

POLICY UNDER REVIEW

Please note that this policy is under review. It does, however, remain current Trust policy subject to any recent legislative changes, national policy instruction (NHS or Department of Health), or Trust Board decision. For guidance, please contact the Author/Owner.

Document Title	Grievance and Disputes Policy and Procedure V2.1		
This document replaces (exact title of previous version):	Grievance and Disputes Policy and Procedure V2.0		
Date Issued/Approved:	July 2018		
Date Valid From:	July 2018		
Date Valid To:	January 2022		
Directorate / Department responsible (author/owner):	People Experience and Organisational Development		
Contact details:	01872 253240		
Brief summary of contents	This policy sets out the Trust's approach to managing grievances and disputes raised by members of staff.		
Suggested Keywords:	Grievance, concern, complaint, dispute		
Target Audience	RCHT ✓	CFT	KCCG
Executive Director responsible for Policy:	Director of People and OD		
Approval route for consultation and ratification:	JCNC/JLNC		
General Manager confirming approval processes:	Head of People Experience		
Document library corporate guardian confirming approval of extension	Angela Chisholm		
Links to key external standards	None required		
Related Documents:	<ul style="list-style-type: none"> ▪ ACAS Code of Practice on Disciplinary and Grievance Procedures ▪ ACAS Guide: Discipline and grievances at work ▪ Dignity at Work Policy 		

	<ul style="list-style-type: none"> ▪ Freedom to Speak Up: Raising Concerns Policy ▪ Capability Policy and Procedure ▪ Disciplinary Policy and Procedure 		
Training Need Identified?	Yes – Manager’s Passport		
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Controlled Document

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UNDER REVIEW

Grievance and Disputes Policy and Procedure

V2.1

July 2018

Summary.

