

## Policy No. HR03 Grievance and Disputes Policy and Procedure

The following personnel have direct roles and responsibilities in the implementation of this policy:

- All Trust Staff

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<b>Trust Contact:</b>	<b>HR Manager</b>
<b>Executive Lead:</b>	<b>Director of HR</b>

University Hospitals of North Midlands NHS Trust  
Grievance & Disputes Policy & Procedure

<b>Version Control Schedule</b>
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<b>Final Version</b>	<b>Issue Date</b>	<b>Comments</b>
1	July 1993	Policy developed and approved
2	April 2006	
3	December 2009	
4	February 2013	Ratified
5	April 2016	
6	August 2017	Policy revised following review of ACAS code of practice and guidance, to align with the revised HR02 Dignity at Work Policy and Procedure and to drive process efficiency improvements

FOI Ref 182-1819

# University Hospitals of North Midlands

NHS Trust

## ***Statement on Trust Policies to be included in all policies***

### **Staff Side and Trade Unions**

The University Hospitals of North Midlands NHS Trust is committed to ensuring that, as far as is reasonably practicable, the way in which we provide services to the public and the way in which we treat our staff reflects their individual needs and does not discriminate against individuals or groups on any grounds.

### **Equality and Diversity**

The University Hospitals of North Midlands aims to promote equality and diversity and value the benefits this brings. It is our aim to ensure that all staff feel valued and have a fair and equitable quality of working life.

### **Equality Impact Assessment**

The organisation aims to design and implement services, policies and measures that meet the diverse needs of our service, population and workforce, ensuring that none are placed at a disadvantage over others. The Equality Impact Assessment tool is designed to help you consider the needs and assess the impact of your policy.

### **Information Governance**

Any Trust policy which impacts on or involves the use and disclosure of personal information (patient or employee) must make reference to and ensure that the content of the policy is comparable with the relevant statutory or legal requirement and ethical standards

### **Data Protection Bill, General Data Protection Regulations (GDPR) and the NHS Code of Confidentiality**

GDPR replaces the EU Data Protection Directive of 1995 and supersedes the law of member states that were developed in compliance with the Data Protection Directive 95/45/EC. Its purpose is to protect the “right and freedom” of natural persons (i.e. living individuals) and to ensure that personal data is not processed without their knowledge, and, wherever possible, that it is processed with their consent.

Processing includes holding, obtaining, recording, using and disclosing of information and applies to all forms of media, including paper and images. It applies to confidential patient information but is far wider in its scope, e.g. it also covers personal records

While GDPR applies to both patient and employee information, the Confidentiality Code of Practice (COP) applies only to patient information. The COP incorporates, the requirements of GDPR and other relevant legislations together with the recommendations of the Caldicott report and medical ethics considerations, in some cases extending statutory requirements and provides detailed specific guidance.

### **Freedom of Information Act 2000**

The Freedom of Information Act 2000 (FOIA) is an Act which makes legal provision and creates a legal gateway and timetable for the disclosure, to the public, of the **majority** of corporate information held (but not necessarily created) by this Trust. The Trust has a legal responsibility to proactively provide a large amount of information to the public and to pro-actively respond to specific requests for information. Information will not be disclosed when the Trust can claim legal exemption. Any non-disclosure must be conveyed in writing; quoting the relevant exemption together with signposting to internal and external methods of complaint. Locally, guidance on the DPA, FOIA and COP can be obtained from the Information Governance Manager or the Caldicott Guardian.

## **Mental Capacity Act**

Any Trust policy which may affect a person who may lack capacity should comply with the requirements of the Mental Capacity Act 2005 (MCA)

The MCA and its associated Code of Practice provides the framework for making decisions on behalf of individuals who lack the mental capacity to do these acts or make these decisions for themselves. Everyone working with and/or caring for adults who lack capacity, whether they are dealing with everyday matters or life-changing events in the lives of people who lack capacity must comply with the Act.

In a day to day context mental capacity includes making decisions or taking actions affecting daily life – when to get up, what to wear, what to eat etc. In a legal context it refers to a person's ability to do something, including making a decision, which may have legal consequences for the person lacking capacity, or for other people.

The Code provides guidance to all those working with and/or caring for adults who lack capacity, including family members, professionals and carers. It describes their responsibilities when acting or making decisions with, or on behalf of, individuals who lack the capacity to do this for themselves. In particular, it focuses on those who will have a duty of care to a person lacking capacity and explains how the legal rules set out in the Act will work in practice.

