MEETING DATE:	8 October 2015	NHS
AGENDA ITEM NUMBER:	Item 7.8.1	North Lincolnshire
AUTHOR:	Liz Beecroft	Clinical Commissioning Group
JOB TITLE:	Human Resources Advisor	REPORT TO THE CLINICAL COMMISSIONING GROUP GOVERNING BODY
DEPARTMENT:	Yorkshire and Humber Commissioning Support	GOVERNING BODY

#### **GRIEVANCE POLICY**

PURPOSE/ACTION REQUIRED:	Decisions for Approval
CONSULTATION AND/OR INVOLVEMENT PROCESS:	All staff have had an opportunity to contribute to the development of the policy. The policy has been approved by the Joint Trade Union Partnership Forum (JTUPF) on Wednesday 26 August 2015.
FREEDOM OF INFORMATION:	Public

1.	PURPOSE (	OF THE REPOR	KT:
Τ.	PURPUSE (	OF THE KEPUR	11.

To present the following new and/or revised Workforce policy for the approval of the Governing Body;

• Grievance Policy - The policy applies to all staff who wish to raise concerns and are encouraged to do so under this policy. This policy has been approved following the JTUPF meeting held on 26<sup>th</sup> August 2015.

#### 2. STRATEGIC OBJECTIVES SUPPORTED BY THIS REPORT:

Continue to improve the quality of services	n/a
Reduce unwarranted variations in services	n/a
Deliver the best outcomes for every patient	n/a
Improve patient experience	n/a
Reduce the inequalities gap in North Lincolnshire	n/a

#### 3. IMPACT ON RISK ASSURANCE FRAMEWORK:

Yes	No	х

#### 4. IMPACT ON THE ENVIRONMENT – SUSTAINABILITY:

Yes No x
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A sustainability assessment has been included within the policy and no specific impacts have been identified.

# 5. LEGAL IMPLICATIONS: Yes No The policy is consistent with the principles set out under Agenda for Change Terms and Conditions. 6. RESOURCE IMPLICATIONS: Yes No Х The North Lincolnshire Clinical Commissioning Groups is committed to ensure that all employees have recourse to a publicised and well defined grievance procedure. This procedure also covers both collective and individual grievances concerning terms and conditions of service. 7. EQUALITY IMPACT ASSESSMENT: Yes No As a result of performing the analysis, the policy does not appear to have any adverse effects on people who share Protected Characteristics and no further actions are recommended at this stage. PROPOSED PUBLIC & PATIENT INVOLVEMENT AND COMMUNICATIONS: Yes No Patient and/ or public involvement would not be required for the development of Workforce policies. It should be noted that all CCG staff have had the opportunity to be involved in and contribute to the development of the policy. 9. RECOMMENDATIONS: The CCG is asked to review and approve the following policies which accompany this report: 1. Grievance Policy Appendices: 1. Grievance Policy



# **GRIEVANCE POLICY**

(October 2015)

**Authorship:** Yorkshire and Humber CS Workforce Team

adapted locally for use by North Lincolnshire CCG

**Committee Approved:** 

**Approved date:** 

**Review Date:** 

Equality Impact Assessment Completed - Full/Completed - Screening [delete

as required]

**Sustainability Impact Assessment: Completed** 

**Target Audience:** 

Policy Reference No: Request from CCG Business Manager

**Version Number:** 

The on-line version is the only version that is maintained. Any printed copies should, therefore, be viewed as 'uncontrolled' and as such may not necessarily contain the latest updates and amendments.

# **POLICY AMENDMENTS**

Amendments to the Policy will be issued from time to time. A new amendment history will be issued with each change.

New Version Number	Issued by	Nature of Amendment	Approved by & Date	Date on Intranet
1.0	North Lincolnshire Clinical Commissioning Group	New Policy for CCG		

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#### 1 INTRODUCTION

- 1.1 This document outlines the policy and procedure utilised by North Lincolnshire Clinical Commissioning Group (the CCG) for the raising of Grievances.
- 1.2 Any worker may at some time have problems or concerns with their work, working conditions or relationships with colleagues that they wish to raise with management.
- 1.3 Grievances are best dealt with at an early stage, informally with the immediate line manager. However, organisations should have formal procedures in place to handle cases left unresolved. Having formal grievance procedures in place allows employers to give reasonable consideration to any issues which can't be resolved informally and to deal with them fairly and consistently. Pursuing the formal route should be a last resort rather than the first option.

#### 2 ENGAGEMENT

In developing this policy the following groups were consulted:

- Joint Trade Union Partnership Forum/ Policy Development Group;
- · Senior Management Team; and
- NL CCG staff via the CCG newsletter and publishing the draft policy on the intranet for feedback/comment.

#### 3 IMPACT ANALYSES

#### 3.1 Equality

All policies require an assessment for their impact on people with protected characteristics (defined in the guidance document). An Equality Impact Analysis Toolkit is available for this purpose and is attached at Appendix 1.

As a result of performing the analysis, the policy, project or function does not appear to have any adverse effects on people who share *Protected Characteristics* and no further actions are recommended at this stage.

#### 3.2 Sustainability

Anyone developing a policy or procedural document is required to complete a Sustainability Impact Assessment. The purpose is to record any positive or negative impacts that the policy is likely to have on each of the CCG's sustainability themes. The Sustainability Impact Assessment form is attached at Appendix 2.

