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NOTES TO USER:

You must either complete or delete information which is highlighted in yellow in these template letters before sending to the employee.

Please pay specific attention to who is sending each letter and ensure that it fits with your governance structure and the table in paragraph 3 of your adopted Capability Policy and Procedure.

# LETTER – INVITATION TO FIRST CAPABILITY MEETING

Dear [NAME]

**First Capability Meeting**

I am initiating a First Capability Meeting under the School’s Capability Policy and Procedure. Therefore, please find enclosed:

1. A copy of the School’s Capability Policy and Procedure;
2. Performance Report dated [INSERT DATE].

You are required to attend a First Capability Meeting with me on [DATE] at [TIME] at [VENUE] (which is at least 5 working days from today’s date). The enclosed Performance Report sets out the aspects of your performance causing concern, the specific and achievable standards that are expected of you and the support provided to you so far.

The purpose of the meeting is for you to have an opportunity to comment upon, offer an explanation and/or refute the Performance Report and to discuss the professional shortcomings identified, support and guidance required and how your performance will be monitored and supported going forward.

Any evidence you intend to present at the meeting must be provided to me at least 2 working days in advance of the First Capability Meeting. This is in order to ensure efficiency and operational smoothness and to provide me with enough time to fully consider any evidence you provide.

You may be accompanied by a Companion who can be a trade union official, an accredited representative of a trade union or other professional association of which you are a member, or a willing work colleague who is not involved in your performance issues. Note that your Companion cannot answer questions for you and you must notify me of their name at least the working day before the meeting, therefore by [INSERT DATE].

If you consider yourself to be a person with a disability and there are reasonable adjustments you believe I can make to accommodate your disability in relation to the operation of the Capability Policy and Procedure, please do let me know as soon as possible.

You may also be able to obtain support from Education Support who can be contacted on 08000 562 561 [INSERT DETAILS OF ANY LOCAL COUNSELLING OR SUPPORT SERVICES AVAILABLE TO SCHOOL STAFF].

Yours sincerely

**[NAME]**

**Capability Manager**

Enc. Capability Policy and Procedure and Performance Report

# LETTER – OUTCOME OF FIRST CAPABILITY MEETING

Dear [NAME]

**Outcome of First Capability Meeting**

**OPTION A:**

Following our First Capability Meeting on [INSERT DATE], having considered your comments, I have concluded that your performance is satisfactory and, therefore, you are no longer subject to the School’s Capability Policy and Procedure. The School’s Appraisal Policy and Procedure will resume with immediate effect.

Yours sincerely

**[NAME]**

**Capability Manager**

**OPTION B:**

Following our First Capability Meeting, on [INSERT DATE], having considered your comments, I have concluded that your performance is unsatisfactory, and I am issuing a First Written Warning in accordance with the School’s Capability Policy and Procedure.

We will now draw up an Improvement and Support Plan which will focus on the points listed below:

Professional shortcomings

INSERT

Sustainable standard of performance needed to exit capability procedure

INSERT

Support to be provided during Assessment Period

INSERT

Timetable for improvement

INSERT

Your performance will be subject to assessment and I have set an Assessment Period of [INSERT] working weeks commencing today and ending on [INSERT DATE].

There will be a Second Capability Meeting on [DATE] at [TIME] at [VENUE] to formally assess whether your performance has improved sustainably to the required standard. I will be submitting an Updated Performance Report to you at least 5 working days before the Second Capability Meeting is scheduled to take place, therefore by [INSERT DATE]. It should be noted that failure to improve may lead to your dismissal.

You may be accompanied by a Companion who can be a trade union official, an accredited representative of a trade union or other professional association of which you are a member, or a willing work colleague who is not involved in your performance issues. Note that your Companion cannot answer questions for you and you must notify me of their name at least the working day before the meeting, therefore by [INSERT DATE].

If you consider yourself to be a person with a disability and there are reasonable adjustments you believe I can make to accommodate your disability in relation to the operation of the capability procedure, please do let me know as soon as possible.

You have the right to appeal against my decision. If you wish to appeal, you should notify the Clerk to the Governors within 5 working days of the date this letter and, therefore by [INSERT DATE] Please note that an appeal will not delay the commencement of the Assessment Period.

You may also be able to obtain support from Education Support, who can be contacted on 08000 562 561 [INSERT DETAILS OF ANY LOCAL COUNSELLING OR SUPPORT SERVICES AVAILABLE TO SCHOOL STAFF].

