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1 Introduction

The Trust recognises that employment may end for a variety of reasons. Where this occurs, it is essential that the process is lawful, fair, compassionate, and consistent, and that dismissal is only pursued where appropriate procedures have been followed and alternatives considered.

This procedure sets out how employment ends, not why disciplinary, capability, or organisational decisions are made, which are governed by separate policies.

This policy aligns with and supports the delivery of [Our Journey To Change: the next chapter](#).

2 Purpose

This procedure provides a fair, clear, and legally compliant framework for managing the end of employment:

- By the member of staff (resignation, retirement)
- By the Trust (dismissal for specific lawful reasons)
- Automatically (end of fixed-term contracts, death in service)
- Ensuring consistent handling of notice, appeals, records, and pay
- Reasonable adjustments are considered where required
- Staff are treated with dignity and respect throughout the process
- Exit data is reviewed to identify any trends relating to protected characteristics and workforce equality

It aligns with:

- UK employment law
- ACAS guidance
- NHS best practice

3 Who this procedure applies to

Applies to all Trust staff (Agenda for Change and Medical Staffing), except where superseded by national training contracts.

This procedure does not apply to:

- Bank staff

4 Related documents

This procedure also refers to:

- [Exit interviews - Thinking about leaving or moving roles | TEWV Intranet](#)
- [Organisational Change Procedure](#)
- [Probationary Period Procedure](#)
- [Capability Procedure](#)
- [Staff Health, Wellbeing and Attendance Procedure](#)
- [Disciplinary Procedure](#)
- [Dealing with concerns affecting Medical staff for Medical Staffing](#)

5 Key principles

1. Dismissal must always be for a fair reason
2. A fair process must be followed for that reason
3. Dismissal is a last resort
4. Employees have the right to representation and appeal
5. All decisions must be documented and auditable



Every effort **must** be made to undertake an exit interview for all staff in line with the Trust's exit interview process set out at [Exit interviews - Thinking about leaving or moving roles | TEWV Intranet](#)

Line Managers **must** engage with staff at the earliest opportunity or as soon as they are aware a staff member is thinking about leaving or moving roles.

6 Reasons for end of employment – by staff member

Employment may lawfully end for the following reasons:

- Resignation (including retirement)
- Death in service

6.1 Resignation

6.1.1 Process

1. Staff member submits resignation in writing
2. Line Manager acknowledges within 5 working days

3. Notice period confirmed
4. Leavers process initiated (ESR, checklist, exit process)

6.1.2 Notice periods

As per contract of employment/Agenda for Change (AfC) Terms and Conditions of Service:

Position	Notice period
Temporary contract of less than 6 months	1 week
Temporary contract of 6 months or more	2 months
AfC Grades 1 – 5	2 months
AfC Grades 6 – 7	2 months
AfC Grades 8 – 9	3 months
Consultant and SAS doctors	3 months
Resident Doctors	1 month

6.1.3 Key points

- Shorter notice periods may apply; notice can be waived by mutual agreement
- Pension-related retirements should give a minimum 4 months' notice
- Leaving without notice may result in pay up to last worked day only
- Where appropriate, a longer notice period may apply (advice should be sought from People and Culture)

7 Reasons for end of employment – by the Trust (dismissal)

- Failure to meet requirements of probationary period (not applicable to Medical staff)
- Capability (performance)
- Capability (ill-health)
- Conduct
- Non-renewal of fixed-term contract
- Redundancy
- TUPE – refer to the Trust's Organisational Change Procedure
- Some other substantial reason (SOSR)



This procedure does not replace the relevant governing procedure. Dismissal **must** be considered in line with the relevant governing procedure.

7.1 Notice periods (dismissal)

Statutory minimums apply unless contractual notice is greater:

Length of Service	Notice period
More than 1 month but less than 2 years continuous service	1 week
More than 2 years but less than 12 years continuous service	1 week for each year of service up to a maximum of 12 weeks
More than 12 years continuous service	12 weeks

In certain circumstances payment in lieu of notice (PILON) may be considered with People and Culture advice.

7.2 Failure to meet requirements of probationary period (not applicable to Medical staff)

7.2.1 Governing Procedure

- Probationary Period Procedure

7.2.2 Minimum requirements

- Reviews conducted
- Support provided
- Formal Management Meeting held
- Dismissal must be confirmed in writing with right of appeal

7.3 Capability (performance)

7.3.1 Governing Procedure

- Capability Procedure

7.3.2 When dismissal may occur

Only after:

- Formal capability stages completed
- Support, training and review periods exhausted
- Final capability hearing held

7.3.3 Leavers process

- Written confirmation of dismissal issued
- Right of appeal confirmed
- Notice issued (unless summary dismissal applies)

7.4 Capability (ill-health)

7.4.1 Governing Procedure

- Staff Health, Wellbeing and Attendance Procedure

7.4.2 Minimum requirements before dismissal

- Occupational Health advice obtained, reviewed, and considered
- Reasonable adjustments considered and trialled, if possible
- Redeployment explored, if applicable
- Final Sickness Hearing held

7.4.3 Key legal considerations

- Equality Act 2010
- Human Rights Act 1998
- Ill-health retirement considered, where applicable

7.5 Conduct

7.5.1 Governing Procedure

- Disciplinary Procedure

7.5.2 When dismissal may occur

- Following a formal disciplinary hearing
- Summary dismissal (only in cases of gross misconduct)

7.5.3 Leavers process

Outcome letter confirms:

- Reason for dismissal
- Effective date
- Notice (or summary dismissal)
- Right of appeal

7.6 Non-renewal of fixed-term contract

7.6.1 Legal position

- Non-renewal is a dismissal in law where the member of staff has been continuously employed for longer than 6 months

7.6.2 Process

1. Manager reviews contract **minimum 4 weeks prior** to end date
2. Written meeting invite issued
3. Discussion held
4. Outcome confirmed in writing (must demonstrate a fair reason for non-renewal)

7.6.3 Redeployment (not applicable to Medical staff)

- Employees with 2+ years' continuous service with the Trust **must** be registered for redeployment
- Redeployment must be exhausted before dismissal

7.7 Redundancy

For additional information on redundancy, please refer to Agenda for Change Terms and Conditions of Service.

7.7.1 Governing Procedure

- Organisational Change Procedure

7.7.2 Leavers process trigger

- After formal redundancy decision is confirmed
- Following redeployment exhaustion, if applicable

7.7.3 Minimum requirements before dismissal

- At-risk consultation completed
- Redeployment fully exhausted and evidenced
- Redundancy approval obtained
- Notice issued in writing

7.7.4 Notice and pay

- Statutory or contractual (whichever is greater)
- Redundancy pay, where applicable

7.8 Some other substantial reason (SOSR)

7.8.1 Requirements

- People and Culture advice is mandatory
- Evidence of reasonableness must be provided
- Formal meeting must be held
- Staff have the right of appeal

8 Appeals against dismissal (in-line with appropriate governing procedure)

8.1 Governing procedures

Appeals against dismissal should be held in-line with the appeal process set out in the relevant governing procedure.

