

Staff Conduct Policy

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What is in this policy?

The Staff Conduct Policy provides an overview of the expected standards of behaviour and conduct for all employees of UHBW. The purpose of the Policy is to provide a summary for staff with reference to other Trust Policies and Codes of Conduct.

The Trust's Workforce Diversity & Inclusion Strategy sets out the ambition to be 'committed to inclusion in everything we do'. Ensuring dignity and respect for patients and staff is a core principle within this strategy, and promoting equality, diversity and human rights while challenging any form of inequality, discrimination and harassment is central to the Trust's Values.

UHBW will not tolerate discrimination, harassment or bullying under any circumstances and particularly because of a protected characteristic. This is supported by the Trust's commitment to the Equality Act 2010 and its Public Sector Equality Duties as defined by the Act.

Our Human Resources policies are written with this commitment as a guiding principle, to ensure that the policies and their application are inclusive and supportive to all of our staff.

Document (Change Control			
Date of Version	Version Number	Lead for Revisions	Type of Revision	Description of Revision
June 2010	V1	Director of Workforce and Organisational Development	Review	Review
July 2012	V2	Director of Workforce & Organisational Development	Review	Review
July 2014	V3	Director of Workforce & Organisational Development	Review	Review
September 2017	V4	Head of Employee Relations	Review	Review – new formatting and minor amendments
December 2021	V4.1	HR Specialist	review	Minor amendments to include new Trust name, values and ED&I statement

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1. Introduction

This policy provides a summary of the standards of behaviour and conduct, including Trust Values, expected of all UHBW employees, both full and part time hours on permanent and fixed term contracts and Temporary Staffing Bureau (Bank) staff, Doctors on Locum Bank Contracts, those on Honorary Contracts, volunteers, temporary staff and trainees.

This policy is not intended to provide a definitive guide to all policies and procedures relating to conduct or behaviour and staff should ensure that they are familiar with all employment policies which can be found on ______, HR Web or the HR pages of Weston intranet.

Any breaches of the provisions of this policy will be addressed under the relevant Trust policies and procedures, including the Resolving Conduct Concerns/Disciplinary Policy, as well as professional codes of conduct.

is a non-exhaustive list of examples of offences which would be deemed as gross misconduct, potentially leading to summary dismissal without notice or payment in lieu of notice.

Employees must abide by the terms and conditions in their contract of employment, which include the requirement to disclose any additional work they undertake or are planning to undertake for another employer. UHBW will permit staff to undertake this additional work providing UHBW is satisfied that this does not conflict with the interests of the organisation, performance of their normal duties or with the requirements of the Working Time Regulations.

2. Trust Values

UHBW is committed to provide patient care, education and research of the highest quality. In delivering this ambition, we will be guided by the following values:

We are Supportive - We're always there for each other. We try and do the right thing for patients and colleagues everyday

We are Respectful - We always look for the best in people. We are inclusive, welcoming and treat everybody fairly

We are Innovative - We're full of bright ideas. We're open to using research, learning and finding new ways of working

We are Collaborative - We do things together. We share our experience and expertise for the benefit of the Trust and our communities

UHBW expects all staff to work in ways which reflect these values at all times. See further details.

3. Conduct and Personal Presentation

All UHBW staff must remember that they are ambassadors for the Trust at all times and must conduct themselves in an appropriate manner and not bring UHBW into disrepute.

Staff must present a professional and efficient image by maintaining high standards of dress, tidiness, personal hygiene and be mindful of the prevention and management of infection control and demonstrate very high standards of customer care at all times.

Staff are expected to deal politely, professionally, humanely, courteously and respectfully with patients, carers, members of the public and other staff at all times, respecting everyone, and their human rights.

They should demonstrate sincere interest, care and concern when dealing with enquiries, whether over the telephone or in person and take personal responsibility for dealing with any issues which may arise and should not blame other individuals or departments.

Verbal aggression, abuse or threatening language or behaviours towards anyone are not acceptable.

Staff should be mindful of all of the above, especially when identifiable as a UHBW member of staff, both on or off Trust premises and when on social media sites.

4. Duties, Roles and Responsibilities

4.1 **Managers**

Code of Conduct for NHS Managers

All managers, with responsibility for people management at any level, must comply fully with the NHS Code of Conduct for Managers, both in its spirit and its principles of good employment practice.

The NHS Code of Conduct for Managers implements the Nolan Principles on Conduct in Public Life, the Corporate Governance Codes of Conduct and Accountability, the Standards of Business Conduct and the Duty of Candour legislation.