## **The Health Act: Code of Practice for the Prevention and Control of Health Care Associated Infections**

The purpose of the Code is to help NHS bodies plan and implement how they can prevent and control HCAI. It sets out criteria by which managers of NHS organisations are to ensure that patients are cared for in a clean, safe environment, where the risk of HCAI is kept as low as possible. Failure to observe the Code may either result in an Improvement Notice being issued by the Care Quality Commission, or in the Trust being reported for significant failings and placed on 'Special Measures'.

The Code relates to healthcare provided by all NHS bodies. Each NHS body is expected to have systems in place sufficient to comply with the relevant provisions of the Code, so as to minimise the risk of HCAI to patients, staff and visitors.

The Trust Board must have an agreement outlining its collective responsibility for minimising the risks of infection and the general means by which it prevents and controls such risks.

Effective prevention and control of HCAI must be embedded into everyday practice and applied consistently by all staff.

## **Human Rights**

The Trust is committed to the principles contained in the Human Rights Act. We aim to ensure that our employment policies protect the rights and interests of our staff and ensure that they are treated in a fair, dignified and equitable way when employed at the Trust.

## **Sustainable Development**

The University Hospitals of North Midlands NHS Trust (UHNM) is committed to demonstrating leadership in sustainability and has a Trust Board approved Sustainable Development Management Plan (SDMP): Our 2020 Vision: Our Sustainable Future which sets out the route to developing a world-class healthcare system that is financially, socially and environmentally sustainable.

There are three 'Key Priorities' to aim for by 2020. With the help of employees, key partners and other stakeholders the trust will embed opportunities to:

1. Reduce our environmental impact, associated carbon emissions and benefit from a healthier environment;

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2. Improve the resilience of our services and built environment as a result of severe environmental and climatic changes;
3. Embed sustainable models of care and support our local community to be well-connected, healthy, resilient, independent and managing their lives in a positive way.

The SWITCH campaign is designed to achieve these priorities. It is relevant to all departments and all members of staff. The focus is on using resources sustainably in order to provide better patient care, improve health and our working environment

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## 1. INTRODUCTION

The arrangements described within this procedure have been agreed between the Trust and recognised staff organisations and are based on current employment legislation including ACAS and relevant Codes of Practice. Nothing in this policy or procedure can remove or change an employee's statutory rights.

## 2. POLICY STATEMENT

The University Hospitals of North Midlands aims to promote equality and diversity, and value the benefits this brings. It is our aim to ensure that all staff feel valued and have a fair and equitable quality of working life.

The policy supports the Trust's intention to promote a positive and harmonious working climate to maximise the individual contribution that each employee has to make. It also acknowledges the commitment of both management and staff side to maintain a positive and constructive industrial relations climate.

This policy should be read in conjunction with the following policy and procedure documents as appropriate:

- HR01 Disciplinary Policy & Procedure
- HR02 Dignity at Work Policy & Procedure
- HR06 Trust Policy for Recognition and Local Collective Bargaining Arrangements
- HR08 Recruitment & Selection Policy & Procedure
- HR12 Equality & Diversity Policy
- HR14 Sickness Absence Management Policy & Procedures
- HR29 Capability Policy
- HR30 Raising Concerns at Work (Whistleblowing) Procedure
- HR51 Flexible Working Policy

## 3. SCOPE

This policy applies equally to all Trust employees. It cannot be used to change NHS national agreements e.g. pay awards.

The Trust recognises that where an employee or group of employees are aggrieved about some aspect of their employment then conflict and loss of motivation can occur. The aim of this policy is to provide a framework of dealing promptly and fairly with employee complaints or concerns.

The policy is also designed to allow employees the opportunity to raise issues with managers beyond their immediate line manager if they do not feel that they are securing a satisfactory resolution at the local level.

Two different situations may occur where resolution of a grievance is sought either by an individual/ group of employees or recognised Trade Union officials. A separate procedure is used to manage each situation as follows:

### 3.1. General Grievances

General grievances could arise from situations where an individual or group of individuals is aggrieved at an action or decision taken, or about to be taken, by their manager which relates directly to the terms and conditions or circumstances of their employment, such as Health & Safety issues, work issues, working environment or formal dignity at work and bullying and harassment issues that have not been resolved by the informal process outlined in the dignity

at work policy (HR02). Appendix 1 describes the procedural arrangements for dealing with general grievances.

### 3.2. Disputes

Disputes are situations where there has been a breakdown in the working relationship between management and staff side as parties to joint consultation and negotiation. Appendix 3 of this policy describes the procedural arrangements for dealing with disputes.

## 4. **PRINCIPLES**

Managers and employees should raise and deal with issues promptly and should not unreasonably delay meetings, decisions or confirmation of those decisions.