8.2 Appeals against dismissal where there is no governing procedure or where there is no appeal process set out in the relevant governing procedure

Where there is no governing procedure or where there is no appeal process set out in the relevant governing procedure, appeals against dismissal should be held in-line with the appeal process as set out in **Appendix 7** and **Appendix 8** of this procedure.

8.3 Timescales

- **Appeal submission:** within 7 calendar days of receiving an outcome letter
- **Appeal hearing:** normally within 3 months of the date of submission
- **Outcome issued:** within 5 working days of the appeal hearing

8.4 Appeal panel

Will be:

- Independent
- Established in line with **Appendix 7 – Point 4**
- Not involved in original decision
- Supported by People and Culture

There is no further internal right of appeal beyond this stage.

9 Roles and responsibilities (all reasons)

9.1 Line Manager

- Confirm final date in writing
- Complete ESR termination within 2 working days
- Ensure return of Trust property
- Calculate final annual leave and advise Payroll
- Encourage completion of leavers form

9.2 Employee

- Return Trust property
- Complete handover
- Participate in exit process, where applicable

10 Death in service

In the unfortunate event of a death in service the Trust recognises the need to balance sensitivity with the practical need to administer pay arrangements during a difficult and emotional time for the next of kin.

In addition, the death of a colleague has a major impact on the wider team and management should ensure that appropriate support is offered to colleagues through this difficult and emotional time.

10.1 Line Manager responsibilities

As soon as the line manager is made aware of the death of a member of staff, immediately they must:

- Notify their Senior Manager
- Notify the Chief Executive
- Notify People and Culture twev.hradminteam@nhs.net
- Notify the Pension Services Team tewv.pensionservices@nhs.net
- Record the member of staff's death on ESR. The date of termination will be the date of death

The role of the Line Manager will depend on the circumstances surrounding the death which fall into 3 main categories:

- a) Death outside of working time
- b) Death at work whilst on duty
- c) Death either outside of working time or at work whilst on duty where the individual works into, but is not employed by, the Trust (i.e. employed by another organisation)

In each situation the role of the Line Manager varies.

10.1.1 Death outside of working time

The Line Manager should establish contact with the employee's next of kin to:

- Offer condolences on behalf of the Trust
- Answer any initial queries relatives may have
- Establish the marital or civil partnership status of the member of staff and whether they have any dependent children (if over the age of 18 are they in full time education?)
- Obtain information about the funeral arrangements and whether the family would prefer flowers or a charitable donation and make the appropriate arrangements on behalf of the Trust
- Obtain support for colleagues who may be in distress, an extra source of support available to colleagues is the Chaplain

10.1.2 Death at work whilst on duty

The Line Manager should deal with the immediate situation by:

- Obtaining assistance from a Doctor and Senior Manager (the Doctor at the scene will contact the Coroner's Office)
- Arrange removal of the deceased to a place of privacy
- Obtain support for colleagues who may be in distress, an extra source of support available to colleagues is the Chaplain

They should then:

- Establish the next of kin from either ESR or the personal file
- Ensure that the next of kin is informed by either visiting personally or contacting the Police
- Arrange a facility for the interviewing of witnesses by the coroner's office, and provide support during such interviews, if requested
- Obtain information about the funeral arrangements and whether the family would prefer flowers or a charitable donation
- If possible, attend the funeral or arrange for a representative to attend on their behalf
- Complete and process the member of staff as a leaver on ESR. The date of termination will be the date of death

a) Death either outside of working time or at work whilst on duty where the individual works into, but is not employed by, the Trust (i.e. employed by another organisation)

Death outside of working time:

- The Line Manager should inform the employer of the death of their employee and ensure they understand that all arrangements are their responsibility, including notifying next of kin

Death whilst on duty:

- The manager should obtain assistance from a Doctor who will contact the Coroner's office
- Arrange the removal of the deceased to a place of privacy
- The manager should inform their employer of the death and ensure that they understand that all arrangements are their responsibility, including notifying the next of kin
- Arrange a facility for the interviewing of witnesses by the coroner's office, and provide support during such interviews if requested
- Obtain support for colleagues who may be in distress, an extra source of support available to colleagues is the Chaplain

Where possible, the Line Manager should attend the funeral or arrange for a representative to attend. Managers need to be sensitive to the fact that several staff may wish to attend the funeral and will need to manage staffing to allow as many people as possible to attend.

10.2 People and Culture responsibilities

As soon as People and Culture receive notification of the death of a member of staff, they will:

- Draft a letter of condolence to the next of kin on behalf of the Trust for review by the Chief Executive
- Provide guidance to managers in respect for time off for attendance at funerals and support the manager with any welfare issues that may arise
- Inform Occupational Health of the death of the staff member (where applicable)
- Inform Payroll of the death of the employee
- Contact the Pension Services Team to ascertain whether the staff member was in the NHS Pension scheme. If yes, provide the Pension Services Team with next of kin details
- Ensure measures are put in place to ensure no written correspondence in the deceased's name is sent to their home address
- Ensure the member of staff's death has been recorded on ESR
- Ensure all completed documentation is processed appropriately and promptly
- Provide advice and guidance to the Line Manager on the protocols following a death in service including information for the family and advice on the sensitive recovery of any Trust property

10.3 Pension Services Team responsibilities

As soon as the Pension Services Team receives notification of the death of a member of staff, they will:

- Notify NHS Pensions of the death and the next of kin – NHS Pensions will then write to the family with the necessary forms to complete

11 Definitions

Term	Definition
Companion	Your chosen companion can be: • A fellow worker employed by the Trust • A Trade Union representative • An official employed by a Trade Union or friend or family member A trade union representative who is not an employed official must have been certified by their union as being competent to accompany a worker in line with the ACAS code of practice.
Accredited Representative	An elected or appointed representative of a Professional Organisation or Trade Union who is notified to, and accepted by, the Trust as a formal representative of that organisation.
Continuous Service	Continuous service for the purpose of calculating statutory notice periods (in accordance with the Employment Rights Act 1996) is from the date you commenced employment with the Trust. If you have left and rejoined the Trust, there must not have been a break of more than a week (measured Sunday to Saturday). If there has been a break, your continuous service would commence from the date you rejoined the Trust. Please note, bank work, does not count towards continuous service.

12 How this procedure will be implemented

- People & Culture will produce a communication brief for the intranet, weekly all staff email
- This procedure will be published on the Trust's Intranet and external website
- This procedure will be made available to all staff who are subject to potential redeployment
- Ongoing support and guidance will be available to all staff from the People and Culture

12.1 Training needs analysis

Staff/Professional Group	Type of Training	Duration	Frequency of Training
None identified.			