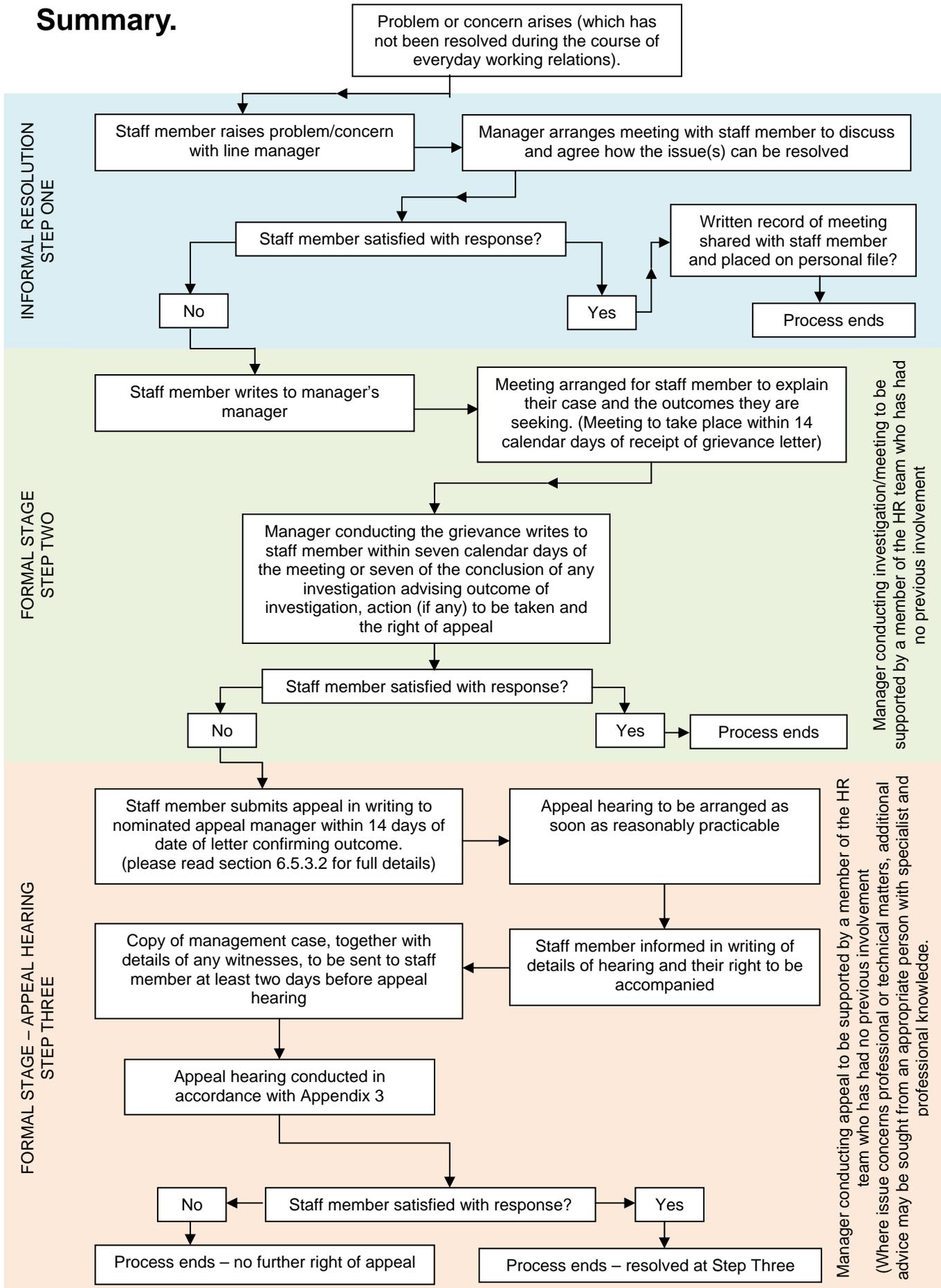


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1. Introduction

1.1. The Grievance and Disputes Policy and Procedure has been developed so that staff who are concerned about a matter relating to their employment can raise an individual or collective grievance (concern or complaint), with a view to having the issue considered and resolved as quickly as possible.

1.2. It is important for good employee relations that any grievances (individual or collective) are resolved fairly and at the lowest level of management and staff members should discuss any issues of concern with their line manager.

1.3. Wherever possible, grievances should be resolved on an informal basis. The formal stages of this policy should be used when informal action has not been able to resolve the issue or a concern is considered too serious to be dealt with informally.

1.4. Staff members however should not use the policy to simply frustrate the right of management to manage performance or conduct or manage and implement change. These issues should be managed under the Capability Procedure, Maintaining High professional Standards (MHPS), Disciplinary Procedure or the Organisational Change Policy as appropriate.

1.5. This version supersedes any previous versions of this document.

2. Purpose of this Policy/Procedure

The purpose of this policy is to provide a framework within which Trust staff can raise their grievances in confidence and with an overall aim of reaching resolution.

3. Scope

3.1. The policy applies to all staff directly employed by the Trust including medical & dental.

3.2. It applies to individuals and groups.

3.3. It should be noted that there may be situations where the use of other Trust policies is more appropriate. These include, for example:

- any complaints involving bullying or harassment at work, which should be dealt with under the Trust's *Dignity at Work* policy
- job evaluation and banding appeals, which will be dealt with under the Trust's *Agenda for Change Job Matching* policy.

Copies of the above mentioned policies are available from the Human Resources folder on the Trust's document library.

3.4. Any concerns raised by former staff members should be addressed in accordance with section 6.4 of this policy.

4. Definitions / Glossary

- **Grievance** – a complaint presented to a Trust manager by a staff member.

Issues that may cause grievances include but are not limited to:

- ❖ terms and conditions of employment (excluding disagreements about job matching – see section 3.3.)
 - ❖ the introduction of new working practices
 - ❖ organisational/management changes
 - ❖ health and safety issues
 - ❖ relationships at work (including personality clashes)
 - ❖ discrimination.
- **Collective grievance** – a complaint presented to a Trust manager by two or more staff members.
 - **Dispute** – a specific complaint in writing covering a matter related to the employment of staff by the Trust, raised by a trade union or professional body representative on behalf of their members.
 - **Mediation** – a voluntary and confidential form of alternative dispute resolution. It involves an impartial third party helping two or more individuals or groups reach a solution that is acceptable to everyone concerned.

5. Ownership and Responsibilities

5.1. Role of the Trust Board and Executive Team

The Trust Board is responsible for:

- setting organisational values which support the development of a positive working environment in which concerns can be addressed promptly and fairly
- actively seeking assurance that this policy is complied with.

5.2. Role of the Director of Human Resources and Organisational Development

The Director of Human Resources (HR) and Organisational Development (OD) has overall responsibility for the implementation of this policy.

5.3. Role of HR practitioners

HR practitioners are responsible for:

- providing managers and staff members with advice in relation to the application of the policy, helping to ensure any delays in the process are avoided
- supporting the process by attending meetings as necessary. Advice, guidance and support can, however, be sought from the divisional HR practitioner at any stage within the procedure

- ensuring appropriate records are kept by the manager(s) at each part of the process
- in conjunction with the Learning and Development department, providing training and coaching to managers as required.

5.4. Role of Managers

Managers are responsible for:

- carefully considering grievances that are raised with them and making every reasonable effort to resolve these informally or as early in the procedure as possible before they develop into major difficulties for all concerned
- ensuring the scope of the grievance is defined and investigating the concerns as necessary to allow them to respond fully to the grievance
- ensuring that no unreasonable delay occurs when responding to a grievance and the staff member is kept informed. Issues should be dealt with promptly and meetings, decisions, or confirmation of these decisions, should not be unreasonably delayed
- considering the potential impact on other staff when responding to a grievance to ensure equality and consistency of approach across the organisation
- informing their divisional HR practitioner as soon as possible of any grievance received and seeking advice and guidance as appropriate throughout the process
- ensuring appropriate records are kept at each part of the process.

