## **RECORD OF INITIAL ASSESSMENT**

- To be completed by the Manager when informal discussions with the employee have not resulted in satisfactory improvement in performance following a reasonable timescale, or where more serious concerns have come to light about an employee's performance.
- Managers should record their reasons for deciding whether there are grounds for taking formal action under the UHB Capability Policy. Please also refer to the toolkit for guidance.

NAME OF EMPLOYEE	
JOB TITLE	
GRADE	
NAME OF MANAGER	
JOB TITLE	
DATE UNDERTAKEN	
(This could include the Ir	ISIDERED AS PART OF THE INITIAL ASSESSMENT Informal Discussion Record, notes from review meetings, DRs, witness statements, notes from interviewing the
action under the Capabil	e/reasons that would provide grounds for taking formal ity Policy)
CONSIDERATION OF ANY UNDERLYING ISSUES (Managers should consider the following:	

<ul> <li>whether any Disability/ health and /or domestic concerns have been raised and their implications</li> <li>the relevance and significance of any mitigation that has been raised</li> <li>whether has the employee been given a reasonable amount of time and the opportunity to improve</li> <li>whether the agreed training and support has been implemented and sufficient opportunities given to embed and put the learning into practice</li> <li>the impact on the service and risks on the role</li> </ul>
OUTCOME OF INITIAL ASSESSMENT
NO FORMAL ACTION REQUIRED  Comments
MOVE TO STAGE 1 CAPABILITY HEARING
SIGNATURES
NAME OF MANAGERSIGNATURE