13 How the implementation of this procedure will be monitored

Number	Auditable Standard/Key Performance Indicators	Frequency/Method/Person Responsible	Where results and any Associate Action Plan will be reported to, implemented and monitored; (this will usually be via the relevant Governance Group)
1	Procedure Review	12 months from date of publication	Policy Working Group

14 References

- UK employment law
- ACAS guidance
- NHS best practice
- Agenda for Change (AfC) Terms and Conditions of Service

15 Document control (external)

To be recorded on the policy register by Policy Coordinator

Required information type	Information
Date of approval	21 July 2026
Next review date	21 July 2029
This document replaces	HR-0044-v3.4
This document was approved by	People and Culture Policy Working Group
This document was approved	22 June 2026
This document was ratified by	Joint Consultative Committee
This document was ratified	21 July 2026
An equality analysis was completed on this policy on	20 July 2026
Document type	Public
FOI Clause (Private documents only)	N/A

Change record

Version	Date	Amendment details	Status
v4	21 Jul 2026	• Procedure transferred to the new format • Inclusion of clear dismissal reasons • Explicit setting out of governing policy/procedure for each dismissal reason • Updated definitions • Amended Medical Staffing terminology, i.e. ○ 6.1.2 – ‘Registrars’ replaced with ‘Resident Doctors’ ○ 6.1.3 – clearer wording regarding shorter or longer notice periods	Approved

		○ 7 – Probationary does not apply to Medical Staff ○ 7.6.3 – Redeployment does not apply to medical staff ○ Appendix 3c – ‘Clinical Manager’ replaced with ‘Medical Manager’ • Appendix 7 – amended requirements for Directors on appeal panels, i.e. 1 Director for dismissals other than conduct • Appendix 6 – Inclusion of Medical Staff Leaver Checklist	
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Appendix 1 - Equality Impact Assessment Screening Form

Please note: The [Equality Impact Assessment Policy](#) and [Equality Impact Assessment Guidance](#) can be found on the policy pages of the intranet

Section 1	Scope
Name of service area/directorate/department	Trust Wide
Title	Leavers Procedure
Type	Procedure
Geographical area covered	Trust wide
Aims and objectives	This procedure sets out how employment ends, not why disciplinary, capability, or organisational decisions are made, which are governed by separate policies.
Start date of Equality Analysis Screening	01/06/26
End date of Equality Analysis Screening	20/07/2026

Section 2	Impacts
Who does the Policy, Procedure, Service, Function, Strategy, Code of practice, Guidance, Project or Business plan benefit?	All Staff
Will the Policy, Procedure, Service, Function, Strategy, Code of practice, Guidance, Project or Business plan impact negatively on any of the protected characteristic groups? Are there any Human Rights implications?	• Race (including Gypsy and Traveller) NO • Disability (includes physical, learning, mental health, sensory and medical disabilities) NO • Sex (Men and women) NO • Gender reassignment (Transgender and gender identity) NO • Sexual Orientation (Lesbian, Gay, Bisexual, Heterosexual, Pansexual and Asexual etc.) NO • Age (includes, young people, older people – people of all ages) NO

	• Religion or Belief (includes faith groups, atheism and philosophical beliefs) NO • Pregnancy and Maternity (includes pregnancy, women / people who are breastfeeding, women / people accessing perinatal services, women / people on maternity leave) NO • Marriage and Civil Partnership (includes opposite and same sex couples who are married or civil partners) NO • Armed Forces (includes serving armed forces personnel, reservists, veterans and their families) NO • Human Rights Implications NO (Human Rights - easy read)
Describe any negative impacts / Human Rights Implications	No significant negative impact has been identified. However, there is a potential risk that some employees may experience disadvantage if information relating to the leaving process is not accessible, if communication needs are not met, or if the procedure is applied inconsistently. Employees with disabilities, those requiring reasonable adjustments may require additional support to fully engage with elements of the leaving process, including exit interviews or completion of associated documentation.
Describe any positive impacts / Human Rights Implications	The Leavers Procedure is expected to have a positive impact by providing a clear, consistent and transparent process for managing employee departures from the Trust. The procedure supports fair treatment of all staff, regardless of their protected characteristics, and helps ensure that exit arrangements are managed professionally, respectfully and in accordance with employment legislation and Trust requirements. The procedure promotes equality of opportunity by applying a standard process to all employees and supporting the collection of feedback through exit interviews, which may help identify and address workforce equality issues.

	The procedure also supports employee wellbeing by ensuring staff receive appropriate information regarding final pay, annual leave, pension arrangements and employment records
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Section 3	Research and involvement
What sources of information have you considered? (e.g. legislation, codes of practice, best practice, nice guidelines, CQC reports or feedback etc.)	AFC Terms and Conditions
Have you engaged or consulted with patients, carers, staff and other stakeholders including people from the protected groups?	Yes
If you answered Yes above, describe the engagement and involvement that has taken place	Full Consultation
If you answered No above, describe future plans that you may have to engage and involve people from different groups	N/A

Section 4	Training needs
As part of this equality impact assessment have any training needs/service needs been identified?	No
Describe any training needs for Trust staff	Awareness sessions of updated procedure
Describe any training needs for patients	N/A
Describe any training needs for contractors or other outside agencies	N/A