#### 3.3 Bribery Act 2010

Under the Bribery Act 2010, it is a criminal offence to:

 Bribe another person by offering, promising or giving a financial or other advantage to induce them to perform improperly a relevant function or activity, or as a reward for already having done so; and Be bribed by another person by requesting, agreeing to receive or accepting
a financial or other advantage with the intention that a relevant function or
activity would then be performed improperly, or as a reward for having
already done so.

These offences can be committed directly or by and through a third person and, in many cases, it does not matter whether the person knows or believes that the performance of the function or activity is improper.

It is therefore, extremely important that staff adhere to this and other related policies and documentation (as detailed on the CCG's intranet) when considering whether to offer or accept gifts and hospitality and/or other incentives.

If fraud, bribery and corruption are particularly relevant to a policy, the section should be headed Anti-fraud, Bribery and Corruption and should include a cross reference to the Local Anti-fraud, Bribery & Corruption Policy. The following wording should also be included:

To raise any suspicions of fraud and/or corruption please contact the Local Counter Fraud Specialist (LCFS) or the Counter Fraud Manager at (for East Riding and North Lincolnshire – East Coast Audit Consortium, 01482 866800 email fraud@humber.nhs.uk

The LCFS will inform the Chief Financial Officer if the suspicion seems well founded and will conduct a thorough investigation. Concers may also be discussed with the Chief Financial Officer or the Audit Committee Chair.

If staff prefer, they may call the NHS Fraud & Corruption Reporting Line on 0800 028 40 60 between 8am-6pm Monday-Friday or report online at <a href="https://www.reportnhsfraud.nhs.uk">www.reportnhsfraud.nhs.uk</a>. This would be the suggested contact if there is a concern that the LCFS or the Chief Financial Officer themselves may be implicated in suspected fraud, bribery or corruption.

Further information on the Bribery Act can be found at <a href="www.opsi.gov.uk/acts">www.opsi.gov.uk/acts</a>. A list of frequently asked questions is available from the CSU Corporate Strategy and Policy Manager.

#### 4 SCOPE

4.1 This policy applies to all employees of the CCG in all locations. This policy does not apply to the settling of differences where separately agreed appeals procedures are in place for specific policies.

#### 5 POLICY PURPOSE/AIMS & FAILURE TO COMPLY

- 5.1 It is the North Lincolnshire Clinical Commissioning Groups (NL CCG) policy that all employees have recourse to a publicised and well defined grievance procedure. This procedure also covers both collective and individual grievances concerning terms and conditions of service.
- 5.2 Staff are advised to raise issues informally with their line manager in the first place, however where this does not resolve the matter staff are encouraged to use the grievance procedure to deal with issues promptly.

- 5.3 In some instances where a dispute occurs between employees it may be of use to consider a mediation service which aims to find mutually agreeable outcomes where conflict has occurred. It is important to note that the service is informal, 'non-binding' and does not impact on the individual's right to instigate formal procedures if the mediation is unsuccessful. Further details of the service can be found by contacting the YHCS Workforce Department.
- It is recognised that the procedure itself cannot guarantee the resolution of any particular grievance as this depends on all concerned adopting a reasonable attitude to the matter, and taking positive action to resolve the problem. The fundamental principle is that staff grievances should be dealt with fairly, quickly and as close as possible to the point of origin.
- 5.5 Staff using the grievance procedure will be treated in a fair and equitable manner and care will be taken to ensure that confidentially is maintained.

#### 6 DEFINITIONS

- 6.1 A grievance is defined in the 2009 ACAS Code of Practice for Disciplinary and Grievance Procedures as 'Concerns, problems or complaints that employees raise with their employers'.
- 6.2 An individual grievance is defined as a complaint from an individual employee that is specific to that employee and related to their terms and conditions of service and any other issue related to employment.
- 6.3 A collective grievance is defined as a complaint from a number of employees which is common to the employees concerned and related to their terms and conditions of service. It may be more appropriate for the problem to be resolved through collective agreements between the trade union(s) and the employer.

#### 7 ROLES / RESPONSIBILITIES / DUTIES

#### 7.1 The CCG Constitution

The CCG Constitution, section 9, refers to the duties and responsibilities of the CCG as an employer that may be summarised as follows:

- the CCG recognises that its most valuable asset is its people and will seek to enhance their skills and experience;
- the CCG will seek to set an example of best practice as an employer and will
  ensure that employment practices are designed to promote diversity and to
  treat all individuals equally;
- the CCG will ensure that it employs suitably qualified and experienced staff
  who will discharge their responsibilities in accordance with the high standards
  expected of staff employed by the CCG;
- all staff will be made aware of the constitution and the relevant internal management and control systems which relate to their field of work;

- the CCG will maintain and publish policies and procedures on all aspects of human resources management, including grievance and disciplinary matters;
- the CCG will ensure that its rules for recruitment and management of staff provide for the appointment and advancement on merit on the basis of equal opportunity for all applicants and staff;
- the CCG will ensure that employees' behaviour reflects the values, aims and principles set out in the Constitution;
- the CCG will ensure that it complies with all aspects of employment law;
- the CCG will ensure that its employees have access to such expert advice and training opportunities as the Governing Body consider reasonable in order to exercise their responsibilities effectively and
- the CCG will adopt a Code of Conduct for staff and will maintain and promote effective 'whistleblowing' procedures to ensure that concerned staff have means through which their concerns can be voiced.

