

Respecting Everyone Policy

Who should use this policy?

This policy should be used by all University Hospitals Bristol and Weston NHS Foundation Trust (UHBW) colleagues.

Fast Find – Key Guidance [Respecting Everyone Website](#)

1. [Our approach](#)
2. [Experiencing unwanted behaviour](#)
3. [Support and guidance for colleagues witnessing unwanted or concerning behaviour](#)
4. [Support if someone's raised a concern about your behaviour or performance](#)
5. [A guide to providing positive and constructive Feedback](#)
6. [Early resolution](#)

The following policy should be read and used in conjunction with the Early Resolution Procedures.

[Formal Process Procedure A](#)

[Formal Process Procedure B](#)

This policy contains guidance to resolve issues of bullying and harassment, conduct, capability and grievances within UHBW. Through the use of this policy, we will ensure that all matters are dealt with fairly and consistently at the earliest opportunity with respect for everyone.

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 and NHS Just Culture Guidance.

This policy replaces the Weston Area Health Authority EMP14 Disciplinary Policy and Procedure and the UHBW Dignity at Work, Disciplinary, Grievance, Managing Capability Concerns of Medical and Dental Staff and Supporting Performance policies.

Confidential support available from your union if you are a member [REDACTED]
or HR Services [REDACTED]

Wellbeing Support

Free, confidential counselling and advice is available 24/7 from Health Assured

- Call: [REDACTED]
- visit the [Health Assured](#) website
enter username: [REDACTED]
- Download the [REDACTED] enter the unique code: [REDACTED]

Further resources detailing support and help can be found here [REDACTED]

1. Introduction

University Hospitals Bristol and Weston NHS Foundation Trust's (UHBW) Respecting Everyone Policy aims to ensure that all matters regarding bullying and harassment, grievances, conduct and capability are dealt with fairly, consistently and with resolution at the heart of the process. We are a learning organisation and recognise the importance of resolving issues of concern early and quickly, maximising opportunities to improve and learn from experiences of individuals and circumstances that arise.

We support a culture of fairness, openness and learning by making people feel confident to speak up when things go wrong, rather than fearing blame. Supporting colleagues to be open about mistakes allows valuable lessons to be learnt so the same errors can be prevented from being repeated. This policy should be used in conjunction with the Respecting Everyone Guides and Procedures.

2. Purpose

This Policy provides a systematic approach to decision making to resolve all types of issues including concerns, problems, disagreements, disputes, complaints, and allegations of bullying and harassment and conduct and capability concerns. It can also be used to resolve collective disputes. It applies to all colleagues both Agenda for Change and Medical and Dental colleagues, including Bank Staff.

Our Health and Sickness at Work Policy applies when managing capability due to ill health.

It is recognised that conflict and disagreements in the workplace happen, which are not always negative. When conflict is managed well it can lead to healthy, resilient and positive working relationships. Our trust values and leadership behaviours highlight that we strive for a workplace where colleagues can engage with one another constructively and use the guidance available to seek their own resolution.

A formal investigation will not usually be commissioned unless all steps of Early Resolution have been exhausted or the situation is so serious that a formal investigation is required at the outset. All investigations will be undertaken into the circumstances surrounding the situation and not directed at the individual. This policy focuses on giving colleagues the opportunity to learn and improve and this is at the heart of the Early Resolution Steps.

3. UHBW Values

This policy has been created with our values at its heart.



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The following principles, developed from our values and leadership behaviours, alongside best practice for patient outcomes, underpin the policy:

- Colleagues will be treated with dignity and respect and be able to work without fear of bullying and harassment on any grounds.
- Colleagues will be heard and have a voice when an incident occurs.
- Colleagues will be able to raise their concerns in a safe environment without fear of reprisal.
- Colleagues will be treated with compassion and respect if involved in an incident in the workplace.
- Any concerns relating to capability will be fairly and reasonably addressed and opportunities to learn and improve maximised.
- Colleagues who are raising concerns, are facing concerns relating to their conduct or capability or are aggrieved will be provided with support to protect their health and wellbeing as far as reasonably practicable.
- Wherever possible colleagues will engage with this policy in an informal and timely way.
- All allegations will be treated seriously and in good faith.
- All allegations and concerns will be assessed prior to starting a formal process utilising independence and expertise appropriately to ensure balance and proportionality.
- Colleagues will have fair opportunity to respond to allegations made against them.