Managers and employees should act consistently.

Managers should carry out any necessary investigations, to establish the facts of the case.

Managers should allow employees to be accompanied at any formal grievance meeting.

Managers should allow an employee to appeal against any formal decision made.

### 4.1. General Grievances

Wherever possible, managers and staff should make every effort to resolve issues of grievance or potential grievance informally at a local level before invoking the formal grievance procedure.

After the informal route has been exhausted and if it is not possible to resolve a grievance informally, employees should raise the matter formally and without unreasonable delay with a manager who is not the subject of the grievance. This should be done in writing, should set out the nature of the grievance and the resolution that they are seeking, alongside any supporting evidence. The matter should be raised formally within 2 weeks following notification of the informal grievance outcome, unless there are exceptional circumstances, to ensure that the grievance can be addressed promptly in the interests of maintaining a positive employee relations climate

Managers should arrange for a formal meeting to be held without unreasonable delay after a written grievance is received in line with the above.

Managers, employees and their companions should make every effort to attend the meeting. Employees should be allowed to explain their grievance and how they think it should be resolved. Consideration should be given to adjourning the meeting for any investigation that may be necessary.

Where an employee raises a grievance during a disciplinary process, the disciplinary may be temporarily suspended in order to deal with the grievance. Where the grievance and disciplinary cases are related, it may be appropriate to deal with both issues concurrently.

For those employees whose first language is not English or who have a disability, expressing themselves formally can be difficult. In these circumstances, Managers and Human Resources representatives should encourage individuals to seek help from a Trade Union or other employee representative or the Advisory, Conciliation and Arbitration Service (ACAS). Under the Equality Act 2010 Reasonable adjustments to Grievance Procedures must be made which may include assisting employees to formulate a written grievance if they are

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unable to do so because of a disability. In such circumstances advice should be sought from the Human Resources Directorate.

Where a complaint is maliciously raised on a regular basis, the manager must discuss the case with their Human Resources Team.

All information shared and discussed during Grievance processes shall be dealt with, with the appropriate level of confidentiality.

All parties agree that, where appropriate, status quo may be maintained until the grievance is resolved.

Reasonable adjustments will be considered for any employees or companions who have a disability.

It may be helpful to consider mediation if the issue cannot be resolved via the informal route of the grievance policy.

#### 4.2 Disputes

With the agreement of the parties, certain collective issues and/or potential disputes may be more appropriately considered under Human Resources joint consultative arrangements. The parties to this agreement are committed to the maintenance of appropriate joint consultative and negotiating machinery.

Any industrial action that may arise through a failure to resolve an issue through the procedures, or for any other reason, shall not endanger the welfare of patients.

#### 4.3 Additional Information

Nothing in this agreement shall take away any rights of appeal which are provided for in Agenda for Change NHS Terms and Conditions of Service Handbook, or Medical and Dental Terms and Conditions and observed in contracts of employment.

Nothing in this agreement shall be construed as restricting the right of employees to seek advice or assistance from a representative of his/her staff organisation, in accordance with their internal procedures.

### 5. **RESPONSIBILITIES**

#### 5.1 Responsibility of the Trust Board

The responsibility for the provision of the Grievance and Disputes Policy rests with the Trust Board. It is the responsibility of the Trust Board to ensure that the Policy is implemented through the Trust's line management structure.

#### 5.2 Responsibility of the Human Resources Directorate

It is the responsibility of the Human Resources Directorate:

- To provide support in the application of the policy in individual cases.
- To ensure that the Policy is continually reviewed and updated as appropriate.
- To promote fairness and give guidance to managers and employees as requested.

### 5.3 Responsibility of Managers

- It is the responsibility of Managers:
- To ensure that employees are made aware of the Grievance Policy and their responsibilities under the policy.
- To take timely, appropriate action to deal with grievances, balancing the needs of the individual(s) with needs of the service.
- To endeavour to resolve any grievance raised at the lowest level of the procedure possible.
- To keep written records during the grievance process.
- To consider the confidentiality of information before providing or discussing it.
- To inform their Human Resources Team when a formal grievance has been raised.

### 5.4 Responsibility of Employees

It is the employee's responsibility:

- To attempt to resolve the grievance as soon as possible by raising an issue normally with their Line Manager or an alternative Manager, where appropriate. Where an issue is with their Manager and it is inappropriate to raise the grievance directly, they should raise the grievance with the next level of management.
- To detail the nature of their grievance in writing at the formal stages to the appropriate Manager, along with the resolution that they are seeking and any supporting evidence.

### 5.5 Role of Staff Side

To negotiate, raise concern, or provide support on a member's behalf as necessary in relation to this policy.