Yours sincerely

**[NAME]**

**Capability Manager**

# LETTER – SECOND CAPABILITY MEETING – UPDATED PERFORMANCE REPORT

Dear [NAME]

**Second Capability Meeting – Updated Performance Report**

Ahead of the Second Capability Meeting on [INSERT DATE], I enclose my Updated Performance Report which, in addition to my earlier Performance Report, sets out the support that has been provided to you and any evaluation of your performance at the end of the Assessment Period. At the Second Capability Meeting you will have an opportunity to comment upon, explain and/or refute the contents of the Updated Performance Report, to discuss any continuing professional shortcomings, support and guidance required and how your performance will be monitored and support going forward.

Any documentation you wish to rely on during the Second Capability Meeting must be submitted at least 2 Working Days prior to the Second Capability Meeting, therefore by [INSERT DATE].

You may be accompanied by a Companion who can be trade union official, an accredited representative of a trade union or other professional association of which you are a member, or a willing work colleague who is not involved in your performance issues. Note that your Companion cannot answer questions for you and you must notify me of their name at least the working day before the meeting, therefore by [INSERT DATE

You may also be able to obtain support from Education Support, who can be contacted on 08000 562 561 [INSERT DETAILS OF ANY LOCAL COUNSELLING OR SUPPORT SERVICES AVAILABLE TO SCHOOL STAFF].

Yours sincerely

**[NAME]**

**Capability Manager**

Enc. Updated Performance Report

# LETTER – OUTCOME OF SECOND CAPABILITY MEETING

Dear [NAME]

**Outcome of Second Capability Meeting**

**OPTION A:**

Following the Second Capability Meeting on [INSERT DATE], I have concluded that the standard of your performance is satisfactory and you are, therefore, no longer subject to the School’s Capability Policy and Procedure. The School’s Appraisal Policy and Procedure will resume with immediate effect.

The First Written Warning issued on [INSERT DATE] remains live until [INSERT DATE]; in the event that the standard of your performance falls to an unsatisfactory level, the School’s Capability Policy and Procedure will recommence at the stage at which it was concluded.

Yours sincerely

**[NAME]**

**Capability Manager**

**OPTION B:**

Following the Second Capability Meeting on [INSERT DATE], I have concluded that, whilst some progress has been made, the standard of your performance still remains below the required standard. I believe that with a further period of monitoring an acceptable level of performance will be achieved. As such, your performance will be subject to further assessment and I have extended the Assessment Period by [up to 4 working weeks]. The further assessment period will expire on [INSERT DATE] following which we shall meet again to review your performance.

If you do not make sustainable improvement to the required standard during this extended Assessment Period, you are at risk of dismissal.

If you consider yourself to be a person with a disability and there are reasonable adjustments you believe I can make to accommodate your disability in relation to the operation of the capability procedure, please do let me know as soon as possible.

You may also be able to obtain support from Education Support, who can be contacted on 08000 562 561 [INSERT DETAILS OF ANY LOCAL COUNSELLING OR SUPPORT SERVICES AVAILABLE TO SCHOOL STAFF].

Yours sincerely

**[NAME]**

**Capability Manager**

**OPTION C:**

Following the Second Capability Meeting on [INSERT DATE], I have concluded that you have not made sufficient improvement and that your performance remains unsatisfactory. Therefore, I am issuing a Final Written Warning in accordance with the School’s Capability Policy and Procedure. Your performance will be subject to a further Assessment Period by [4 working weeks] which will expire on [INSERT DATE].

If you do not make sustainable improvement to the required standard during this further Assessment Period, you are at risk of dismissal.

You are required to attend a Final Capability Meeting on [DATE] at [TIME] at [VENUE]. This meeting will be conducted by NAME[s]] as Final Capability Manager appointed in accordance with the School’s Capability Policy and Procedure.

I will submit my Final Performance Report to you on or after the last day of the Assessment Period and, in any event, at least 5 working days before the Final Capability Meeting, therefore, by [INSERT DATE].My Final Performance Report will contain an evaluation of your performance and will detail any support provided during the further Assessment Period.

You have the right to appeal against my decision to impose a Final Written Warning. If you wish to appeal you should notify the Clerk to the Governors within 5 Working Days of the date of this letter, therefore, by [INSERT DATE]. An appeal will not delay the commencement of the Further Assessment Period.

You may be accompanied by a Companion who can be trade union official, an accredited representative of a trade union or other professional association of which you are a member, or a willing work colleague who is not involved in your performance issues. Note that your Companion cannot answer questions for you and you must notify me of their name at least the working day before the meeting, therefore by [INSERT DATE].

If you consider yourself to be a person with a disability and there are reasonable adjustments you believe I can make to accommodate your disability in relation to the operation of the Capability Policy and Procedure, please do let me know as soon as possible.