4. Definitions

Bullying	Behaviour from another person or group of people that is unwanted and makes someone feel uncomfortable. This often involves an imbalance of power.
Capability	The potential of someone to do something, though they may not be able to do it successfully.
Conduct	The manner in which someone behaves. More information relating to the conduct expected of UHBW colleagues can be found in the Staff Conduct Policy.
Discrimination	Discrimination unfair treatment because of a protected characteristic under the Equality Act 2010.
Exclusion	A request made to an employee to refrain from attending the workplace when concerns of an extremely serious nature are raised. This is done only in the rarest of cases following an exclusion risk assessment and is done while a formal investigation takes place.
Gross Misconduct	Misconduct that is so serious that it fundamentally breaches the contractual relationship between the employee and organisation. When an employee commits an act of gross misconduct, the employer can dismiss them without notice.
Harassment	Harassment bullying or unwanted behaviour related to protected characteristics under the Equality Act 2010.
Mediation	Where colleagues meet with an independent and impartial person present who assists them in the process of negotiating their differences.
Victimisation	Victimisation is when someone is treated unfairly because they made or supported a complaint about discrimination.

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5. Duties, Roles and Responsibilities

<p>Case Managers <i>Often this will be the next level of management, but it may also be an independent person</i></p>	<p>To chair Case Assessment meetings.</p> <p>To set the terms of reference for the investigation with support from HR.</p> <p>To appoint a Case Investigator in a timely fashion where a formal investigation is commissioned.</p> <p>To assess and recommend for approval of the Chief People Officer/ Deputy Chief People Officer when exclusion is required.</p> <p>To review any exclusion and decide whether it should continue and write to a colleague if their exclusion has exceeded 28 calendar days, to let them know the period of extension and the reasons for it.</p> <p>To review the progress of the investigation ensuring timescales are adhered to.</p>
<p>Case Investigators <i>Often this will be the line manager, but it may also be an independent person</i></p>	<p>To ensure that incidents are investigated fully ensuring that all facts, mitigating factors, system and environmental factors are established when compiling reports and making recommendations.</p> <p>To comply with the terms of reference as provided by the Case Manager.</p>
<p>Human Resources</p>	<p>To support and advise managers ensuring that fact finds and investigations are undertaken in accordance with this policy and the terms of reference as provided by the Case Manager and escalate through appropriate reporting channels where this is not possible.</p> <p>To ensure that appropriate notifications and referrals are completed e.g Safeguarding, DBS and Professional Bodies.</p> <p>To promote a culture of locally resolving concerns, learning and improving in response to feedback and respecting each other.</p> <p>To provide data relating to cases as required.</p> <p>HR Services to monitor and produce frequent reporting for the purposes of ensuring recommendations set out by Dido Harding are met. These reports will be received by the Respecting Everyone Best Practice Group and the Trust Board.</p>
<p>Line Managers</p>	<p>To ensure colleagues Health and Wellbeing is considered and the correct support put in place e.g., referral to Occupational Health, counselling, Care First or other external support.</p> <p>To review incidents or concerns in collaboration with the colleagues involved, to hear their perspective and carry out initial fact-finding to establish circumstances surrounding the incidents or concerns.</p> <p>To ensure that appropriate notifications and referrals are completed e.g Safeguarding, DBS and Professional Bodies.</p> <p>To use all Early Resolution steps, maximising opportunities to learn and improve prior to recommended a formal investigation.</p>
<p>Staff Side/ Trade Union Representatives</p>	<p>Supporting colleagues involved in application of this policy</p> <p>Working in partnership to resolve workplace concerns as quickly as possible</p>

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Support Buddy	To keep in touch with a colleague involved in a formal investigation. To provide updates and be a point of contact.
EDI Lead	Provides expert advice from a diversity perspective to ensure fairness and equity. To provide and advice relating to unconscious bias during processes. To act as the lead for staff network representatives who lend their expertise to supporting the delivery of the Respecting Everyone Policy, in particular during case assessments and at the 'Respecting Everyone Best Practice Group'. To participate in the 'Respecting Everyone Best Practice Group' bringing an EDI lens and supporting UHBW to close the experience gap currently in existence for our colleagues.
Designated Member (Process B – MHPS only)	To oversee the investigation, ensure exclusion reviews and timescales are adhered to and act as a point of contact for the practitioner should they have concerns around the formal investigation.