## 6. **RIGHT OF ACCOMPANIMENT**

### Informal

At informal stages it is not usually necessary for employees to be accompanied. However should an individual ask to be accompanied this should not be unreasonably refused except in circumstances where this may result in unnecessary delays to the informal meeting taking place.

### Formal

At formal stages of the procedure, employees have the right to be accompanied by a companion. A companion is a member of their staff side organisation, trade union representative or an official employed by a trade union, or work colleague not acting in a legal capacity. There is no statutory right to be accompanied by anybody else who falls outside of this definition of a companion. A trade union representative who is not an employed official must have been certified by their union as being competent to accompany an employee. The HR department retains a list of Trade Union Officials that are accredited and certified as

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competent to accompany an employee. The employee must be notified of this right and then choose whether or not to exercise it. It is the employee's responsibility to make arrangements to be accompanied.

As a matter of good practice, employees should bear in mind the practicalities of the arrangements. For instance, an employee may choose to be accompanied by a companion who is suitable, willing and available on site rather than someone from a geographically remote location. Employees should inform the manager in advance the name of the companion where possible and whether they are a trade union official or representative or a staff side representative or work colleague.

In extraordinary circumstances the employee could send a representative, or representation can be made in writing during the formal stages of the procedure. Advice should be sought from Human Resources in such cases.

The availability of the staff representative should be considered when arranging the meeting. This would normally be within 5 business days. However, this limit may be extended by mutual agreement. After a 5 business day extension the Trust reserves the right to hold the meeting without the chosen representative present.

The companion should be allowed to address the hearing to put forward and sum up the employee's case, respond on behalf of the employee to any views expressed at the meeting and confer with the employee during the hearing. The companion does not, however, have the right to answer questions on the employee's behalf, address the hearing if the employee does not wish it or prevent the manager from explaining their case.

## **7. EDUCATION AND TRAINING**

The Trust will endeavour to provide education and training in the application of this policy as. Not all managers will need or be able to attend training but are required to observe the procedures of principles within the policy. Individual coaching and support will be given where necessary.

## **8. MONITORING AND REVIEW**

This policy will be monitored on an on-going basis via the central tracking system used in HR and will be formally reviewed for consistency on an annual basis.

This policy may be amended at any stage by joint agreement. In any event the policy will be reviewed and updated in line with any changes to legislation or as deemed necessary or in three years.

## **APPENDIX 1**

### **GRIEVANCE PROCEDURE (GENERAL GRIEVANCES)**

## 1. GRIEVANCE PROCEDURE

### 1.1 INFORMAL

When a grievance is raised by an employee or group of employees, every effort should be made to resolve the issue informally at the local level by the immediate line manager or supervisor. Dealing with an issue informally contributes greatly to achieving a harmonious climate for staff and managers to work together and early communication and discussion will resolve many potential issues before they become an obstacle to achieving our main priorities.

According to the nature of the issue, the initial stage(s) of the procedure may not be appropriate and an issue may be actioned at the next stage of the procedure that is most appropriate. For example, an individual(s) may not feel able to raise a grievance with their immediate line manager/ supervisor, particularly if the complaint is against them, in which case they should approach the line manager of their immediate line manager / supervisor. This informal stage will usually be dealt with by the employee and immediate line manager. If the matter is not resolved through an informal discussion with the manager, it may be helpful to consider mediation.

If the matter is not resolved informally after considering mediation, then the first stage of the formal procedure should be followed.

Details of the mediation process are outlined in the Trust's Dignity at Work policy (HR02). For the purposes of clarity, the approach will be utilised from HR02, however, any mediation carried out following an informal grievance will be classed as mediation under this grievance policy (HR03)

