

Disciplinary Policy and Procedure

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What is in this policy?	<p>This policy contains guidance for managers on dealing with conduct and disciplinary issues through both formal and informal means.</p> <p>It aims to ensure that all disciplinary matters are dealt with fairly and consistently, by setting a clear process for resolving disciplinary issues appropriately at all levels of seriousness.</p>
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Jan 2020	4.1	HR Manager	Minor	Amendment to the address for appeals (section 10.8)

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Do I need to read this Policy?

All Staff

Must read the whole policy

1. Introduction & Purpose

University Hospitals Bristol NHS Foundation Trust's (The Trust) Disciplinary Policy aims to ensure that all disciplinary matters are dealt with fairly and consistently. Minor lapses in conduct will generally be dealt with as part of day to day management by verbal advice or counselling, but where lapses are more serious or persistent the disciplinary procedure can be invoked.

This policy and procedure is designed to assist and encourage all employees to maintain acceptable standards of conduct, performance and attendance, whilst safeguarding the interests of the Trust, its patients, clients, staff and visitors.

The policy is compliant with legislation contained within the Employment Rights Act 1996 and the Employment Act 2008 and has taken due account of the ACAS Code of Practice on Disciplinary and Grievance Procedures.

Every effort will be made to avoid the use of disciplinary action where alternatives are appropriate.

No disciplinary action will be taken without the employee being informed of the nature of the allegations against them and being given the opportunity to respond to such allegations.

2. Scope

The policy and procedure applies to all employees within the Trust including all Temporary Staffing Bureau Staff and Medical and Dental Staff, and should be read in conjunction with the Trust's Medical and Dental Policy for Managing Capability Concerns, appropriate codes of conduct and rules for professional bodies.

Guidance on hearings and disciplinary procedures regarding medical and dental staff is published in "Maintaining High Professional Standards in the Modern NHS", which states that misconduct matters for doctors and dentists are matters for local employers and must be resolved locally (adhering to Maintaining High Professional Standards exclusion requirements, where appropriate). Appendix G of this policy must also be referenced for such cases.

Separate procedures exist for dealing with poor performance and incapability due to ill health. For these issues managers should refer to:

- Supporting Performance Policy
- Supporting Attendance Policy

3. Definitions

3.1 Informal action

This is any action taken by a manager that doesn't include a formal investigation, and will not result in formal warnings or dismissal. It may include initial fact-finding, file notes etc. See section 6 for more detail.

3.2 Formal action

This is any action taken including and leading from a formal investigation commissioned by a senior manager, and can result in formal warnings or dismissal if allegations are proven. See section 8 for full details.

3.3 Suspension

This is when an employee is removed from their place of work on full pay, pending an investigation of an incident or their conduct. See section 7 for full details.

3.4 Disciplinary Hearing

This is a formal hearing held as a result of a formal investigation finding that there is a case for the member of staff to answer. See section 9 for full details.

3.5 Disciplinary Sanction

This is a possible outcome of a formal disciplinary hearing where a case against the employee has been proven, and includes formal warnings, downgrading, and dismissal. See section 10 for full details.

3.6 Commissioning Manager

This is the senior manager who formally decides whether an investigation should be undertaken, and by whom it should be investigated. They will set the terms of reference for the investigation, determine if suspension is appropriate, in most cases will receive the investigation report and determine if a formal hearing is required, and in most cases will chair the disciplinary hearing themselves. The commissioning manager should generally be determined with reference to the required levels of authority (Appendix F).

3.7 Investigating Officer

This is the manager that has been appointed by the commissioning manager to formally investigate an allegation. In many cases this will be the employee's line manager, but in situations where the line manager is already involved, the commissioning manager will nominate another manager to fulfil this role. The investigating officer will be more senior than the member of staff under investigation.

4. Duties, Roles and Responsibilities

4.1 Line managers

- (a) To make every effort to handle conduct issues in an informal way where this is appropriate and reasonable, and to only request a formal investigation where the alternatives are not appropriate.

- (b) To handle conduct issues professionally, sensitively and confidentially, and to remain a source of support and guidance to their member of staff regardless of the seriousness of action being taken.
- (c) In the case of formal action being taken, to meet with the employee to discuss the incident and request that they produce a written statement to take along to the investigation meeting. Failing this their statement will be taken verbally at the investigation meeting by the investigating officer.
- (d) To ensure that the employee is aware of the details of the complaint against them at the earliest appropriate stage, that they know that an investigation will be taking place, the name of the investigating officer, and that they will be able to state their case.
- (e) To ensure that the employee is aware of their right to be accompanied by a union representative at any formal meeting held under this policy, or may be accompanied by a friend, family member or colleague (see section 5.4)

4.2 *Investigating officers*

- (a) To ensure that complaints against an employee's conduct are investigated as fully as is reasonable and appropriate to the circumstances of the case, prior to any decision being made as to whether to proceed to a formal hearing.
- (b) To comply as far as is practicable with the terms of reference of investigations as provided by the commissioning manager, and conduct the investigation in accordance with section 8 of this policy.
- (c) To be responsible for, as far as is practicable, concluding investigations within four weeks (or other timescale as specified in the terms of reference).

4.3 *Commissioning managers*

- (a) To consider whether suspension is necessary, and to be responsible for the suspension meeting (though this can be delegated to the line manager if appropriate, see section 7 and Appendix D).
- (b) To write to the employee if the suspension has exceeded 28 calendar days, to advise on the period of extension and the reasons for the delay in concluding the investigation.
- (c) To identify and secure an investigating officer, providing them with comprehensive terms of reference for the investigation.
- (d) To actively seek assurance that the investigating officer is progressing the investigation in a timely fashion and in accordance with the terms of reference.
- (e) To follow the process for handling investigation reports and disciplinary hearings in accordance with section 8 of this policy.

4.4 Chair of a disciplinary hearing

- (a) To conduct the disciplinary hearing in accordance with section 9 of this policy.
- (b) To report cases requiring external referral to the Head of Employee Relations or Head of Profession as appropriate (see sections 5.2, 5.3 and 10.9).

4.5 Employee Services

- (a) To support and advise the line manager throughout the investigation process, attending meetings and hearings as necessary.
- (b) To ensure that the investigation is being undertaken in accordance with this policy and the terms of reference as provided by the commissioning manager.
- (c) To encourage and support the investigating officer to conclude the investigation within the specified timescale.
- (d) To support with the review of suspensions on a regular basis and within the 28 day review timeframe.

4.6 Employees involved in an investigation

- (a) To maintain confidentiality at all times during and after their involvement in a disciplinary process.
- (b) Comply with the policy and attend any informal or formal meetings as required.
- (c) Produce a statement as part of the investigation when requested.
- (d) Let the organiser know as soon as reasonably practicable if they cannot attend informal or formal meetings.
- (e) If a member of a trade union, to make it clear whether or not they wish a specified union representative to be copied into correspondence about the process and to seek support from their union at the earliest opportunity.

5. Policy Statement and Provisions

5.1 Key Provisions

The Trust's disciplinary procedure is based on the following principles:

- The protection and safety of staff, patients and the public is the Trust's overriding priority.
- Employees may be accompanied by a Trade Union representative or colleague at formal meetings (see section 5.4).
- No formal disciplinary sanction will be taken against an employee unless the case has been fully investigated by the appointed investigating officer.