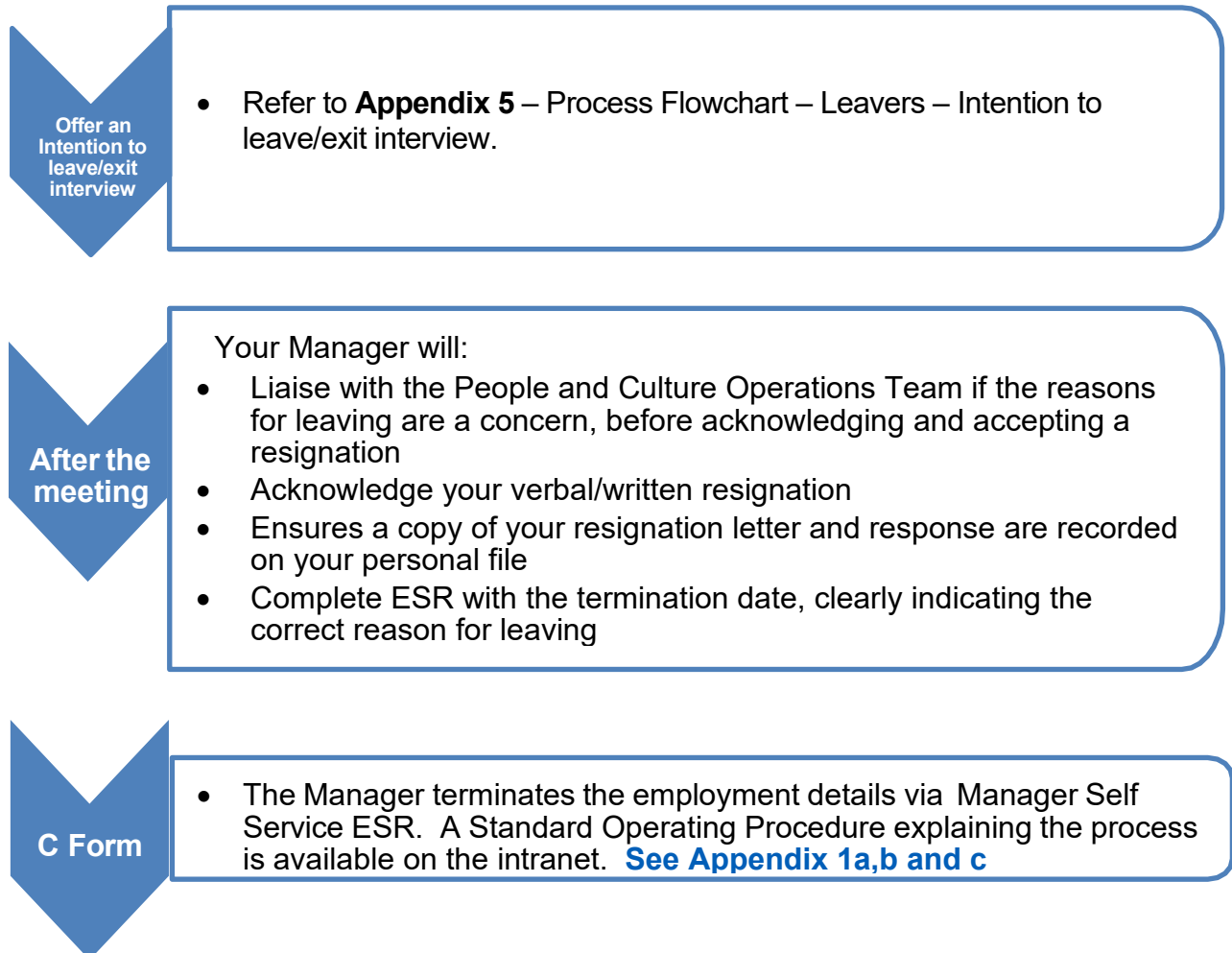
Check the information you have provided and ensure additional evidence can be provided if asked.

Appendix 2 – Approval checklist

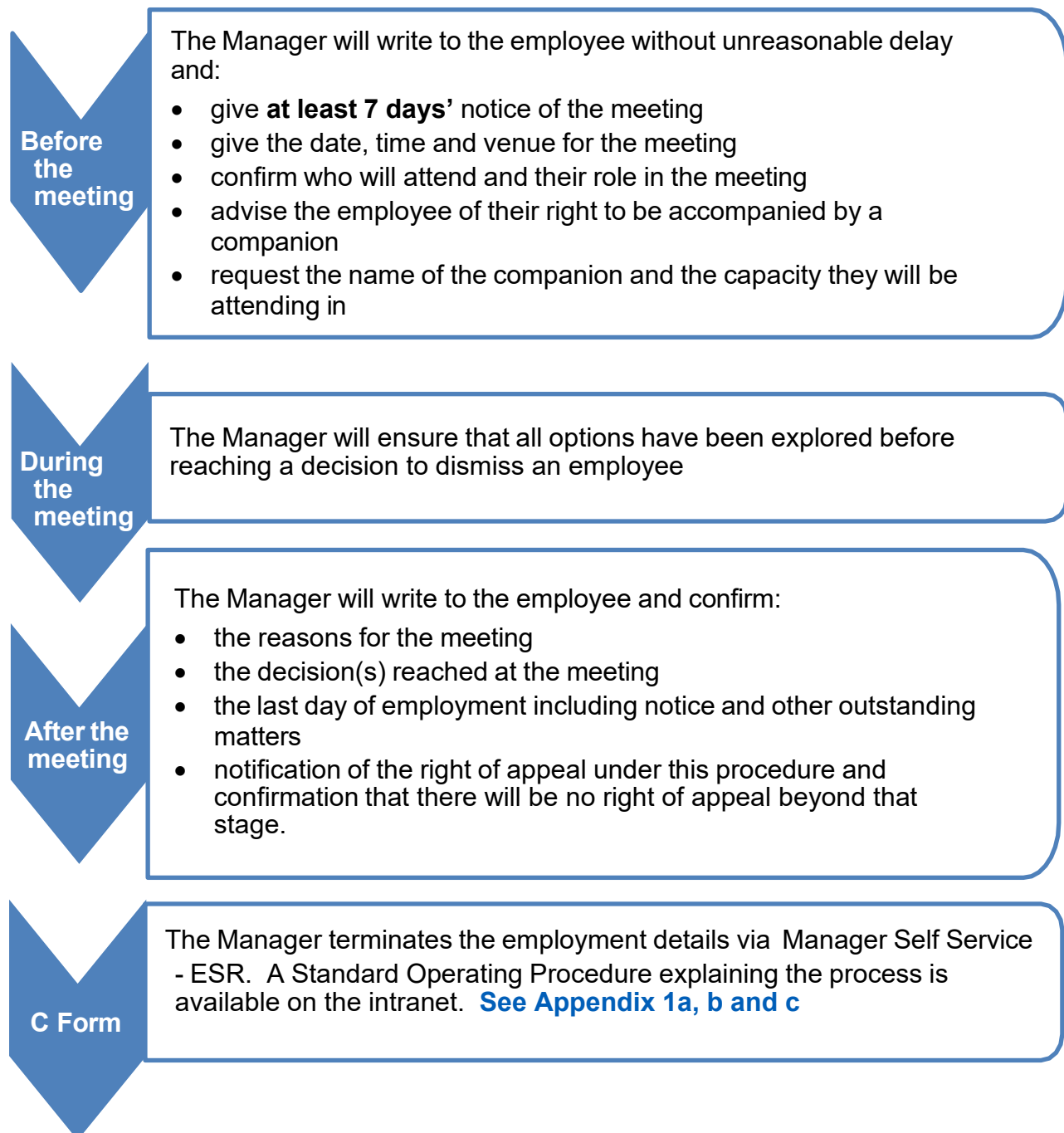
Title of document being reviewed:	Yes / No / Not applicable	Comments
1. Title	Yes	
Is the title clear and unambiguous?	Yes	
Is it clear whether the document is a guideline, policy, protocol or standard?	Yes	
2. Rationale		
Are reasons for development of the document stated?	Yes	
3. Development Process		
Are people involved in the development identified?	Yes	
Has relevant expertise has been sought/used?	Yes	
Is there evidence of consultation with stakeholders and patients?	Yes	
Have any related documents or documents that are impacted by this change been identified and updated?	Yes	
4. Content		
Is the objective of the document clear?	Yes	
Is the target population clear and unambiguous?	Yes	
Are the intended outcomes described?	Yes	
Are the statements clear and unambiguous?	Yes	
5. Evidence Base		
Is the type of evidence to support the document identified explicitly?	Yes	
Are key references cited?	Yes	
Are supporting documents referenced?	Yes	
6. Training		