6. How to resolve an issue using Early Resolution – [Guidance here](#)

It is expected that all day-to-day problems and concerns can be dealt with satisfactorily as part of the ongoing communication between a colleague and their manager, such as regular 1:1s or supervision. Regular meetings provide dedicated time to discuss any aspect of work and provide the opportunity to seek guidance and support as appropriate.

Where a colleague has concerns about their manager and they are not able to resolve the issue directly with them, they are advised to contact the next more senior manager or HR for advice and support. Every attempt should be made by all parties to resolve any problems in an informal manner where possible through discussion at a local level.

More serious issues may not be suitable for Early Resolution and should be assessed for formal investigation using the case assessment process described in section 8.

A pattern or repetition of behaviour following Early Resolution may require formal investigation. A decision tree to assess this can be found [here](#).

Early Resolution (Step 1) – One-to-One Conversation (What to do first)

Conduct or Capability Concerns - The aim of step 1 is to address concerns and understand the colleague's perspective of an issue before agreeing improvements. This conversation will be an initial discussion around the situation that has occurred, the colleague's perspective and the future expectations.

Bullying and Harassment or Grievances – The aim of step 1 is to support a colleague to be able to talk with the person they feel is behaving unacceptably to explain to them how they are making them feel and ask them to stop.

Early Resolution (Step 2) – Round-table Conversation (What to do if a One-to-One Conversation hasn't helped or support is needed)

Conduct or Capability Concerns - The aim of step 2 is to address concerns and understand the colleague's perspective before discussing and agreeing improvements providing any support, adjustments or training, required to achieve and sustain improvements. This will include an Informal Development Plan.

Bullying and Harassment or Grievances - The aim of step 2 is to support a colleague to talk with the person they feel is behaving unacceptably towards them with an appropriate person there to facilitate (help guide) the conversation.

Early Resolution (Step 3) – What to do if there is no improvement

Conduct or Capability Concerns - The aim of step 3 is to understand the facts of the situation and the colleague's perspective before agreeing improvements for the future. It may include concerns around repetition of behaviour. Any support, adjustments or training required to achieve and sustain improvements will be agreed. This will include a Development Plan containing objectives or standards that are required and a letter reminding the colleague of expectations.

Bullying and Harassment or Grievances – The aim of step 3 is to support colleagues to talk to each other through mediation. Mediation should take place when step 1 and step 2 have been unsuccessful or where the situation is more serious. More information on mediation can be found in our guide to mediation.

7. What to do when Early Resolution has not helped or is not appropriate

When Early Resolution has not helped or is not appropriate a Case Assessment should be completed. A Case Assessment will take place when

- a local issue arises, and the manager is not sure whether Early Resolution is appropriate, or
- all Early Resolution steps have been tried without resolution, or
- when escalation through the policy is required, or
- the matter is so serious it is anticipated that a formal investigation will be required.

7.1 Case Assessment

A Case Assessment will be undertaken when Early Resolution has not resulted in a mutually agreeable solution or an improvement in conduct or capability. In very serious cases, a case assessment may be undertaken without Early Resolution having taken place. An outcome of Case Assessment may be that Early Resolution is required or that the steps should be repeated.

The Case Assessment will be carried out by a group of people, the line manager and their HR support who will complete an exercise to collate information relating to the case. The

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second line manager (or other appropriate senior manager) who will be the Case Manager, an HR representative and a third person such as an EDI representative, staff network representative or professional lead. The group will use the Case Assessment Form found [REDACTED] to guide their discussion and decision making. The assessment will enable the situation to be considered in an informed way, this means that the line manager will need to collate all relevant facts before completion.

Where an assessment indicates that a formal investigation is required then the assessment form must be completed and submitted to the case manager. Guidance on Case Assessment can be found in our Formal Process Guides for [REDACTED] and [REDACTED]

Where an assessment establishes that Early Resolution is appropriate, the form does not need to be discussed at a Case Assessment or submitted to the Case Manager but should be retained by the line manager and sent to HR Services for future reference.

8. Formal Investigation

Formal Investigation Process A – for all staff

This is the process that should be followed when undertaking a formal investigation for

- all types of concerns for Agenda for Change colleagues and
- Bullying and Harassment and Grievances for Medical and Dental colleagues.