- The employee will be advised of the complaint against them and will be given the opportunity to state their case before any decision is made.
- No employee will normally be dismissed for a first breach of discipline except in the case of gross misconduct, when the disciplinary sanction will be dismissal without notice or any post-employment notice pay (see Appendix E).
- The procedure may be initiated at the informal or formal stage dependent on the seriousness and nature of the alleged misconduct. Every effort will be made to avoid the use of disciplinary action where alternatives are appropriate.
- Disciplinary hearings and investigations are confidential to the individuals concerned and a breach of confidentiality will be regarded as a disciplinary matter in itself.
- Impartiality will be maintained by all those involved in the disciplinary investigation and hearings. A disciplinary hearing will not be conducted by anyone who has been actively involved in the disciplinary investigation.
- Investigations may include precautionary suspension on full pay (see section 7).
- In line with the Trust's Linking Pay Progression with Performance Management Policy, incremental pay will be deferred for twelve months where formal disciplinary sanctions have been applied (see section 10.3).

5.2 Safeguarding

Safeguarding procedures are not limited to allegations involving significant harm or the risk of significant harm to a child or vulnerable adult. The Safeguarding leads for Adults and Children need to be notified at the outset in respect of any allegation that an employee has:

- Behaved in a way that has harmed a patient, or may have harmed a child or vulnerable adult, whether or not this person is a patient;
- Possibly committed a criminal offence against or related to a child or vulnerable adult, whether or not this person is a patient;
- Behaved towards a child or vulnerable adult in a way that indicates s/he is unsuitable to work with children or vulnerable adults.

The Trust has a legal duty to refer to the Disclosure and Barring Service relevant information where there is a concern relating to harm or the risk of harm to children or vulnerable adults (see section 10.9). Further information on safeguarding can be found in the Safeguarding Adults Policy and the Safeguarding Children, Young People and Unborn Babies from Abuse Policy.

5.3 Professional Bodies

The Trust requires employees in registered professions to adhere to their standards of professional practice, and their relevant codes of professional conduct will be referenced in line with this policy.

The relevant external body for professional staff will be notified of professional misconduct cases if a formal sanction results from a disciplinary process. The professional body may take action in addition to action taken by the Trust. The Trust has a duty to report instances of professional

misconduct to certain statutory bodies e.g. Nursing and Midwifery Council. Reporting is done with the relevant Head of Profession's approval within the division.

The professional body should be informed either after an appeal has been heard where the final outcome has been given or at the end of the appeal deadline. In some cases the Trust may inform the relevant professional body at the beginning of an investigation if appropriate, after discussion with the relevant professional lead (see Appendix F).

If the nurse or midwife is subject to an internal disciplinary procedure, they will be able to apply to renew their registration as long as they fulfil all the revalidation requirements. However, if this internal disciplinary procedure includes concerns about the nurse or midwife's fitness to practise, these should be raised in the appropriate way at that time. This would fall outside of the revalidation process.

5.4 Formal Representation

The Trust will allow for an employee to be accompanied at investigation meetings by a Trade union representative or a colleague from the workplace. It is at the investigating manager's discretion whether to allow the employee to instead bring someone from outside these categories such as a personal friend or family member as moral support, but should usually be accommodated. Only union representatives can formally represent the employee or answer questions on their behalf.

At a disciplinary hearing the employee will have the right to be accompanied by an accredited Trade Union representative from one of the Unions recognised by the Trust, friend or colleague not acting in a legal capacity. If the employee has been represented throughout the formal process, it is important to include the union representative when organising the disciplinary hearing.

Investigation meetings and disciplinary hearings may be rearranged if a Trade Union or employee representative is not available on the first date offered, however this must not be unduly delayed and a second meeting should be proposed to be held as soon as possible.

Where disciplinary action is being considered against an employee who is a Trade Union representative, the normal disciplinary procedure must be followed. Depending on the circumstances, however, it is advisable to discuss the matter at an early stage with an official employed by the union, after obtaining the employee's agreement.

5.5 Behaviour outside the working environment

Behaviour outside the working environment may be dealt with under the disciplinary procedure if it affects an individual's continued suitability for employment, or is connected with their employment in a context that could bring the Trust into disrepute. In certain cases, suspension from duty may be considered appropriate.

Inappropriate use of social networking sites can be classed as unsuitable behaviour outside the working environment and could potentially result in disciplinary action (refer to the Social Media for Personal Use Policy).

Some situations, for example Christmas work parties or drinks with colleagues after work, can by law be considered extensions of the workplace, and inappropriate behaviour in these situations may lead to action under this policy.

An employee who is arrested and charged, or served with a summons on a criminal charge is required to inform their line manager of the situation as soon as possible. A conviction for a criminal offence which is not directly related to an individual's employment may still be regarded as gross misconduct resulting in summary dismissal. However, the fact that an employee has been charged, remanded in custody, or convicted of a criminal offence not related to their employment, will not be regarded as an automatic reason for dismissal or other disciplinary action.

Where events giving rise to disciplinary action are the subject of legal proceedings or legal processes, the Trust may take disciplinary action before such legal proceedings/processes are concluded. This will depend on advice from the police or other prosecuting bodies, including the Local Counter Fraud Specialist, on whether it is appropriate to continue with the Trust's disciplinary process.

6. Informal Action

See Appendix A for flow chart.

On most occasions, minor breaches of discipline can be dealt with informally, and it will not usually be appropriate for managers to use the formal disciplinary procedure on the first occasion of misconduct by an employee. Employees should be warned that any repeat of the misconduct may lead to formal disciplinary action.

The manager should meet informally with the employee to highlight the matter to the employee, providing support and encouragement to improve their behaviour. The aim of the meeting should be to agree joint standards and plan improvement over an agreed timescale, where appropriate. The manager must write to the employee to confirm the discussion.

This letter, record of discussion or piece of professional advice will be live on the employee's personal file for six months, except where there is an emerging pattern of behaviour (indicated by a second similar incident within the six month period). Any subsequent letters or records of discussion will expire following a six month period in which there have been no further incidents of similar behaviour.

Informal meetings to discuss issues are not part of the disciplinary process. However, the manager may feel during an informal meeting that an investigation is required and hence may end the meeting at any time and undertake a formal investigation (see section 8). The formal procedure should also be followed where the informal approach has failed to achieve the required improvements in behaviour, or where an informal approach is inappropriate.

Employees do not have the right to be accompanied at informal meetings, but requests to do so will be considered.

7. Suspension

See Appendix D for the suspension meeting checklist.

See Appendix G if the case relates to a Medical and Dental member of staff.

7.1 Procedure

In some cases it may be necessary to remove an employee from the work place whilst an investigation is carried out.

Examples of this include when:

- It is necessary for the protection of an employee, a patient or the public;
- The allegation is of such a serious nature that it is not acceptable for the employee concerned to remain on duty (e.g. assault/under the influence of alcohol);
- It may be appropriate to remove an employee from the workplace for a period of "cooling off".

This can be done by:

- Restricting the employee's access to systems, areas of work or the type of work undertaken;
- Moving the employee to a different work area;
- Changing the employee's work pattern;
- Suspension.

If it is necessary to remove an employee from the workplace for the protection of an employee, a patient or the public, or the allegation is of such a serious nature that it is not acceptable for the employee to remain on duty; the employee may be sent home immediately. This must be followed as soon as possible by formal suspension. In other circumstances, suspension from duty should only be implemented after the alternatives have been considered.

Suspension is normally carried out by either the line manager or the commissioning manager, with advice from a senior HR practitioner or the relevant HR Business Partner.

It is the responsibility of the line manager / Employee Services to either email the Joint Union office on Unions@UHBristol.nhs.uk or phone on ext. 20826 or 20824 to inform them that an employee is to be suspended. This notification must take place, but must not delay the process. Unless the employee's consent has been gained, and they are a member of a recognised Trade Union, the employee's name must not be given, but the Unions should be informed of the date, time and staff group of the employee being suspended. An employee can refuse to have a union representative present at the suspension meeting.