Have training needs been considered?	Yes	
Are training needs included in the document?	Yes	
7. Implementation and monitoring		
Does the document identify how it will be implemented and monitored?	Yes	
8. Equality analysis		
Has an equality analysis been completed for the document?	Yes	
Have Equality and Diversity reviewed and approved the equality analysis?	Yes	
9. Approval		
Does the document identify which committee/group will approve it?	Yes	
10. Publication		
Has the policy been reviewed for harm?	Yes	
Does the document identify whether it is private or public?	Yes	
If private, does the document identify which clause of the Freedom of Information Act 2000 applies?	Yes	
11. Accessibility (See intranet accessibility page for more information)		
Have you run the Microsoft Word Accessibility Checker? (Under the review tab, 'check accessibility'. You must remove all errors)	Yes	
Do all pictures and tables have meaningful alternative text?		
Do all hyperlinks have a meaningful description? (do not use something generic like 'click here')	Yes	

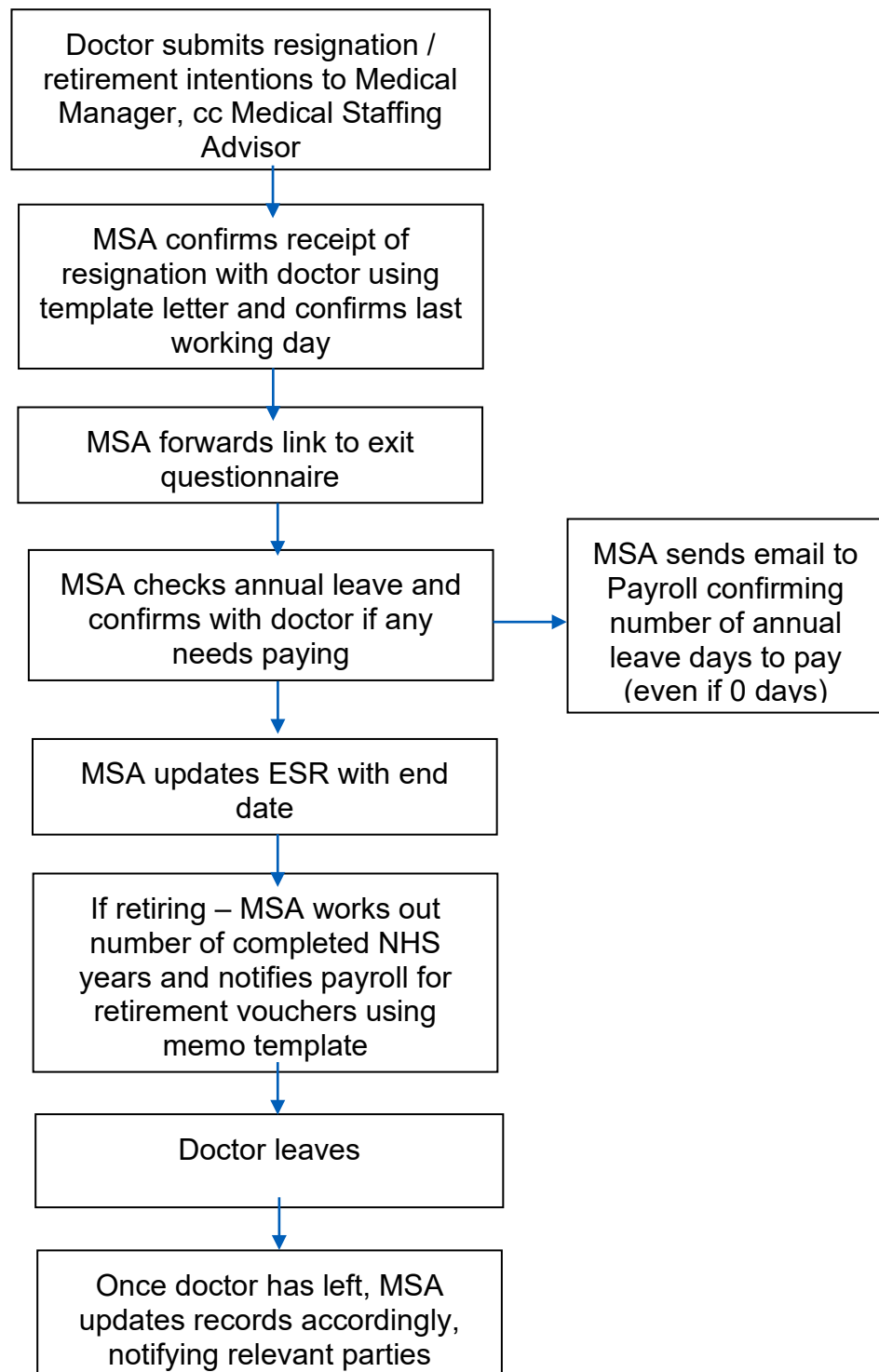
Appendix 3a – Resignation Flowchart



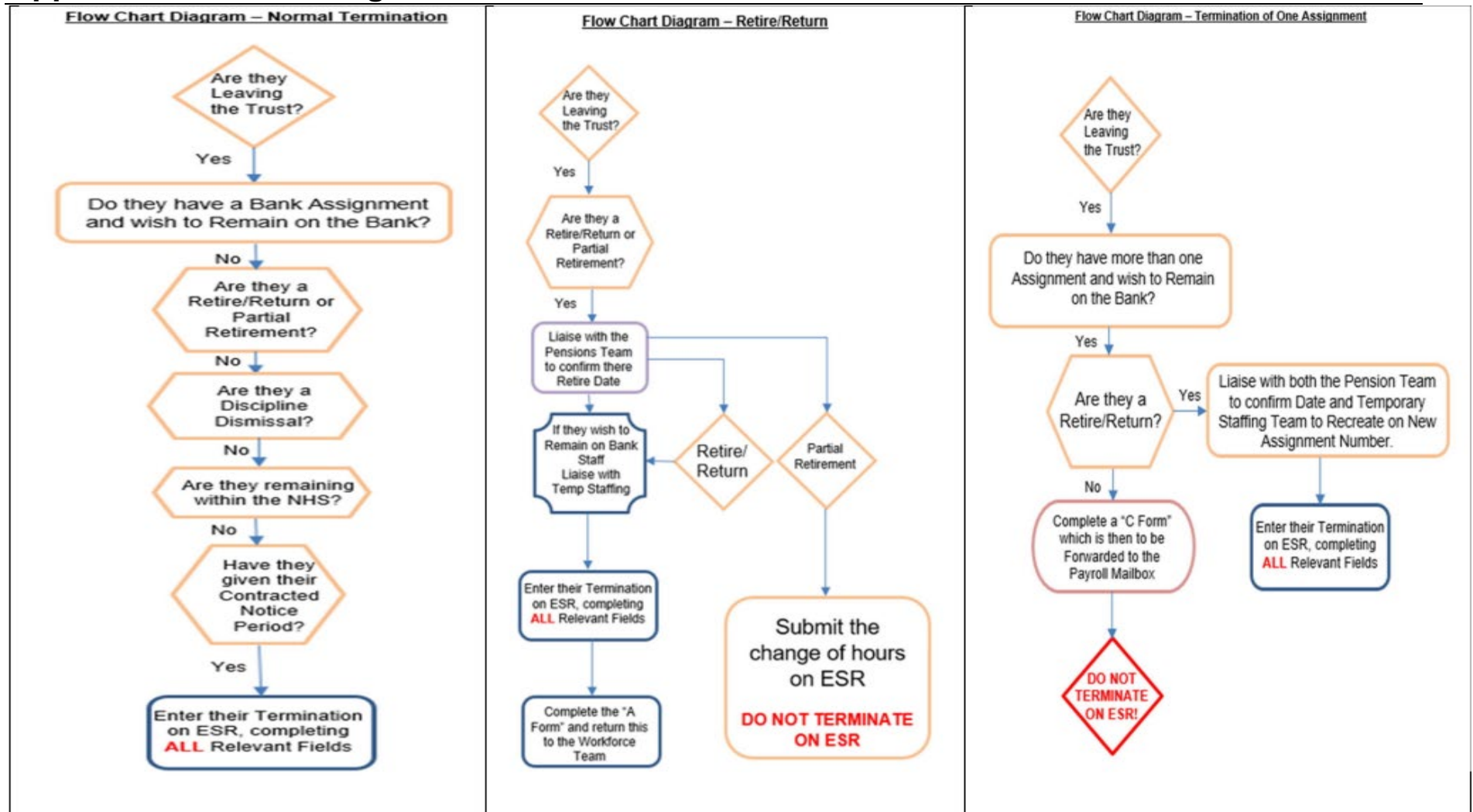
Appendix 3b – Fixed-term contract end flowchart



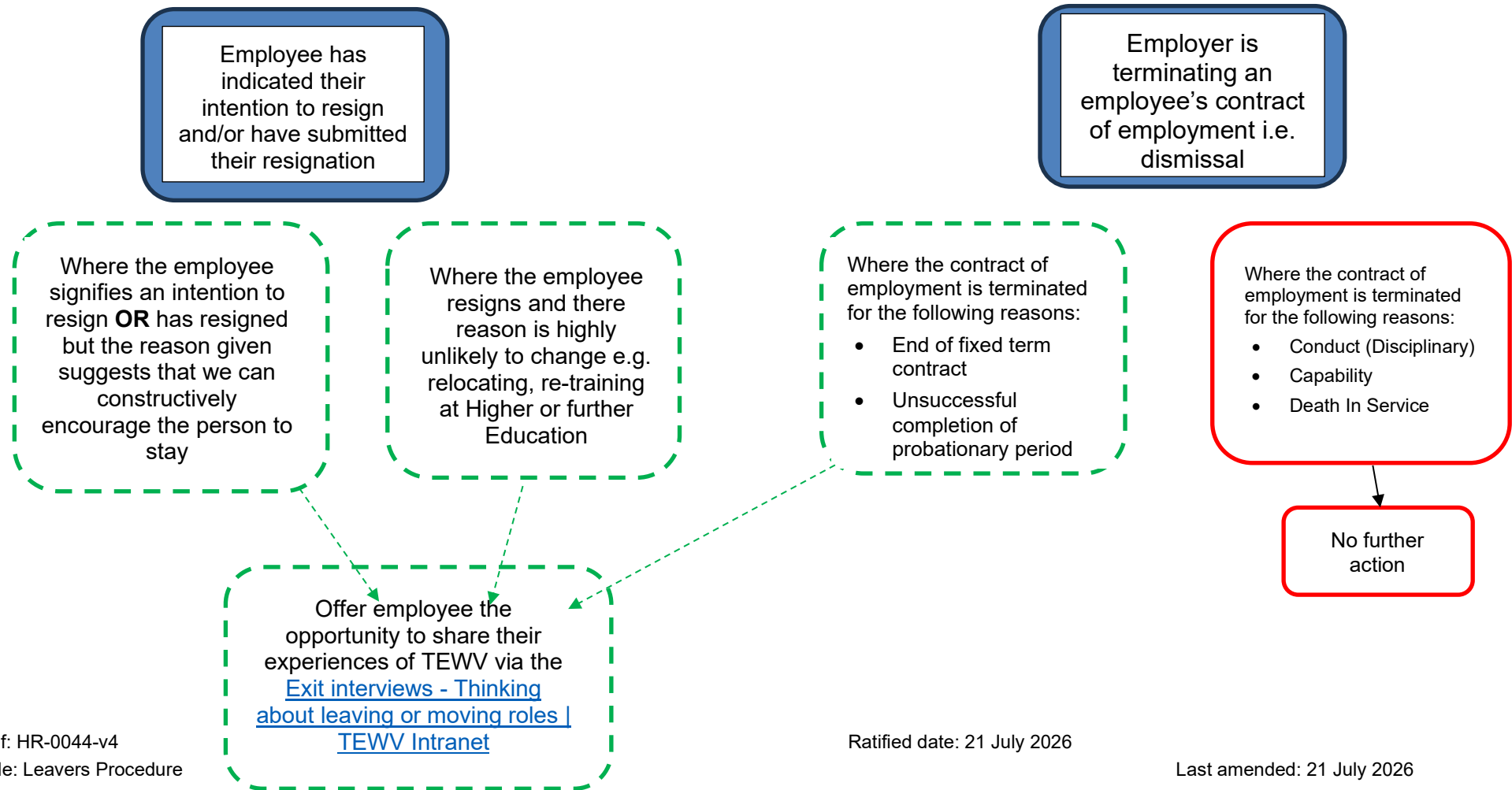
Appendix 3c – Medical Staffing Flowchart

