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NG17 4JL

25th July 2024

Tel: 01623 622515
Join today: www.sfh-tr.nhs.uk

Dear Sir/Madam

Freedom of Information Act (FOI) 2000 - Request for Information Reference: Just and Restorative approach

I am writing in response to your request for information under the FOI 2000.

I can confirm in accordance with Section 1 (1) of the Freedom of Information Act 2000 that we do hold the information you have requested. A response to each part of your request is provided below.

Home, Community, Hospital.

Patient Experience Team
01623 672222
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Chair Claire Ward
Chief Executive Paul Robinson

FOI Request / Question	Question Response	Is there an exemption?	Exemption	Exemption Details
1. Has your Trust implemented the Just and Restorative approach in your policies, processes and guidance documents?	Yes			
2. If Yes please provide evidence of policies, processes, tools and guidance for Managers, Staff and HR.		Yes	Section 21 Exemption - Refer Applicant to the Publication Scheme / Information Reasonably Accessible Elsewhere	Under Section 21 of the Act, the Trust is not required to provide information in response to a request if it is already reasonably accessible to you. The information you requested is available on the Trust's website https://www.sfh-tr.nhs.uk/about-us/policies-and-procedures/non-clinical-policies-procedures/human-resources/?id=8537
3. Have you implemented Just and Restorative culture training in your Trust?	Yes			
4. If yes, please provide the training outline	The Trust has established Just Culture into a number of it's training sessions. This includes Investigation Training and Fact-Finding Training, which talks about the importance of taking a person-centred approach and the importance of doing a fact-find prior to any decisions being made in relation to a formal disciplinary investigation. The training makes reference to Amin			

	<p>Abdullah and the events at Imperial College Healthcare. It references the changes made by Sherwood eg. fact-finding and increased emphasis on wellbeing.</p> <p>Just Culture principles are also implemented in the Sickness Absence training, which highlights the importance of taking a person-centred approach.</p>			
5. Who receives the training?	<p>The training was initially rolled out to Senior Leaders within the organisation, both operationally and clinically (e.g. Nurses, Medics etc). This training is available for all leaders to book on, as and when they feel it is necessary for their own development. Any new Case Managers or Investigating Officers are met with, and bespoke training offered.</p>			
6. If your trust has implemented the Just and Restorative approach, how have you measured impact?	<p>Time taken to complete casework Volume of casework Numbers of colleagues going through a process who then absent themselves from work due to sickness absence.</p>			
7. Have you seen any improvement in HR metrics, such as casework, number of no cases to answer, and length of time for investigations?	<p>Yes. All of the metrics described in the previous question have seen an improvement. This includes less people in ER processes going off sick, reduced casework and reduced time to complete casework.</p>			

<p>8. Do you measure and compare your metrics through an Inclusive lens?</p>	<p>a. With a focus on reducing disparities on outcomes for staff from Ethnic Minority groups and Disabilities? Yes</p> <p>b. If yes, how is this measured? Data is reported to the Trust's People Cabinet and Executive Board on a monthly basis. Information is also provided as part of the WRES and WDES report which is submitted annually by the Trust's EDI Lead.</p> <p>c. What improvements have been made. The number of BME and colleagues with disabilities who are part of a formal ER process has declined since the introduction of a Just and Restorative Culture.</p> <p>d. What interventions have you put in place to address any disparities? The Trust always ensures that an objective Case Manager and (where applicable) chair of a hearing is appointed, to try and reduce bias. Where there are concerns which are raised about BME colleagues, we ensure an Investigating Officer is appointed whom is also BME, in order to try and understand experiences of these staff further. From a</p>			
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	capability perspective, colleagues are supported with a referral to Occupational Health. Where there are concerns relating to disabilities, the process is paused, and the relevant procedure is followed in order to support the individual and their disability.			
9. Do investigating officers receive training?	Yes			
10. If yes, please outline the method and duration	This is face-to-face, or via MS Teams, depending upon the requirements of the individual. Fact-finding training takes approximately 1 hour, and investigation training takes approximately 2 hours.			
11. Do investigating officers have protected time to complete investigations?	Investigating Officers complete investigations at the same time as their substantive role. Prior to taking on an investigation, potential Investigating Officers are asked whether they have suitable availability to commit to completing the investigation. There is no set protected time to complete the investigation.			
12. If yes, is there a specific protected time agreement?	N/A			
13. If a protected time agreement exists please	N/A			

provide a copy of this.				
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I trust this information answers your request. Should you have any further enquiries or queries about this response please do not hesitate to contact me. However, if you are unhappy with the way in which your request has been handled, you have the right to ask for an internal review. Internal review requests should be submitted within two months of the date of receipt of the response to your original letter and should be addressed to: Sally Brook Shanahan, Director of Corporate Affairs, King's Mill Hospital, Mansfield Road, Sutton in Ashfield, Nottinghamshire, NG17 4JL or email sally.brookshanahan@nhs.net.

If you are dissatisfied with the outcome of the internal review, you can apply to the Information Commissioner's Office, who will consider whether we have complied with our obligations under the Act and can require us to remedy any problems. Generally, the Information Commissioner's Office cannot decide unless you have exhausted the internal review procedure. You can find out more about how to do this, and about the Act in general, on the Information Commissioner's Office website at: <https://ico.org.uk/your-data-matters/official-information/>.

Complaints to the Information Commissioner's Office should be sent to FOI/EIR Complaints Resolution, Information Commissioner's Office, Wycliffe House, Water Lane, Wilmslow, Cheshire, SK9 5AF. Telephone 0303 1231113, email casework@ico.org.uk.

If you would like this letter or information in an alternative format, for example large print or easy read, or if you need help with communicating with us, for example because you use British Sign Language, please let us know. You can call us on 01623 672232 or email sfh-tr.foi.requests@nhs.net.

Yours faithfully

Information Governance Team

All information we have provided is subject to the provisions of the Re-use of Public Sector Information Regulations 2015. Accordingly, if the information has been made available for re-use under the [Open Government Licence](#) (OGL) a request to re-use is not required, but the licence conditions must be met. You must not re-use any previously unreleased information without having the consent from Sherwood Forest Hospitals NHS Foundation Trust. Should you wish to re-use previously unreleased information then you must make your request in writing. All requests for re-use will be responded to within 20 working days of receipt.