It is also a manager's responsibility to ensure all staff comply with all legal (statutory) requirements, and with mandatory requirements which UHBW may set locally.

All managers must be aware of UHBW's Standing Financial Instructions. These can be found on the FinWeb section of Connect.

4.2 *All staff*

All staff are expected to conduct themselves in line with their responsibilities to the public, their patients and colleagues as detailed in the NHS Constitution (

Identity badges must be worn and be clearly visible at all times whilst on duty by all staff, including students who are issued badges by their education organisation.

All staff must comply with health and safety legislation, and have a personal responsibility to ensure they complete and maintain all statutory and mandatory training relevant to their role.

5. Policy Statement and Provisions

5.1 Treatment of other Staff - We are Respectful

UHBW is committed to creating a culture where all individuals are treated with dignity and respect. Any actions which prevent this or are against UHBW's values are unacceptable and can be challenged.

UHBW does not tolerate any acts of discrimination, bullying or harassment and any such acts are treated very seriously and may lead to dismissal.

5.2 **Performance of Duties**

Staff are expected to comply with all procedures and reasonable instructions relating to the performance of their duties.

All Staff who are required to be professionally registered to undertake their roles have a personal responsibility to ensure that registration is maintained and up to date at all times and that they adhere to their Professional Codes of Practice. Staff must also advise their managers of any additional employment they are undertaking.

Staff must always ensure that they are fit to attend work and should not present themselves for duty in an unfit state (e.g. through alcohol or drugs) and should remain in a fit state whilst on duty. If staff have concerns about another employee's fitness to work, they must report this concern, in confidence, to their immediate manager or to HR Services, extension

There should be no absences from work other than for legitimate or acceptable reasons. All staff are expected to attend for work on time and to work their required hours.

All staff must comply with hygiene and hand washing requirements across all areas of UHBW.

Smoking is not permitted on Trust premises, including hospital grounds, inside and outside of Trust buildings, vehicles, car parks, doorways and entrances where boundaries are clearly marked by white boundary lines and signage.

Under the Health and Safety at Work Act 1974 all staff have a responsibility to take care for the health, safety and welfare of themselves and others who may come into contact with them, or be affected by them or their work. They must not intentionally or recklessly interfere with anything provided including personal protective equipment for Health and Safety or welfare at work and must follow health and safety procedures relevant to their work.

5.3 Confidentiality of Information

Patients and employees have rights to protection in relation to confidential information and its disclosure. All information concerning patients and employees must be treated as strictly confidential. This includes information in all formats i.e. paper or electronic including email, photographs/videos, audio etc.

All person identifiable information is confidential, and should only be accessed for reasons that are directly related to the management of the person concerned. Audit trails of access are kept in some systems and staff may be asked to justify their reasons for accessing a record.

All employees must know and understand the requirements of the Data Protection Act 1998, the Freedom of Information Act 2000, the Caldicott Principles and the NHS Code of Practice specifically relating to confidentiality, as they relate to their roles, and the very limited circumstances under which confidential information can be accessed and disclosed. Staff hospital records should only be accessed for the direct care of the staff member. Staff should not access their own hospital records via IT systems or where paper-based.

All staff must ensure that they are only accessing information in the execution of their duties (e.g. it is not acceptable to use Trust systems to look up staff or patients' birthdays or addresses for curiosity). Staff must understand their responsibility to protect any confidential information that they use in their role by ensuring they know and understand UHBW's Confidentiality Protocol and their legal duty.

5.4 *Honesty*

Staff must be honest and truthful in their dealings with the Trust and with patients, carers and members of the public with whom they come into contact during the course of their work. Dishonesty (for example, providing false details on an application for a post or submitting false claims for payment) is treated as a very serious offence and may be considered as fraud and treated accordingly.

Staff must advise UHBW of any offences and/or investigations which may affect their continued suitability for employment, including those which occur outside the working environment.

All staff have a responsibility to notify their manager and/or UHBW's Local Security Management Specialist or Security Adviser immediately if they suspect or believe that an incident of fraud, theft or corruption may have occurred.

5.5 Standards of Business Conduct

As well as complying with this policy, staff must comply with NHS Standards of Business Conduct which cover registration of interests, conflicts of interest, attendance at conferences, purchasing and research.

Staff must declare any interests which are personally beneficial to them, either directly or indirectly, which may affect their employment with UHBW.

Staff may not accept gifts which may be, or could be construed to be, rewards or inducements for directing business towards a particular person or organisation. Small gifts of appreciation from patients to employees are not included in this category; however it is good practice to encourage declaration. If in doubt staff should seek advice from their line manager.