When suspending an employee, the suspending manager should, if practicable, meet with the employee in person to inform them of their suspension immediately, or at the beginning of the employee's next working shift. In exceptional circumstances, and after discussion with Employee Services, the suspending manager may undertake the suspension by a phone conversation with

the employee. In either circumstance, the manager must use the Suspension Meeting Checklist (Appendix D) as a guide.

If meeting in person, ideally a member of Employee Services should attend the suspension meeting, and union representation should be offered to the employee if they are a member of a recognised Trade Union. If this is not possible, suspension will not be unduly delayed, but all parties should be informed of the action that has been taken.

The manager must also consider whether to make a referral to safeguarding (see section 5.2).

The conditions of the suspension should then be confirmed in writing, expressing the following key points:

- The reason for suspension;
- That it is not disciplinary action and is a precautionary measure;
- The anticipated duration of the suspension and how the matter will proceed including, if possible, a date and time of an investigation meeting;
- That the suspension is on full contractual pay. If there is an unreasonable delay in the investigation caused by the member of staff, this may be subject to review. However, being declared unfit to participate in the process by Occupational Health would not be an unreasonable delay;
- The terms of the suspension, including that if contact is needed to colleagues or anyone who might be a witness, permission should be requested from the Investigating Officer, and that they should not enter the regular workplace except as a patient/visitor or to meet their union representative.
- That the employee must not work for the Trust or undertake any bank or agency work with other NHS Trusts in their normal work hours whilst on suspension. The Trust may inform any other NHS employers the employee has if there are safeguarding concerns.
- That the suspension period will be kept to a minimum and that any reasons for delay will be communicated to the employee by the suspending manager.
- That support is available from Occupational Health, Employee Services or their nominated contact.
- Who to contact if there are any queries.

7.2 Employee Support

An employee that is suspended should be supported throughout the process. They should be nominated a senior member of staff and a member of the Employee Services team to remain in contact with. They should be informed of the process that will be taking place and informed regularly of progress the investigating officer is making.

If it becomes apparent that the suspension is going to remain in place for longer than 28 calendar days, the commissioning manager should write to the employee to advise on the period of extension and the reasons for the delay in concluding the investigation.

7.3 *Ending a Suspension Early*

The commissioning manager should regularly review whether it is appropriate for a suspension to continue, taking cues from the investigating officer if further information comes to light that is material to the decision to suspend.

The commissioning manager retains the right to end a suspension prior to the conclusion of an investigation, but this should only be done after discussion with the divisional HR Business Partner or Head of Employee Relations. Any decision to do so is taken without prejudicing a subsequent disciplinary hearing. In such a situation, the investigating officer must write to the employee notifying them of the end of their suspension, as soon as the decision to lift the suspension is made.

7.4 *Bank and other work during Suspension*

The line manager must ensure that the Temporary Staffing Bureau is advised if a member of staff is on suspension. The employee who has been suspended must not undertake work for the Trust or other NHS employers during their normal work hours with the Trust, including bank, agency and locum work. If an agency worker is suspended, the Temporary Staffing Bureau must inform the agency who supplied the worker.

7.5 *Annual Leave during Suspension*

The suspending manager should ask the employee during the suspension meeting whether they have any annual leave booked that might fall within the suspension period. This information should be passed on to the investigating officer, and investigation meetings should not be arranged to take place on dates of the employee's annual leave.

If annual leave has already been booked by the employee this won't be cancelled while they are on suspension. However if the employee would like to cancel their leave, they can make this request to the investigating officer. If the employee explicitly offers to make themselves available for meetings during their annual leave, then if a meeting is booked on one of these days, the employee will be credited that day of annual leave.

If an employee is on suspension and wishes to book new annual leave, they may request it via their line manager and it will be dealt with in accordance with the Trust's Annual Leave policy. However, it would not normally be granted if it would impede the investigation process.

7.6 *Sickness during Suspension*

If an employee is unwell during the period of suspension and has a GP fit note to verify this, then the absence will be recorded and paid as sickness absence as opposed to suspension, and managed in accordance with the Trust's Supporting Attendance Policy.

8. *Investigation*

See Appendix G if the case relates to a member of medical and dental staff.

See section 4 for individual duties and responsibilities.

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The investigating officer will normally be the line manager of the individual about whom the allegations have been made. However if the line manager has been involved in the incident then an investigating officer will be appointed by the senior manager commissioning the investigation, in discussion with Employee Services or the divisional HR Business Partner. Ideally, this appointed person should be familiar with the type of issues and the area of work.

The investigation should begin as soon as possible, and should be completed without undue delay. The whole process of investigation should take no longer than four weeks. If the investigation is going to take longer than this then the employee should be informed in writing with the reasons for the delay.

8.1 Initial Fact-Finding

When an allegation is made or an incident comes to light, it the line manager (or other appropriate person) should undertake an initial fact-finding before a full investigation is commissioned, in order to determine:

- The basic facts of the situation in order to support the drafting of accurate terms of reference. This may include gathering statements and examining documentary evidence such as Datix reports, patient records etc.)
- Whether a formal investigation is required, or whether some other action is appropriate, such as informal action (see section 6) or performance management. For clinical incidents, managers should refer to the Staff Support and Being Open Policy, which covers the relationship between incident reporting and disciplinary action.
- Whether fraud or corruption is suspected, in which case the Local Counter Fraud Specialist should be contacted, in line with the Countering Fraud and Bribery Policy.
- Whether a safeguarding referral is appropriate (see section 5.2)
- Whether suspension is appropriate or necessary (see section 7).

8.2 Terms of Reference

As soon as the initial fact-finding is completed, the line manager should discuss the allegations with the appropriate senior manager within the division (with reference to Appendix F). If the senior manager commissions an investigation, they must prepare the terms of reference. This will set out clearly the investigating officer's remit and the deadline for the investigation.

The commissioning manager will identify an appropriate investigating officer, with advice from their divisional HR Business Partner or Employee Services, taking into consideration:

- The seriousness and complexity of the allegation;
- Whether the line manager is personally involved in the matter or any other potential investigating officer is too closely associated with the people involved in it;
- Whether there is any conflict of interest.

If new allegations come to light during the investigation, it may be appropriate for the commissioning manager to amend the terms of reference in order to avoid any confusion about

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the scope of the investigation (the investigating officer would need to write to the employee regardless).

8.3 Procedure

See Appendix B for flow chart.

Once they are provided with the terms of reference, the investigating officer will:

- (a) Write to the employee inviting them to an investigation meeting, outlining the allegation and informing them that they can have representation at the meeting. The employee should receive this letter 5 working days before the investigation meeting.
- (b) Arrange a venue for the investigation meeting and also, where possible, provide a note taker. The notes are not a verbatim record of the meeting but should be sent to the employee as soon as possible after the meeting to be reviewed and signed for accuracy. If there is a dispute about the content of the notes it is possible to hold two sets as a disputed record for review. In some circumstances it may be appropriate to for the Trust to use a digital recording device in order to provide a full transcription. This must only be done with the agreement of all parties in advance of the hearing. Any recording will be deleted once transcribed.
- (c) Meet with all witnesses and obtain a verbal account of the incident and request a written statement within 48 hours of the incident happening, and collect relevant documents, equipment or any other material relevant to the case.
- (d) Inform witnesses that their statements will be seen by the individual under investigation, should the case proceed to a formal hearing.
- (e) Having gathered the relevant facts, present their findings in an investigation report outlining the full circumstances of the case to determine if there is a case to answer.
- (f) Should the case go to a formal disciplinary hearing, present a summary of their findings at that meeting.