### 1.2 FORMAL STAGE 1

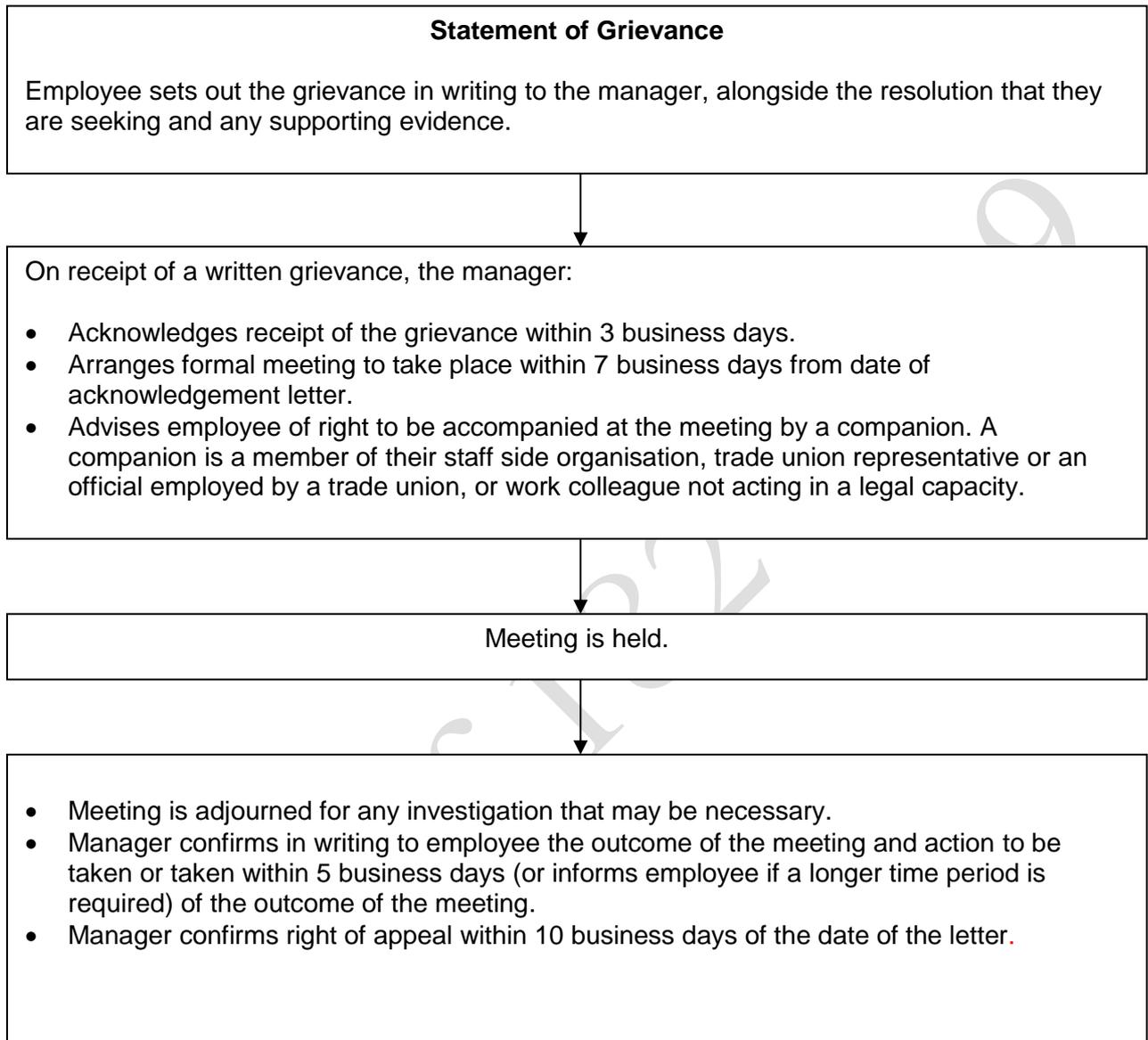
Upon receipt of a written grievance the manager (or manager's manager if the grievance has been raised through the informal route with the line manager or it is not appropriate because the manager is the subject of the grievance) should:

- Acknowledge receipt of the grievance (within 3 business days).
- Arrange a date for a formal meeting to take place (within 7 business days from date of acknowledgement letter)
- Advise the employee(s) of their right to be accompanied (see section 6, right of accompaniment).
- At the meeting the Directorate Manager/Head of Department or Equivalent will discuss the matter with the employee(s) and seek to resolve it.
- If no agreement can be reached, the following action should be taken:-
- The meeting is adjourned for any investigation that may be necessary.

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- Details for conducting investigations are outlined in the Trust's Disciplinary Policy (HR01).
- For the purposes of clarity, the framework will be utilised from HR01, however, any investigations conducted in relation to a grievance will be classed as an investigation under this grievance policy (HR03).
- Where a grievance has been raised, the roles of investigator and decision maker may be combined. In many cases, matters raised in a grievance may be resolved more satisfactorily if the person investigating the issue also hears the grievance.
- Many investigations may be conducted without removing an employee from their typical working environment.
- On occasions, an employer may need to consider taking a temporary measure while an investigation is conducted. Further details of these measures are outlined under the Separation section of the Trust's Disciplinary Policy & Procedure (HR01). For the purposes of clarity, the principles will be used from HR01; however, any separation arrangements in relation to a grievance will be classed as separation under this grievance policy (HR03).
- The manager confirms in writing to the member(s) of staff the outcome of the meeting and any action, if any, to take or that has been taken to resolve the grievance (within 5 business days of the meeting).
- Please note that employees will be informed if a longer time period is required depending on complexity of the issue and length of the investigation required to review the matter fully. However, every effort will be made to ensure that decisions are communicated to the employee, in writing, without unreasonable delay.
- The manager must also confirm the right of appeal to be lodged within 10 business days of the date of the letter.
- A copy of an audio-recording will be available upon request where meetings are recorded. If the meeting is to be recorded, it is good practice to agree this with all concerned at the commencement.