All staff must also observe the seven principles for holders of public office set out in the 1995 Nolan Report on Standards for Public Life, as listed in

5.6 Reporting of Complaints and Untoward Incidents

Staff are expected to comply with procedures in UHBW for managing complaints and for reporting any untoward incidents affecting patients, members of the public or employees or their data, using UHBW's Freedom to Speak Up Policy.

5.7 Use and Care of Trust Resources

Staff are required to ensure the safe, secure, efficient and economic use of UHBW's premises, property and equipment. This includes ensuring general cleanliness, tidiness and maintenance of infection control standards, good security, high standards relating to careful and appropriate handling and usage of property, and avoidance of waste (e.g. through over-stocking). No private or personal use of Trust property is allowed unless it is fully sanctioned by the supervising manager.

5.8 Political Campaigning

UHBW must maintain a neutral position and as such staff may not engage in political campaigning or lobbying on UHBW's premises at any time NHS facilities cannot be used to produce or distribute party leaflets, party political slogans cannot be worn or displayed and political meetings cannot be held on Trust premises.

5.9 Communication with the Media

UHBW has a detailed communications strategy and a proactive approach to the media. All communication with the media involving UHBW should be channelled through the press office, part of UHBW's Communications team. Staff who have ideas for positive news stories that highlight clinical work, research, teaching, or achievements of staff, and can assist in UHBW's desire to recognise success and value everyone, should contact UHBW Communications Team to discuss the best approach.

5.10 Social Networking Sites

Staff must be aware that should they choose to make use of social media in their social lives and in their professional lives, whilst they may not be acting on behalf of UHBW, they can damage the image of the Trust if they are recognised as being a member of staff and could bring UHBW into disrepute. Please refer to the Social Media Policy for more information.

5.11 Right to work

All employees and workers must have the right to work legally in the UK. Individuals with limited leave to remain in the UK will be subject to regular checks by HR Services. Please refer to the Right to Work Policy and Procedure for more information.

6. Standards and Key Performance Indicators

6.1 Measurement and Key Performance Indicators

Statutory and Mandatory (Essential) Training compliance is monitored by the Education Department and reported to the People and Education Group.

The maintaining of Professional Clinical Registration is monitored by the HRIS Team and HR Services and reported to UHBW's Workforce Management Group.

Formal grievance and conduct resolution matters are monitored by HR Services and will be reported in a quarterly report to the Staff Partnership Forum.

7. References

NHS Constitution

Nolan Principles on Conduct in Public Life

Duty of candour

Professional standards of practice and behaviour for nurses, midwives and nursing associates

General Dental Council: Standards and guidance

Health Professions Council: Standards of conduct, performance and ethics

General Medical Council: Ethical Guidance

General Pharmaceutical Council: Standards

8. Associated Internal Documentation

Resolving Conduct Concerns Policy / Disciplinary Policy and Procedure

Freedom to Speak Up Policy

Social Media Policy

Right to Work Policy and Procedure

9. Appendix A - Behaviours to support UHBW Values

We are supportive respectful innovative collaborative.
We are UHBW.

Expected Behaviours

Communicates openly, honestly and listens to others

Keep work area clean and pick up litter when you see it

Treat everyone in a friendly, courteous manner, smile and make eye contact

Ensure patient confidentiality at all times by keeping information safe and secure

Learn from mistakes and ask for support where necessary

Provide consistently high standards of care and service at all times

Ensure appearance is professional and ID badge is visible

Actively seek better ways of working to achieve improvements

Respect patients and visitors time, apologise and explain if we are keeping them waiting

Uphold UHBWs values and be proud to work here

Respond promptly to telephones, call bells and other requests for help

Follow the Trust procedures for Hand Hygiene

Has pride and strives to do their best

Take responsibility and assist anyone who appears lost

Seeks out ways to learn and develop

Respects the wishes and preferences of patients

Positive and enthusiastic

Adopts a flexible and willing approach

Behaviours we do not expect to see

Does not know or care about how they come across to others

Criticising colleagues/disagreeing with them in front of patients, visitors and other staff

Any act of discrimination

Sharing personal beliefs and opinions with patients

Continually moans to others without making any attempt to change things

Appears unapproachable, moody or bad tempered

Appears unapproachable, moody or bad tempered

Blames others and makes excuses

Being unsupportive of change/or new ideas for improvement

Wearing inappropriate dress/or having an unprofessional appearance

Rude or insensitive behaviour

Ill treatment or bullying of patients or colleagues

Dishonesty

10. Appendix B - Examples of Gross Misconduct

The following acts and offences of a like nature or a similar gravity are regarded as gross misconduct and may lead to summary dismissal (i.e. without notice or previous warning) although mitigating circumstances will be taken into account. The list is not exclusive or exhaustive:

- Theft. In cases of suspected theft the Security Adviser must be notified.
- Fraud. In cases of suspected fraud, UHBW's local counter fraud specialist and Director of Finance must be notified.
- Deliberate falsification of records.
- Assault, actual or threatened; serious fighting.
- Ill treatment of patients, staff or visitors, either verbally or physically.
- Negligence which causes or threatens unacceptable loss, damage or injury.
- Deliberate damage to UHBW's property or that of colleagues, patients or contractors or users of UHBW whilst on site.
- Being unfit for duty, other than for medical reasons, due to drugs or alcohol, which may include sleeping on duty.
- Unauthorised disclosure of confidential information.
- Mention of UHBW, its component hospitals or reference to working for the NHS in Bristol on social networking sites which may bring UHBW into disrepute.
- Sexual offences or sexual misconduct at work. This includes sexual or inappropriate relationships with patients in care or receiving treatment.
- Staff must not use their position to influence patients or relatives.
- Staff must not use their position to influence patients or relatives about the choice of private care as either an alternative to, or follow up to, care received from UHBW.
- Professional misconduct contravention of professional codes of conduct.
- Criminal offences and any other conduct outside employment (whether on or off duty)
 which affects the employee's suitability to perform his or her work, makes him or her
 unacceptable to other employees, or damages UHBW to the extent that the employee's
 presence at work cannot be permitted.
- Corruption receipt of money, goods, favours, excessive hospitality, inappropriate involvement in the award of contracts of services etc.
- Computers failing to comply with regulations relating to software and hardware.

- Omission or conduct liable to lead to serious loss of confidence from UHBW.
- Malicious intent to harass, bully or discriminate, including on the basis of a protected characteristic.
- Inappropriate use of the internet or e-mail, e.g. accessing internet sites containing obscene, pornographic or offensive material.
- Employment elsewhere during the hours of work staff are contracted with UHBW (other than with explicit permission from the appropriate manager).
- Employment elsewhere whilst absent due to ill health from their employment with UHBW (other than with explicit permission from the appropriate manager).

11. Appendix C - NHS Constitution – Your responsibilities

All staff have responsibilities to the public, their patients and colleagues:

- You have a duty to accept professional accountability and maintain the standards of professional practice as set by the appropriate regulatory body applicable to your profession or role.
- You have a duty to take reasonable care of health and safety at work for you, your team and others, and to co-operate with employers to ensure compliance with health and safety requirements.
- You have a duty to act in accordance with the express and implied terms of your contract of employment.
- You have a duty not to discriminate against patients or staff and to adhere to equal opportunities and equality and human rights legislation.
- You have a duty to protect the confidentiality of personal information that you hold.
- You have a duty to be honest and truthful in applying for a job and in carrying out that job.
- The Constitution also includes expectations that reflect how staff should play their part in ensuring the success of the NHS and delivering high-quality care.

You should aim:

- To maintain the highest standards of care and service, treating every individual with compassion, dignity and respect, taking responsibility not only for the care you personally provide, but also for your wider contribution to the aims of your team and the NHS as a whole;
- To take up training and development opportunities provided over and above those legally required of your post;

- To play your part in sustainably improving services by working in partnership with patients, the public and communities;
- To raise any genuine concern you may have about a risk, malpractice or wrongdoing at work (such as a risk to patient safety, fraud or breaches of patient confidentiality), which may affect patients, the public, other staff or the organisation itself, at the earliest reasonable opportunity;
- To involve patients, their families, carers or representatives fully in decisions about prevention, diagnosis, and their individual care and treatment;
- To be open with patients, their families, carers or representatives, including if anything goes wrong; welcoming and listening to feedback and addressing concerns promptly and in a spirit of co-operation.
- To contribute to a climate where the truth can be heard, the reporting of, and learning from, errors is encouraged and colleagues are supported where errors are made;
- To view the services you prove from the standpoint of a patient, and involve patients, their families and carers in the services you provide, working with them, their communities and other organisations, and making it clear who is responsible for their care.
- To take every appropriate opportunity to encourage and support patients and colleagues to improve their health and wellbeing;
- To contribute towards providing fair and equitable services for all and play your part, wherever possible, in helping to reduce inequalities in experience, access or outcomes between differing groups or sections of society requiring health care;
- To inform patients about the use of their confidential information and to record their objections, consent or dissent;
- To provide access to a patient's information to other relevant professionals, always doing so securely, and only where there is a legal and appropriate basis to do so.