8.4 Next Steps

Upon receiving the completed investigation report, the commissioning manager will:

- (a) Read the submitted investigation report and determine whether:
 - (i) The case should proceed to a formal hearing;
 - (ii) The employee should undertake extra training or any other informal recommendations or restrictions that may be put in place (see section 10.2)
 - (iii) There is no case to answer and no further action will be taken (see section 10.1).

- (b) If they decide the case should proceed to formal hearing, to determine who should chair the panel in line with the levels of authority necessary depending on the severity of allegation (see section 9). The commissioning manager can chair the hearing themselves.
- (c) To decide whether it is appropriate to end the suspension prior to a hearing (see section 7.3)
- (d) If proceeding to a formal hearing, to share the investigation report with the employee and their chosen Trade Union representative as early as is practicable.
- (e) If the commissioning manager is not able to read the report and make a decision in a timely manner, it should be passed to another appropriate manager so that the process is not delayed. Refer to Appendix F for appropriate authority levels.

9. Disciplinary Hearing

See Appendix G if the case relates to a member of medical and dental staff.

In order for a formal sanction to be considered, a disciplinary hearing is required. The hearing will be organised by the chair of the panel, who will be appropriately authorised or will have delegated responsibility to issue a sanction (See Appendix F). This manager will not have been actively involved in the disciplinary investigation, but may have been the suspending manager, the commissioning manager, or the manager who received the investigation report (if these are not the same person).

A provisional date for a formal hearing may be arranged prior to a decision being made on whether to proceed to a panel, in order to limit undue delays in the process. Any such arrangement is without prejudice, and does not inform or lead the decision of the manager receiving the investigation report.

The chair of the panel will:

- Select who should be on the panel to support them, depending on the severity or complexity of the case or the staff group the employee belongs to;
- Formally invite the employee to a disciplinary hearing, giving at least 10 calendar days' notice, including the following information:
 - The requirement of the employee to attend the hearing;
 - The date, time and place of the hearing;
 - The precise details of the allegations against the employee;
 - The right of the employee to be accompanied by a Trade Union representative, or other person not acting in a legal capacity;
 - The names and job titles of the individuals attending the hearing;
 - A request for details of the employee's representative (if any) at the hearing, witnesses to be called and documents to be produced;
 - Whether the allegation could be considered gross misconduct, and whether dismissal is a possible outcome of the disciplinary hearing.

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- Send out two copies of the investigation report to the employee with the invitation letter. If a member of staff has been represented by a Trade Union Representative, send a copy of the investigation report and letter to the appropriate representative.
- Organise a note taker for the hearing;
- Lead the hearing and follow the process as set out in Appendix C;
- Make a decision in line with section 10 of this policy, after consultation with the other members of the panel;
- Confirm the outcome of the hearing to the individual in writing.

The panel should also include an HR professional to advise the panel on process.

There may be a third panel member present to ensure objectivity or be an expert in the field relating to the employee's place of work or from the profession to which the employee belongs.

A third panel member is required for any hearing where the outcome may be dismissal on the grounds of conduct.

Before the hearing, the employee should:

- Produce evidence or a statement in response to the investigation report for the panel to consider, which should be received by the chair no fewer than two working days prior to the hearing. The employee should submit sufficient copies of written documents for all panel members.
- Let the organiser know as soon as reasonably practicable if they cannot attend;
- Organise Trade Union representation, friend or colleague, if required, and give them a copy of the investigation report.

Where the employee is an accredited Trade Union representative, the Human Resources advisor must contact the Full Time Officer before arranging a disciplinary hearing.

9.1 Conduct of the Hearing

See Appendix C for flow chart.

The hearing will be conducted impartially. The chair of the panel must ensure that the employee is given every opportunity to state their case, and that only facts relevant to the allegation are considered.

The panel should consider the information they have received prior to the hearing. If new or additional evidence is to be presented, this needs to be given to the chair of the panel who will consider whether it is appropriate to accept or to refer back to the investigating team for further investigation.

Witnesses may also be present for the part of the hearing relevant to them. Witnesses called should be informed of the process of the hearing before entering and offered any support they require.

A note taker should also be present and notes will be made available to all parties following the hearing if requested. The notes are not a verbatim record of the hearing. In some circumstances it may be appropriate for the Trust to use a digital recording device in order to provide a full transcription of the hearing. This must only be done with the agreement of all parties in advance of the hearing. Any recording will be deleted once transcribed.

9.2 *Non Attendance at a hearing*

If an employee fails to attend a hearing without notification or without reasonable justification, the hearing may go ahead in their absence. The chair of the panel, with the counsel of the other panel members, will decide whether to proceed with the hearing.

A staff side representative may present the case in the absence of the employee, if needed, and only if all parties agree.

Disciplinary hearings may be rearranged once if the employee or their representative is unable to attend, providing they have given prior warning and reasonable justification. At the second attempt, the hearing will take place and a decision will be made in their absence unless there are highly exceptional circumstances.

10. Outcomes and Disciplinary Sanctions

10.1 *No case to answer*

If, following either a full investigation or a formal hearing, the manager receiving the investigation report or chairing the panel decides that there is no case to answer on the presented allegations, they should write to the employee to confirm the decision and end the disciplinary process.

10.2 *Informal Outcome with Recommendations*

Following either a full investigation or a formal hearing, the manager receiving the investigation report or chairing the panel may decide that while the allegations may be substantiated, a formal hearing or formal sanction is not warranted. They should write to the employee to confirm this decision and the nature of the informal outcome (for example, a recommendation for additional training or professional advice in writing), and inform them that if further similar allegations arise within the next 12 months, the evidence gathered may be considered alongside a future investigation. The letter will remain live on the employee's file for 12 months.

10.3 *Formal Sanctions*

Formal sanctions can only be applied following a formal disciplinary hearing.

When a sanction is given, the panel should have considered all the facts available, any mitigation provided, and be confident that a fair and consistent decision has been made in light of the allegation and evidence presented.

An employee's service record should be taken into account where appropriate.

The chair of the panel, with advice from the other panel member(s), must decide whether formal disciplinary action is necessary. If appropriate, the below sanctions are available under the Trust's procedure.

The chair of the panel should also defer an employee's incremental progression for 12 months whenever a formal sanction is applied. The chair must refer to the Trust's Linking Pay Progression with Performance Management Policy and seek advice from the Human Resources advisor to the panel.

10.4 First Written Warning

Where unacceptable levels of conduct or performance have not been resolved informally or where the offence is more serious, the employee may be given a first written warning.

The warning will set out the nature of the offence, the consequences of any further offence, specifying, if appropriate, what improvement is required and over what time period, and notification that further incidents could result in a final warning and ultimately dismissal.

There can be recommendations made by the panel in reference to retraining or managing performance, where appropriate.

This warning letter will normally remain live on the employee's file for a period of 12 months.

10.5 Final Written Warning

Where there has been serious misconduct, or where there has been further misconduct during the timespan of a previous formal written warning, the employee may be given a final written warning.

The final written warning will set out the nature of the offence, specifying, if appropriate, what improvement is required over what time period and will state that any further misconduct may lead to dismissal.

There can be recommendations made by the panel in reference to retraining or managing performance where appropriate.

This warning letter will normally remain live on the employee's file for a period of 12 months. However, for serious misconduct, this may be extended up to a maximum of 24 months.

10.6 Downgrading/Transfer

In certain circumstances it may be necessary to apply further disciplinary sanctions in addition to a final written warning or as an alternative to dismissal. This includes downgrading or transfer (permanent or temporary) without protection of earnings. Any downgrading will always be within one band or equivalent of the employee's existing post.

