

DIGNITY AT WORK

		POLICY	
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	X		
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Author (Position & Name)	People Operational Lead		
Lead Division/ Directorate	Corporate		
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Position of Person able to provide Further Guidance/Information	Head of Operational HR		
Associated Documents/ Information		Date Associated Documents/ Information was reviewed	
<ol style="list-style-type: none"> 1. Disciplinary Policy 2. Grievance Policy 3. Managing Work Related Stress Policy 4. Policy for the Management of Work Related Violence and Aggression 5. Health and Safety Policy 		April 2024 May 2024 June 2022 August 2021 October 2023	

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1.0 INTRODUCTION

- 1.1 Sherwood Forest Hospitals NHS Foundation Trust is committed to the belief that all employees have the right to be treated with dignity and respect at work and not be subjected to any form of unacceptable behaviour from colleagues. Everyone at the trust, and those who have dealings with trust, have a responsibility to maintain good working relationships and not to use words or carry out deeds that may harm the wellbeing of others. In addition to the obligations placed upon employer and employee by the Equality Act 2010, everyone has the right to be treated with consideration, fairness, dignity and respect. This contributes to a workplace environment in which individuals feel safe and can work effectively competently and confidently.
- 1.2 In line with the Trust's CARE values, this policy is about creating and sustaining a working environment in the Trust that is marked by mutual respect, tolerance and understanding and a working culture based on dignity and respect across our services and departments. This means recognising that bullying and harassment in the workplace is a serious issue that must always be addressed whenever it occurs.
- 1.2 The Trust's CARE values have been developed to support and promote a culture based on respect, which is free from discrimination and harassment. The values outline the Trust's expected values and behaviours of continuous improvement, efficiency, safety and respect.
- 1.4 As a responsible employer the Trust has a legal and ethical responsibility to ensure that our staff are not subjected to inappropriate and disrespectful or discriminatory behaviours that may affect their performance and health and wellbeing.

2.0 POLICY STATEMENT

- 2.1 The policy covers any behaviours which result in people feeling that they are not being treated with dignity and respect including bullying and harassment in the workplace.
- 2.2 This policy applies to all staff employed by Sherwood Forest Hospitals NHS Foundation Trust as well as those who act as volunteers, those who hold an honorary contract, bank, agency and contracted staff.
- 2.3 Each individual carries personal responsibility for their own behaviours in relation to this policy.

3.0 DEFINITIONS/ ABBREVIATIONS

- 3.1 ACAS define bullying as:

Any unwanted behaviour that makes someone feel intimidated, degraded, humiliated or offended. It is not necessarily always obvious or apparent to others and may happen in the workplace without an employer's awareness.

- 3.2 Harassment, as defined in the Equality Act 2010, is:

Unwanted conduct related to a relevant protected characteristic, which has the purpose or effect of violating an individual's dignity or creating an intimidating, hostile, degrading, humiliating or offensive environment for that individual.

- 3.3 Protected characteristics are age, disability, gender reassignment, race, religion or belief, sex, sexual orientation, marriage and civil partnership and pregnancy and maternity.
- 3.4 Victimisation is defined as treating someone badly or less favourably because they have submitted a complaint or are going to make a complaint either formally or informally.

4.0 ROLES AND RESPONSIBILITIES

4.1 **Line Managers** – is the duty of managers to establish and maintain an environment free from harassment and bullying by:

- 4.1.1 ensuring all employees are aware of the Trust's values and behaviours
- 4.1.2 ensuring that all employees in their area of work are made aware that this policy exists and that they have a right not to be harassed, bullied or victimised at work. All employees will be made aware this kind of behaviour is unacceptable and where appropriate will be treated as a disciplinary matter.
- 4.1.3 taking prompt action to stop harassment and bullying. By pointing out that the behaviour is unacceptable, managers may be able effectively to put a stop to the problem without the need for further formal action.
- 4.1.4 setting a positive example by treating others with respect and setting standards of acceptable behaviour; also promote a working environment where harassment is unacceptable and not tolerated
- 4.1.5 ensuring that offensive or potentially offensive language and material is not displayed in the workplace.
- 4.1.6 ensuring all complaints of harassment and bullying are treated seriously and sympathetically and with confidence by management.
- 4.1.7 ensuring that staff members understand that victimisation of any employee making or helping someone to make a complaint is unacceptable and where appropriate will be treated as a disciplinary matter.