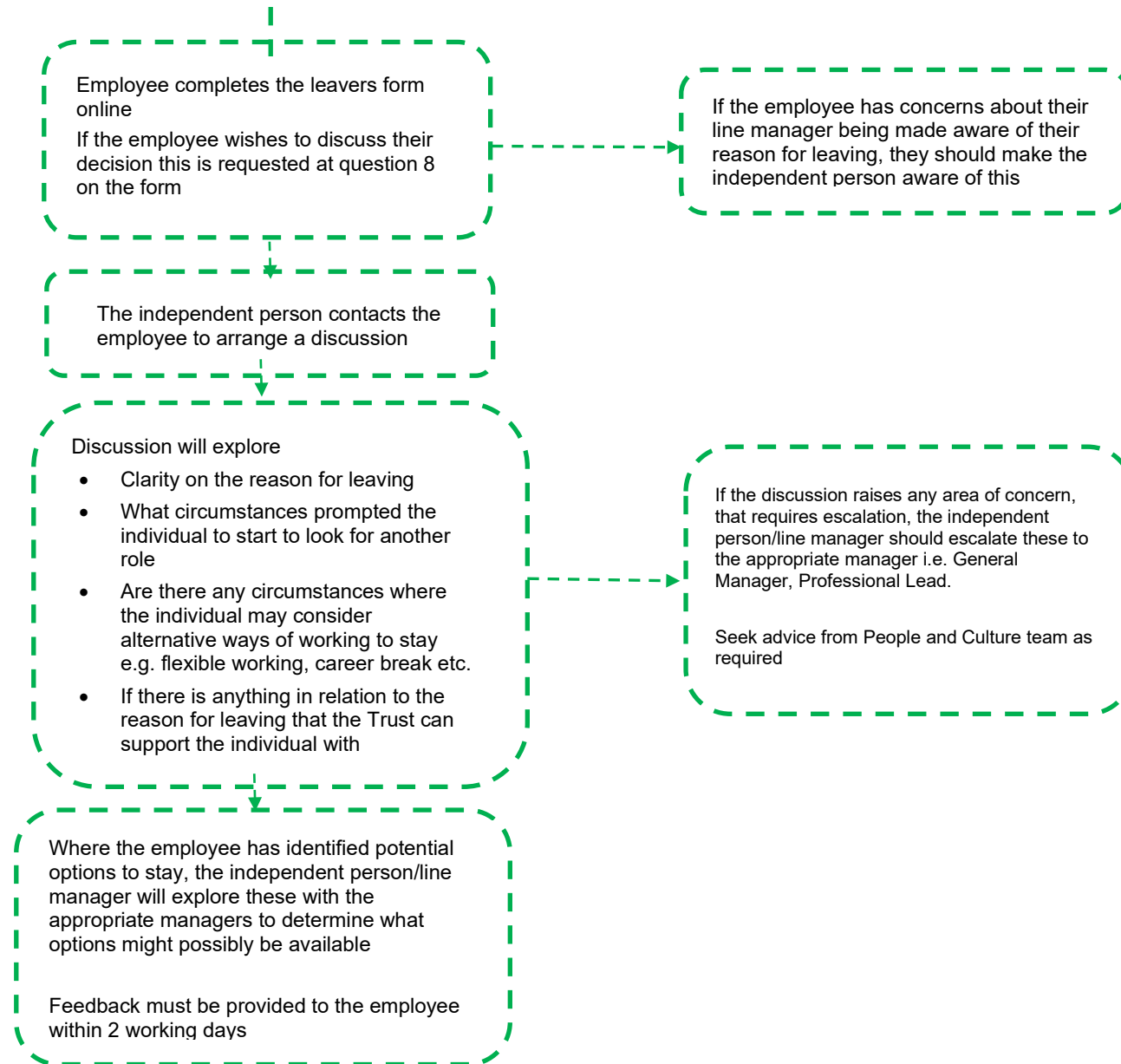


Appendix 4 – Recording a termination on ESR



Appendix 5 – Intention to Leaver Interview and/or Exit Questionnaire flowchart (Agenda for Change staff only)





Appendix 6 - Leaver Checklist

SECTION A – ALL STAFF		
Action Required	Who is responsible?	Date Completed
Calculate Annual Leave Entitlement and confirm with Payroll	Line Manager	
Complete the tasks identified within the ESR Manager Self Service Standard Operating Procedure for Termination of Employment	Line Manager	
Is the staff member part of a professionally led workforce? For example, do they receive clinical or professional supervision in addition to management supervision. If so, please link in with the relevant professional lead	Line Manager	
Complete the Intention to Leave form and undertake Leavers Debrief (see SECTION B for Medical Staff)	Line Manager/Employee	
Document & Data Management – Ensure the following: - Any data held on a portable device has been moved to the appropriate shared drive, Line manager should be aware of where the information is being stored on the shared drive - Delete all data from portable device - Portable devices should be returned by employee - Email account reviewed and all emails either filed in shared drive or deleted (see corporate records management guidance or contact Information Governance department) - All records on the home drive have been transferred to the shared drive or deleted (see corporate records management guidance or contact Information Governance department) - Information Asset Administrator to review all information and sign off that information has been correctly saved by completion of the removal of network access documentation	Line Manager/Employee Information Asset Administrator	

Lease Car Details (ensure the return of the Lease Car has been processed)	Line Manager/Employee	
ID Badge is returned	Line Manager/Employee	
Security Fob returned	Line Manager/Employee	
Library notified of leaving date	Line Manager/Employee	
Is this role an Information Asset Owner or Administrator? If yes notify the Policy Co-ordinator	Line Manager/Employee	
Is this role a policy author or policy lead? If yes notify the Policy Co-ordinator	Line Manager/Employee	
Return of all Trust property such as: • Laptop & Accessories. • Mobile • Portable Devices • Attack Alarms • Uniform • Trust Property/Premises Keys • Pagers/Bleepers • Car Park Pass • Disable NHS smartcard • Any other Trust property • Library books This is not an exhaustive list. All Trust property must be discussed	Line Manager/Employee	
SECTION B – MEDICAL STAFF ONLY		
Action Required	Who is responsible?	Date Completed

To confirm receipt of resignation and to confirm last working day with the Doctor using the template letter	Medical Staffing	
Forward link to exit questionnaire (see checklist below)	Medical Staffing	
To update internal records (master database, APA database, Medical Directory, Establishment List, Email circulation lists, New Starter/ Leaver Spreadsheet	Medical Staffing	
To inform Medical Education and Revalidation Lead	Medical Staffing	
To inform Library & NEAP	Medical Staffing	
To inform Foundation Trust Membership	Medical Staffing	
To update Sponsor Management System if Visa holder	Medical Staffing	
To inform GMC if IFD	Medical Staffing	

Medical Staff Leaver Checklist

Job Details	
Name of Doctor	
Job Title & Specialty	
Base & Location	
End Date	

Before Doctor Leaves				
	Yes	N/A	Date	Initials
Letter of resignation received**				
Letter of acknowledgement sent**				
Link to exit questionnaire sent				
Annual leave entitlement checked				
Actual last working day confirmed				
Payroll advised of annual leave (even if none to take)				
Payroll advised of retirement gift vouchers**				
ESR Updated				
ESR Checked (Checker to sign)				
If doctor is a supervisor, update ESR & Master Database				
Email Revalidation Lead re Exit Report (locums only)				
Email: Revalidation Lead (update revalidation DB & GMC Connect)				
Email: Recruitment Advisor				
Email EMD's secretary re CPD Group (Cailean Owens)				
Email Medical Education Events Co-Ordinator re SAS leaver				