Please refer to the guidance for Procedure A [REDACTED] for full information including roles, timescales and potential outcomes.

Formal Investigation Process B - for Medical and Dental staff conduct and capability

This is the process that should be followed when undertaking a formal investigation relating to

- conduct or capability for Medical and Dental colleagues

The process includes the principles and contractual entitlements set out in the MHPS Guidance. Please refer to the guidance for Procedure B [REDACTED] for full information including roles, timescales and potential outcomes.

8.1 Terms of Reference

When a formal investigation is required, the Case Manager will prepare Terms of Reference for the investigation with expert advice from HR. The Terms of Reference will set out clearly the Case Investigator's remit and the deadline for the investigation. Guidance on writing Terms of Reference can be found in our Formal Process Guides for [REDACTED] and [REDACTED]

8.2 Following a Formal Investigation

Having read the completed investigation report, the Case Manager will determine the next steps, which could be that

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- (i) the facts have established in the investigation indicate that a formal hearing is required
- (ii) there is a need to undertake further Early Resolution steps
- (iii) the concerns could be addressed by further training, support, development or other means
- (iv) there is no case to answer and no further action will be taken
- (v) the case should be referred to the Supporting Attendance Policy for management relating to a health condition

9. Hearing

A hearing is required for a formal outcome to be considered. The hearing will be chaired by an appropriately authorised manager with delegated responsibility to issue a warning or other outcome.

Only colleagues of Band 8b and above and Clinical Leads and above have dismissal rights. However, in exceptional circumstances and in conjunction with advice from the Head of HR Services, these rights may be delegated.

The constitution of a Conduct or Capability Panel in line with MHPS requires, three panel members including two Executive Directors. Please refer to [REDACTED] for more information.

The hearing chair will not have been actively involved in the investigation but in some cases, it may be the Case Manager.

10. Possible Outcomes & Resolution

The possible outcomes are shown in the table below, although this list is not exhaustive. We will also consider any wider actions, implications or learning for UHBW.

First Written Warning	Where conduct or performance has fallen below acceptable standards and reasonable attempts for Early Resolution have not resulted in sufficient improvement and all other approaches have been exhausted or where the incident is sufficiently serious
Final Written Warning	Where conduct or performance falls significantly below acceptable standards and previous measures have not resulted in sufficient improvement or where the incident is so serious that a final written notice is the only appropriate outcome. Dismissal is a clear possibility; however mitigating circumstances have been accepted
Dismissal	Considered where conduct or performance falls significantly below acceptable standards and previous measures have not resulted in sufficient improvement. We may end employment with the appropriate contractual notice. Where a single incident is considered as very serious, except in the most exceptional circumstances, employment will be ended without contractual notice (Summary Dismissal).

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11. Exclusion

Exclusion is a last resort. It is normally carried out by either the line manager or the Case Manager and must be authorised by the Chief People Officer and Head of Profession or nominated deputies following an exclusion risk assessment and consultation with the required professional bodies.

If it is necessary to remove a colleague from the workplace for the protection of colleagues, patients or the public, or if the allegation is of such a serious nature that it is not acceptable for the colleague to remain on duty; they may be sent home immediately for a 'cooling off' period. This must be followed as soon as possible by a formal exclusion risk assessment and authorisation process, the 'cooling off' period will be paid. Further guidance can be found in our Formal Process Guides for [REDACTED] and [REDACTED]

12. Right to be accompanied

Colleagues have the right to be accompanied, if a formal investigation is commissioned, by a union representative, friend or colleague, not acting in a legal capacity.

13. Overlapping Concerns

Where a colleague raises a complaint while concerns about them have been raised, the resolution process may be suspended to deal with their complaint. Where the cases are related it may be appropriate to deal with both issues concurrently or through the same process.

14. Appeals

Following a formal resolution outcome (including dismissal) a colleague can appeal against the decision. The right to appeal will be given in writing in the outcome letter from the Resolution Hearing, including a copy of UHBW's Appeals Policy (under which any appeal will be conducted).

To register an appeal the colleague must email the Head of HR Services via [REDACTED] within 5 working days of receiving the outcome letter. This must be followed by a written statement within 10 days of sending their appeal email.

For Appeals relating to a Conduct or Capability (MHPS) hearing, the appeal must be submitted within 25 working days from the date of the written confirmation.