5.5. Role of Individual Staff

All members of staff are responsible for:

- bringing their grievance to their manager's attention within a reasonable time-scale
- aiming to settle most grievances informally with their line manager whenever possible
- directing their grievance to the appropriate manager (see Section 6.5)
- compiling the written request for a grievance to be considered and at all stages initiating the referral to the next stage. Failure to raise the grievance to the next stage within the time-scales set out in the procedure will result in the grievance being considered resolved, unless these time-scales are varied by mutual agreement
- not using this policy for malicious or vexatious purposes or to frustrate the right of management to manage performance or conduct or manage and implement change.

Staff members are required to address any concerns or complaints they may have through the grievance procedure prior to taking any other steps including those external to the organisation.

5.6. Role of Trade Union/ Professional Body representatives

Trade union/professional body representatives are responsible for:

- working in partnership with managers to take all steps to support an informal resolution of grievances and disputes where appropriate
- to advise individual members of their respective unions and professional associations regarding the process and, where the staff member wishes, accompanying them at any formal meetings/hearings (see sections 6.1 and 6.5.1).

6. Standards and Practice

6.1. Right to representation

6.1.1. Staff have the right to be accompanied at any formal grievance meetings by a work colleague or a trade union/professional body representative neither of whom should be a family member or working in a legal capacity. It is for the member of staff to determine their workplace colleague except where there is a conflict of interest, eg: where the workplace colleague has been previously involved in the concern in another capacity or where they are the current or prospective line manager.

6.1.2. The companion is able to address the meeting to put and sum up the staff member's case, respond on their behalf to any views expressed at the meeting and confer with the staff member during the meeting. They do not, however, have the right to answer questions on their behalf.

6.1.3. If a staff member's trade union representative/professional body representative or workplace colleague cannot attend on the proposed meeting date then, in consultation with the staff member or representative, an alternative date will be arranged but this should be within 14 calendar days.

6.1.4. In circumstances where a grievance is raised by or against an accredited staff representative, the case will be discussed with the appropriate senior trade union representative or full-time officer.

6.2. Time-frame

6.2.1. This process aims for grievances to be resolved promptly and within a reasonable time-scale. This will be as soon as possible and, normally, within eight weeks from the formal complaint being received to resolution unless an appeal is lodged.

6.2.2. Where this is not possible, it should be resolved as soon as is reasonably practicable.

6.2.3. All parties to the grievance will be kept fully briefed on the grievance arrangements and agree a reasonable time-frame to address the issue so that a resolution can be achieved as soon as reasonably practicable.

6.3. Use of mediation

6.3.1. It may be possible to resolve some grievances with the help of mediation and this option can be considered at any stage of the grievance procedure.

6.3.2. Mediators may be drawn from a range of functions including HR practitioners and trade unions and, where appropriate, the Trust will also consider the engagement of external mediation if this would support and enable an issue to be resolved in a timely and effective way.

6.3.3. Advice should be sought from the divisional HR practitioner where it is thought mediation may be helpful in resolving a grievance.

6.4. Grievance from a former member of staff

6.4.1. Any grievances raised by a staff member prior to and including their final date of employment should be dealt with in accordance with the procedures set out in section 6.5.

6.4.2. A concern raised after the date of leaving does not need to be dealt with under the Grievance and Disputes policy and procedure. Instead the manager should consider the issue and respond as if it were a complaint. There is no right of appeal.

6.5. Raising a grievance

6.5.1. Informal resolution – STEP ONE

6.5.1.1. The Trust is committed to resolving grievances and disputes through informal discussion between the manager and staff member on a one to one basis. A staff member may require support from a trade union/professional body representative, attendance at the meeting is not required. In exceptional circumstances a staff member may be supported by a trade union/professional body representative or work colleague although all parties should recognise the informal nature of this part of the process. The aim will be to deal quickly and confidentially with the issues raised so that a resolution can be reached and agreed.

6.5.1.2. In the first instance the staff member should informally raise their grievance with their line manager (or next line manager if the grievance is against their immediate line manager) who will try to find a solution informally.

6.5.1.3. The manager will arrange to meet with the staff member to hear details of the grievance or dispute and agree how the issues raised can be resolved. A written record of this discussion will be kept on the staff member's personal file.

6.5.1.4. Where the grievance or dispute is about the head of the department, it may be appropriate to write to the head of department's line manager.

6.5.1.5. Where a grievance is not resolved through informal discussion the staff member may take up the grievance formally.