### Formal Stage 1 Meeting



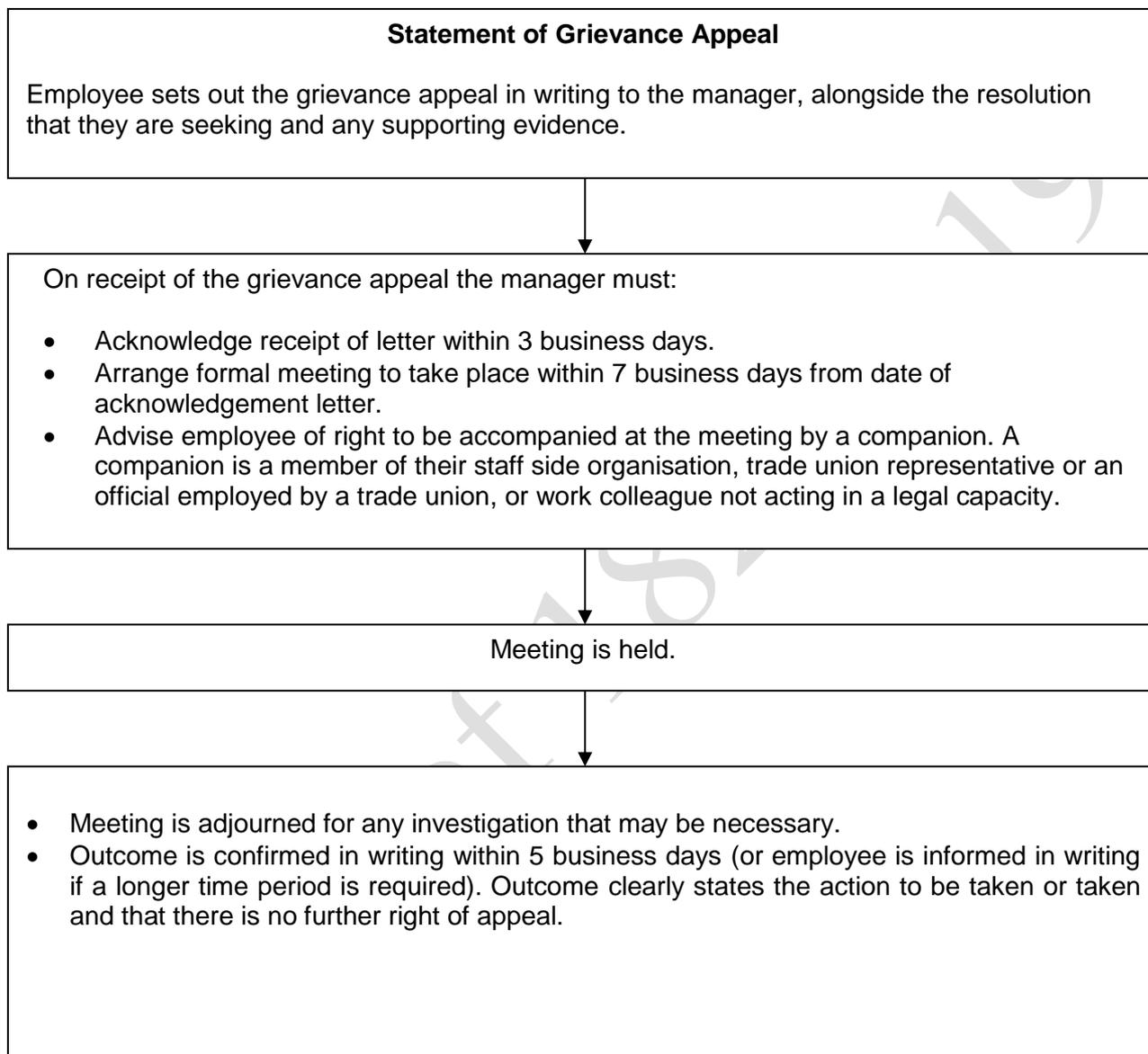
### 1.3 FORMAL STAGE 2 - APPEAL

If the member of staff is dissatisfied with the outcome of the 1st formal stage they may appeal to the next level of management. This appeal letter should have attached to it all documents and information that made up the employee's case so far, alongside the specific reasons for the appeal and any additional supporting evidence or information.