Email SAS Tutor re SAS leaver (Huma Aazer)				
Medical Education (tewv.undergraduate@nhs.net & TEAWVNT.Medicaleducation@nhs.net) informed				
<u>Tewv.events@nhs.net</u> informed				
New Starter / Leaver Spreadsheet updated				
LTFT Champion informed (if LTFT Trainee)				
Arrange for laptop/smartphone return (Juniors only)				
Patchwork profile checked (compliance documentation still valid)				
Library informed if FP or GP registrar (tewv.libraryadmin@nhs.net)				
Check if SpR still requires IT access (for research)				

**** Print letters/e-mails and add to paper personal file** (Contractual T&C section)

After Doctor Has Left

IT Network/PARIS access removed – One Form				
LYPFT Network/PARIS removed				
Cancel ID Badge				
Removed from Master Database				
Removed from Additional PA database				
Removed from Medical Directory				
Removed from Trust Doctor database				
Removed from rotas				
Removed from email circulation lists				
Establishment List Updated				
Library informed if not FP/GP Registrar (tewv.libraryadmin@nhs.net)				
NEAP informed (tewv.neap@nhs.net)				
Foundation Trust Membership informed (tewv.ftmembership@nhs.net)				

Update Sponsor Management System if visa holder				
Inform GMC if IFD				
Exit report received from supervisor (agency doctors)				
Exit report sent to doctor and agency (agency doctors)				
Advise GMD of leaver for CPD purposes – cons/SAS				
Remove from CPD Peer Group list				
Archive doctor on DRS				
Archive personal file				

File notes:

I confirm I have followed and completed the actions in this leaver checklist form Name:..... Signature:..... Date:..... Medical Staffing Advisor

I confirm this leaver checklist form is fully completed Name:..... Signature:..... Date:..... Medical Staffing Team Leader

File placed into leavers drawer	☐	☐	☐	☐
Personal e-file archived	☐	☐	☐	☐

Appendix 7 – Appeals against dismissal where there is no governing procedure or where there is no appeal process set out in the relevant governing procedure

1. Arrangements will be made for the appeal to be heard without unreasonable delay, normally **within 3 months** of the date of submission
2. Prior to the hearing of an appeal, both the Determining Manager from the previous hearing and staff side will be asked to submit relevant documentation considered in the previous stage for the information of the panel. Management should ensure their submission outlines the main issues of the case to be heard and should be submitted **at least 3 weeks** before the date of the hearing
3. Employee submissions should be made to the People and Culture Operational Team Admin tewv.hradminteam@nhs.net no later than **5 working days** before the hearing in readiness for exchange between relevant parties
4. The appeal panel will consist of:
 - 2 Directors for dismissals under the Trust's Disciplinary Procedure, one of whom will act as the chair of the panel and the Deputy Director of People and Culture, or a nominated deputy will attend in an advisory capacity
 - 1 Director for all other dismissals who will act as the chair of the panel and the Deputy Director of People and Culture, or a nominated deputy will attend in an advisory capacity
 - In either case, the appeal panel may also include an additional member such as an appropriate professional advisor when the case involves a registered professional, or an appropriate subject matter expert, for example an Inclusive Cultures Lead
5. The appeal panel will not include anyone who has been directly involved in the original decision
6. The appeal panel may hear any new evidence not available in the previous stage
7. The employee will have the right to be accompanied by an accredited representative or a colleague employed by the Trust
8. The appeal panel will determine one or a combination of the following decisions:
 - That the original decision(s) was correct
 - That the original decision(s) was not appropriate and reinstate the employee
9. If a decision can be reached the same day the employee or their representative will be advised verbally of the outcome of the appeal hearing
10. Confirmation of the outcome of the appeal will be put in writing and sent to both the employee and their representative within **5 working days**. If for any reason this confirmation or the decision will be delayed beyond this period, the employee must be advised of the reason for the delay and the likely timescale for receipt
11. In all cases this document will include:

- The reasons for the meeting
- The findings of the appeal panel
- The decision(s) of the appeal panel
- The reasons for the decision(s)

12. There will be no right of appeal beyond this stage

Appendix 8 – Format of the appeal hearing for appeals against dismissal where there is no governing procedure or where there is no appeal process set out in the relevant governing procedure

1. The Determining Manager from the previous hearing shall state the management case in the presence of the employee and their companion and may call witnesses
2. The employee or their companion shall have the opportunity to ask questions of the Determining Manager from the previous hearing and witnesses
3. The members of the appeal panel shall have the opportunity to ask questions of the Determining Manager from the previous hearing and witnesses
4. The Determining Manager from the previous hearing shall have the opportunity to re-examine their witness on any matter referred to in their examination by members of the appeal panel, the employee or their companion. Witnesses will withdraw from the hearing
5. The employee or their companion shall put their case in the presence of the Determining Manager from the previous hearing and may call witnesses
6. The Determining Manager from the previous hearing shall have the opportunity to ask questions of the employee, their companion or their witnesses
7. The members of the appeal panel shall have the opportunity to ask questions of the employee, their companion or their witnesses
8. The employee or their companion shall have the opportunity to re-examine their witnesses on any matter referred to in their examination by members of the appeal panel or the Determining Manager from the previous hearing. Witnesses will withdraw from the hearing
9. The members of the appeal panel may invite either party to clarify or expand upon any statement they may have made and ask questions to determine whether any evidence will be called in respect of any part of their statement or evidence. Both parties may examine the clarifications in accordance with points 2 or 6 above
10. The appeal panel may at their discretion adjourn the hearing in order that further evidence may be produced by either party or where evidence requires additional time to be considered or for any other justifiable reason
11. The Determining Manager from the previous hearing and the employee or their companion will be given the opportunity to sum up their case if they so wish. The employee or their companion shall have the right to speak last. In their summing up neither party may introduce any new matter
12. The appeal panel will satisfy themselves that all parties have made all the points that they wish and are satisfied with the fairness of the hearing
13. The appeal panel will adjourn the hearing to enable full consideration of all the evidence

presented and to consider their decision

14. The appeal panel will deliberate in private only recalling both parties to clear points of uncertainty on evidence already given
15. Before reaching a decision, the Determining Manager of the appeal should consider:
 - Whether there has been as much consideration of alternatives to dismissal as was reasonable in the circumstances
 - All matters raised that were related to the decision, whether they were known to the manager making the decision at the time, but not matters that are unrelated to the reason for that decision
 - Whether the actions taken or not taken were reasonable in the circumstances
 - Whether there are any mitigating circumstances which may have a bearing on the case were reasonably considered
 - Whether the decision and action were proportionate to the issues at hand
 - Whether the action taken was within the band of reasonable responses that an employer would have been able to take in the circumstances
 - Whether there have been any similar cases in the past

If a decision can be reached the same day the employee or their representative will be advised verbally of the outcome of the appeal hearing.

Confirmation of the outcome of the appeal will be put in writing and sent to both the employee and their representative within **5 working days**.

If for any reason this confirmation or the decision will be delayed beyond this period, the employee must be advised of the reason for the delay and the likely timescale for receipt.