



SECTION: HUMAN RESOURCES
POLICY AND PROCEDURE: 10.11
NATURE AND SCOPE: POLICY AND PROCEDURE - TRUST WIDE
SUBJECT: GRIEVANCE

This policy and procedure sets out the Trust's arrangements to be applied to any grievances, raised individually or collectively that relate to employment.

DATE OF LATEST RATIFICATION: DECEMBER 2017
RATIFIED BY: EXECUTIVE LEADERSHIP TEAM
IMPLEMENTATION DATE: DECEMBER 2017
REVIEW DATE: DECEMBER 2020
ASSOCIATED TRUST POLICIES & PROCEDURES:
Conduct – 10.10
Preventing Work Related Stress & Ensuring Staff Wellbeing – 11.15
Raising Concerns (Whistleblowing) Policy – 10.15
Respect at Work Policy – 10.

NOTTINGHAMSHIRE HEALTHCARE NHS FOUNDATION TRUST

GRIEVANCE POLICY

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NOTTINGHAMSHIRE HEALTHCARE NHS FOUNDATION TRUST**GRIEVANCE POLICY****1.0 POLICY****1.1 Introduction & Objectives**

1.1.1 A grievance in the workplace is any concern, problem or complaint, together referred to as 'concerns' that an employee raises with their employer about their employment.

1.1.2 Any concerns raised will be taken seriously and investigated appropriately.

1.2 Single Equality Scheme

1.2.1 In applying this policy and procedure managers, employees and their representatives will have regard to the principles and requirements of the Trust's Single Equality Scheme. The Trust is committed to equality, diversity and human rights accordingly. The implementation of this policy and procedure and its impact will be monitored across all equality strands and reported regularly to the Trust Board.

1.2.2 Managers will not discriminate in the application of this policy and procedure in respect of age, disability (including mental health status), race, ethnicity or nationality, sexual orientation, gender, gender identity, religion/beliefs, marital/partnership status, pregnancy/maternity or trade union membership.

1.3 Scope And Application

1.3.1 This policy applies to all employees of the Trust. The policy directs staff to resolve concerns informally.

1.3.2 If there are reasonable grounds to suspect that an employee may be raising a vexatious grievance, the organization will investigate the cause in accordance with the Conduct Policy, and may take appropriate action under that Policy.

1.3.3 Issues must be raised at the earliest opportunity to support resolution at the lowest level. Therefore issues must be raised within 3 months of the event taking place. In exceptional circumstances, a longer period of time can be taken into account.

1.4 Representation

1.4.1 Employees have the right to be accompanied at formal stages of this process by a representative of a recognised Trade Union or work colleague. It is the responsibility of the employee to make arrangements for representation and to arrange for an alternative representative where necessary

1.4.2 As part of the Trust's commitment to good practice, support may be given to employees who request the assistance of a Trade Union representative or to be accompanied at the informal stages if this can be facilitated.

1.4.3 There is no right to legal representation at any stage of this policy and procedure.

1.5 Roles & Responsibilities

1.5.1 Employees

- All employees have a personal responsibility to work towards resolving issues informally in line with this procedure and to work with their manager to find mutually acceptable solutions/resolutions.
- All employees should be willing to participate in an open discussion of the issues whether at the informal or formal stage of a grievance.

1.5.2 Managers, Team Leaders and Supervisors

- Managers will ensure that all employees are aware of the content of this policy.
- All levels of manager have a responsibility to ensure that concerns are dealt with swiftly, thoroughly and sensitively to avoid unnecessary escalation of issues and minimize any stress/anxiety for all parties concerned.

1.5.4 HR Business Operations Team

- The role of Workforce Advisors is to actively support managers and employees in addressing concerns swiftly and appropriately through strategies such as supportive intervention, mediation, training, and support for investigating officers.
- Workforce Advisors will provide guidance to managers and employees in the interpretation and application of this procedure as and when required, including advice to managers by attendance at grievance meetings at the formal stage of the procedure.
- Some members of the wider HR function are trained and accredited workplace mediators. This confidential and informal service should be utilised wherever necessary to help resolve workplace concerns.

1.5.5 Trade Union Representatives

- The role of the Trade Union Representative is to advise individual members regarding the process and where an employee wishes it, to accompany them at meetings held at the formal stage of the process and ensure the policy and procedure are adhered to. Representatives should emphasize the importance of resolving concerns on an informal basis using counselling or mediation processes before adopting a formal approach.

2.0 **MANAGEMENT OF GRIEVANCES PROCEDURE**

2.1 Stage 1 - Informal Stage

- 2.1.1 Where appropriate, employees and managers should, in the first instance resolve any issues informally as they arise.
- 2.1.2 This may involve an informal meeting with all parties concerned to discuss the concern raised and agree an appropriate resolution. This may include exploration of mediation at this stage.