To whom the appeal is to be addressed will be clearly laid out in the outcome letter but it is likely to be in most circumstances the manager of the manager who chaired the formal stage one meeting or a manager at an equivalent level (unless it is not appropriate if the manager is the subject of the grievance), who shall seek to resolve the grievance through a formal meeting with the employee(s). Upon receipt of the appeal letter the following action must be taken:

- Acknowledge receipt of the letter (within 3 business days).
- Arrange a date for a formal meeting to take place (within 7 business days from date of acknowledgement letter). The manager should contact their HR team if they wish a HR representative to be present.
- Advise the employee(s) of their right to be accompanied (see section 6, right of accompaniment).
- At the meeting the manager will discuss the matter with the employee(s) and seek to resolve it.
- The manager hearing the appeal will also be allowed to call into the meeting persons he/she feels would be beneficial in clarifying the facts of the case so far. Please note that HR's role in the formal stage two grievance meeting is to ensure that the meeting is conducted in a fair and consistent manner in line with the Trust's HR policies and terms and conditions of employment. Therefore, any questions about the decision should be directed towards the grievance chair and questions about the HR process to the HR person involved.
- The meeting may be adjourned for any investigation that may be necessary.
- The manager confirms in writing to the member(s) of staff the outcome of the meeting and the action taken (within 5 business days).
- Please note that employees will be informed if a longer time period is required depending on complexity of the issue and length of the investigation required to review the matter fully. However, every effort will be made to ensure that decisions are communicated to the employee, in writing, without unreasonable delay.
- This is the final stage of the grievance process and there is no further right of appeal.
- A copy of the audio-recording will be available upon request where meetings are recorded.
- If the interview/hearing is to be recorded, it is good practice to agree this with all concerned at the commencement.

### Formal Stage 2 Appeal



## **APPENDIX 2**

## **DISPUTES PROCEDURE**

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## 2. DISPUTES PROCEDURE

A dispute arises where there is a breakdown between management and staff side (or its constituent Trade Unions) on issues affecting employees terms and conditions of employment which have been the subject of joint discussions or negotiation.

If at any stage an individual or group grievance becomes the subject of joint negotiation and the grievance process breaks down, it may be agreed that the issue would be more appropriately handled under the Disputes procedure. This would normally be on the basis of a request from the Trade Union(s) involved.

If it is not possible to resolve the issues informally with managers and representatives at the local level (Stage 1), the matter should be registered formally as a dispute with the relevant Senior Manager (Stage 2). At this stage the Director of Human Resources and relevant full time officers should be advised.

The Senior Manager, will seek to resolve the issue in discussion with the relevant manager and staff side representatives with the aim of reaching a satisfactory joint agreement on the issues. Full account will be taken of information put forward by both sides in support of their respective views and proposals on the issue in question and, if appropriate, written statements may be required and exchanged prior to the meeting.

If no satisfactory agreement is reached, the matter may be referred to a Clinical Director/Executive Director (Stage 3) who will seek to resolve the issue within a specified timescale.

If no agreement is reached at stage 3 the matter will then be referred to the Chief Executive (Stage 4). In these circumstances, the relevant full-time officer will be asked to confirm to the Director of Human Resources the wish to progress the matter to this stage.

If the matter remains unresolved, either side may refer the matter to ACAS (Stage 5), with the terms of reference being jointly agreed. These terms of reference may include conciliation, mediation or arbitration.

## **APPENDIX 3**

### **SCHEDULE OF RESPONSIBILITIES**

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**SCHEDULE OF RESPONSIBILITIES**

<b>GRIEVANCE PROCEDURE - GENERAL GRIEVANCES</b>	
<b>INFORMAL</b>	Immediate Line Manager/Supervisor
<b>FORMAL STAGE 1</b>	Manager of Line Manager/Supervisor or equivalent level (if not appropriate if the manager is the subject of the grievance) (HR attendance can be requested)
<b>APPEAL STAGE 2</b>	Manager of the grievance chair for formal stage one or equivalent level (if not appropriate if the manager is the subject of the grievance) and HR representative previously not involved

<b>DISPUTES</b>	
<b>STAGE 1</b>	Immediate Line Manager/Supervisor
<b>STAGE 2</b>	Associate Director/CD or Equivalent Senior Manager and HR representative previously not involved
<b>STAGE 3</b>	Clinical Director/Executive Director
<b>STAGE 4</b>	Chief Executive and one executive Director
<b>STAGE 5</b>	ACAS

## **APPENDIX 4**

### **STANDARD LETTER CONFIRMING RECEIPT OF GRIEVANCE**

**Standard letter confirming receipt of a formal grievance**

Dear (name)

**Grievance – Stage x**

I write to confirm that your notification of Grievance has been received and will be dealt with at Stage (X) of the Trust's Grievance Procedure by (name, job title). A copy of the Grievance and Disputes Policy can be found on the intranet by clicking here OR I have attached / enclosed a copy of the Grievance and Disputes Policy and Procedures for your reference .

