**Attendance Review Meeting**

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| Employee Name |  |
| Job Title |  |
| Name of attendees at meeting |  |
| Date |  |
| Summary of Absence in last 12 months |
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| Discussion notes* *Employees reason for absence*
* *Likelihood of further absences*
* *Agree solutions to address causes of absence from work*
* Agree targets and timescales for improvement where appropriate in the context of the health issue(s) at hand

*IF necessary -* Make the employee aware that where no specific health or disability related issues have been identified then a lack of improvement in their attendance record could result in formal action being taken.  |
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| Actions Agreed*Include timescale of review period.* |
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| Review Date |  |
| Review Outcome |  |

***Once the initial Attendance Review Meeting is completed, please upload onto the staff database and this will enable the People and Culture Team to draft a letter confirming any actions. Once the Review Period is complete, please update form and upload onto the staff database replacing the original document.***