You may also be able to obtain support from Education Support, who can be contacted on 08000 562 561 [INSERT DETAILS OF ANY LOCAL COUNSELLING OR SUPPORT SERVICES AVAILABLE TO SCHOOL STAFF].

Yours sincerely

**[NAME]**

**Capability Manager**

# LETTER – OUTCOME OF FURTHER ASSESSMENT PERIOD

Dear [NAME]

**Outcome of further Assessment Period**

Further to my letter dated [INSERT DATE], you have now completed a further Assessment Period which ended on [INSERT DATE]. I have concluded that the standard of your performance is satisfactory and you are, therefore, no longer subject to the School’s Capability Policy and Procedure. The School’s Appraisal Policy and Procedure will resume with immediate effect.

The First Written Warning issued on [INSERT DATE] remains live until [INSERT DATE]; in the event that the standard of your performance falls to an unsatisfactory level, the School’s Capability Policy and Procedure will recommence at the stage at which it was concluded and you will be notified of this in writing.

Yours sincerely

**[NAME]**

**Capability Manager**

**OPTION B:**

Further to my letter dated [INSERT DATE], you have completed a further Assessment Period which ended on [INSERT DATE]. I have concluded that you have not made sufficient improvement and that your performance remains unsatisfactory.

As you have not made sustainable improvement to the required standard during this further Assessment Period, you are now at risk of dismissal.

You are required to attend a Final Capability Meeting on [DATE] at [TIME] at [VENUE]. This meeting will be conducted by NAME[s]] as Final Capability Manager appointed in accordance with the School’s Capability Policy and Procedure.

I will submit my Final Performance Report to you in due course and, in any event, at least 5 working days before the Final Capability Meeting, therefore, by [INSERT DATE]. My Final Performance Report will contain an evaluation of your performance and will detail any support provided during the further Assessment Period.

You may be accompanied by a Companion who can be trade union official, an accredited representative of a trade union or other professional association of which you are a member, or a willing work colleague who is not involved in your performance issues. Note that your Companion cannot answer questions for you and you must notify me of their name at least the working day before the meeting, therefore by [INSERT DATE].

If you consider yourself to be a person with a disability and there are reasonable adjustments you believe I can make to accommodate your disability in relation to the operation of the Capability Policy and Procedure, please do let me know as soon as possible.

You may be able to obtain support from Education Support, who can be contacted on 08000 562 561. [INSERT DETAILS OF ANY LOCAL COUNSELLING OR SUPPORT SERVICES AVAILABLE TO SCHOOL STAFF].

**[NAME]**

**Capability Manager**

# LETTER – FINAL PERFORMANCE REPORT

Dear NAME

**Final Performance Report for Final Capability Meeting**

Ahead of the Final Capability Meeting on [INSERT DATE], I enclose my Final Performance Report. This report sets out an evaluation of your performance and details the support provided during the further Assessment Period.

At the Final Capability Meeting you will have an opportunity to comment upon, explain and/or refute the contents of the Final Performance Report and to discuss any continued professional shortcomings.

Any documentation you wish to rely on during the Final Capability Meeting must be submitted at least 2 working days prior to the Final Capability Meeting, therefore by [INSERT DATE].

You may be accompanied by a Companion who can be trade union official, an accredited representative of a trade union or other professional association of which you are a member, or a willing work colleague who is not involved in your performance issues. Note that your Companion cannot answer questions for you and you must notify me of their name at least the working day before the meeting, therefore by [INSERT DATE].

You may also be able to obtain support from Education Support, who can be contacted on 08000 562 561 [INSERT DETAILS OF ANY LOCAL COUNSELLING OR SUPPORT SERVICES AVAILABLE TO SCHOOL STAFF].

Yours sincerely

**[NAME]**

**Capability Manager**

Enc. Final Performance Report

# LETTER – OUTCOME OF FINAL CAPABILITY MEETING

Dear [NAME]

**Outcome of Final Capability Meeting**

**OPTION A:**

I am writing further to the Final Capability Meeting on [INSERT DATE]. The Final Capability Manager has concluded that the standard of your performance is satisfactory and you are, therefore, no longer subject to the School’s Capability Policy and Procedure. The School’s Appraisal Policy and Procedure will resume with immediate effect.

The Final Written Warning issued on [INSERT DATE] remains live until [INSERT DATE]; in the event that the standard of your performance falls to an unsatisfactory level, the School’s Capability Policy and Procedure will recommence at the stage at which it was concluded.

Yours sincerely

**[NAME]**

**On behalf of Final Capability Manager**

**OPTION B:**

I am writing further to the Final Capability Meeting on [INSERT DATE]. The Final Capability Manager has concluded that your performance remains below the required standard and is not capable of sustainable improvement.