10.7 Dismissal

If all disciplinary stages have been followed and the misconduct continues or where there have been a number of instances of less serious offences, or where an incident is so serious it constitutes gross misconduct (see Appendix E), then the employee will be dismissed. Dismissal for **misconduct** will be with the appropriate notice period (or exceptionally post-employment notice pay) of one week's notice for each completed year of continuous service up to a maximum of twelve weeks. A dismissal for **gross misconduct** will be a summary dismissal without notice or post-employment notice pay.

In considering dismissal as an option, the following must be examined:

- Whether the disciplinary procedure has been complied with and, if it has not, that there are good and justifiable reasons for deviating from it;
- Whether other available courses of action have been considered and discounted;
- Where appropriate, the dismissal is consistent with previous practice within the Trust and is a reasonable course of action;
- All the evidence relied upon is available and sufficiently clear to justify the decision.

In certain circumstances, where a registered health professional employee is dismissed from the Trust, the relevant professional body should be informed by the dismissing Chair. This should be done after the appeal deadline or after the final outcome has been made.

10.8 Appeals

Following a disciplinary sanction, an employee can appeal against the decision. The right to appeal will be given in writing in the outcome letter from the disciplinary hearing, including a copy of the Trust's Appeals Policy (under which any appeal will be conducted).

An appeal must be to the nominated manager as stated in the disciplinary hearing outcome letter, and must be received by them no later than ten working days following the employee's receipt of the written confirmation of the hearing outcome. For appeals against dismissal, the appeal should be addressed to the Head of Employee Relations, University Hospitals Bristol NHS Foundation Trust, Level 4C Whitefriars, Lewins Mead, Bristol, BS1 2NT or email EmployeeServices@UH Bristol.nhs.uk marking for the attention of Head of Employee Relations.

The employee should include in their written appeal the following:

- The reasons for appeal;
- If they feel that due process in the hearing was not followed;
- If they feel that there was evidence/mitigation that was not considered.

10.9 Referrals

In some circumstances, the Trust has a legal duty to refer individuals to the Disclosure and Barring Service (DBS). Where the outcome of a hearing is to dismiss or transfer the employee from a post working with children or vulnerable adults, and that their action or inaction caused or risked harm to a child or vulnerable adult, the chair of the hearing must report the case to the Head of

Employee Relations. Advice about making DBS referrals can also be sought from the Trust's Lead Safeguarding Nurse (see section 5.2).

Where the employee is a professional registrant, the hearing chair must consider whether a referral to the professional body is appropriate and discuss this with the relevant professional lead (see section 5.3).

Referrals will be made once any line of appeal is exhausted.

10.10 Records and Time Limits

All disciplinary records and associated papers are confidential and will be kept on the employee's central personal file in Employee Services.

Written warnings will remain on the individual's personal file for the period of the sanction and may be disclosed as part of employment references. At the end of this time the record will be disregarded for most purposes.

All written documents/records and proceedings relating to matters dealt with under this policy are, and must remain, confidential, with the exception of meeting the Trust's duties to make referrals to the DBS (see section 10.9) or to professional bodies.

11. References

[ACAS Code of Practice on Disciplinary and Grievance Procedures](#)

[Alcohol and Prohibited Substance Misuse Policy](#)

[Appeals Policy](#)

[Countering Fraud and Bribery Policy](#)

[Linking Pay Progression with Performance Policy](#)

[Maintaining High Professional Standards in the Modern NHS](#)

[Medical and Dental Capability Concerns Policy](#)

[Safeguarding Adults Policy](#)

[Safeguarding Children, Young People and Unborn Babies from Abuse Policy](#)

[Social Media for Personal Use Policy](#)

[Staff Conduct Policy](#)

[Staff Support and Being Open Policy](#)

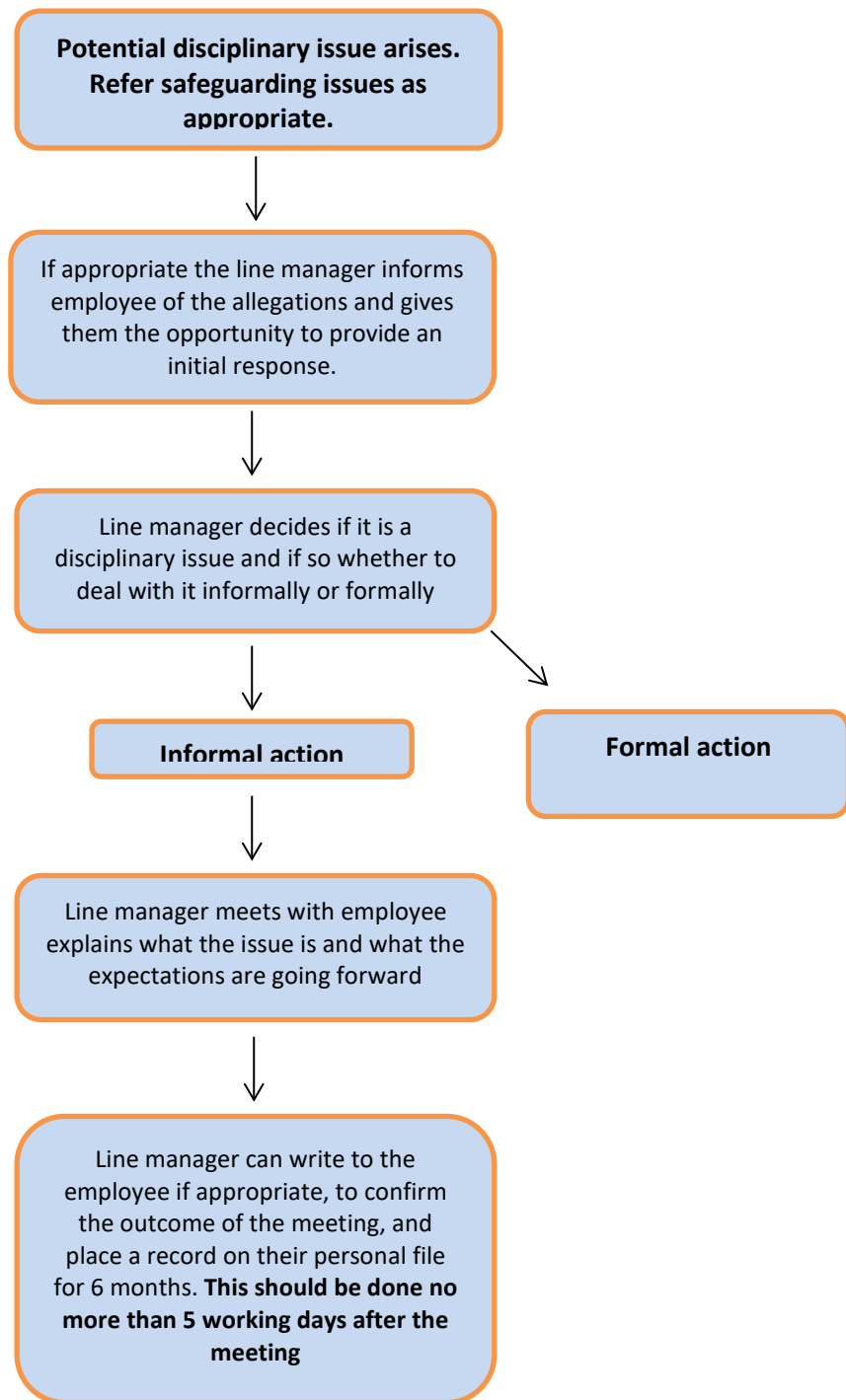
[Supporting Attendance Policy](#)

[Supporting Performance Policy](#)

