# PA8b - Outcome of Case Conference (Stage 3 – potential dismissal)

Green = required input

Red = short term absences

Blue = long term absence

Date

**Private and Confidential**

Name

Address

Dear

**Outcome of Stage 3 Hearing**

I am writing to confirm the outcome of the Case Conference held on (DATE) when we discussed your current sickness absence. Also present at the meeting was/were (name, job title, / TU Rep / People Management).

During the meeting we discussed your absence and considered whether there were any further actions the Council could take to assist you in continuing with your employment.

In reaching a decision, I considered the information provided by the manager (name, job title) which included: ***(amend as appropriate)***

*Advice received from the occupational health service*

*Your absence record*

*The impact of your absence on service delivery, colleagues and the Council*

*Actions taken to support you in trying to reach an acceptable level of attendance*

*Any implications arising from the Equality Act (2010) and other employment legislation*

*Your response and representation made on your behalf*

*Other…*

I considered all the submissions made and the evidence presented very carefully and foundas follows:

**List each point in turn with the finding for that particular point and reasons for the findings.**

The final outcome of the hearing was **(*insert details*).**

***(If not dismissal)***

I decided that in light of your continued absence that:

E.g

-The meeting will be adjourned as further information is required.

-A supportive action plan will be implemented but if not successful, a further stage 3 will be re-convened.

-Triggers to be reviewed

-Updated medical advice required (Occupational health report not to be more than 3 months old).

***(If dismissal)***

I decided that in light of your continued absence and no certain date of a return to work / no prospect of a return to work in the foreseeable future and the effect of your continued absence on service delivery and colleagues, that your employment as (job title) should be terminated on the grounds of incapability through ill health.

It is with regret that I therefore give you (NUMBER) month’s official notice of your dismissal on the grounds of incapability to undertake your duties effectively because of ill health. This will take effect from (date). You will receive normal pay for this period, this/these payment will be made at the usual time(s), the final payment will be made on (**give date dependant on notice period**).

***(FOR IHR***)

For ill health retirement if you require further information about the pension decision and / or a copy of the Council’s Pension Appeal Procedure, this can be obtained from your manager or People Management, Resources and Transformation, Cumbria County Council, Parkhouse Building, Kingmoor Park, Carlisle, Cumbria, CA6 4SJ. The appeal procedure is known as the Internal Disputes Resolution Procedure and can be obtained from <http://www.intouch.ccc/hr/pay_benefits/default.asp>

If you are unhappy with the pension decision you can appeal to:-

Your Pension Service, PO Box 1382, PRESTON, PR2 0WQ

or at askpensions@localpensionspartnership.org.uk within 6 months of the date of this letter. You also have recourse to contact The Pension Advisory Service (TPAS).TPAS helps members and beneficiaries of pension schemes with disputes that they cannot resolve directly with the Pensions Scheme governing body. The address for the TPAS is:

11 Belgrave Road, London SW1V 1RB

Pensions Helpline number: 0845 6012923

Fax: 020 7592 7000

Email: enquiries@pensionsadvisoryservice.org.uk

TPAS can also be contacted via your local Citizens' Advice Bureau.

The appeal procedure has two internal stages. The first stage is to the “adjudicator” who is a Senior Manager and the second stage, which must be within six months of the adjudicator’s decision, would be to the “administering authority” who is the Senior Manager, Pensions & Financial Services. Thereafter any further appeal would be an external appeal to the Pension Ombudsman at:-

The Office of the Pensions Ombudsman, 11 Belgrave Road, London, SW1V 1RB or at <http://www.pensions-ombudsman.org.uk/contact-us>

Should you wish to access Cumbria County Council’s counselling service, which is an independent and confidential service, please contact me and I will make arrangements.

If you wish to access additional support you can find details of national helplines and websites on [inTouch](http://www.intouch.ccc/hr/attendance_wellbeing/default.asp) or on the [County Council website](http://cumbria.gov.uk/employeeinformation/copingwithchange.asp).

In accordance with the Grey Book Absence Management Procedure I must inform you that you have the right of appeal against this decision. If you wish to exercise this right you or your representative should do so in writing to me, within 7 working days of the date of notification of the decision and should state the reasons for the appeal.

If you choose not to appeal and you have any personal belongings which you would like to be returned to you, please let me know and I shall make these arrangements. If you have any property belonging to the County Council again please let me know and I shall make the arrangements to have these collected from you.

If you require a copy of this document in different formats such as large print, Braille, audio or in a different language, please call 01228 606060.

***(amend / use as appropriate to individual circumstances***)

On behalf of Cumbria County Council I would like to thank you for the work you have undertaken. I acknowledge that this has been a stressful time for you and those close to you and hope that you can now move forward and look to the future with much improved health.

Yours sincerely

Area Manager

Cc: TU Rep *(where relevant)*

 People Management/Personal file

 Line Manager