#### 7.2 Chief Officer Responsibilities

The Chief Officer of the CCG is responsible for:

- Promoting a fair and equitable working environment
- Ensuring this policy is followed by all senior and line managers

#### 7.3 Senior Officers and Line Managers

Senior Officers and line managers at all levels are responsible for:

- Acquainting themselves with the procedure
- Ensuring this policy is followed, and that each member of staff is aware of the steps taken in airing a grievance.

#### 7.4 All individuals

It is the responsibility of everyone covered by the scope of this policy to ensure they comply with this policy.

#### 8 PROCEDURE

8.1 The grievance procedure is a staged process that consists of 2 distinct elements: Initial informal procedure (Stage 1); followed by Formal procedure (Stages 2 and 3)

Stage 2 should not normally be initiated until after the informal procedure (Stage 1) has been followed and no resolution has been found at that stage.

See Appendix 3: Flowchart of Standard Grievance Procedure.

#### 9 STAGE 1 – INFORMAL PROCEDURE

9.1 Before an employee or, in a collective grievance, a representative of the group

takes up a formal grievance under this procedure they are advised to raise the matter informally with their immediate supervisor/line manager in an attempt to resolve the issue by informal discussion(s).

- 9.2 If the matter is not resolved through informal discussion(s) with their immediate supervisor/line manager, the grievance should be put in writing and escalated to a manager at the next level within the management structure, or as appropriate, not previously involved in the issue. Employees should use the form at Appendix 1, Notification of Grievance. However, any form of written communication indicating a grievance or concern(s) from an employee may be considered a formal grievance.
- 9.3 The CCG may, where necessary, investigate a grievance raised informally even when the complainant does not want to place the grievance in writing. It is recognised that this may restrict the ability to properly investigate the complaint. The CCG will do this to protect the health and safety of the staff and to fulfil its obligations as an employer.

#### 10 STAGE 2 – FORMAL PROCEDURE

- 10.1 The relevant manager and a Workforce Representative will meet with the employee or representative of the group as soon as possible, to discuss the issues and to seek a resolution. See section 21 for rights to representation. Following the meeting the manager will write to the employee or representative confirming the outcome.
- 10.2 If the employee remains dissatisfied after Stage 2, the employee has the option to appeal at Stage 3.
- 10.3 The procedure for handling a grievance hearing is outlined at Appendix 2.

#### 11 STAGE 3 – FORMAL PROCEDURE

11.1 If the employee still remains dissatisfied after Stage 2, they can submit an appeal to the Chief Officer within 14 days of receipt of the letter confirming the outcome.

An Appeal Panel will consist of three members including at least one Lay/GP Member of the CCG, who will act as chair to the panel. Other members will be drawn from the Senior Management Team or Governing Body plus a workforce representative. No member of the panel will have had any previous involvement in the case.

A hearing will be held as quickly as possible, and certainly no later than 6 weeks from receipt of the appeal, unless otherwise agreed.

Appeal hearings will be conducted in accordance with the Appeals procedure as outlined in the CCG Disciplinary Policy (appendix x).

11.2 Dependant on the nature of the grievance a professional advisor may be available to offer advice to the panel on technical points, if required. The professional advisor

would not be a decision making member of the panel.

11.3 This is the final stage in the grievance procedure. The decision of the panel will be binding. The panel will write to the employee or representative confirming the outcome of the meeting.

#### 12 UNRESOLVED COLLECTIVE GRIEVANCE

12.1 Where a collective grievance remains unresolved following exhaustion of the procedure, both parties – subject to joint agreement, may be referred to the Advisory, Conciliation and Arbitration Service (ACAS) for conciliatory and/or mediation. This is on the basis that ACAS is empowered to provide advice on procedures for avoiding and settling disputes and workers grievances. Such intervention must be agreed by all parties involved.

#### 13 INVESTIGATION

- 13.1 A formal investigation will not be required in all Grievances raised. However, there will be occasions where an investigation is appropriate. In this instance a member of management will investigate the matter promptly and adequately supported by a CSU Workforce representative. A suitable Investigating Officer, who had not previously been involved in the procedure, will be appointed to undertake the investigation. The employee(s) will be informed in writing of the name of the Investigating Officer and any Workforce representative supporting the Investigating Officer.
- 13.2 The Investigating Officer may propose a timeframe within which the investigation could reasonably be expected to be completed. However, it is difficult to attach time limits to the process and all parties will be kept informed of any changes (and the reasons) to the proposed timeframe.
- 13.3 When the investigation is concluded, the employee(s) and their representative (if any) will be informed in writing of the outcome of the investigation. The Investigating Officer will write to the manager with their recommendation as a result of the investigation.

#### 14 HEARINGS / APPEALS

- 14.1 The outcome of grievances hearings at Stage 2 and 3 will be confirmed in writing to the employee or representative within 7 calendar days following the meeting.
- 14.2 Where there has been a failure to agree at previous stages of the procedure, an appeal should be made in writing to the next level of management within 7 calendar days of written receipt of the decision at the previous stage. *Note*: At Stage 1, this will be on receipt of the verbal decision at the informal discussion. Appendix 1, Notification of Grievance Form, can be used for this purpose.
- 14.3 Where no appeal is raised within this timescale the grievance will be deemed to have been resolved. Every effort will be made to hold grievance hearings in a

timely manner.

