

GRIEVANCE POLICY

		POLICY	
Reference	HR/0025		
Approving Body	JSPF		
Date Approved	30 July 2024		
For publication to external SFH website	Positive confirmation received from the approving body that the content does not risk the safety of patients or the public:		
	YES	NO	N/A
	X		
Issue Date	02 August 2024		
Version	4		
Summary of Changes from Previous Version	Clarification of how paperwork relating to grievances will be shared Updated timescales, to ensure consistency throughout the policy		
Supersedes	3		
Document Category	Human Resources		
Consultation Undertaken	JSPF subgroup		
Date of Completion of Equality Impact Assessment	June 2024		
Date of Environmental Impact Assessment (if applicable)	N/A		
Legal and/or Accreditation Implications	Employment Act 2008 Employment Act 2002 (Dispute Resolution) Regulations 2004 Equality Act 2010 ACAS Code of Practice 2015		
Target Audience	All substantive staff		
Review Date	30 June 2027		
Sponsor (Position)	Executive Director of People		
Author (Position & Name)	People Operational Lead		
Lead Division/ Directorate	Corporate		
Lead Specialty/ Service/ Department	People Directorate		
Position of Person able to provide Further Guidance/Information	People Operational Lead		
Associated Documents/ Information			Date Associated Documents/ Information was reviewed

1. Disciplinary Policy	April 2024
2. Dignity At Work Policy	April 2024
3. Speaking Up Policy	July 2023
4. Managing Work Related Stress Policy	June 2022
5. Guidance for the Management of Work Related Violence and Aggression	August 2021
6. Health and Safety Policy	January 2024

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1.0 INTRODUCTION

The Trust is committed to resolving individual's problems, difficulties or dissatisfactions in a sensitive, fair and speedy manner. It is an individuals' right to seek an appropriate resolution to problems at work.

2.0 POLICY STATEMENT

- 2.1 This policy applies equally to all colleagues.
- 2.2 The Trust recognises that where an individual is aggrieved about some aspect of their employment, then conflict and loss of motivation can occur. The aim of this policy is to provide a framework of dealing promptly and fairly with colleague dissatisfaction without fear of recrimination.
- 2.3 All information shared and discussed during the grievance processes shall be dealt with in strict confidence by all parties.
- 2.4 Mediation may be considered at any stage of the procedure to secure an effective resolution. When considering mediation as a tool for resolution advice should be sought from the People Directorate.

3.0 DEFINITIONS/ ABBREVIATIONS

- 3.1 **Individual Grievance** is a specific complaint from an individual against management and/or the Trust, concerning a matter related to their employment. The Trust's Dignity at Work Policy and Procedure is designed to specifically deal with issues relating to bullying or harassment and should be used in these cases, rather than this policy/procedure.
- 3.2 **Collective Grievance** is a specific complaint from a group of colleagues against management and/or the Trust, concerning a matter related to their employment, which those employees have agreed should be raised together. The Collective Disputes policy should be used in these cases, rather than this policy/procedure

4.0 ROLES AND RESPONSIBILITIES

4.1 Managers' Responsibilities

- 4.1.1 To be aware that employees have the right to raise a grievance in good faith, without being subject to any detriment as a result.
- 4.1.2 When grievances are raised, to attempt to resolve issues raised by individuals informally in the first instance, ensuring this is managed fairly, consistently and within the agreed timescales.

- 4.1.3 To communicate effectively with colleagues, enabling and encouraging them to raise any issues of concern in an appropriate manner, and work with them to find a mutually acceptable solution to problems.
- 4.1.4 To take all workplace complaints seriously, even those not raised as a “grievance”, investigate whether they are valid, and deal with them appropriately.
- 4.1.5 To work in partnership with trade unions/professional organisations, in attempts to resolve grievances at the earliest stage possible.

4.2 Individual Responsibilities

- 4.2.1 Individuals wishing to raise a grievance should do so within three months of the last incident or action giving rise to the grievance.
- 4.2.2 To communicate effectively with their line manager, raise any issues of concern in an appropriate manner and be willing to work with their manager to find mutually acceptable solutions to problems.
- 4.2.3 To treat grievances confidentially.
- 4.2.4 Individuals should aim to settle complaints or concerns informally with their line manager in the first instance.
- 4.2.5 To be willing to participate in an open discussion of the issues raised whether at the informal or formal stage of a grievance.

4.3 People Directorate Responsibilities

- 4.3.1 To contribute to the development of policies and protocols and participate in the delivery of training in this area.
- 4.3.2 To provide timely professional advice to colleagues and managers on the implementation of this policy and procedure.
- 4.3.3 Wherever possible, to facilitate a solution to the grievance that is mutually acceptable to the individual and the manager.
- 4.3.4 To promote partnership working between managers and staff representatives in attempts to resolve all grievances.

4.4 Trade Union Responsibilities

- 4.4.1 To work in partnership with managers and take all steps to support an informal resolution of grievances where appropriate.

4.4.2 To advise individual members of their respective unions and professional associations regarding the process and, where the employee wishes it, to accompany them at informal meetings and formal grievance hearings.