4.2 **All employees** – All employees must:

- 4.2.1 ensure they are aware and act in accordance with the Trust's CARE values and behaviours.

- 4.2.2 refrain from the following in relation to staff, colleagues and patients (this is not an exhaustive list)
- bullying,
 - harassing,
 - intimidating behaving,
 - isolating behaving,
 - making inappropriate comments,
 - making inappropriate gestures,
 - discrimination,
 - verbal and/or physical abuse,
 - shouting
 - undermine undermining behaviours
- 4.2.3 encourage individuals who report bullying, victimisation or harassment to seek help from an appropriate source;
- 4.2.4 refrain from participating in, encouraging or condoning gossip related to cases of alleged or actual bullying or harassment;
- 4.2.5 take appropriate steps to prevent or stop gossip in their area of work;
- 4.2.6 attend training sessions which may be arranged to increase their awareness of the issues involved in bullying and harassment.
- 4.2.7 All employees of Sherwood Forest Hospitals NHS Foundation Trust are encouraged to report incidents of harassment and bullying in the knowledge that complaints will be dealt with in a sensitive manner.
- 4.3 **Trade Union Representative** – Trade Union Representatives are encouraged to assist their members who allege they have been bullied or victimised, including supporting them in making complaints and offering confidential advice.
- 4.3.1 The Trust recognises that members of a Trade Union are entitled to support their members during the informal stage of the process and are able to represent members at formal stages of this process. Trade Unions are not able to participate in formal mediation.
- 4.3.2 To be committed to resolve any complaints of bullying and harassment informally.
- 4.3.3 The Trust is committed to the prevention of bullying, harassment or victimisation of Trade Union activists or members because of their Trade Union role.
- 4.4 **Occupational Health**– The aim of Occupational Health is improving and sustaining the health and wellbeing of staff. It is an advisory service and can be accessed by individuals making contact directly or by management referral.

- 4.4.1 Staff Counselling can be accessed via Vivup, the Trust's Employee Assistance Provision, and this provides staff support which is a confidential service which is non-judgemental and impartial.
- 4.5 **People Directorate** – The People Directorate may be contacted informally to discuss issues of concern related to dignity at work. The People Directorate will support the informal and formal processes of this policy.
- 4.6 **Freedom to Speak up Guardians** - Act in an independent and impartial capacity, listening to employees and supporting them to raise concerns they may have by using the available structures and the Dignity at Work Policy, should there be concerns of bullying and harassment.
- 4.7 **Mediator** – Formally trained as a workplace mediator who will attempt to facilitate those involved in any concerns about dignity at work to work together to come to an agreement. This may be provided by the Organisational Development (OD) Team or externally via a third party, e.g. ACAS.

5.0 APPROVAL

- 5.1 This document has been approved by the Joint Staff Partnership Forum.

6.0 DOCUMENT REQUIREMENTS

6.1 Informal Process

- 6.1.1 If the individual feels unable to approach the alleged bully/harasser, they should raise the concerns with their line manager with a view to resolving these informally without proceeding to the formal procedure. This may be done verbally or in writing.
- 6.1.2 If the problems/issues is about the individual's line manager, the individual may raise these with the next level of management.
- 6.1.3 The manager will meet with the individual to discuss the issue(s) that have been raised and the desired outcome/resolution to be achieved from the informal process.
- 6.1.4 The manager will do some initial fact finding in order to resolve the matter promptly and fairly. This will involve discussing the concerns with the individual who the concerns have been raised against, as that individual must be given the opportunity to answer the concerns and put their side of the case to the manager.
- 6.1.5 It may be appropriate at this point for the manager to arrange a facilitated discussion between the two parties with a view to resolving the issue and agreeing a way forward.
- 6.1.6 Alternatively formal internal workplace mediation may be recommended. Advice regarding this should be sought from the Organisational Development Team (OD).