- 14.4 Adequate time should be allowed for the preparation of the Appeal paperwork at Stage 2 & 3, which must be submitted prior to the Hearing. Mutual exchange of papers prior to the hearing will take place by agreement on the same date. This should be at least 7 calendar days before the hearing unless agreed otherwise between the parties. The complainant or representative will be kept informed if there is to be a delay in arranging the Appeal hearing.
- 14.5 The procedure for handling a grievance hearing or appeal is outlined at Appendix 2.

#### 15 REPRESENTATION

- 15.1 Employees have the right to be accompanied by a companion to grievance hearings, at all stages who can be either:
  - A trade union official who has been certified by the trade union as having had experience or having received training in acting as a worker's companion in such circumstances e.g. an accredited staff representative; or
  - Another fellow worker employed by the CCG

This right does not include the right to be accompanied by a person acting in a legal capacity or any other person.

15.2 In the case of a collective grievance, the employee(s) involved must appoint a single representative to act as a spokesperson during a grievance hearing or appeal.

The purpose of representation is to assist or represent the employee in stating their grievance and to provide support and guidance.

15.3 Where the grievance involves accredited staff representatives no investigation or action will be taken until the case has been discussed with a full-time official of the organisation concerned.

#### 16 WORKFORCE SERVICES

- 16.1 At any stage of the procedure the complainant/manager can approach a YHCS Workforce representative for guidance on the process or attendance at meetings to consider the matter and seek a resolution. (This may not always be appropriate at Stage 1)
- 16.2 Workforce advice should be obtained at every stage of the procedure and a YHCS Workforce representative must attend meetings from stage 2 onwards.

#### 17 STATUS QUO WORKING

17.1 It is agreed that in the event of a Grievance being lodged which cannot immediately

be resolved, then whatever practice or agreement existed prior to the difference shall continue to operate pending a settlement or until the agreed procedure has been exhausted.

17.2 Except where there is a manifest emergency situation in relation to services provided and /or health and safety matters and in such circumstances it may be difficult to operate the 'status quo'. In these circumstances a decision regarding the 'status quo working' will be made following discussions with the YHCS Head of Workforce. It is recognised these are likely to be isolated or exceptional cases.

#### 18 TIMING

18.1 Every effort will be made by both sides to resolve the grievance at the lowest level and with the minimum delay.

#### 19 RECORDS

- 19.1 Records will be kept detailing the nature of the grievance raised, the CCG's response, any action taken and the reason for it. Managers are expected to maintain a written record on the appropriate Grievance Tracking Form (Appendix 6) at all stages of the process in accordance with the Grievance Policy.
- 19.2 A copy of the Grievance Tracking form will be retained on the employee's personal file for the duration of the process and for 12 months following the resolution or completion of the process. A copy of relevant background papers and the outcome correspondence will be kept on the file.
- 19.3 The CSU Workforce department will retain all other papers relating to a grievance, e.g. investigation/meeting notes.
- 19.4 All records will be kept in a confidential environment and retained in accordance with the Data Protection Act 1998 NHS Code of Practice on Records Management (Department of Health 2006).

#### 20 CONFIDENTIALITY

20.1 Grievance issues should be considered confidential. Only those persons who need to know should be given access to relevant information and they in turn, should treat that information as confidential. All those involved should be informed that any breach of confidentiality (including informal discussions with colleagues) may prejudice a fair outcome and may also constitute a disciplinary offence.

#### 21 POLICY IMPLEMENTATION

- 21.1 This policy will be communicated to staff via team meetings/team brief and will be available for staff on the intranet.
- 21.2 Breaches of this policy may be investigated and may result in the matter being treated as a disciplinary offence under the CCGs disciplinary procedure.

21.3 Support will be available to all Line Managers in the implementation and application of this policy.

#### 22 TRAINING & AWARENESS

A copy of the policy will be available on the CCG intranet. Training needs will be identified via the appraisal process and training needs analysis.

#### 23 MONITORING & AUDIT

The implementation of this policy will be audited on an annual basis by the CCG and reported to CCG Governing Body.

#### 24 POLICY REVIEW

The policy and procedure will be reviewed after 3 years by the CCG Governing Body in conjunction with Trade Union representatives. Where review is necessary due to legislative change, this will happen immediately.