6.5.2. Formal stage – STEP TWO

6.5.2.1. Where a member of staff wishes to raise a grievance formally, it should be raised in writing to the next level of management not previously involved. The letter or form (see Appendix 5) should clearly state the details of the concern or complaint and what outcome is requested and should typically include the following information:

- the full details of the grievance, making it clear that it is being raised under Step Two
- what has been done in an attempt to address the grievance at Step One (where applicable)
- what outcome or range of outcomes are being requested.

6.5.2.2. Where staff members have difficulty expressing themselves because of language or other difficulties, they may wish to seek help from their trade union/professional body or colleagues.

Grievance meeting

6.5.2.3. A member of the HR team should assist the manager conducting the investigation/meeting and provide advice on the procedure.

6.5.2.4. On receipt of a formal grievance, a meeting with the staff member who raised the grievance will be arranged to allow them to explain their case and what outcomes they are looking for. This should be carried out within 14 calendar days by an appropriate manager.

6.5.2.5. An investigation may be carried out to establish the facts. This may involve meetings with other staff. An investigation should be carried out fairly, promptly and in confidence.

6.5.2.6. A digital recording device may be used to ensure the Trust has an accurate record of any formal meetings and/or appeal hearings. These recordings will be securely retained and a copy made available to the staff member on request. In the event that an approved digital device is not available a note taker will be used.

Decide on appropriate action

6.5.2.7. Following the meeting(s), the manager should decide on what action, if any, to take. Whether responding at the initial Step Two grievance meeting or after a period of investigation, the manager should confirm their response in writing, setting out clearly:

- the nature of the grievance

- what was decided and actions taken
- the reason for the actions taken
- the right of appeal.

This letter should be sent within seven calendar days of the initial grievance meeting or within seven calendar days of the conclusion of any investigation and must set out the staff member's right of appeal to Step Three of the procedure and the timeframe for such an appeal. A copy of the letter should be placed on the staff member's personal file.

6.5.3. Appeal hearing – STEP THREE

6.5.3.1. All staff have a right of appeal against the outcome of a grievance. Appeals should be submitted in writing to the nominated appeal manager within 14 calendar days of the date of the letter confirming the outcome.

6.5.3.2. The appeal letter must state clearly the grounds for the appeal and should include:

- the full details of the original grievance, ensuring no new issues that have not been already been considered at Step Two of the procedure are raised and enclosing any written correspondence from previous steps of the procedure.
- what has been done in attempt to address this grievance at Step One and Step Two of the Grievance procedure and why these responses were considered unsatisfactory
- what the staff member would like the outcome of the grievance appeal to be
- any statements and documents which they intend to rely on at the hearing; a list of any witnesses they intend to call; and the details of their workplace colleague or trade union/professional body representative.

6.5.3.3. The purpose of an appeal hearing is to review the outcome of the grievance based on the grounds of the appeal and any other matters the appeal panel considers relevant. The appeal hearing manager will determine whether to uphold the original decision at Step Two or whether to substitute an alternative outcome.

6.5.3.4. The appeal will be heard by the next level of management not previously involved in the matter. They will be supported by a member of the HR Department.

6.5.3.5. Where the issue concerns professional or technical matters, the manager hearing the appeal may seek additional advice from an appropriate person with specialist and professional knowledge. This person will form part of the panel.

6.5.3.6. The appeal hearing should take place, as soon as is reasonably practicable.

6.5.3.7. The following actions should be taken prior to the appeal hearing.

- The member of staff should be informed in writing of the time, date and location for the hearing and their right to be accompanied to the hearing by a workplace colleague or trade union/professional body representative. The hearing should be scheduled for a date that is known to be convenient for all attendees including the workplace colleague or trade union/professional body representative.
- The manager who heard and responded to the grievance at Step Two should prepare a management case which should outline the findings of the investigation/formal stage and the reason for the decision. This should be sent to the member of staff by the appeal hearing manager at least two days before the appeal hearing together with details of any witnesses the manager intends to call to the hearing.

6.5.3.8. The appeal hearing will be conducted in accordance with the process outlined in Appendix 3.

6.5.3.9. The appeal stage represents the final stage of the procedure and there are no further internal stages.

6.6. Ill health

Circumstances may arise when the ill health of a member of staff prevents the grievance procedure from being followed because they are too ill to participate in the investigation, adequately prepare for a hearing or attend the hearing itself. Where this is the case, we will use the following principles.

- The ill health of a member of staff will not usually be grounds for abandoning any on-going grievance procedures.
- Where the absence is likely to be short, the Chair or Investigating Officer will usually wait until the member of staff recovers and is able to take a full part in the process.
- When the absence is on-going and it appears that the member of staff is likely to remain off sick for an extended period, the Trust will require them to co-operate with the Occupational Health (OH) department in determining whether or not they are fit to take part in the grievance process.
- If, following consultation with the OH department, it appears that the member of staff is fit to take part in the grievance process, the process will continue although the Chair may, at their discretion, also take any of the steps listed in “special measures” below.
- Where it appears that the member of staff is not fit to take a full part in the standard grievance procedure, the Chair will consider taking any of the special measures set out below.