4.4.3 To ensure their members are treated fairly and that the policy is implemented consistently.

5.0 APPROVAL

5.1 This policy has been approved by the Joint Staff Partnership Forum

6.0 DOCUMENT REQUIREMENTS

6.1 RIGHTS TO ACCOMPANIMENT

6.1.1 At informal stages it is not usually necessary for employees to be accompanied. However, should an individual ask to be accompanied this should not be unreasonably refused. Individuals can bring a workplace colleague acting in a non-legal capacity, or a Trade Union Representative.

6.1.2 At formal stages of the procedure, employees have the right to be accompanied by an accredited Trade Union or a current work colleague not acting in a legal capacity. They must be informed of their right and then choose whether or not to exercise it. It is the individual's responsibility to make arrangements to be accompanied.

6.2 INFORMAL APPROACH TO RESOLVING GRIEVANCES

6.2.1 Individuals who feel aggrieved must, in the first instance, raise problems with their line manager, with a view to resolving these informally without proceeding to the formal procedure.

6.2.2 If the problems/issues are about an individual's line manager, the individual may raise these with the next level of management.

6.2.3 The manager will meet with the individual to discuss the issue(s) that have been raised and discuss the desired outcome/resolution to be achieved from the process.

6.2.4 The manager will undertake some initial fact finding in order to resolve the matter promptly and fairly. Where the grievance is about another colleague, that individual must be given the opportunity to answer the grievance and put their side of the case to the manager.

- 6.2.5 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.
- 6.2.6 Alternatively formal internal workplace mediation may be recommended. Advice regarding this should be sought from the People Directorate.
- 6.2.7 Following the discussion, within 7 working days, the manager will write to relevant parties to confirm the outcome and any actions that have been agreed.
- 6.2.8 If the grievance is resolved informally the manager and individuals involved will take forward actions as agreed. In the event of the grievance not being resolved informally, the aggrieved individual has the option to instigate the formal stages of the procedure.

6.3 RAISING A FORMAL GRIEVANCE

STEP 1

- 6.3.1 An individual must inform their manager of their grievance in writing. If an grievance relates to the individual's line manager, the individual should raise a grievance with their manager's line manager or another appropriate manager in the organisation.
- 6.3.2 If an individual requires assistance in setting out a grievance(s), they are encouraged to seek help from their accredited trade union representative or a current work colleague not acting in a legal capacity.
- 6.3.3 Grievances need to be timely and must be raised within 3 months of the latest incident giving rise to concerns.

STEP 2

- 6.3.4 The manager who has received the grievance will invite the individual to a meeting to discuss the grievance within 14 working days of receiving the Notification Form.
- 6.3.5 The individual who has submitted the grievance will make all reasonable steps to attend the meeting.
- 6.3.6 If an individual fails to attend a grievance meeting on 2 separate occasions without reasonable justification, the manager will take this as indication that the grievance is withdrawn.
- 6.3.7 If a grievance is withdrawn, the individual will not be able to raise a grievance regarding the same issue for a minimum of 12 weeks.
- 6.3.8 All colleagues involved in any grievance investigation will be expected to fully cooperate with the process.

- 6.3.9 At the meeting an individual will be asked to explain their grievance and give an indication of how they think it might be settled.
- 6.3.10 At the conclusion of the initial meeting, the manager may identify that a grievance requires investigation. The individual will be informed of this. Investigations should be completed in a timely manner, and it is aimed that this is completed within 28 working days. Timescales may be extended by the Case Manager where deemed necessary, during the course of the investigation.
- 6.3.11 Throughout any investigation, the identified Investigating Officer will keep the aggrieved individual up to date on the progress of the investigation. This will be on a weekly basis. A communication plan will be agreed with the individual at the outset of the investigation.
- 6.3.12 Following the meeting or investigation, the manager will respond in writing to the employee's grievance within a reasonable time period (as a guide this will normally be 7 working days after the meeting or 7 working days following completion of an investigation). If this is not possible this should be discussed with the employee. As part of the response, the employee will be informed of their right to appeal. This must be done within 2 weeks of the date of the outcome letter.

STEP 3

- 6.3.12 If an employee feels grievance has not been satisfactorily resolved, they have the right to an appeal meeting; this should be raised in accordance with the Trust's Appeal Policy.
- 6.3.13 Employees must put the appeal grievance in writing.

6.4 COLLECTIVE GRIEVANCE PROCEDURE

- 6.4.1 In cases where two or more employees raise a grievance on the same issue, this will be known as a "Collective Grievance". In such cases, an appropriate representative may set out details of the grievance in writing on behalf of the employees. An appropriate representative shall be defined as Trade Union Representative or a nominated member of the group.
- 6.4.2 The Collective Grievance procedure complements the procedure for dealing with individual grievances and is informed by the ACAS guidelines.
- 6.4.3 Staff using this procedure must be aware that they cannot then use the Individual Grievance Procedure for raising the same issue.
- 6.4.4 The process for dealing with a collective grievance is the same as outlined in 5 and 6 (Formal, Step 1, Step 2, and Step 3) of this policy.