#### 25 ASSOCIATED POLICIES

- Disciplinary
- Equality and Diversity
- Whistleblowing

# **Appendix 1**

**Equality Impact Analysis:** 

For support with completion of this documentation, please see the accompanying guidance and/or contact the Equality Lead in the Yorkshire and Humber Commissioning Support

# **Equality Impact Analysis**

1. Equality Impact Analysis						
Policy / Project / Function:	Grievance Policy					
Date of Analysis:	December 2014					
This Equality Impact Analysis was completed by: (Name and Department)	YHCS Workforce Team					
What are the aims and intended effects of this policy, project or function?	It is the North Lincolnshire Clinical Commissioning Groups (NL CCG) policy that all employees have recourse to a published and well defined grievance procedure. This procedure covers both collective and individual grievances concerning terms and conditions of service					
Please list any other policies that are related to or referred to as part of this analysis?	<ul><li>Disciplinary Policy</li><li>Equality and Diversity</li><li>Whistleblowing</li></ul>					
Who does the policy, project or function affect?  Please Tick ✓	Employees					

	Could this policy have a positive impact on			olicy have a npact on	Is there any evidence which already exists from previous (e.g. from previous engagement) to evidence this impact
	Yes	No	Yes	No	
Race		$\boxtimes$		$\boxtimes$	This has been considered and has a no impact
Age		$\boxtimes$		$\boxtimes$	This has been considered and has a no impact
Sexual Orientation		$\boxtimes$		$\boxtimes$	This has been considered and has a no impact
Disabled People		$\boxtimes$		$\boxtimes$	This has been considered and has a no impact
Gender		$\boxtimes$		$\boxtimes$	This has been considered and has a no impact
Transgender People		$\boxtimes$		$\boxtimes$	This has been considered and has a no impact
Pregnancy and Maternity		$\boxtimes$		$\boxtimes$	This has been considered and has a no impact
Marital Status		$\boxtimes$		$\boxtimes$	This has been considered and has a no impact
Religion and Belief		$\boxtimes$			This has been considered and has a no impact
Reasoning			1		

# 3. Equality Impact Analysis: Equality Data Available

#### Is any Equality Data available relating to the use or implementation of this policy, project or function?

Equality data is internal or external information that may indicate how the activity being analysed can affect different groups of people who share the nine Protected Characteristics - referred to hereafter as 'Equality Groups'.

Examples of Equality Data include: (this list is not definitive)

- Application success rates Equality Groups
   Complaints by Equality Groups
- 3. Service usage and withdrawal of services by Equality Groups
- 4. Grievances or decisions upheld and dismissed by Equality Groups
- 5. Previous EIAs

**Yes** employee data has been used to support the monitoring of the impact of this policy in the future. The employee data is not included due to the low number of CCG employees and concern around anonymity.

No

Where you have answered yes, please incorporate this data when performing the Equality Impact Assessment Test (the next section of this document).

List any Consultation e.g. with employees, service users, Unions or members of the public that has taken place in the development or implementation of this policy, project or function

North Lincolnshire CCG Employees Joint Trade Union Partnership Policy Group Joint Trade Union Partnership Forum

**Promoting Inclusivity** How does the project, service or function contribute towards our aims of eliminating discrimination and promoting equality and diversity within our organisation

This policy does not directly promote inclusivity, but provides a framework to settle grievances in the workplace. This should contribute towards eliminating discrimination

## 4. Equality Impact Analysis: Assessment Test

What impact will the implementation of this policy, project or function have on employees, service users or other people who share characteristics protected by *The Equality Act 2010*?

Protected Characteristic:	No Impact:	Positive Impact:	Negative Impact:	Evidence of impact and if applicable, justification where a Genuine Determining Reason exists
Gender	✓			This has been considered and has a no impact
(Men and Women)				
Race				This has been considered and has a no impact
(All Racial Groups)	•			
Disability	,			This has been considered and has a no impact
(Mental and Physical)	<b>Y</b>			· ·
Religion or Belief	✓			This has been considered and has a no impact
Sexual Orientation (Heterosexual, Homosexual and Bisexual)	<b>√</b>			This has been considered and has a no impact

What impact will the implementation of this policy, project or function have on employees, service users or other people who share characteristics protected by *The Equality Act 2010*?

Protected Characteristic:	No Impact:	Positive Impact:	Negative Impact:	Evidence of impact and if applicable, justification where a <i>Genuine Determining Reason</i> exists
Pregnancy and Maternity	✓			This has been considered and has a no impact
Transgender	✓			This has been considered and has a no impact
Marital Status	✓			This has been considered and has a no impact
Age	✓			This has been considered and has a no impact

5. Action Planning  As a result of performing this analysis, what actions are proposed to remove or reduce any risks of adverse outcomes identified on employees, service users or other people who share characteristics protected by <i>The Equality Act 2010</i> ?						

6. Equality Impact Analysis Findings					
Analysis Rating:	□ Red	□ Red/Amber		□ Amber	□ <mark>Green</mark>
		Actions		Wording for Policy	/ Project / Function
Red Stop and remove the policy	Red: As a result of performing the analysis, it is evident that a risk of discrimination exists (direct, indirect, unintentional or otherwise) to one or more of the nine groups of people who share <i>Protected Characteristics</i> . It is recommended that the use of the policy be suspended until further work or analysis is performed.	Remove the policy  Complete the action plan above identify the areas of discriminal and the work or actions which to be carried out to minimise the of discrimination.	ition needs		d as policy is being removed
Red Amber  Continue the policy	As a result of performing the analysis, it is evident that a risk of discrimination exists (direct, indirect, unintentional or otherwise) to one or more of the nine groups of people who share <i>Protected Characteristics</i> . However, a genuine determining reason may exist that could legitimise or justify the use of this policy and further professional advice should be taken.	The policy can be published the EIA  List the justification of the discrimination and source the evidence (i.e. clinical need as by NICE).  Consider if there are any poter actions which would reduce the discrimination.  Another EIA must be completed policy is changed, reviewed or further discrimination is identification.	advised  ntial e risk of ed if the	that a risk of discrir unintentional or oth groups of people w Characteristics. Ho reason exists which and further profess [Insert what the di justification of the	rming the analysis, it is evident mination exists (direct, indirect, nerwise) to one or more of the nine who share <i>Protected</i> wever, a genuine determining in justifies the use of this policy ional advice.  iscrimination is and the existing any and the labeled what reduce the risk]

later date.