- If, after taking into account the special measures, the member of staff is still not able to attend, the Chair should hold the meeting in their absence.

6.7. Special measures

The Trust may, at its discretion, propose adjusting the standard grievance procedure by taking any or all of the measures set out below with a view to ensuring the effective participation of the member of staff in the grievance process.

- **Venue**
Consider holding the grievance hearing at a venue other than the organisation's premises either to reduce the stress caused to the member of staff in attending the hearing or to accommodate any physical needs they may have.
- **Representation**
Where it appears that the staff member's illness may affect their ability to explain their case, consider any request they may have to be represented in the process by a colleague or union official. The representative may be allowed an expanded role in the process where this would assist the staff member in ensuring that their case is fully explained.
- **Written representations**
Where the staff member may have difficulty in explaining their case, consideration will be given to allowing them to rely on written representations (which may be prepared by a representative).
- **Documentation**
The Trust will take particular care to ensure that the staff member receives all documentation relating to the grievance process sufficiently in advance to allow him/her to prepare fully taking into account any effect that their health may have on their ability to analyse the information and prepare a response.
- **Timings**
While being committed to the principle that matters should be dealt with promptly, the Trust may allow extra time for any stage of the grievance process to ensure that the staff member can participate effectively. Particular attention will be given to the duration of any grievance hearing and its impact on the staff member and the need to take appropriate breaks.

6.8. Overlapping grievance and disciplinary/performance management cases

6.8.1. Where a member of staff raises a grievance during a disciplinary or performance management process, a decision will need to be made about the best way to handle the two issues.

6.8.2. Both issues should be dealt with promptly and without unreasonable delay. Each case will be considered on its own merits and any potential delay must be risk assessed for its impact on patient and/or staff safety using an *Impact Assessment* form (see Appendix 4).

- Where the grievance and disciplinary/performance management cases are related, it will be appropriate to deal with both issues concurrently.
- Any procedural issues or concerns regarding disciplinary action should be dealt with as part of the disciplinary process (investigation/hearing or appeal stage).
- Any procedural issues or concerns regarding performance management cases should be dealt with as part of the performance management process.
- Any counter grievances will be considered as part of the original grievance.

6.9. Disputes

6.9.1. Trade unions and professional bodies recognised by the Trust may raise a dispute about a matter relating to terms and conditions of employment on behalf of their members. A key principle is wherever possible, disputes are resolved informally.

6.9.2. The formal process should only be used when all reasonable attempts to resolve the dispute informally have failed. Trade Union/Professional Bodies should not use the policy simply to frustrate the right of management to manage and implement change.

6.9.3. A dispute may be initiated at Step Two of the procedure subject to mutual agreement.

6.9.4. In the case of a dispute both parties may agree to refer the matter to ACAS for conciliation once all steps of the procedure have been exhausted. The terms of any reference will be subject to mutual agreement.

7. Dissemination and Implementation

7.1. A copy of the policy will be stored electronically in the HR section of the Trust's document library on the internet/intranet site.

7.2. A copy of the policy will be circulated to members of the HR team to enable them to support implementation with their managers.

7.3. A clear communication will be sent to all managers to make them aware that the policy has been issued and that they are responsible for cascading the information to their staff members including those who do not have regular access to e-mail.

7.4. Staff-Side (JCNC/JLNC) will be advised of the issue of the policy.

7.5. Information to promote awareness of the revised policy will also be included

in the monthly *Bulletin Extra: Updated Policies and Procedures* circulated to all staff via their e-mail accounts.

7.6. The HR team can provide coaching and advice to managers and staff as the need arises.

8. Monitoring compliance and effectiveness

Element to be monitored	<ul style="list-style-type: none"> • Number of grievances investigated - informal and formal. • Time taken to resolve grievances
Lead	Director of HR and OD.
Tool	Employee Relations – HR case log
Frequency	<ul style="list-style-type: none"> • Bi-monthly • Quarterly
Reporting arrangements	<p>The Director of HR and OD has lead responsibility for ensuring the policy and procedure is monitored and audited to assess effectiveness and that it is applied equally and consistently.</p> <ul style="list-style-type: none"> • Bimonthly report to People and OD committee • Quarterly report to the Trust Board. <p>The overall effectiveness of the policy will be considered and any remedial actions identified will be recorded in the relevant meeting notes or minutes.</p>
Acting on recommendations and Lead(s)	The Deputy Director of HR and OD will ensure any subsequent recommendations are undertaken.
Change in practice and lessons to be shared	<p>Any policy/system improvements will be actioned in partnership with Staff-Side within six months.</p> <p>Any policy amendments will be communicated to staff.</p>

9. Updating and Review

9.1. This policy has been agreed by Trust management and Staff-Side representatives under the Agenda for Change partnership arrangements.

