

LEAD EMPLOYER GRIEVANCE POLICY AND PROCEDURE

Code:	
Policy Sponsor	Deputy Director of HR
Lead Executive	Director of Human Resources
Approved by:	LNC
Date Approved:	11.01.2018
Ratified by:	Workforce Council
Date Ratified :	24.01.2018
Author(s):	HR Project Manager
Date issued:	
Review date:	31.01.2020
Target audience:	All management and staff including Trainees in the Lead Employer, Host Organisations and the Health Education England
Document purpose	To set out the measures the Lead Employer Service has put in place to try and ensure that grievances raised by Trainees are dealt with in a fair and consistent manner
Training requirements	Host Organisations and Universities will be encouraged to provide an environment for Trainees to work in which helps to ensure a sense of well being. However it is recognised that Trainees will have concerns and therefore clinical supervisor/managers will be guided and coached in dealing with these in a fair, consistent and reasonable manner when grievances are raised. Trainees will also be made aware of this policy.
Associated documents and Key References	<p><u>External</u></p> <p>Equality Act 2010 Ref 1 ACAS Code of Practice – Disciplinary and Grievance Procedures Ref 2</p> <p><u>Internal</u></p> <p>Lead Employer Respect at Work Policy Ref 3 Lead Employer Raising Concerns at Work Policy Ref 4 Disciplinary Policy and Procedure Ref 5 Attendance Management Policy – Lead Employer Ref 6 Disciplinary Policy and Procedure – Lead Employer (Ref 7)</p>
Financial Resource Implications	No additional resources required

Consultation, Communication and Implementation

Consultation Required	Authorised By	Date Authorised	Comments
Equality Impact Assessment	HR Project Manager		
External Stakeholders	N/A		
Lead Employer Staff Consultation via Intranet	Start date: January 2018		End Date: January 2021

Describe the Implementation Plan for the Policy (and guideline if impacts upon policy) (Considerations include; launch event, awareness sessions, communication / training via Divisions and other management structures, etc)	By Whom will this be Delivered?
This policy will be communicated to Trainees via the Lead Employer internet and will be communicated in more detail to managers by the Lead Employer HR Service Managers.	Lead Employer Head of HR, HR Service Managers

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Monitoring Compliance with the Policy

Describe Key Performance Indicators (KPIs)	Target	How will the KPI be Monitored?	Which Committee will Monitor this KPI?	Frequency of Review	Lead
Compliance with policy by line management	100%	HR management will monitor the conduct of individual cases and review any concerns raised by managers and/or trade union representatives.	Workforce Council	Annual	Deputy Director HR

Performance Management of the Policy

Who is Responsible for Producing Action Plans if KPIs are not met?	Which committee will monitor these action plans?	Frequency of Review (To be agreed by Committee)
HR Service Managers	Workforce Council	Quarterly

How will Learning occur?	Who is responsible
	HR

Document Version History

Date		Author Designation	Summary of key changes
October 2013	1	HR Project Manager	First version of the new policy therefore N/A
February 2016	2	HR Project Manager	Inclusion of Student Physician Associates
May 2016	3	HR Project Admin	Updated HEE references and contact number for Annette Craghill
April 2017	4	HR Project Admin	Extended review date to Oct 2017
June 2017	5	HR Project Admin	Amended section 5.4 and final box of Appendix 2b
Sep 2017	6	HR Project Admin	Review date extended to Dec 2017
Oct 2017	7	HR Project Admin	Review date extended till 31.01.17
December 2017	8	HR Business Partner	5.1, 5.8 & 5.9

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Executive Summary

1. Policy Aim

The aim of this policy is to ensure that all grievances are dealt with in a fair, consistent and reasonable manner throughout the Trust as Lead Employer ('the Trust') and that all clinical supervisors/managers and trainees know what to do when a grievance arises.

2. Policy Description

The Lead Employer recognises that trainees may have concerns, problems or complaints concerning their employment that they wish to raise with management and this policy sets out the rights and responsibilities of managers/clinical supervisor and trainees when handling such situations. The policy lays down both the informal and the formal mechanisms to deal with such grievances.

SECTION 1

1. Introduction

This policy is designed to help ensure that trainees are treated in a consistent, fair and reasonable manner during the grievance process and has been devised taking into account the statutory requirements of the [ACAS Code of Practice – Disciplinary and Grievance Procedures \(Ref 2\)](#) in reference to individual grievances.

