

Our Ref: <<Managers initial>>
Your Ref: <<Employee Number>>
Contact: <<Line Manager Name>>
Tel:
E-mail:
Date:



Private and Confidential

«Name»
«Address1»
«Address2»
«Address3»

Service Details

Name
Job Title
Job Title Second Line
Address Line 1
Address Line 2
Address Line 3
www.northlanarkshire.gov.uk

Dear «JointTitle» «JointSurname»

RECORD OF ATTENDANCE SUPPORT MEETING (F8) JOB TITLE: <<INSERT JOB TITLE>>

I refer to the Attendance Support Meeting held on **(insert date)**. This meeting was conducted by telephone/video conferencing/was held at **(insert location)** **(delete as appropriate)**. You were accompanied at the meeting by **(insert name)**/you confirmed that you were happy not to be accompanied at this meeting **(delete as appropriate)**. **(insert name)** Employment & Policy Advisor was also in attendance **(delete if not applicable)**.

(the sections below should be tailored depending on the circumstances of each meeting)

The purpose of the meeting was to discuss your current/recent **(delete as appropriate)** sickness absence, including your recent report from occupational health (if appropriate), any update on your health, the temporary adjustments that were put in place to support you back to work.

Your absence commenced on (insert date) and the reason for this is/was **(insert reason)** **(delete as appropriate)**. Your most recent fit not covers you until the **(insert date)**/you returned to work on **(insert date)** **(delete as appropriate)**.

At the meeting, we discussed how you were feeling, and you advised **(obtain update on current health status and any updates from GP or other medical professionals)**

We discussed your occupational health report dated (a short summary of the report can be noted in the letter i.e fit not fit for work, timescale for return etc) – **delete this section if not applicable**

Recommendations from Occupational Health....(discussion around reasonable adjustments (temporary or permanent) including redeployment if appropriate at that time) **delete this section if not applicable**

We reviewed your phased return/temporary adjustments...(Enter details of discussion regarding supports and adjustments offered or ones already in place including temporary or permanent redeployment if appropriate) – **delete this section if not applicable.**



The following actions were agreed (insert summary of what was agreed i.e. referral to OH if not already, review again in x amount of weeks etc).

If moving to stage 1 /2 following this ASM include the following paragraph

I reminded you that you are currently on a STAGE? in terms of the Teachers Managing Absence Policy (F8) and that if you did not return to work or reached an absence trigger then we would need to consider moving to STAGE? in line with policy as we cannot sustain long term absences indefinitely or unacceptable levels of attendance.

If moving to stage 3 following this ASM include the following paragraph

I reminded you that you are currently on Stage 2 of the Teachers Managing Absence Policy (F8) and as such if there is no prospect of a return to work to your post or any other post in the foreseeable future, and ill health retirement is not an option/is not successful **(delete as appropriate)**, it would leave me with no alternative but to convene a Stage 3 Capability Meeting and make a decision on your continued employment with the Council.

This could result in the termination of your employment on the grounds of capability due to unsustainable levels of attendance/ill health **(delete as appropriate)**. Of course, all available options, such as redeployment, ill health retirement **(if applicable)** and a reduction in working hours will be considered before a decision to dismiss is made.

I trust this is an accurate reflection of matters discussed but if you need any further clarification or support, please do not hesitate to contact me.

Yours sincerely

<<LINE MANAGER NAME>>
<<JOB TITLE>>