9.2. The policy will be reviewed every three years or earlier if changes to legislation, practice, national or local standards dictate.

10. Equality and Diversity

10.1. General statement

Royal Cornwall Hospitals NHS Trust is committed to a Policy of Equal Opportunities in employment. The aim of this policy is to ensure that no job applicant or employee receives less favourable treatment because of their race, colour, nationality, ethnic or national origin, or on the grounds of their age, gender, gender reassignment, marital status, domestic circumstances, disability, HIV status, sexual orientation, religion, belief, political affiliation or trade union membership, social or employment status or is disadvantaged by conditions or

requirements which are not justified by the job to be done. This policy concerns all aspects of employment for existing staff and potential employees.

10.2. *Equality Impact Assessment*

The Initial Equality Impact Assessment Screening Form is at Appendix 2.

Appendix 1. Governance Information

Document Title	Grievance and Disputes Policy and Procedure		
Date Issued/Approved:	July 2018		
Date Valid From:	9 July 2018		
Date Valid To:	9 July 2021		
Directorate / Department responsible (author/owner):	Helen Strickland, HR Business Partner		
Contact details:	01872 252649		
Brief summary of contents	This policy sets out the Trust's approach to managing grievances and disputes raised by members of staff.		
Suggested Keywords:	Grievance, concern, complaint, dispute		
Target Audience	RCHT ✓	CFT	KCCG
Executive Director responsible for Policy:	Director of Human Resources and Organisational Development		
Date revised:	July 2018		
This document replaces (exact title of previous version):	Grievance and Disputes Policy and Procedure V2.0		
Approval route (names of committees)/consultation	HRD, JCNC/JLNC, Policy Review Group		
Divisional Manager confirming approval processes	Deputy Director of HR and OD		
Signature of Executive Director giving approval	Original signed		
Signature of JCNC Chair or nominated deputy	Original signed		
Publication Location (refer to Policy on Policies – Approvals and Ratification):	Internet & Intranet	✓	Intranet Only
Document Library Folder/Sub Folder	Human Resources		
Links to key external standards			
Related Documents:	<ul style="list-style-type: none"> ▪ ACAS Code of Practice on Disciplinary and Grievance Procedures ▪ ACAS Guide: Discipline and grievances at work 		

	<ul style="list-style-type: none"> ▪ Dignity at Work Policy ▪ Freedom to Speak Up: Raising Concerns Policy ▪ Capability Policy and Procedure ▪ Disciplinary Policy and Procedure
Training Need Identified?	Yes – Manager’s passport

Version Control Table

Date	Version No	Summary of Changes	Changes Made by (Name and Job Title)
August 2010	V1.0	Initial Issue	Human Resources
July 2011	V1.1	Policy re-formatted to comply with the Trust <i>Policy on Policies</i> document	Helen Strickland, Human Resources
December 2015	V1.2	Amendment made to Section 6.3.5 Appeal Hearing – Step 3 pending full review of policy	Helen Cridland, Acting Associate Director of HR and OD
March 2018	V2.0	Full review of policy Will include : <ul style="list-style-type: none"> • Review of timescales • Introduction of recording devices • Improved monitoring and recording • Inclusion of overlapping ER issues impact assessment tool 	Helen Strickland, Human Resources
July 2018	V2.1	Section 1: paragraph 1.3 amended for clarification re process Section 4: ‘dispute’ definition amended Section 6.2: reworded for clarity Section 6.4: wording clarified - amended to ‘prior to and including their last day of service’ Section 6.5: amendment to 6.5.1.1 re role of staff side in informal process Section 6.5.2: third bullet point, addition of ‘where applicable’ Section 6.5.3: clarification of appeal process Section 6.6 and 6.7: new sections relating to ill health and special measures.	Helen Strickland, Human Resources

All or part of this document can be released under the Freedom of Information Act 2000

This document is to be retained for 10 years from the date of expiry.
This document is only valid on the day of printing

Controlled Document

This document has been created following the Royal Cornwall Hospitals NHS Trust Policy on Document Production. It should not be altered in any way without the express permission of the author or their Line Manager.

