

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



### Service Details

Name  
Job Title  
Job Title Second Line  
Address Line 1  
Address Line 2  
Address Line 3  
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### Private and Confidential

«JointName»  
«Address1»  
«TenancyCorrAddress2»  
«TenancyCorrAddress3»  
«TenancyCorrAddress4»  
«TenancyCorrAddress5»  
«TenancyCorrAddress6»

Dear «JointTitle» «JointSurname»

### OUTCOME OF STAGE 2 FORMAL ATTENDANCE REVIEW MEETING – LONG TERM (F8)

#### JOB TITLE: <<INSERT JOB TITLE >>

I refer to the Stage 2 Formal Attendance Review 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)**.

The meeting was arranged to discuss your current absence from work which began on **(insert date)** due to **(insert reason)**.

At the meeting, we discussed how you were feeling, and you advised **(enter details of discussion held)**.

We also discussed the medical report received following your appointment with the Council's Occupational Health Adviser **(enter details of discussion held or delete if no referral completed)**.

In addition, we spoke about any interventions the service could provide to help assist you in returning to work **(Enter details of discussion regarding supports and adjustments offered or ones already in place)**.

We then discussed the benefits of a referral to physiotherapy/counselling **(delete as appropriate)** and it was agreed that a referral would be made/no referral was required at this time but that you would let me know if you felt this would be beneficial in the future **(delete as appropriate)** **(delete full paragraph if not musculoskeletal or stress/anxiety/depression related)**.

It was agreed that **(insert summary of what was agreed)**.

I advised that I am sympathetic to the difficulties you have been experiencing with your health at this time, however you have incurred a significant period of absence(s) which I am unable to sustain indefinitely. As you were unable to provide a return-to-work timeframe, we discussed alternative options for you. The first was that of redeployment where it was agreed **(enter details of discussion)**.

Or



As redeployment was not a suitable option due to **(insert reason)** we discussed the option of ill health retirement **(enter details of discussion or delete if not relevant)**.

It was explained that applications to the Scottish Teachers' pension scheme for ill health retirement is teacher led, and I provided you with details of the two types of ill health retirement available (total incapacity benefit and partial incapacity benefit). I provided you with the relevant forms from the Scottish Public Pensions Agency (SPPA) and we discussed how these should be completed. We also discussed **(insert details of discussion on this topic as required)**.

While it was explained that a decision would be made by the SPPA based on your application and medical evidence you submit, I advised that I could make a management referral to Occupational Health for you which will provide you with additional supporting medical information. You confirmed that you consented to a referral being made / You advised that you would let me know if you required me to submit a referral **(delete as appropriate)**. **(delete paragraph if ill health is not an option)**.

I advised that as you have been absent between 17 and 25 weeks you are now 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 if your absence reaches between 36 to 52 weeks 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.

***If the teacher provides a return-to-work date at this meeting detail this and any support/adjustments agreed for their return and include the following paragraphs.***

Please note that your attendance will be monitored under Stage 2 of the Teachers Managing Absence Policy (F8) for 12 months from the date of your return to work. Should you reach the council's action trigger points during this period, due to either short- or long-term absence, you may be required to attend a Stage 3 Capability Meeting.

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>>