This procedure applies to all trainees including non-medical Public Health Trainees, Student Physician Associates and covers both individual and collective grievances. While Trainees are employed by the Trust as the Lead Employer there will be instances where individual managers/clinical supervisor in host organisations or the Health Education England are better placed to hear a grievance raised (see Appendix 2). Any appeal within the Lead Employer will be held by a member of the Trust's management. Nothing in this policy applies to independent contractors or agency/locum staff working for the Trust under a contract for services.

This policy is not applicable to individual banding concerns which are covered by paragraph 22.1 of trainees' Terms and Conditions of Service which lays down an agreed appeals procedure.

Whilst it is envisaged that most grievances will be resolved satisfactorily by informal discussion, it is recognised that all trainees have the right to seek redress for a grievance. This policy should be read in conjunction with the Trusts Lead Employer [Respect at Work Policy \(Ref 3\)](#) and Lead Employer [Raising Concerns at Work Policy \(Ref 4\)](#).

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This policy does not address issues relating to

- Disciplinary matters, which will be dealt with in line with the [Disciplinary Policy and Procedure – Lead Employer \(Ref 7\)](#)
- The outcome of attendance management stage or level meetings which will be dealt with in line with the [Attendance Management Policy – Lead Employer \(Ref 6\)](#)

In cases where a grievance leads to an allegation of misconduct the matter will be dealt with under the Trust's [Disciplinary Policy and Procedure \(Ref 5\)](#) or [Disciplinary Policy and Procedure – Lead Employer \(Ref 7\)](#) or the [disciplinary policy of the Host Organisation as appropriate](#).

The Trust recognises its legal duty under the [Equality Act 2010 \(Ref 1\)](#) to make reasonable adjustments to working arrangements as appropriate in relation to the operation of this policy.

For avoidance of doubt this procedure does not form part of any trainee's contract of employment.

2. Policy Objectives

The objectives of this policy are to ensure that the Trust:

- Has a laid down procedure to be followed when trainees individually or collectively raise a grievance.
- Encourages grievances to be settled in the shortest time before they develop into major concerns, as near as possible to the point of origin, whilst allowing trainees the opportunity for appealing to a higher level if necessary.
- Is legally compliant and adheres to the [ACAS Code of Practice-Disciplinary and Grievance Procedures \(Ref 2\)](#) which is applicable to individual grievances under this policy.
- Treats its trainees in a consistent, fair and reasonable manner.
- Promotes the policy within the Trust, Host Organisations and the Health Education England.

3. Definitions

Trainees - Specialty Trainees which includes the following:

- Core trainees
- Specialist Registrars
- Specialty Registrars
- Fixed Term Specialty Training Appointments

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- Locum Appointments for Training
- SHO (Oral and Maxillo Facial Surgery)
- Medical and Dental Public Health Specialty Registrars
- Non-medical Public Health Specialty Registrars
- Student Physician Associates

Thereafter, referred to as the 'trainees'.

Host Organisation – the location where the Trainee is undertaking their on the job training NB where the term is used in this policy it should be regarded as including Sponsoring Organisations for Trainee Physician Associates.

Grievances - are concerns, problems or complaints that employees raise with their employers.

Status Quo - the working and management arrangements that apply prior to a collective grievance being lodged. The status quo will normally apply until the agreed grievance procedure has been exhausted and the completed proceedings indicate otherwise. However in exceptional circumstances e.g. dangerous working practices, danger to staff, patients or the general public and/or breach of statute it may be necessary to take interim appropriate action.

Right to be accompanied - Trainees have a statutory right to be accompanied where they are required or invited by their employer to attend certain disciplinary or grievance meetings. The chosen companion may be a fellow worker, a trade union representative, or an official employed by a trade union. The companion should be allowed to address the hearing to put and sum up the trainees' case, respond on behalf of the worker to any views expressed at the meeting and confer with the trainee during the hearing. The companion does not, however, have the right to answer questions on the worker's behalf, address the hearing if the trainee does not wish it or prevent the employer from explaining their case.

In the case of Student Physician Associates while on academic placements in University the manager is the individual designated as such by the University Programme Director. This applies to the term throughout this policy

SECTION 2

4. Duties, Accountabilities and Responsibilities

4.1 The Chief Executive

The ultimate responsibility in the area of performance and legislative

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adherence lies with the Chief Executive.