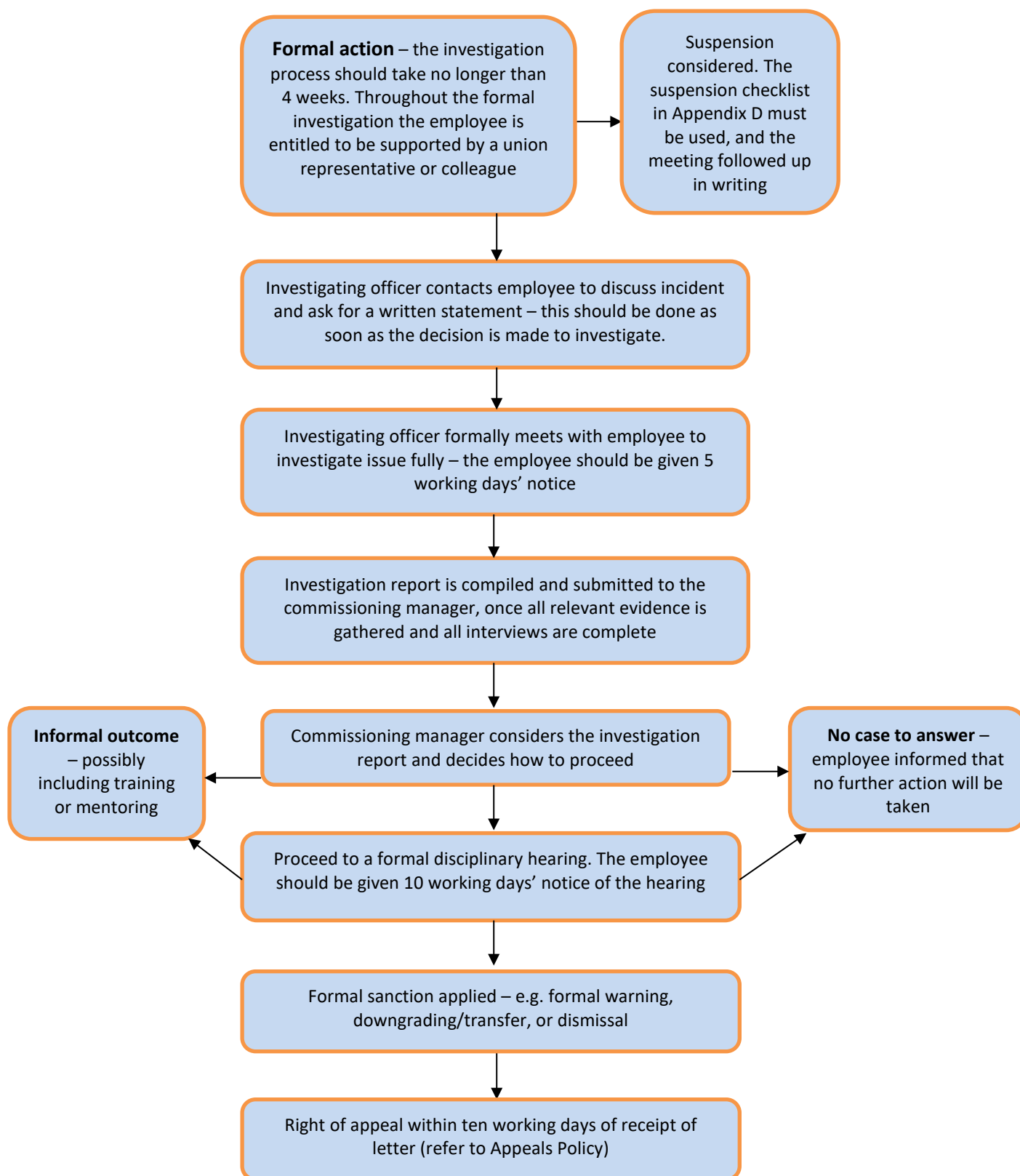
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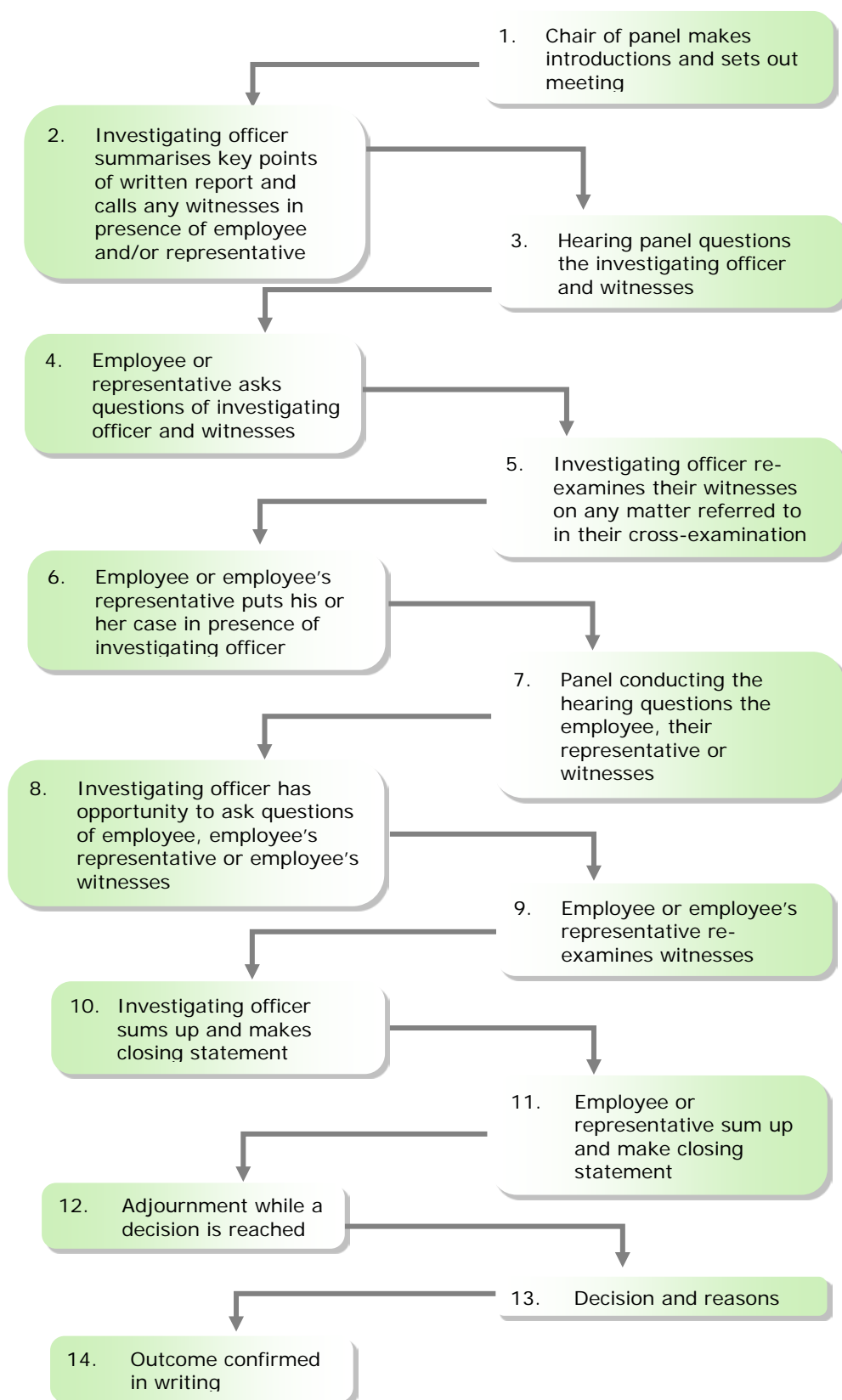
12. Appendix A – Informal Action Flow Chart



13. Appendix B – Formal Action Flow Chart



14. Appendix C – Disciplinary Hearing Flow Chart



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15. Appendix D – Suspension Meeting Checklist and Guidelines

Prior to the suspension meeting

- Ensure you have read section 7 of the policy and this guidance fully before taking further action.
- Consider whether suspension is the most appropriate course of action. Consideration should be given to the seriousness of the incident or allegation(s) (risk to employee, patients or the public) for the employee to remain in the workplace should an investigation be required.
- Discuss the intention to suspend with the Divisional HR Business Partner.
- Contact the Employee Services team on ext. 25000 (option 3) to arrange for a member of the team to attend the suspension meeting if possible.
- Arrange to meet the employee as soon as possible following the incident or allegation being made.
- Contact Staff Side by email (Unions@UHBristol.nhs.uk) or on extension 20826 or 20824 if the employee is a union member.
- Ensure the employee has a member of staff nominated within the Trust for support and guidance. The member of staff should be nominated before the suspension meeting is held so it can be highlighted to the employee being suspended.