Equality Impact Findings (continued):				
		Actions	Wording for Policy / Project / Function	
Amber Adjust the Policy	As a result of performing the analysis, it is evident that a risk of discrimination (as described above) exists and this risk may be removed or reduced by implementing the actions detailed within the <i>Action Planning</i> section of this document.	The policy can be published with the EIA  The policy can still be published but the Action Plan must be monitored to ensure that work is being carried out to remove or reduce the discrimination.  Any changes identified and made to the service/policy/ strategy etc. should be included in the policy.  Another EIA must be completed if the policy is changed, reviewed or if further discrimination is identified at a later date.	As a result of performing the analysis, it is evident that a risk of discrimination (as described above) exists and this risk may be removed or reduced by implementing the actions detailed within the Action Planning section of this document.  [Insert what the discrimination is and what work will be carried out to reduce/eliminate the risk]	
Green	As a result of performing the analysis, the policy, project or	The policy can be published with the EIA	As a result of performing the analysis, the policy, project or function does not appear to have any	
No major change	function does not appear to have any adverse effects on people who share <i>Protected Characteristics</i> and no further actions are recommended at this stage.	Another EIA must be completed if the policy is changed, reviewed or if any discrimination is identified at a later date	adverse effects on people who share <i>Protected Characteristics</i> and no further actions are recommended at this stage.	

Brief Summary/Further comments	

Approved By					
Job Title:	Name:	Date:			

#### SUSTAINABILITY IMPACT ASSESSMENT

Staff preparing a Policy / Board Report / Committee Report / Service Plan / Project are required to complete a Sustainability Impact Assessment. Sustainability is one of the Trust's key Strategies and the Trust has made a corporate commitment to address the environmental effects of activities across Trust services. The purpose of this Sustainability Impact Assessment is to record any positive or negative impacts that this activity is likely to have on each of the Trust's Sustainability Themes. For assistance with completing the Sustainability Impact Assessment, please refer to the instructions below.

Policy / Report / Service Plan / Project Title:				
Theme (Potential impacts of the activity)	Positive Impact	Negative Impact	No specific impact	What will the impact be? If the impact is negative, how can it be mitigated? (action)
Reduce Carbon Emission from buildings by 12.5% by 2010-11 then 30% by 2020			<b>✓</b>	
New builds and refurbishments over £2million (capital costs) comply with BREEAM Healthcare requirements.			✓	
Reduce the risk of pollution and avoid any breaches in legislation.			✓	
Goods and services are procured more sustainability.			<b>√</b>	
Reduce carbon emissions from road vehicles.			✓	
Reduce water consumption by 25% by 2020.			✓	
Ensure legal compliance with waste legislation.			✓	
Reduce the amount of waste produced by 5% by 2010 and by 25% by 2020			✓	
Increase the amount of waste being recycled to 40%.			✓	
Sustainability training and communications for employees.			✓	
Partnership working with local groups and organisations to support sustainable development.			✓	
Financial aspects of sustainable development are considered in line with policy requirements and commitments.			✓	

#### INSTRUCTIONS FOR COMPLETING THE SUSTAINABILITY IMPACT ASSESSMENT

Sustainability is one of the Trust's key Strategies and consequently the Trust has made a corporate commitment to address the environmental effects of its activities across all service areas. The purpose of the Sustainability Impact Assessment is to record any positive or negative impacts that a Policy / Board Report / Committee Report / Service Plan / Project is likely to have on each of the Trust's sustainability themes. The Sustainability Impact Assessment enables any relevant impacts to be identified and potentially managed.

The Sustainability Impact Assessment is based on assessing the impact of the activity against a series of criteria covering environmental sustainability issues. It would be most desirable for activities to score positively in as many areas as possible, although it is likely that some areas will score positively against some themes, and negatively against others.

#### **Using the Sustainability Impact Assessment template**

To complete the Sustainability Impact Assessment template, you should consider whether the Policy / Board Report / Committee Report / Service Plan / Project will have a positive or negative impact on each of the themes by placing a mark in the appropriate column. When you think there is likely to be an impact, please provide some annotations regarding the nature of the impact, and any actions that will be taken to address that impact. Users should note that not every theme will be relevant. Where this is the case the 'No Specific Impact' column should be marked. Users should also consider the following tips:

- 1. Make relative not absolute judgements (e.g. a new energy efficient service would score positively even if it consumes more energy than if no service were provided).
- 2. Be aware that small positive changes could be outweighed by negative ones (e.g. new energy efficient lighting in the short term may outweigh the benefits of maintaining current lighting).
- 3. If there are both positive and negative impacts, these need to be recorded in order to give a balanced view. Be objective and unbiased.
- 4. Concentrate on the most key significant issues there is the potential to consider the appraisal in a very detailed way. This should be avoided at this stage.
- 5. Judge a proposal over its whole lifespan and remember that some impacts may change over different timescales.