4.2 Board of Directors

The Board of Directors are responsible for ensuring that the policy is being adhered to both collectively and by the management and trainees in their area of responsibility. The Director of Human Resources has Board level responsibility for ensuring that this policy applies to all levels within the organisation and that the policy is followed fairly and consistently. In addition they must ensure that grievances are addressed in a fair, equitable and reasonable manner. The monitoring of the impact of the policy will be delegated to the Workforce Council and LELNC and the auditing to the HR management team however the HR Director and Workforce Council will highlight any areas of significant shortfall identified to the Governance Board (a sub committee of the Board).

4.3 Director of Human Resources

The Director of Human Resources has a responsibility to ensure all legislation in this area and the [ACAS Code of Practice - Disciplinary and Grievance Procedures \(Ref 2\)](#) is adhered to. Specific responsibility for areas such as auditing and monitoring may be delegated by the Director of HR to particular individuals within the function but the final responsibility remains with the Director. The senior management team in Lead Employer HR are responsible for escalating any areas of concern following monitoring to the HR Director who where necessary will highlight to the Board. In addition they must ensure that the requisite coaching and guidance is provided for clinical supervisors/managers throughout the grievance procedure.

4.4 Clinical Supervisor/Manager

Clinical supervisors/managers must ensure that:

- Once a grievance has been raised that it is dealt with quickly and as near as possible to the point of origin while ensuring fairness to all involved to ensure that working relationships are maintained. Given that a grievance may involve the Host Organisation or Health Education England or the University for Student Physician Associates or the Trust as Lead Employer the Clinical supervisor/manager to whom the grievance is addressed must liaise with the Lead Employer HR Service Manager to determine who is best placed to deal with it (see Appendix 2).
- Grievances are considered and managed in a fair, consistent and reasonable manner.
- Trainees are informed of this policy and its operation.

- If appropriate trainees are offered the opportunity to receive additional support from the Health, Work and Well Being Department.

NB Managers involved in the processes associated with this policy may be from the Lead Employer, host organisations, universities or Health Education England dependent on the nature of the grievance raised.

4.5 Specialty Trainees

All trainees must:

- Endeavour to resolve issues informally whenever applicable.
- Ensure that if it is not possible to resolve a grievance informally that they raise the matter formally without unreasonable delay with a clinical supervisor/manager who is not the subject of the grievance.
- Follow the policy and procedure when raising a grievance.

4.6 Lead Employer Human Resources Staff and Management

HR Head of HR, Service Managers must:

- Ensure that clinical supervisor/managers are provided with appropriate advice and guidance on this policy, including training and coaching as required.
- Provide support to clinical supervisor/managers in individual cases as necessary.
- Liaise with clinical supervisor/manager(s) involved to determine who is best placed to deal with the grievance i.e. a member of the host management or a member of the Health Education England management team or a member of the Trust's management team as Lead Employer (Appendix 2).
- Be present in an advisory capacity at Stage 2 and at any subsequent appeal at Stage 3.
- Review the workings of this policy when shortfalls are identified

NB Some of these responsibilities maybe delegated to the local HR department.

4.7 Trade Union Representatives or Work Based Colleagues

The Trust recognises that Trainees may wish to seek advice and be accompanied by their trade union, professional body or a work based colleague. All Trainees have the right to be accompanied at all formal grievance hearings by an accredited Trade Union representative or a workplace colleague. Where reference is made in the procedure to an accredited Trade Union Representative this should also be taken to mean full-time official as appropriate. The trade union representatives must therefore:

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- Familiarise themselves with this policy and procedure
- Advise members in accordance with this policy and procedure
- Endeavour to resolve issues informally whenever applicable
- Agree a reasonable amount of time off to fulfil their responsibility of employee representation

4.8 Workforce Council

The HR Council are responsible for monitoring the impact of the policy including any resulting equality issues on behalf of the Board. Any issues of significant concern must be escalated up to the Board.

5. Main Policy Information – Process and Procedure

5.1 Informal Process

This stage is considered key to an effective and progressive dispute resolution culture.

Where possible, all trainees should endeavour to raise any grievance as early as possible and resolve any grievance directly with the person concerned through informal discussions. If either party has any concerns that this is the appropriate action to take, advice can be obtained from the Lead Employer HR department.

Submission of a written complaint will not necessarily invoke the formal stage of this policy. A discussion with the Lead Employer HR Department will be required in order to decide on the most appropriate course of action.

If a satisfactory outcome is received then this is the end of the matter. However, should the matter remain unresolved then the formal stages of the procedure should be followed.