- 2.1.3 Any agreed outcomes at the informal stage should be recorded and shared by both parties.

2.2 Stage 2 – Formal Stage

- 2.2.1 If an issue has been unable to be resolved at the informal stage, employees may use the formal stages of the procedure to seek resolution through an appropriate alternative manager.
- 2.2.2 Concerns should be submitted in writing to the appropriate manager on the form provided in **appendix 1**. Where the concern relates specifically to the actions of a line manager, the concern should be submitted to the manager at the next level of authority. The written document should state the exact nature of the concern and what the desired outcome or remedy is.
- 2.2.3 On receipt of the concern, the receiving manager should send an acknowledgement letter, investigate the concern and arrange for a meeting to be held with the employee raising the concern. If practicable this should be done within 14 calendar days although it is accepted that this time limit may not be met in every case.
- 2.2.4 If it would be helpful and appropriate for progressing the concerns raised, the manager may invite other employees to the grievance meeting. All parties will be made aware of those who will be in attendance and the capacity in which they are attending the meeting. A Workforce Advisor may also attend the meeting in an advisory capacity.
- 2.2.5 Following the meeting, the employee will be informed in writing of the outcome within 7 calendar days and told of any action that the Trust proposes to take as a result of the grievance.
- 2.2.6 In the event of a complex concern being raised, the manager may deem it appropriate that the concern be independently investigated.

2.3 Stage 3 – Appeal

- 2.3.1 If an individual is dissatisfied with the outcome of their concern, they may raise an appeal. The appeal must be in writing, state the reasons for appeal and should be submitted to the manager at the next level of authority within 10 calendar days of the date of the written outcome of the grievance.
- 2.3.2 On receipt of the appeal, the receiving manager shall carry out a review of the facts, which may include an investigation if deemed appropriate and arrange for a meeting to be held. The manager may invite the stage 2 manager to the meeting. A relevant HR representative will also attend the meeting in an advisory capacity. If practicable this should be done within 14 calendar days although it is accepted that this time limit may not be met in every case.
- 2.3.3 Written confirmation of the outcome of the appeal meeting will be sent to the employee within 5 calendar days of the appeal meeting.
- 2.3.4 The outcome following the appeal is final.

3.0 TARGET AUDIENCE

- 3.1 All Trust employees.

4.0 CONSULTATION

4.1 Consultation will be between LC, and Staff Side Representatives.

5.0 LEGISLATIVE COMPLIANCE (this is not an exhaustive list)

- The Equal Pay Act 1970 & 1984
- The Rehabilitation of Offenders Act 1976
- The Mental Health Act 1983 & 2007
- The Human Rights Act 1998
- The Data Protection Act 1998
- The Mental Capacity Act 2005
- The Immigration and Asylum Act 2006
- Work and Families Act 2006
- The Equality Act 2010
- ACAS Code of Practice Disciplinary and Grievance Procedures

6.0 MONITORING COMPLIANCE

6.1 The implementation of this policy and its effectiveness will be monitored on an ongoing basis by the Trust Board, relevant General Managers/Heads of Service, senior members of the Human Resource Departments and members of the Core Group. This monitoring process will include the presentation of employment relations statistics provided to management groups including the Workforce, Equality & Diversity Sub-Committee of the Trust Board.

7.0 TRAINING

7.1 All employees must be made aware of the provisions of this policy. This is provided as part of the Trust induction event and must be addressed as part of the local induction for all employees.

8.0 EQUALITY IMPACT ASSESSMENT

8.1 Following the EIA screening exercise it has been concluded that a full EIA is not needed. The policy, as required by the Equality Act 2010 ensures that the specific requirements of diverse groups are identified, considered and met as appropriate within the remit of this policy. The policy also clearly requires managers to ensure full and informed consideration is given to avoid misinterpretation of cultural behaviours/identities.

9.0 CHAMPION & EXPERT WRITER

9.1 The champion of this policy is the Director of HR. This policy and procedure has been expertly written by the Deputy Head of Workforce & Organisational Effectiveness.

10.0 REVIEW DATE

10.1 This policy will be reviewed in October 2020 or in light of organisational or legislative changes.

APPENDIX 1

NOTTINGHAMSHIRE HEALTHCARE NHS FOUNDATION TRUST

RE: NOTIFICATION OF GRIEVANCE

Dear

My name is and I currently work at in the capacity of

I have a grievance regarding
.....

I have tried to resolve this informally with my immediate line manager and write to ask to meet with you to discuss this matter further. I will/will not be attending the meeting with a union representative who's details are:
.....

My desired outcome/remedy to resolve my grievance is
.....
.....

I look forward to meeting with you to resolve this matter appropriately.

Yours sincerely

.....