The colleague should include the following in their written statement:

- 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.

15. Best Practice Group

A best practice group; consisting of representatives from HR, Staff Networks, Staff side and Operational Managers, will

- undertake quarterly reviews of cases with the support of data from HR Services, identifying hotspot areas and trends.
- review cases to ensure consistency in colleague experience across UHBW. This is in response to WRES data which shows Ethnic Minority colleagues are more likely to enter disciplinary processes than their white counterparts.
- assist in the facilitation of Case Reviews and debriefs including assuring that learning points are communicated to the appropriate departments ensuring learning into practice.
- review KPIs associated with this policy to ensure the effectiveness and evaluation of this policy in line with staff feedback and other data.
- To oversee and commission independent reviews into investigations or disciplinary processes that result in harm to the subject of the process in line with the Dido Harding review.

16. References

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

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

[NHS England » A just culture guide](#)

17. Associated Internal Documentation

All policies are available on [REDACTED] or [REDACTED]

Alcohol and Prohibited Substance Misuse Policy
Appeals Policy
Freedom to Speak Up Policy
Health and Sickness at Work Policy
Local Counter Fraud and Bribery Policy
Patient Safety Incident Response Policy
Pay Progression Policy
Safeguarding Patients Policy

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Social Media for Personal Use Policy
Staff Conduct Policy
Staff Support and Being Open Policy

18. Document Data

Document Type:	Policy		
Document Reference:	27301		
Document Status:	Approved		
Document Owner:	Head of HR Services		
Executive Lead:	Chief People Officer		
Approval Authority:	HR Policy Group		
Review Cycle:	36 Months		
Date Version Effective From:	13/11/23	Date Version Effective To:	12/11/26

19. Appendix A - 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.

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 HR Services	People Learning & Delivery Group
To ensure policy remains fit for purpose	Feedback from colleagues, Staff Side & other stakeholders	Policy review	36 months	Head of HR Services	HR Policy Group & People Learning & Delivery Group

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20. Appendix B – 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:	Associate Director of OD and Wellbeing
Is this document: A – replacing the same titled, expired policy, B – replacing an alternative policy, C – a new policy:	C
If answer above is B: Alternative documentation this policy will replace (if applicable):	Weston Area Health Authority EMP14 Disciplinary Policy and Procedure and the UHBW Dignity at Work, Disciplinary, Grievance, Managing Capability Concerns of Medical and Dental Staff and Supporting Performance policies
This document is to be disseminated to:	All staff
Method of dissemination:	Roadshows, Newsbeat, HR Web
Is Training required:	yes
The Training Lead is:	Head of HR Services & Associate Director OD and Wellbeing

Additional Comments
[DITP - Additional Comments]

21. Appendix C – 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 resolve issues of bullying and harassment, conduct, capability and grievances within UHBW. Through the use of this policy, we will ensure that all matters are dealt with fairly and consistently at the earliest opportunity with respect for everyone.
Who is the target audience of the document? Who is it likely to impact on? (Please tick all that apply.)	Add <input checked="" type="checkbox"/> or <input checked="" type="checkbox"/> Staff <input checked="" type="checkbox"/> 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)		x	
Disability (including physical and sensory impairments, learning disabilities, mental health)		x	
Gender reassignment		x	
Pregnancy and maternity		x	
Race (includes ethnicity as well as gypsy travelers)		x	
Religion and belief (includes non-belief)		x	
Sex (male and female)		x	
Sexual Orientation (lesbian, gay, bisexual, other)		x	
Groups at risk of stigma or social exclusion (e.g. offenders, homeless people)		x	
Human Rights (particularly rights to privacy, dignity, liberty and non-degrading treatment)		x	

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 supports the Trust's approach of treating discriminatory behaviour as a serious

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			conduct issue. The policy also sets out clear procedures to ensure a fair process, including the Best Practice Group and Case Assessment involvement of an EDI representative &/or staff network representative 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.
Will it help to get rid of harassment?	x		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.
Will it promote good relations between people from all groups?	x		The policy supports the Trusts approach of treating harassment as a serious offence.
Will it promote and protect human rights?	x		This policy promotes the right to freedom from discrimination and the right to fair employment processes

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: 5th October 2023

Person completing the assessment: [REDACTED]

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