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| [SCRCCG.enquiries@nhs.net](mailto:SCRCCG.enquiries@nhs.net)  Tel via: 01723 343660  Reference  **By Email** | NHS Scarborough and Ryedale CCG  Scarborough Town Hall - York House  St Nicholas Street  Scarborough  North Yorkshire  YO11 2HG |
| Address line 1  Address line 2  Address line 3  Address line 4  Address line 5 | Tel: 01723 343660    Website: [www.scarboroughryedaleccg.nhs.uk](http://www.scarboroughryedaleccg.nhs.uk)  ENTER DATE |

Dear [Mr/Mrs/Ms]

**Grievance Hearing – Stage 3**

I am writing to acknowledge receipt of your letter of appeal dated date and to confirm that arrangements have been made to hear your Grievance at Stage 3 in accordance with the NHS Scarborough and Ryedale CCG Grievance Policy on date at time in location. The Grievance will be heard by names (CCG PANEL) and supported by name, HR Representative.

Please forward your Statement of Case outlining your Grievance to name by date. It is anticipated that mutual exchange of papers will take place on date.

I have to advise you that you have the right to be represented at this hearing by a single companion who can be either a Trade Union Representative or work colleague not appearing in a legal capacity.

I should be grateful if you would confirm your attendance, the name of your companion and if you intend to call any witnesses by contacting name by date.

Please note that Stage 3 is the final stage in the CCG Grievance process and the decision of the panel is binding and there is no further right of appeal.

Yours sincerely

Name

**Job Title**