During the suspension meeting

- Explain that the employee can be accompanied by a Trade Union representative or friend/colleague not acting in a legal capacity. If not accompanied, clarify that they are happy to proceed with the meeting.
- If the employee wishes to have a friend, colleague, or Trade Union representative to accompany them, efforts should be made to arrange this immediately.
- Outline the allegation that is being made.
- Ask if they would like to respond verbally to the allegation. If the employee chooses not to verbally respond, advise that the decision to suspend is made on the information available at present.
- If the decision to suspend is made, explain that because the allegations are very serious you have decided to suspend them from duty to allow for an investigation to take place.
- Explain that the employee will be required to attend an investigation meeting in accordance with the Trust's disciplinary procedure.
- Advise them to draft a written statement in response to the allegation, and that if they don't do this a verbal statement will be taken at the investigation meeting.
- Emphasise that suspension is precautionary and not a disciplinary action.
- Advise that they will receive full contractual pay whilst on suspension.
- Advise that whilst on suspension they should not return to Trust premises without the express permission of the line manager, nor contact Trust staff or patients. Permission would be granted for them to meet with their union representative or to attend as a patient or accompanying a patient.

- Explain the importance of maintaining confidentiality at all times.
- Inform them that the suspension will be confirmed in writing. Ideally this will be handed to the employee at the suspension meeting.
- Explain the additional support available during suspension, including the Staff Counselling service, Occupational Health Service (extension 23400), Employee Services (extension 25000 option 3), and who their nominated contact is for support and guidance.
- Explain that the employee cannot work for the Trust or any other NHS Trust whilst on suspension.
- Explain that clinical staff should not work clinically anywhere else whilst on suspension.
- Explain that the employee, while not required to attend work, should remain available to assist in the disciplinary investigation, attend investigation or disciplinary meetings, or deal with any work-related questions.
- Ask the employee whether they have any booked leave which may fall within the suspension period, and explain this won't be cancelled while they are on suspension. However, if the employee would like to cancel their leave, this can be requested to the Investigating Officer in advance. Individual days may also be recouped where the employee explicitly offers to make themselves available during annual leave, and a meeting is booked on a day of annual leave.
- Explain that if the employee wishes to book new annual leave, they should request it and it will be dealt with in accordance with normal procedures. However it would not normally be granted if it would impede the investigation process.
- Check contact details with the member of staff.
- Allow the member of staff to collect any belongings they need and ensure they leave the premises.
- Remove the employee's Staff ID Badge from them and any other items which would allow the employee to access NHS data or premises.

After the suspension meeting

- Inform the line manager of the employee (if they are not the suspending manager).
- Inform the Temporary Staffing Bureau and other departments the employee may work in, so as to ensure the employee does not work for the Trust in any capacity.
- Inform Employee Services of the suspension (if they have not been available to attend the suspension meeting).
- If the member of staff was unaccompanied but is a union member, the manager needs to inform the union representative as soon as possible of suspension.
- Aim to write the suspension letter the same day and send to the employee, if this has not already been handed to the employee, and in any case within 3 working days. Check the letter with an Employee Services Advisor before sending it out.

Support throughout suspension

- If the suspension is going to exceed 28 calendar days, the suspending manager must write to the employee to advise on the period of extension and the reasons for the delay in concluding the investigation

- Ensure the employee is informed by the line manager regularly of any service-related information relevant to them.
- If the employee decides to be referred to Occupational Health/self-refers to them, their appointments are within a suitable time frame in accordance with the investigation.
- Ensure the employee has the correct contact details for the Employee Services team for added support.
- Ensure the employee has the contact details of a member of the suspension support group.
- The investigating officer should be in regular contact with the suspended employee ensuring they are updated with any changes.

16. Appendix E – 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, the Trust's Local Counter Fraud Specialist and Director of Finance must be notified.
- Deliberate falsification of records.
- Assault, actual or threatened, or 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 the Trust's property or that of colleagues, patients or contractors or users of the Trust whilst on site.
- Being unfit for duty, other than for medical reasons, due to misuse of drugs or alcohol, which may include sleeping on duty.
- Unauthorised disclosure of confidential information.
- Mention of UHBristol, its component hospitals or reference to working for the NHS in Bristol on social networking sites which may bring the Trust into disrepute/cause reputational damage.
- Sexual offences or sexual misconduct at work. This includes inappropriate behaviour towards colleagues and sexual or inappropriate relationships with patients in care or receiving treatment.
- Abuse of position to influence patients or relatives, including about the choice of private care as either an alternative to, or follow up to, care received from the Trust.
- 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 their work, makes them unacceptable to other employees, or damages the Trust 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.

- Breaches of information governance, or failure to comply with regulations relating to computer software and hardware.
- Conduct or act of omission liable to lead to serious loss of confidence from the Trust.
- 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 that staff are contracted with the Trust, or while absent due to ill health from the Trust (other than with explicit permission from the appropriate manager). The Trust's Local Counter Fraud Specialist should be contacted if this is suspected.

17. Appendix F – Required Levels of Authority for Disciplinary Action

The table below sets out the levels of authority required to apply a disciplinary sanction to each category of staff.

Disciplinary Action	Category of Employee				
	Trust Employee (non-medical)	Medical Trainees/ Non-Consultant Career Grades	Medical Consultant	Executive Director	Chief Executive
First Written Warning	Line Manager or Head of Department	Specialty Lead or Lead Doctor	Clinical Chair	Chief Executive	Chair
Final Written Warning	Assistant Divisional Director/ Head of Nursing or Lead AHP/ Designated Corporate Manager	Specialty Lead or Lead Doctor	Clinical Chair	Chief Executive	Chair and 2 Non-Executive Directors
Dismissal	Divisional Director/ Clinical Chair/ Head of Nursing or Lead AHP/ Designated Senior Corporate Manager or Director	Clinical Chair	Medical Director	Chair and 2 Non-Executive Directors	Chair and all Non-Executive Directors

Where authority to chair dismissal or appeal hearings is delegated, this must be confirmed with an email from the delegating manager to the panel chair.

If the member of staff involved is of very senior level, the same principles must be applied around levels of authority to dismiss, but it may be necessary for the manager with authority to hear appeals to conduct the actual dismissal hearing, and for the appeal line to be determined on an individual basis by the corporate Human Resources team. In such circumstances the authority to give warnings may also be distinguished accordingly.

For clinicians/healthcare professionals who are registered with a statutory body, a proportion of disciplinary issues are professional and code of conduct issues. Consequently they must involve appropriate senior professional input at all stages. In all instances of disciplinary action concerning such staff the advice of the divisional Head of Profession or Director of Nursing/Medical Director team must be sought before proceeding.

For clinicians/healthcare professionals who are not registered with a statutory body (e.g. unregistered support workers and some technicians) there may be issues of a 'professional nature' in the disciplinary case which require professional input in the stages of disciplinary process. If in doubt seek the advice of the divisional Head of Profession or Chief Nurses team before proceeding.