**EQUALITY IMPACT ASSESSMENT (EIA) SCREENING TOOL
(Towards an Equality and Recovery Focused Organisation)**

A. Name of policy/procedure/strategy/plan/function etc. being assessed:	Grievance Policy – 10.11
B. Brief description of policy/procedure/strategy/plan/function etc. and reason for EIA:	This policy and procedure sets out the Trust’s arrangements to be applied to any grievances, raised individually or collectively that relate to employment.
C. Names and designations of EIA group members:	Charlotte Whyman, Deputy Head of Workforce:Organisational Effectiveness
D. List of key groups/organisations consulted:	Core Group
E. Data, Intelligence and Evidence used to conduct the screening exercise:	Previous EIA’s

F. Equality Strand	Does the proposed policy/procedure/ strategy/ plan/ function etc. have a positive or negative (adverse) impact on people from these key equality groups? Please describe	Are there any changes which could be made to the proposals which would minimise any adverse impact identified? What changes can be made to the proposals to ensure that a positive impact is achieved? Please describe	Have any mitigating circumstances been identified? Please describe	Areas for Review/Actions Taken (with timescales and name of responsible officer)
Race	<p>Positive impact identified. Section 1.2 of the Policy clearly highlights the responsibility of managers to ensure that consideration is given to the equality and diversity needs/requirements of staff when implementing this policy and procedure.</p> <p>Furthermore, analysis of data from Performance Reports will be reviewed on a 6 monthly basis to ensure that none of the protected characteristic groups are adversely affected by the application of this policy. This will be monitored six monthly by the Trust Core Group</p>			Author to review at review date of policy
Gender Inclu. Transgender and Pregnancy & Maternity	As Race			Author to review at review date of policy
Disability	As Race			Author to review at review date of policy
Religion/Belief	As Race			Author to review at review date of policy

Sexual Orientation Incl. Marriage & Civil Partnership	As Race			Author to review at review date of policy
Age	As Race			Author to review at review date of policy
Social Inclusion * ¹	As Race			Author to review at review date of policy
Community Cohesion * ²	As Race			Author to review at review date of policy
Human Rights * ³	As Race			Author to review at review date of policy

*¹ for **Social Inclusion** please consider any issues which contribute to or act as barriers, resulting in people being excluded from society e.g. homelessness, unemployment, poor educational outcomes, health inequalities, poverty etc.

*² **Community Cohesion** essentially means ensuring that people from different groups and communities interact with each other and do not exclusively live parallel lives. Actions which you may consider, where appropriate, could include ensuring that people with disabilities and non-disabled people interact, or that people from different areas of the City or County have the chance to meet, discuss issues and are given the opportunity to learn from and understand each other.

*³ **The Human Rights Act 1998** prevents discrimination in the enjoyment of a set of fundamental human rights including: The Right to a Fair Trial; Freedom of Thought, Conscience and Religion; Freedom of Expression; Freedom of Assembly and Association; and the Right to Education.

G. Conclusions and Further Action (including whether a full EIA is deemed necessary and agreed date for completion)	Following the EIA screening exercise it has been concluded that a full EIA is not needed. The policy, as required by the Equality Act 2010 ensures that the specific requirements of diverse groups are identified, considered and met as appropriate within the remit of this policy/procedure. The policy also clearly requires managers to ensure full and informed consideration is given to avoid misinterpretation of cultural behaviour(s)/identities.
H. Screening Tool Consultation End Date	Reviewed EIA October 17 – no amendments made
I. Name and Contact Details of Person Responsible for EIA (tel. e-mail, postal)	Charlotte Whyman Deputy Head of Workforce & Organisational Effectiveness charlotte.whyman@nottshc.nhs.uk 0115 9691300 ext 11194
J. Name of Group Approving EIA (i.e. Directorate E&D Group; Divisional Workforce, Equality & Diversity Group; Trustwide E&D Subcommittee; or Divisional Policy & Procedures Group)	Core Group

APPENDIX 3

Policy/Procedure for: GRIEVANCE (Previously 11.03)
Issue: 7
Status: APPROVED
Author Title: Deputy Head of Workforce & Organisational Effectiveness
Issue Date: December 2017
Review Date: December 2020
Approved by: Executive Leadership Team
Distribution/Access: NORMAL

RECORD OF CHANGES

DATE	AUTHOR	POLICY/ PROCEDURE	DETAILS OF CHANGE
11.06	J Fleet	PE/10	Change to house style and review date
01.10	D Gezmis	PE/10	Update and review of full content
06.11	J Cyrnik	11.03	Trust logo updated ,2.3 Bullying & harassment issues raised under this policy , 5.0 Implementation of this policy reflects that in the bullying & harassment policy
Nov/Dec 2013	L Herrick	11.03 (Issue 6)	Changes throughout to include reference to Bullying and harassment (policies merged)
May 2014	P Hall	10.11	Changed policy number Changes to the numbers of Trust relevant policies to reflect their new number
Oct 2017	C Whyman	10.11	Update and review of content