A meeting has been arranged to take place on (date) at (time) in (location). Please confirm your attendance by contacting (Name) on extension ( #).

You may be accompanied by a trade union representative, or colleague not acting in a legal capacity and I would be grateful if you can let me know if you will be bringing someone with you to the meeting.

Please let me know if there are any special requirements or reasonable adjustments required for yourself or your companion and I will review appropriate arrangements.

I will be chairing the meeting. (Name – Adviser/Deputy/Human Resources Manager) will attend the meeting to ensure that it is held in a fair and consistent manner in line with the Grievance and Disputes Policy and Procedure (HR03). (Name – Job title) will also attend as a note-taker and / or the meeting will be recorded.

After investigation and consideration of all the facts, I will respond to your grievance within 5 business days of the meeting. You will be consulted with if a longer time period is necessary, however, we will aim to resolve this matter as soon as possible.

I hope that we will be able to reach a mutually satisfactory outcome. In the meantime, I would be grateful if you would provide any further details of your grievance in order that they can be given due consideration prior to the Stage (X) meeting taking place.

The Trust recognises that being involved in this process can be difficult, but there is a variety of help available through our: Staff Counselling Service, who can provide confidential counselling and support, Occupational Health and Employee Support Advisors ((INSERT LATEST CONTACT DETAILS FOR THESE SERVICES)).

If you have any queries, please do not hesitate to contact me on tel.....

Yours sincerely

(name)  
(title)

cc HR Representative, Trade Union Representative (if attended)  
bcc Personal File

## **APPENDIX 5**

### **STANDARD LETTER CONFIRMING OUTCOME OF GRIEVANCE MEETING**

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## Outcome of Grievance Meeting

Dear (name)

### Outcome of Grievance Meeting – Stage (X)

I am writing to confirm the outcome of the Stage (X) meeting held under the Trust's Grievance and Disputes Policy and Procedure, on (date) to discuss (state issue of concern). You were accompanied by ..... The key points discussed during the meeting are outlined in this letter.

After a full discussion and due consideration of the facts, my conclusions are as follows (give details).

ENTER DETAILS HERE

I therefore confirm my decision to \* (reject/uphold your grievance for the following reasons (state reasons) \*/ suggest the following solution (give details of the suggested course of action/persons responsible/timescales/conditions etc).

[Delete the following as appropriate, subject to whether the grievance outcome is at stage one or stage 2]

In accordance with the Trust's procedures, following stage one of the grievance process, you do have the right to appeal against this decision. Any such appeal should be made in writing, stating the grounds for appeal, and be sent to (insert managers' name) within 10 business days from the date on this letter.

Please let the appeal manager know if there are any special requirements or reasonable adjustments required for yourself or your companion and they will review appropriate arrangements.

OR

In accordance with the Trust's procedures, stage two is the final stage that concludes the grievance process and there is no further right of appeal.

The Trust recognises that being involved in this process can be difficult, but there is a variety of help available through our: Staff Counselling Service, who can provide confidential counselling and support, Occupational Health and Employee Support Advisors (INSERT LATEST CONTACT DETAILS FOR THESE SERVICES).

If you have any queries about the content of this letter, please do not hesitate to contact me.

Yours sincerely

(name)  
(title)

cc HR Representative, Trade Union Representative (if attended)  
bcc Personal File

**Policy approval**

I have reviewed and approve this policy in line with the Trust's formal governance process on the basis that this was ratified at the Trust Joint Negotiating & Consultative Committee (TJNCC) 21<sup>st</sup> September 2017:

Signatures

Signed (Staff side representative): \_\_\_\_\_

Name printed: \_\_\_\_\_

Role: \_\_\_\_\_

Date: \_\_\_\_\_

Signed (Management side representative): \_\_\_\_\_

Name printed: \_\_\_\_\_

Role: \_\_\_\_\_

Date: \_\_\_\_\_

Please note that this policy is subject to further compliance review and there may be further minor changes that will not affect the material content of the policy ratified at TJNCC. These changes will be referenced in the version control section of this policy.