12. Appendix D - Nolan Report on Standards for Public Life (1995)

All staff must also observe the seven principles for holders of public office set out in the 1995 Nolan Report on Standards for Public Life:

Selflessness: Take decisions solely in the public interest and do not to gain material benefits for one's self, family or friends.

Integrity: Do not place one's self under financial obligation to others which might influence the performance of one's duties.

Objectivity: Make choices solely on merit when awarding contracts, making appointments or recommending individuals for rewards.

Accountability: Be responsible for all one's decisions and actions and submit one's self to whatever scrutiny is appropriate to your role.

Openness: All decisions and actions should be as open as possible and reasons for them should normally be given.

Honesty: Declare all private interests which relate to one's public duties and resolve any conflicts in ways which protect the public interest.

Leadership: Promote and support these principles by leadership.

13. Appendix E – Monitoring Table for this Policy

The following table sets out the monitoring provisions associated with this policy. Please ensure any possible means of monitoring this policy to ensure all parts are fulfilled are included in this table. The first line is an example for you and should be removed prior to submission.

Objective	Evidence	Method	Frequency	Responsible	Committee
To ensure that policy remains fit for purpose	Monitoring by HR Services on Policy compliance	Formal Grievance and Disciplinary matters are monitored by Employee Services and will be reported in a quarterly report to UHBW's Partnership Forum.	36 months Quarterly	HR Services	Policy Group Staff Partnership Forum

14. Appendix F - Dissemination, Implementation and Training Plan

The following table sets out the dissemination, implementation and training provisions associated with this Policy.

Plan Elements	Plan Details
The Dissemination Lead is:	Head of HR Services
Is this document: A – replacing the same titled, expired policy, B – replacing an alternative policy, C – a new policy:	A

Status: Approved

Plan Elements	Plan Details
If answer above is B: Alternative documentation this policy will replace (if applicable):	[DITP - Existing documents to be replaced by]
This document is to be disseminated to:	All staff
Method of dissemination:	Newsbeat, HRWeb
Is Training required:	Not Applicable
The Training Lead is:	[DITP - Training Lead Job Title]

Additional Comments	
OITP - Additional Comments]	

15. Appendix G - Equality Impact Assessment (EIA) Screening Tool

Further information and guidance about Equality Impact Assessments is available here:

Query	Response			
What is the main purpose of the document?	To provide a summary of the standards of behaviour and conduct expected of all Trust employees.			
	To ensure that all employees are aware of and understand UHBW's requirements and expectations of them in respect of their behaviour and conduct.			
Who is the target audience of the document?	Add ☑ or 区			
Who is it likely to impact on? (Please tick all that apply.)	Staff Patients Visitors Carers Others			

Could the document have a significant negative impact on equality in relation to each of these characteristics?	YES	NO	Please explain why, and what evidence supports this assessment in relation to your response.
Age (including younger and older people)		Х	
Disability (including physical and sensory impairments, learning disabilities, mental health)		Х	
Gender reassignment		Х	
Pregnancy and maternity		Х	

Status: Approved

Race (includes ethnicity as well as gypsy travelers)	X	
Religion and belief (includes non-belief)	Χ	
Sex (male and female)	Χ	
Sexual Orientation (lesbian, gay, bisexual, other)	X	
Groups at risk of stigma or social exclusion (e.g. offenders, homeless people)	Х	
Human Rights (particularly rights to privacy, dignity, liberty and non-degrading treatment)	х	

Could the document have a significant positive impact on inclusion by reducing inequalities?	YES	NO	If yes, please explain why, and what evidence supports this assessment.
Will it promote equal opportunities for people from all groups?		X	
Will it help to get rid of discrimination?	X		The policy promotes Trust values and respect for all
Will it help to get rid of harassment?	х		The policy promotes Trust values and respect for all
Will it promote good relations between people from all groups?	х		The policy promotes Trust values and respect for all
Will it promote and protect human rights?		х	

On the basis of the information/evidence so far, do you believe that the document will have a positive or negative impact on equality? (Please rate by circling the level of impact, below.)

Positive impact	Negative Impact				
Significant Some	Very Little	NONE	Very Little	Some	Significant

Will the document create any problems or barriers to any community or group?

YES / NO

Will any group be excluded because of this document?

YES / NO

Will the document result in discrimination against any group?

YES / NO

If the answer to any of these questions is YES, you must complete a full Equality Impact Assessment.

Is a full equality impact assessment required? YES / NO

Date assessment completed: 01/12/2021

Person completing the assessment:

