**Department Name**



**Directorate**

**Address 1**

**Address 2**

**Address 3**

**Post Code**

# PRIVATE & CONFIDENTIAL

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| --- | --- |
| **NAME****ADDRESS1****ADDRESS2****ADDRESS3****POST CODE** | **Date: DATE****Ref No:** **Direct Line: Number****Email:****Contact: NAME** |
|  |  |

Dear **[name]**

**Invite to Formal Stage 2 Capability Meeting**

I write to invite you to attend a Formal Stage 2 Capability Meeting in accordance with NHS Greater Glasgow and Clyde’s Employee Capability Policy and Procedure.The meeting arrangements are as follows:

**Date: [date]**

**Time: [time]**

**Location: [location]**

This meeting will be conducted in line with NHS Greater Glasgow and Clyde’s Employee Capability Policy and Procedure, and will be chaired by [**myself/name and job title**]. [**I/name**] will be supported at this meeting by [**name], [HR Job title]**

As the capability review meeting is a formal meeting, you are entitled to be accompanied by a recognised accredited Trade Union / Staff Association representative, or fellow colleague, if you would find that helpful. If you would like to be accompanied by someone other than a Trade Union / Staff Association representative or fellow colleague, please contact me to discuss that. It is your responsibility to arrange your representation, but if you require any advice about how to do this, please contact **[HR name, post title and contact details]**.

A decision has been taken to progress to the Formal Stage 2 of the Capability procedure, as your performance has not improved to a satisfactory standard, despite the provision of support and guidance at both the informal stage and Formal Stage 1. I enclose the notes and action plan that were discussed and monitored with you during Stage 1.

The purpose of the meeting is to discuss the capability issue(s) which we have been focussing on during informal and formal stages over the course of **[timescale]*.*** The main areas of concern are as follows:

**[Clear details of continuing capability issues]**

I must advise that if progress is not satisfactory, I may have to take the decision to refer the matter to the NHS Greater Glasgow and Clyde’s Disciplinary Policy and Procedure in accordance with NHS Greater Glasgow and Clyde’s Employee Capability Policy and Procedure. One potential outcome of this referral to the Disciplinary Policy may be consideration of the termination of your employment.

**Please contact [name, job title and contact details] by [date] to confirm that you will attend this** [**meeting/hearing**] and to confirm whether you will be accompanied **and if so, by whom.** If for any reason either you or your representative/companion is unable to attend at the specified time you must ensure you give me adequate notice of this, so that the [**meeting/hearing**] may be rearranged to a mutually suitable time.

**[If applicable:** A management referral has been made to Occupational Health Service for you. **OR** You may also wish to access support from our Occupational Health Service while this process is underway. If so, the telephone number is **[phone number].]**

In the meantime, if you have any queries please do not hesitate to contact me on **[phone number]**.

Yours sincerely

**[Managers Name]**

**[Job Title]**

**[Service]**