# **APPENDIX 3: NOTIFICATION OF GRIEVANCE**

## **NOTIFICATION OF GRIEVANCE**

To be completed following a failure to agree at Stage 1.

Employee Name:						
Post(s):						
Department						
Base(s):						
Representative(s):						
To (manager):						
I / we have discussed manager named belo	I my / our grievance with my / our immediate supervisor / line w on date:					
Name:	Date:					
And I / we remain aggrieved. In accordance with the Grievance Procedure, I / we now have to inform you of the following matter and wish to proceed to Stage 2 of the Procedure.						
	n information as you can, as this will enable your grievance to be coossible. It would be helpful at this stage to state your preferred					
Namai	Date:					
	form should be sent to the Manager or appropriate level of					
Date received by Ma	nager:					

# APPENDIX 4: PROCEDURE FOR HANDLING A GRIEVANCE HEARING OR APPEAL AT STAGES 2 AND 3

#### Procedure for Handling a Grievance Hearing or Appeal at Stages 2 and 3

#### Administration

Hearings at Stage 2 of the Grievance Procedure will be heard by the appropriate level of management (Officer) and supported by a Workforce Representative.

Stage 3 will be heard by a CCG panel chaired by a Lay Member/GP Governing Body Member as detailed in section 17.1 and supported by a Workforce Representative.

- A minimum notice period of 14 calendar days will be given before a hearing or appeal (unless a mutually agreed shorter timescale is agreed between the parties).
- Mutual exchange of papers prior to the hearing will take place by agreement on the same date. This should be at least 5 calendar days before the Grievance hearing unless agreed otherwise between the parties.
- Copies of all papers to be considered at the hearing must be provided for each panel member, workforce representatives, management side representative, the employee and the employee's representative if applicable.

#### **Procedure for Hearing:**

At the outset of the hearing the Officer/Chair of panel hearing the grievance will:

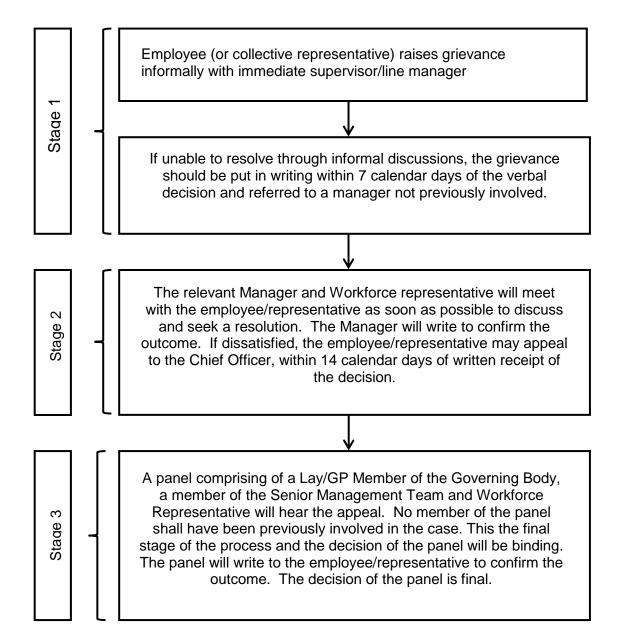
- Outline the purpose of the hearing
- Confirm to the employee and all present, that the hearing will be conducted in line with the grievance procedure
- Introduce all present and state the capacity in which they are there
- If the employee is not represented / accompanied, the Officer / Chair hearing the grievance will check that he/she is aware of his/her right to be represented/accompanied and whether or not he/she is happy to proceed without representation/accompaniment.
- The employee or their representative is asked to present their case and may call witnesses.
- The management side representative may ask questions of the employee, their representative and witnesses, in order to clarify the issue.
- The Officer/panel members hearing the Grievance may ask questions of the employee, their representative and witnesses, in order to gain a comprehensive understanding of the issue.
- The employee or their representative may re-examine their witnesses on any points raised by the Officer or management side representative.
- The management side representative shall present its case and may also call witnesses.
- The employee or their representative may question the management side representative and witnesses.
- The Officer/panel members hearing the Grievance may then question the management side representative and witnesses.

- The management side representative may re-examine its witness on any points raised by the employee or representative and the Officer.
- Nothing in the foregoing procedure shall prevent the Officer/Chair, panel members or Workforce Representative from inviting the representative of either party to elucidate or amplify any statement they may have made or from asking them questions as may be necessary.
- Management side representative makes a final statement without introducing new evidence.
- The employee or their representative makes a final statement without introducing new evidence.
- At the completion of the hearing of the evidence, the employee, their representative, and the management side shall withdraw.
- The Officer/Chair, panel members hearing the Grievance together with the Workforce Representative shall adjourn and consider the evidence in private, only recalling both parties and the representative to clear points of uncertainty on evidence already given.
- If possible the Officer/Chair conducting the meeting will give his/her decision at the time. Both parties will be informed of:
  - The decision
  - The reason for the decision
  - What action will be taken (where applicable / if any)
  - The decision will be communicated in writing within 7 calendar days
  - The employee's right to appeal the matter to the next stage of the formal procedure (other than at Stage 3)

#### Note:

The YHCS Workforce Representative appointed to support the Officer/Chair, panel members shall be in attendance throughout the hearing/appeal, recording the proceedings and shall remain with the Officer/Chair, panel members whilst they consider their decision. He/she shall advise the Officer/Chair, panel members on points of procedure and may ask questions for clarification. He/she shall not have been involved in the case previously.