Appendix 2. Initial Equality Impact Assessment Form

<i>Name of the strategy / policy /proposal / service function to be assessed</i> Grievance and Disputes Policy and Procedure						
<i>Directorate and service area:</i> Human Resources			<i>Is this a new or existing Policy?</i> Existing			
<i>Name of individual completing assessment:</i> Helen Strickland			<i>Telephone:</i> 01872 252649			
1. <i>Policy Aim*</i> <i>Who is the strategy / policy / proposal / service function aimed at?</i>		The policy sets out the Trust's approach to managing grievances and disputes raised by members of staff.				
2. <i>Policy Objectives*</i>		To provide a framework within which staff can raise grievances and disputes.				
3. <i>Policy – intended Outcomes*</i>		The provision of a fair and effective mechanism for handling all grievance issues raised by staff with the overall aim of reaching a resolution.				
4. <i>*How will you measure the outcome?</i>		Through regular monitoring of the grievances reported to the HR Department.				
5. <i>Who is intended to benefit from the policy?</i>		All staff.				
6a <i>Who did you consult with</i>		Workforce	Patients	Local groups	External organisations	Other
		✓				
b). <i>Please identify the groups who have been consulted about this procedure.</i>		Please record specific names of groups JCNC, HR Team Policy Review Group				
What was the outcome of the consultation?		Provisions for members of staff who may have a disability and whose first language is not English.				

7. The Impact				
Please complete the following table. If you are unsure/don't know if there is a negative impact you need to repeat the consultation step.				
Are there concerns that the policy could have differential impact on:				
Equality Strands:	Yes	No	Unsure	Rationale for Assessment / Existing Evidence
Age		✓		
Sex (male, female, trans-gender / gender reassignment)		✓		
Race / Ethnic communities /groups		✓		Members of staff whose first language is not English will be offered support through the process. This may include access to and the right to be accompanied at any meetings by a translator.
Disability - Learning disability, physical impairment, sensory impairment, mental health conditions and some long term health conditions.		✓		Reasonable adjustments will be made to meet the needs of members of staff who have a disability. Needs will be discussed on a case by case basis but may include, for example, access - by ensuring appropriate meeting venues; ensuring the availability of audio loops; making documentation available in other formats; different print size; and supporting staff through the process.
Religion / other beliefs		✓		
Marriage and Civil partnership		✓		
Pregnancy and maternity		✓		
Sexual Orientation, Bisexual, Gay, heterosexual, Lesbian		✓		
<p>You will need to continue to a full Equality Impact Assessment if the following have been highlighted:</p> <ul style="list-style-type: none"> You have ticked "Yes" in any column above and No consultation or evidence of there being consultation- this <u>excludes</u> any <i>policies</i> which have been identified as not requiring consultation. or Major this relates to service redesign or development 				
8. Please indicate if a full equality analysis is recommended.			Yes	No ✓
9. If you are not recommending a Full Impact assessment please explain why.				

Signature of policy developer / lead manager / director Helen Strickland, HR Business Partner		Date of completion and submission July 2018
Names and signatures of members carrying out the Screening Assessment	1. Helen Strickland 2. Human Rights, Equality & Inclusion Lead	

Keep one copy and send a copy to the Human Rights, Equality and Inclusion Lead
c/o Royal Cornwall Hospitals NHS Trust, Human Resources Department, Knowledge Spa,
Truro, Cornwall, TR1 3HD

This EIA will not be uploaded to the Trust website without the signature of the Human Rights, Equality & Inclusion Lead.

A summary of the results will be published on the Trust's web site.

Signed: Helen Strickland

Date: July 2018

Appendix 3. The appeal hearing

1. The appeal hearing manager will ask the staff member, or their workplace colleague or trade union/professional body representative, to present the grounds for the appeal against the outcome of the grievance.
2. Both sides may call an adjournment and, if granted, both sides will leave the room.
3. Witnesses may be called by the staff member to present evidence and may be questioned by the presenting manager and the appeal hearing manager chair. The member of staff or their workplace colleague or trade union/professional body representative may ask further questions of the witnesses.
4. The presenting manager will be requested to present evidence showing the procedure followed leading up to the appeal hearing.
5. The presenting manager may call witnesses who may be questioned by the staff member, or workplace colleague or representative, and by the appeal hearing manager.
6. The staff member, or their workplace colleague or trade union/professional body representative, will be required to sum up their case and, likewise, the presenting manager.
7. The appeal hearing manager will call an adjournment to determine the outcome of the appeal.
8. Following the adjournment, the meeting will be reconvened (unless agreed otherwise) and the staff member will be advised of the outcome of the appeal.
9. The outcome of the appeal hearing will be confirmed in writing.
10. Where possible, a separate meeting room will be provided away from the staff member's department for the staff member to use before and during the appeal hearing.

Appendix 4. Impact Assessment Tool: Overlapping Employee Relations Processes

One + all | we care

Royal Cornwall Hospitals



NHS Trust

IMPACT ASSESSMENT TOOL

OVERLAPPING EMPLOYEE RELATIONS PROCESSES

No processes should be delayed where, to do so, would impact on patient and/or staff safety.