The Final Capability Manager has recommended to the Governing Body that [your employment is terminated in accordance with your contract of employment. Your employment will end on the conclusion of your notice period on [INSERT DATE].]

[**Note to users: please review paragraph 6.6 of the Capability Policy and Procedure. If as an alternative to dismissal another sanction is to be applied by agreement, this arrangement will need to be fully documented here instead of the paragraphs on dismissal contained in this letter]**

[You will be required to attend work as normal during your notice period.]

**OR**

[You will not be required to attend work as normal during your notice period. You should not contact any person connected with the School without my permission but should make yourself available to answer queries on the telephone during your normal working hours. You remain bound by the terms of your contract of employment until the expiry of your notice period]

You have the right to appeal against this decision. If you wish to appeal this decision, you should do so by writing to the Clerk to the Governors within 10 Working Days of the date this letter, therefore, by [INSERT DATE]. An appeal will not delay the commencement of the notice period.

Yours sincerely

**[NAME]**

**Chair of Governors**

# LETTER FROM CLERK TO THE GOVERNORS TO THE EMPLOYEE – RECEIPT OF APPEAL

Dear [NAME]

**Receipt of Appeal**

Thank you for your letter of appeal against the decision to [issue a First Written Warning] [issue a Final Written Warning] [terminate your employment on notice].

The appeal meeting will take place on [DATE] at [TIME] at [VENUE]. The Appeal Manager will be the [NAMES]

The Appeal Manager will be relying on the following evidence at the appeal meeting [INSERT DETAILS OF WRITTEN AND/OR ORAL EVIDENCE] [THIS WRITTEN EVIDENCE IS ENCLOSED WITH THIS LETTER]

You may be accompanied by a Companion who can be a trade union official, an accredited representative of a trade union or other professional association of which you are a member, or a willing work colleague who is not involved in your performance issues. Note that your Companion cannot answer questions for you and you must notify me of their name at least the working day before the meeting, therefore by [INSERT DATE]

If you consider yourself to be a person with a disability and there are reasonable adjustments you believe I can make to accommodate your disability in relation to the operation of the Capability Policy and Procedure, please do let me know as soon as possible.

Any evidence you intend to present at the meeting must be provided to me at least 2 working days in advance of the appeal meeting. This is in order to ensure efficiency and operational smoothness and to provide the Appeal Manager with enough time to fully consider the evidence you provide, therefore by [INSERT DATE].

You may also be able to obtain support from Education Support, who can be contacted on 08000 562 561 [INSERT DETAILS OF ANY LOCAL COUNSELLING OR SUPPORT SERVICES AVAILABLE TO SCHOOL STAFF].

Yours sincerely

**[NAME]**

**Clerk to the Governors**

**Enc. [Copies of written evidence if applicable]**

# LETTER FROM APPEAL MANAGERR - REJECTION OF APPEAL

Dear [NAME]

**Outcome of Appeal**

Further to the appeal meeting held on [INSERT DATE], I am writing to confirm that your appeal was unsuccessful and that the [First Written Warning] [Final Written Warning] [termination of your employment] stands.

[In providing your grounds for appeal, you did not present any new facts or information that had not already been taken into account when the decision was made].

OR

[The information you provided in your grounds for appeal does not add anything material to the facts which would warrant further investigation].

There is no appeal against our decision.

Yours sincerely

**[NAME]**

**On behalf of the Appeal Manager**

# LETTER FROM GOVERNORS – OUTCOME OF APPEAL – FURTHER ASSESSMENT PERIOD

Dear [NAME]

**Outcome of Appeal**

Following the appeal meeting on [INSERT DATE], it has been decided that your dismissal on notice should be revoked and that you should be placed in a further Assessment Period of [X] weeks pending a further Final Capability Meeting.

Please note that this process has not affected your continuous employment and any associated rights from your continuous employment.

Yours sincerely

**NAME**

**On behalf of the Appeal Manager**

# LETTER FROM APPEAL MANAGER – OUTCOME OF APPEAL – APPEAL UPHELD

Dear [NAME]

**Outcome of Appeal**

Further to the appeal meeting held on [INSERT DATE], I am writing to confirm that your appeal has been upheld and that the [First Written Warning] [Final Written Warning] [termination of your employment] has been overturned. I shall be referring the matter back to the [Capability Manager][Final Capability Manager] for reconsideration.

Please note that this process has not affected your continuous employment and any associated rights from your continuous employment.

Yours sincerely

**[NAME]**

**On behalf of the Appeal Manager**