relevant)

Management stated that you had had a significant amount of sickness absence. The details provided by management were; (\*Delete as appropriate)

* ***\*[provide details of monitoring periods instigated, the dates and reasons for these]*** OR
* ***\*[any pattern of frequent, persistent or high levels of unsustainable absence or monitoring which has moved the attendance issues to a final review meeting, include dates and reasons for absence]***

You did not meet the improvement targets set and therefore were advised on ***[Date]*** that you had now entered Stage Three of the policy process, and a final review meeting would be arranged.

Management confirmed that ***[provide details of any actions management confirmed they had taken to support an improvement in attendance e.g. reasonable adjustments, Occupational Health referrals, redeployment, flexible working etc]***.

You provided ***[details of the case provided by the employee, any mitigating circumstances they provided, what they have done to try and improve their attendance levels, or any comments made around the management case they shared with the panel]***.

The panel considered all the information provided in relation to this case, both prior to the hearing and during the hearing. In making the decision consideration was given to the following;

* ***[details of what you considered towards your outcome]***

The Panel informed you that after careful consideration, its decision was to ***[details of decision]***.

 (\*If outcome is dismissal include the following 4 paragraphs)

\*The dismissal would take effect as of the date of the Final Review meeting ***[date of the Final Review meeting]***  and in accordance with your contract of employment you will be paid ***[length of notice e.g. 4 / 8 / 12 weeks]*** notice plus any outstanding annual leave, in line with the NHS Terms and Conditions and/or Working Time Directive whichever is applicable. This notice period will be paid at full pay.

\*Your last day of employment of the ***[length of notice period e.g. 4 / 8 / 12]*** weeks’ notice will therefore be ***[date of end of employment]***.

\*As explained during the meeting you will need to ensure that all NHSBT property is returned. Please liaise directly with ***[manager details]*** on ***[telephone number]*** to organise this, if you have not already returned any NHSBT property.

You are advised of your right of appeal against this decision, which must be made to the Appeal Secretary, by email to Kirsty.Stewart@nhsbt.nhs.uk within 7 calendar days of the date of this letter.

Within 21 calendar days from the date of the outcome letter, you will be required to provide full details of your grounds for appeal, making clear what resolution you are seeking. This will then be provided to me for me to prepare my response to your grounds of appeal. This will be provided to you a minimum of 7 calendar days before the date of the appeal panel.

(\*If outcome is to extend Stage 2 include the following 2 paragraphs)

\*Your Stage 2 extended monitoring period will be for ***[Length of period]*** and will end on ***[Date]***. Your standards of attendance for your Stage 2 extended monitoring period are:

* ***[standards of attendance agreed]***

If you take further sickness absences which reach these standards, your sickness absence will be referred back to a Final Review Meeting at Stage 3 of the Attendance policy. As you will be aware an outcome of the Final Review Meeting could be dismissal due to capability based on unacceptable levels of attendance

\*You are advised of your right of appeal against this decision, which must be in writing within 7 calendar days of the date of this letter. Your appeal letter should be addressed to ***[ managers name and job title – this should be the next level of management above you]***, as chair of the panel and either sent to ***[address to send appeal to]*** or emailed to ***[email address]***. Within 21 calendar days from the date of the outcome letter, you will be required to provide full details of your grounds for appeal, making clear what resolution you are seeking. I will then prepare my response to your grounds of appeal. This will be provided to you a minimum of 7 calendar days before the date of the appeal panel.

(\*If outcome is different to the option above include the following 2 paragraphs)

We came to our decision because ***[provide the reasons you reached the decision you did and any additional information you need to ensure the employee is aware of due to your decision]***.

We also need to remind you that your sickness absences will continue to be managed in line with the Attendance policy.

\*You are advised of your right of appeal against this decision, which must be in writing within 7 calendar days of the date of this letter. ***[managers name and job title – this should be the next level of management above you]***, as chair of the panel and either sent to ***[address to send appeal to]*** or emailed to ***[email address]***. Within 21 calendar days from the date of the outcome letter, you will be required to provide full details of your grounds for appeal, making clear what resolution you are seeking. I will then prepare my response to your grounds of appeal. This will be provided to you a minimum of 7 calendar days before the date of the appeal panel.

(\*If outcome is to remove from monitoring include the following paragraph)

\*If you take any future sickness absences, these will continue to be reviewed against the triggers as explained in the Attendance policy, along with any previous sickness absence taken during your monitoring which fall within the 12-month rolling period.

(\*Include following paragraph in all letters)

\*All details of your management under the Attendance policy should remain confidential between all parties involved in the process.

All details of this process under the Attendance policy should remain confidential and discussed only between those parties directly involved in the process, which could include family members, health professionals including EAP and your trade union representative.   Contents of correspondence and case details should not be disclosed to other parties. This requirement for confidentiality applies verbally, electronically, to use of social media and sharing hard copy content.

I also wanted to remind you of our Employee Assistance Programme. The service is available 24 hours a day, 7 days a week, providing professional help to deal with work or personal issues. If you feel you might benefit from accessing this programme you can either call the 24-hour telephone line on **0800 783 2808**. Alternatively, if you just wanted to find out more about it you can visit their website <https://healthassuredeap.co.uk/>, the ‘access code’ and ‘password’ are both 72992. You can also access the service via your own personal e-mail address. This service also extends to leavers for up to 3 months after your employment ceases.

Yours sincerely,

***[Name]***

***[Job Title]***

***[cc:] [relevant details]***

 ***(If outcome is dismissal send copy to Anna Early)***

***[Encl.] [relevant details]***