- 6.4.5 Once all steps of the procedure have been exhausted, the grievance may be referred to ACAS by joint agreement of the parties to the dispute or grievance for advice on conciliation, mediation and arbitration.

6.5 STATUS QUO

- 6.5.1 When a formal grievance has been submitted, the status quo (i.e. the conditions prevailing prior to the grievance) will remain until such time as the procedure is exhausted.
- 6.5.2 Where invoking the status quo would put the provision of the service at risk or render the service unsafe, the appropriate manager can make the decision not to implement the status quo. This decision must be put in writing to the employee with an explanation of why this has not been implemented.

6.6 DOCUMENTATION

- 6.6.1 The formal grievance notification form can be found at Appendix A of this policy.
- 6.6.2 When sharing documentation regarding the submission of a grievance, this will be shared digitally via secure NHS.NET email. In exceptional circumstances only, will documentation be shared via hard copy.
- 6.6.3 In cases where there is substantial volumes of documentation, external companies may be contacted in order for the documentation to be shared securely.

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 grievances	People Operational Lead	Employee relations cases	Monthly	JSPF and Divisional performance meetings.
Employee Relations Assurance	People Operational Lead	Employee Relations Assurance	Quarterly	People Committee

8.0 TRAINING AND IMPLEMENTATION

The People Directorate will provide managers and supervisors with appropriate training in the application of the Grievance Policy and Procedure which will include responding and hearing grievance cases.

9.0 IMPACT ASSESSMENTS

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

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

Evidence Base:

Employment Act 2008
Employment Act 2002 (Dispute Resolution) Regulations 2004
Equality Act 2010
ACAS Code of Practice 2015

Related SFHFT Documents:

Disciplinary Policy
Dignity At Work Policy
Raising Concerns Policy
Managing Work Related Stress Policy
Policy for the Management of Work Related Violence and Aggression
Health and Safety Policy
Appeals Policy

11.0 KEYWORDS

12.0 APPENDICES

- Appendix A – Formal Grievance Notification Form
- Appendix B – Equality Impact Assessment (EQIA)

Appendix A

FORMAL GRIEVANCE - NOTIFICATION FORM	
Employee's name:	
Employee's job title:	
Employee's department:	
Date:	
Does your grievance relate to your line manager?	
Summary of complaint:	
<p>Please set out the details of your complaint (providing as much detail as possible, particularly dates, times, locations and the identities of those involved). You may attach additional sheets if required.</p>	
Individuals involved in the alleged incident/complaint:	
<p>Please provide the names and contact details of any people involved in your complaint, including witnesses.</p>	

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Outcome requested:

Please set out how you would like to see your complaint dealt with, and why and how you believe that this will resolve the issue.

Declaration:

I confirm that the above statements are true to the best of my knowledge, information and belief. I understand that making any false, malicious or untrue allegations may result in disciplinary action being taken against me by the organisation. (In the most serious cases, making false, malicious or untrue allegations can be treated as gross misconduct.)

Form completed by:	
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Signature:	
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For completion by the organisation:

Date form received by the organisation:	
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Name of recipient and job role:	
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Signature:	
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APPENDIX B - EQUALITY IMPACT ASSESSMENT FORM (EQIA)

Name of service/policy/procedure being reviewed: Grievance Policy			
New or existing service/policy/procedure: Existing Policy			
Date of Assessment: 03.06.2024			
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	A potential lack of cultural awareness and training amongst the workforce	Equal opportunities training	None
Gender	None	N/A	N/A
Age	Ageing workforce and potential for more employees to work longer	Equality and Diversity Training Advice/guidance from EDI Lead	None
Religion / Belief	Lack of understanding, education and information about religious needs	Equality and Diversity Training Advice/guidance from EDI Lead and access to the multi faith centre	None
Disability	Failure to make or implement reasonable adjustments. Lack of awareness and training	Equality and Diversity Training Advice/guidance from EDI Lead. Management of Sickness Absence Policy. Wellbeing Action plan.	None
Sexuality	Less favourable treatment due to lack of awareness or inappropriate comments or behaviour	Equality and Diversity Training Advice/guidance from EDI Lead. CARE Values	None
Pregnancy and Maternity	Managers and Staff have access to relevant information advice and support	Advice and support from People Directorate	None
Gender Reassignment	Lack of awareness and understanding	Equality and Diversity Training Advice/guidance from EDI Lead. CARE Values	None

Marriage and Civil Partnership	Less favourable treatment due to lack of awareness or inappropriate comments and behaviour	Equality and Diversity Training Advice/guidance from EDI Lead. CARE Values	None
Socio-Economic Factors (i.e. living in a poorer neighbourhood / social deprivation)	None	N/A	None
What consultation with protected characteristic groups including patient groups have you carried out?			
<ul style="list-style-type: none"> JSPF 			
What data or information did you use in support of this EQIA?			
<ul style="list-style-type: none"> None 			
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			
<p>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:</p> <p>Low Level of Impact</p> <p>For high or medium levels of impact, please forward a copy of this form to the HR Secretaries for inclusion at the next Diversity and Inclusivity meeting.</p>			
Name of Responsible Person undertaking this assessment: J. Read			
Signature: J Read			
Date: 03.06.24			