Name ---------------

Address-------------

Dear ----------------

 **1st Stage Attendance Management Meeting**

Further to our recent discussion, I am writing to confirm that a 1st Stage Attendance Management Meeting has been arranged for xxxxx 2020 at (timexxx) to be held over skype/telephone (due to the current Coronavirus pandemic) in accordance with the Sickness Absence Policy (<http://intranet/media/655465/sickness-absence-policy.pdf>).

Due to the current constraints of the Coronaviris pandemic to assist with the logistics of representation there is also the option, of undertaking this process via e-mail.

If this is your preferred option, please let me know by xxxx and I will e-mail you a proforma of questions which you will need to complete and return by email to me no later than xxxxx.

***If meeting has to be face to face following request from employee please*** *ensure that you have consulted the risk assessment for your service prior to arranging this meeting face to face. You will be responsible in ensuring that appropriate covid-19 measures are followed in accordance with this risk assessment. This would include test, trace and protect and the requirement for 2 metre social distancing.*

***Please amend the meeting arrangements above and include the wording below***

The Authority are implementing all reasonable steps to maintain a Covid secure workplace with stringent 2m distancing at all times to maximise the safety of all employees and members of public throughout its operations.

For purposes of contact tracing, names, contact telephone numbers, date, arrival, and departure times of all attendees will be recorded. This information will be retained for 21 days following attendance and will be held and disposed of in line with General Data Protection Regulations (GDPR) requirements.

This review meeting follows your periods of absence on [insert dates] [and our return-to-work [meeting/meetings] on date(s)].

You can ask for a recognised trade union representative or work colleague to accompany you to this meeting.

The purpose of this review meeting is to discuss your attendance record/ Occupational Health report / current medical condition (delete as appropriate) and to agree on the most beneficial way forward for you and for the department.

This should be seen as an opportunity for you to raise any concerns which you think are relevant to your overall attendance levels and to discuss the options that are available for you to facilitate your return to work (and / or) maintain your attendance at work.

It is possible that an outcome of the meeting will be a reminder that if there is little or no significant improvement in attendance then ultimately this may result in the termination of your employment on ill health capability and the establishment of a formal review period under stage 1 of the Sickness Absence Policy. However, a decision on this will not be made until you have had a full opportunity to put forward everything that you wish to raise.

Please let me know as soon as possible if you (or your chosen companion) cannot attend the meeting so that we may arrange an alternative time/the process to be undertaken by e-mail, or if you need any adjustment to the meeting arrangements on account of any disability.

Yours sincerely

Manager Name

Job Title

 **cc HR & TU**

**Enclose- Sickness Absence Policy**

**Mae croeso i chi gysylltu gyda’r Cyngor trwy gyfrwng y Gymraeg neu’r Saesneg.**

**You are welcome to contact the Council through the medium of Welsh or English.**