#### APPENDIX 5: FLOW CHART OF STANDARD GRIEVANCE PROCEDURE



All stages of the process will be undertaken in as timely a manner as possible

## **APPENDIX 6: STANDARD LETTERS**

Date	Address
Private and Confidential	Tel: ***** ****
Name Address	Email:name.surname@nhs.net
Dear	
RE: Grievance Hearing – Stage 2	
I am writing to acknowledge receipt of your Notification of Gri to confirm that arrangements have been made to hear your G with NHS North Lincolnshire CCG's Grievance Policy on <b>date</b> will be heard by <b>name</b> and supported by <b>name</b> , YHCS Workf	Grievance at Stage 2 in accordance at time in location. The Grievance
Should you wish to submit any additional information relating <b>name</b> no later than <b>date</b> . It is anticipated that mutual exchan	·
I have to advise you that you have the right to be represented companion who can be either a Trade Union Representative legal capacity.	0 ,
I should be grateful if you would confirm your attendance, the you intend to call any witnesses by contacting <b>name</b> by <b>date</b> .	•
Yours sincerely	
Name Job Title	

Date Address

#### **Private and Confidential**

Tel: \*\*\*\*\* \*\*\*\*\*

Email:name.surname@nhs.net

Name Address

Dear

#### RE: Outcome of Grievance Hearing - Stage 2

Following your Grievance hearing on **date** held in the presence of **names**, I am writing to confirm the outcome.

SPECIFY BRIEF DETAILS OF GRIEVANCE

THE DECISION REACHED

REASON FOR THE DECISION

WHAT ACTION WILL BE TAKEN (WHERE APPLICABLE / IFANY)

You do have the right to appeal against this decision and proceed to Stage 3 as part of NHS North Lincolnshire CCG Grievance Policy. This Stage 3 grievance should be done in writing within 10 working days of receiving this letter outlining the reasons for your grievance, to **name** who will arrange for a hearing to be held under Stage 3 of Grievance policy. Stage 3 is the final stage of the CCG grievance process and the decision of the panel will be binding.

If you do not appeal within this timescale the grievance will be deemed to have been resolved.

Yours sincerely

Name Job Title Date Address

#### **Private and Confidential**

Tel: \*\*\*\*\* \*\*\*\*

Email:name.surname@nhs.net

Name Address

Dear

#### **RE: 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 North Lincolnshire CCG Grievance Policy on date at time in location. The Grievance will be heard by names (CCG PANEL) and supported by name, Workforce 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 Date Address

**Private and Confidential** 

Tel: \*\*\*\*\* \*\*\*\*\*
Email:name.surname@nhs.net

Name Address

Dear

#### RE: Outcome of Grievance Hearing - Stage 3

Following your Grievance hearing on date held in the presence of names, I am writing to confirm the outcome.

SPECIFY BRIEF DETAILS OF GRIEVANCE

THE DECISION REACHED

REASON FOR THE DECISION

WHAT ACTION WILL BE TAKEN (WHERE APPLICABLE / IFANY)

This is the final stage in the process and the decision of the Panel is binding and there is no further right of appeal.

Yours sincerely

Name Job Title

#### APPENDIX 7: STATEMENT OF CASE - STANDARD FORM

The management statement of case is produced by the manager who heard the grievance at the previous stage, with support from the Workforce representative involved. The statement of case is required to be sent out at least 5 calendar days before the hearing, therefore to allow for administration of this, the statement should be received at least 2 working days prior to this. The following is a guideline on what could be included.

\_\_\_\_\_

# STAGE (2/3) GRIEVANCE HEARING – (name of employee) (Hearing date) MANAGEMENT STATEMENT OF CASE BY (Name), (Title)

#### Introduction

The background information

- When the grievance was received (attach copy of letter/Form/e-mail)
- A summary of the grievance.

This may also include information on the employee, their role, how long they have been working in the area etc and anything relevant to the case.

Response to Grievance/Investigation

What information you sought and what investigations you did and attach your letter of response or letter to confirm outcome of previous meeting/hearing and notes of any meetings relevant to the case.

Summary of your reasons for not upholding the grievance. This will be taken mainly from your letter to the individual. Include any additional information in response to the appeal letter from the individual.

#### **Summary/Conclusion**

Summarise your reasons for not upholding the grievance.

Add your views about the reasonableness of the actions taken and what steps the PCT have taken and what you have done to try and address this grievance.

Anything you think the panel need to consider

Ask the panel to uphold your decision

# **APPENDIX 8: GRIEVANCE TRACKING FORM**

Employee name:	Post:
Directorate:	Base:
Representative: Grievance (*Delete as appropriate)	Collective/Individual*

STAGE	Date Complaint Raised at Each stage	Date Complaint Discussed/Heard	Date Response/ Decision given	Comments - summarise the subject of the Grievance. Record any time extensions and the outcome/response of any meetings
Informal				
Stage 1				
Formal Stage 2				
Formal Stage 3				