For non-clinical professional staff who are registered with their appropriate professional body, (e.g. finance or HR professionals), senior professional input must be sought at all stages where there are issues of a professional nature. It is advised that in all instances of disciplinary action concerning such staff, the advice of a senior professional lead or Director in the function is sought before proceeding.

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18. Appendix G – Dealing with Conduct Concerns with Medical and Dental Staff

This document describes the steps required if the disciplinary investigation relates to the conduct of a member of Medical or Dental staff who is not in training. It should be read in conjunction with the Maintaining High Professional Standards (MHPS) document in relation to conduct issues. The National Clinical Assessment Service (NCAS) should also be contacted at the earliest opportunity. NCAS helps improve patient safety by helping to resolve concerns about the professional practice of doctors, dentists and pharmacists in the UK and overseas by providing expert advice and support, clinical assessment and training.

Each section of the policy where a separate procedure is required for Medical and Dental staff has been highlighted. In these instances, reference should be made to this document and the relevant section of the MHPS document. Where no reference has been made to this Appendix, the requirements of the main policy will apply. Where a case relates to both the conduct and capability of a member of Medical and Dental staff, 2 separate processes will be required and reference must be made to the Medical and Dental Policy for Managing Capability Concerns.

Section 7 - Suspension

The term used for medical and dental staff is **Exclusion**, to avoid confusion with suspension imposed by the GMC or GDC. Exclusions must be reviewed regularly by the Board and the Chief Executive (or nominated Deputy), the requirements of this are outlined below. Other than the alternatives outlined in the main policy, clinical supervision of normal contractual duties may be considered as an alternative for medical and dental staff.

NCAS should be contacted and informed at the earliest opportunity if a member of medical or dental staff is excluded and should be informed of any subsequent extension or changes to the exclusion. Annex B of the MHPS document should be referred to for more detailed information about exclusions.

Exclusion can be immediate or formal, the differences are as follows:

- Immediate exclusion allows for protection of patients or other staff and assists the investigation process when there is a clear risk that the practitioner's presence would impede the gathering of evidence. It is an appropriate course of action following a critical incident when serious allegations have been made or when there is an allegation of a criminal act.
- Formal exclusion may only take place after the Case Manager has considered whether there is a case to answer. Formal exclusion arrangements should be reviewed regularly in conjunction with NCAS and should not ordinarily be longer than 4 weeks in duration wherever possible.

Section 8 - Investigation

Investigations are carried out by a Case Investigator, who is appointed by the Medical Director. Their role is described below:

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- The Case Investigator needs to be appropriately qualified and must ensure strict confidentiality. Patient confidentiality needs to be maintained but the investigation report needs to clearly show the details of the allegations.
- It is the responsibility of the Case Investigator to judge what information needs to be gathered and how.
- The Case Investigator needs to ensure that sufficient evidence is collected to fully consider all aspects of the investigation and that a report is made of the investigation process and the information gathered.
- It is not the role of the Case Investigator to make decisions regarding actions required at the completion of the investigation.
- The Case Investigator may not be a member of a hearing panel subsequent to the investigation, but may be required to present the investigation report at the hearing or attend the hearing as a witness as required.

Once the report of the investigation is prepared, the Case Investigator must give the practitioner the opportunity to study the content and provide written comment, and submit this to the Case Investigator within 14 calendar days of receipt. This time limit may be altered in exceptional cases with the prior agreement of the case manager.

The case manager will, taking all sources of information into account (e.g. from NCAS) and after consultation with the Director of People, decide what further action is necessary and develop an action plan accordingly. The case manager will inform the practitioner of the decision at the earliest possible opportunity and normally within 14 calendar days of receiving the practitioner's comments.

Section 9 – Disciplinary Hearing

For the purposes of setting up a hearing panel for Medical and Dental staff, it is important that the constitution meets the requirements of the MHPS document. As such, the panel must include a member who is medically qualified (in the case of doctors) or dentally qualified (in the case of dentists) and not currently employed by the Trust.

19. Appendix H – Monitoring Table for this Policy

The following table sets out the monitoring provisions associated with this Policy.

Objective	Evidence	Method	Frequency	Responsible	Committee
To ensure policy is being applied fairly and consistently	Review of employee relations cases and diversity data.	Data analysis	Annual	Head of Employee Relations	Trust Partnership Forum
To ensure policy remains fit for purpose	Feedback from managers, Staffside, and other stakeholders	Policy review	24 months	Head of Employee Relations	Policy Group and Trust Partnership Forum

20. Appendix I – 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 Employee Relations
Is this document: A – replacing an expired policy, B – replacing an alternative policy, C – a new policy:	Replacing an expired policy
Alternative documentation this policy will replace (if applicable):	N/A
This document is to be disseminated to:	All staff
Method of dissemination:	HRweb and Newsbeat
Is Training required:	For investigating officers, yes For other staff, no
The Training Lead is:	Head of Employee Relations

Additional Comments
[DITP - Additional Comments]

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21. Appendix J – Equality Impact Assessment (EIA) Screening Tool

Query	Response
What is the main purpose of the document?	To ensure that all disciplinary matters are dealt with fairly and consistently, by setting a clear process for resolving disciplinary issues appropriately at all levels of seriousness.
Who is the target audience of the document (which staff groups)? Who is it likely to impact on? (Please tick all that apply.)	Add <input checked="" type="checkbox"/> or <input checked="" type="checkbox"/> 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.
Age (including younger and older people)		<input checked="" type="checkbox"/>	No impact identified
Disability (including physical and sensory impairments, learning disabilities, mental health)		<input checked="" type="checkbox"/>	No impact identified
Gender reassignment		<input checked="" type="checkbox"/>	No impact identified
Pregnancy and maternity		<input checked="" type="checkbox"/>	No impact identified
Race (includes ethnicity as well as gypsy travelers)		<input checked="" type="checkbox"/>	No impact identified
Religion and belief (includes non-belief)		<input checked="" type="checkbox"/>	No impact identified
Sex (male and female)		<input checked="" type="checkbox"/>	No impact identified
Sexual Orientation (lesbian, gay, bisexual, other)		<input checked="" type="checkbox"/>	No impact identified
Groups at risk of stigma or social exclusion (e.g. offenders, homeless people)		<input checked="" type="checkbox"/>	No impact identified
Human Rights (particularly rights to privacy, dignity, liberty and non-degrading treatment)		<input checked="" type="checkbox"/>	No impact identified

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.

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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?		<input checked="" type="checkbox"/>	
Will it help to get rid of discrimination?	<input checked="" type="checkbox"/>		<p>The policy supports the Trust's approach of treating discriminatory behaviour as a serious conduct issue.</p> <p>The policy also sets out clear procedures to ensure a fair process, as well as a separation of powers from investigating officer and chair to minimise the chance of the policy being used as a discriminatory action. This is further mitigated with the right of appeal against any formal sanctions.</p>
Will it help to get rid of harassment?	<input checked="" type="checkbox"/>		<p>The policy supports the Trust's approach of treating harassment as a serious conduct issue. As stated above, there are protections in place to prevent the policy being used as a tool for harassment.</p>
Will it promote good relations between people from all groups?	<input checked="" type="checkbox"/>		Having an effective disciplinary process underpins the Trust Value of Respecting Everyone.
Will it promote and protect human rights?	<input checked="" type="checkbox"/>		This policy protects the human rights of freedom from discrimination and the right to a fair process.

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

Is a full equality impact assessment required? ~~YES~~ / NO

Date assessment completed: 15/10/2018

Person completing the assessment: Head of Employee Relations

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