6.2 Formal Process

- 6.2.1 Formal procedures may be invoked when the informal stages of the Dignity at Work Policy have been exhausted or unsuccessful.
- 6.2.2 The formal process can also be instigated following the investigation of the facts when the outcome from the investigation finds that the nature and particulars of the complaint are sufficiently serious to warrant formal investigation.
- 6.2.3 Formal complaints must be made in writing to the line manager, or if the problems/issues is about the employee's line manager, the individual may raise these with the next level of management.
- 6.2.4 The written complaint should include;
- The name(s) of the person being complained about;
 - The nature of the complaint e.g. treatment resulting in loss of dignity or respect, harassment, bullying etc.
 - The dates, times and places where the incident(s) took place;
 - The name(s) of any person(s) who witnessed any of the incident(s);
 - Details of any action taken by the complainant or others to stop the behaviour being complained about.
- 6.2.5 The above information will be shared with the person the complaint is being made against.
- 6.2.6 An investigation into the complaint will be conducted in line with the Trust's Disciplinary Policy, specifically from point 6.5 onwards.
- 6.2.7 Following the investigation the case manager will form a view as to whether there is a case to answer under the Trust's disciplinary procedure. The conclusion may be that:
- there is no case to answer
 - some level of inappropriate behaviour has occurred but it is insufficient to initiate the formal disciplinary procedures and an alternative resolution must be found;
 - the offence is of a serious enough nature to warrant a disciplinary hearing under the Trust's disciplinary policy;

- 6.2.8 The case manager and HR representative will meet with the complainant and person(s) being complained about and their representatives within a reasonable period of time. The purpose of the meeting will be to communicate the outcome of the investigation and whether or not formal proceedings will take place.
- 6.2.9 Whether the complaint is resolved via the informal process, mediation or through the formal process, the line manager must ensure that any action decided upon is properly and fully followed through.
- 6.2.10 Following the process it may be necessary to consider relocation, redeployment, team building and other transitional arrangements. Therefore, following the completion of the procedure the appropriate Manager and a member of the People Directorate need to meet with relevant members of staff and discuss issues in relation to any of the following as soon as practically possible:
- Return to work/relocation
 - Support structures
 - Team building/conciliation
 - External support
 - Training issues
 - Whether there is a need for future review

6.3 Preventing victimisation

- 6.3.1 On completion of a case, whatever the outcome management is responsible for maintain dignity and respect at work including ensuring that victimisation does not take place. Victimisation occurs where a person is treated less favourably than another person because s/he has referred to or has asserted their rights under the relevant statutory provision, e.g. the Equality Act 2010 or raised a complaint under Trust procedures.
- 6.3.2 This would cover those bringing cases under this policy or acting as witnesses in any investigations or complaint.

7.0 MONITORING COMPLIANCE AND EFFECTIVENESS

Minimum Requirement to be Monitored (WHAT – element of compliance or effectiveness within the document will be monitored)	Responsible Individual (WHO – is going to monitor this element)	Process for Monitoring e.g. Audit (HOW – will this element be monitored (method used))	Frequency of Monitoring (WHEN – will this element be monitored (frequency/ how often))	Responsible Individual or Committee/ Group for Review of Results (WHERE – Which individual/ committee or group will this be reported to, in what format (eg verbal, formal report etc) and by who)
Number of bullying and harassment cases	People Operational Lead	Employee Relations Cases	Monthly	JSPF
Employee Relations Assurance	People Operational Lead	Employee Relations Assurance	Quarterly	People Cabinet

8.0 TRAINING AND IMPLEMENTATION

- 8.1 The People Directorate are responsible for ensuring that the effective management of harassment and bullying is covered by them in the trust's induction course for all new starters.
- 8.2 In addition, all managers with people responsibilities will be expected to have awareness training to fully understand their responsibilities in the application of this policy.
- 8.2 The People Operational Lead will be responsible for reviewing this policy and will ensure that anyone involved in implementing this policy (for example conducting investigations) will receive training to assist them with these duties.