This impact assessment tool is to be used prior to any decision being taken about whether to temporarily suspend a process in order to deal with a counter allegation. It should be completed by the line/commissioning manager with advice from Human Resources.

Current investigation details:	
Counter allegation details:	

Please complete the risk analysis below to ascertain whether suspension of current investigation may have a detrimental impact on patient or staff safety.

Risk analysis (see table below for grading)

Risks	Yes	No	Risk Likelihood (L)	Risk Consequence (C)	Score (L x C)
Risk of harm to patients	<input type="checkbox"/>	<input type="checkbox"/>			
Risk of harm to employees	<input type="checkbox"/>	<input type="checkbox"/>			
Risk of harm to self	<input type="checkbox"/>	<input type="checkbox"/>			
Risk of harm to Trust	<input type="checkbox"/>	<input type="checkbox"/>			
Risk of continued fraud	<input type="checkbox"/>	<input type="checkbox"/>			
Risk to service provision	<input type="checkbox"/>	<input type="checkbox"/>			
Risk to investigation process	<input type="checkbox"/>	<input type="checkbox"/>			
Some other substantial reason	<input type="checkbox"/>	<input type="checkbox"/>			

Risk grading

	Likelihood (L)				
Consequence (C)	1 - Rare	2 - Unlikely	3 - Possible	4 - Likely	5 - Almost certain
5 Catastrophic	5	10	15	20	25
4 Major	4	8	12	16	20
3 Moderate	3	6	9	12	15
2 Minor	2	4	6	8	10
1 Negligible	1	2	3	4	5

1 - 3 Low risk
4 - 6 Moderate
8 - 12 High risk
15 - 25 Extreme risk

Actions to be taken to reduce risk

Risk	Mitigation action	New Risk Rating (following implementation of mitigation action)

Decision on outcomes following risk analysis

What action do you intend to take in respect of the current investigation?	
What action do you intend to take in respect of the counter-allegation?	

Signed:	Date:
Name and job title:	
Signed:	Date:
Name of HR Practitioner:	

Please ensure a copy of this form is retained on the investigation file(s).

Appendix 5. Raising a grievance

RAISING A FORMAL GRIEVANCE – NOTIFICATION FORM			
<p><i>This form may be used by staff wishing to formally raise a grievance under Stage Two (see Section 6.5.2) of the Trust's Grievance Policy and Procedure.</i></p> <p><i>If you require assistance with completing the form, you may ask a representative from your trade union/professional body or colleague for help. You may also ask your local HR practitioner or line manager as appropriate.</i></p>			
<p>Section 1. Your details</p> <p><i>In the case of collective grievances, please list the names, job titles, department and contact details for each individual involved on a separate sheet and attach securely.</i></p>			
Name		Job title	
Department			
<p>Preferred contact details</p> <p><i>Please indicate your preferred method of contact by providing the relevant telephone number(s) and/or e-mail address(es) below.</i></p>			
<u>Telephone</u>		<u>E-mail</u>	
<input type="checkbox"/> Home:		<input type="checkbox"/> Home:	
<input type="checkbox"/> Work:		<input type="checkbox"/> Work:	
<input type="checkbox"/> Mobile:			
Name of your immediate line manager			
Name of trade union/professional body representative or work colleague			
Contact details for your representative <i>Please be aware that it is your responsibility to arrange representation.</i>	Telephone		
	E-mail		
<p>Section 2. Nature of Grievance</p> <p><i>Please use the space below to set out the details of your grievance clearly and concisely. Details should include:</i></p> <ul style="list-style-type: none"> ▪ <i>the nature of your grievance</i> ▪ <i>whether this is a one-off issue or part of a sequence of events</i> ▪ <i>why the grievance has been raised formally</i> ▪ <i>any dates, times or conversations relevant to the grievance</i> ▪ <i>the names of those involved</i> ▪ <i>any action already taken by yourself, your line manager or other members of staff to help resolve the grievance</i> ▪ <i>reference to any relevant documents or policies.</i> <p><i>(If you need to use additional sheet(s), please ensure they are attached securely to this form.)</i></p>			

Section 3. Desired Outcome

Please use the space below to state your desired outcome and your reasons for thinking this will resolve the issue.

Empty space for writing the desired outcome and reasons.

Section 4. Declaration

This form is submitted in support of my wish to raise a formal grievance under Stage Two of the Trust's Grievance Policy and Procedure.

I confirm that the above statements are true to the best of my knowledge, information and belief.

I give my consent for this information to be circulated to relevant members of staff on a need to know basis for the purpose of investigating my formal grievance.

Signature		Date	
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Now pass this form to the next level of management not previously involved.

(If you are unsure, your line manager or HR practitioner can help you identify who this should be.)

Please ensure you keep a copy of this form and any attachments for your own records.

Name of Receiving Manager			
Job Title		Date	