9.0 IMPACT ASSESSMENTS

- This document has been subject to an Equality Impact Assessment, see completed form at Appendix 1
- This document is not subject to an Environmental Impact Assessment

10.0 EVIDENCE BASE (Relevant Legislation/ National Guidance) AND RELATED SFHFT DOCUMENTS

Evidence Base:

- Health and Safety at Work etc. Act 1974
- Protection from Harassment Act 1997
- Equality Act 2010

Related SFHFT Documents:

- Disciplinary Policy
- Grievance Policy
- Raising Concerns Policy
- Managing Work Related Stress Policy
- Health and Safety Policy
- Policy for the Management of Work Related Violence and Aggression

11.0 APPENDICES

Appendix 1 Equality Impact Assessment Form

APPENDIX 1 - EQUALITY IMPACT ASSESSMENT FORM (EQIA)

Name of policy being reviewed: Dignity at Work			
Existing policy			
Date of Assessment: 11/04/2024			
For the service/policy/procedure and its implementation answer the questions a – c below against each characteristic (if relevant consider breaking the policy or implementation down into areas)			
Protected Characteristic	a) Using data and supporting information, what issues, needs or barriers could the protected characteristic groups' experience? For example, are there any known health inequality or access issues to consider?	b) What is already in place in the policy or its implementation to address any inequalities or barriers to access including under representation at clinics, screening?	c) Please state any barriers that still need to be addressed and any proposed actions to eliminate inequality
The area of policy or its implementation being assessed:			
Race and Ethnicity	The policy when applied correctly gives no potential for disadvantage	Standardised approach to addressing inappropriate standards of behaviour	None
Gender	The policy when applied correctly gives no potential for disadvantage	Standardised approach to addressing inappropriate standards of behaviour	None
Age	The policy when applied correctly gives no potential for disadvantage	Standardised approach to addressing inappropriate standards of behaviour	None
Religion / Belief	The policy when applied correctly gives no potential for disadvantage	Standardised approach to addressing inappropriate standards of behaviour	None
Disability	The policy when applied correctly gives no potential for disadvantage	Standardised approach to addressing inappropriate standards of behaviour	None
Sexuality	The policy when applied correctly gives no potential for disadvantage	Standardised approach to addressing inappropriate standards of behaviour	None

Pregnancy and Maternity	The policy when applied correctly gives no potential for disadvantage	Standardised approach to addressing inappropriate standards of behaviour	None
Gender Reassignment	The policy when applied correctly gives no potential for disadvantage	Standardised approach to addressing inappropriate standards of behaviour	None
Marriage and Civil Partnership	The policy when applied correctly gives no potential for disadvantage	Standardised approach to addressing inappropriate standards of behaviour	None
Socio-Economic Factors (i.e. living in a poorer neighbourhood / social deprivation)	The policy when applied correctly gives no potential for disadvantage	Standardised approach to addressing inappropriate standards of behaviour	None
What consultation with protected characteristic groups including patient groups have you carried out? JSPF Sub-group and JSPF			
What data or information did you use in support of this EqIA? <ul style="list-style-type: none"> Previous policy 			
As far as you are aware are there any Human Rights issues be taken into account such as arising from surveys, questionnaires, comments, concerns, complaints or compliments? <ul style="list-style-type: none"> No 			
Level of impact From the information provided above and following EQIA guidance document Guidance on how to complete an EIA (click here), please indicate the perceived level of impact: Low Level of Impact .			
Name of Responsible Person undertaking this assessment: J Read			
Signature: J Read			
Date: 11.04.2024			