Details of any informal discussions must be entered onto the trainee's personal file unless mutually agreed as being of insufficient significance (NB if in doubt advice should always be sought from the Lead Employer HR department).

5.2 The Formal Procedure - Stage 1

The aggrieved trainee(s) should write to their clinical supervisor/manager (unless the grievance is against their clinical supervisor/manager personally) advising that they are raising a formal grievance. The letter should state the nature of the grievance and the reason why they are dissatisfied.

Once a grievance is raised by a Trainee the clinical supervisor/manager will liaise with the Lead Employer HR to agree who is best placed to deal with this grievance i.e. a member of the host management/clinical supervisor team/ university management team or a member of the Health Education England management team or a member of the Trust's management team as Lead Employer (Appendix 2).

In some cases where the issue raised is within the host organisation nevertheless it may not be appropriate for the clinical supervisor/manager to hear the grievance, for example, if the grievance is against them. In this instance, another clinical supervisor/manager at same level should hear the grievance unless all parties agree that the next level of manager should hear the grievance. This will still be regarded as stage 1 of the procedure.

Upon receipt of this letter the appropriate clinical supervisor/manager should notify the trainee, in writing, that a hearing has been arranged. The hearing should take place within 14 calendar days of receipt of the grievance subject to shift arrangements and leave. The right to be accompanied and to call witnesses must be included in the letter (NB any witnesses to be called must be notified to the clinical supervisor/manager in advance of the day of the hearing).

If there is any relevant paperwork that the trainee intends to use to support their grievance which has not been sent with the grievance letter this must be sent to arrive with the clinical supervisor/manager within 3 calendar days of the date of the grievance hearing.

Attendees at the hearing will be the trainee(s) who has raised the grievance, their representative or workplace colleague, and the clinical supervisor/manager hearing the grievance. Witnesses maybe called if required (if applicable this will include the person who the grievance is against). A HR representative is not required to be present. Managers will have access to a guidance sheet laying out the structure of the Grievance hearing to follow and within this; managers are reminded that they may adjourn the hearing if they require any further information or advice on the process from the Lead Employer HR Department.

The decision will normally be announced immediately following the hearing. Whenever this is not possible, the trainee will normally be advised of the decision by the clinical supervisor/manager within 10 calendar days unless extensive investigation is required. The clinical supervisor/manager will write to the trainee to confirm the decision enclosing a copy of the notes from the hearing within seven calendar days of the hearing or if applicable from the date of the decision being subsequently verbally communicated.

If the trainee(s) remains dissatisfied they should write to Lead Employer Head of HR stating they are pursuing their grievance under Stage 2 of the procedure and the reasons for their continuing grievance. This should be

done within 7 calendar days of written confirmation of the outcome of the Stage 1 hearing being sent.

5.3 The Formal Procedure - Stage 2

Upon receipt of this letter the Lead Employer Head of HR should liaise with the host organisation to agree who is best placed to deal with this grievance i.e. a member of the host management e.g. clinical director, or GP partner or manager or a member of the Health Education England management team or a member of the Trust's management team as Lead Employer (Appendix 2). The individual hearing the grievance at Stage 2 will normally be a more senior individual than the person who heard the Stage 1 hearing and from the same organisation (i.e. Lead Employer, host organisation or Health Education England) as the person who heard the Stage 1 (NB it will never be the same person that heard the Stage 1).

The individual Deputy Medical Director or nominated deputy (e.g. clinical director)/ GP Partner/senior manager agreed to hold the grievance will notify the Trainee, in writing, that a hearing has been arranged. The right to be accompanied and to call witnesses must be included in the letter.

The hearing should take place within 14 calendar days of receipt of the grievance subject to shift arrangements and leave. If there is any additional relevant paperwork that the trainee tends to use to support their grievance which has not been sent with the grievance letter this must be sent to arrive with the line manager within within 3 calendar days of the date of the grievance hearing.

At the meeting will be the Deputy Medical Director or nominated deputy / GP Partner/senior manager hearing the grievance and the Lead Employer HR Service Manager in an advisory capacity only, the person who has raised the grievance and their trade union representative or workplace colleague. If necessary the clinical supervisor/manager who heard the stage 1 hearing should attend as a witness.

The decision will be made by Deputy Medical Director or nominated deputy / GP Partner/senior manager hearing the grievance after discussion with the HR representative (if present) and will normally be announced immediately following the hearing. Whenever this is not possible, the trainee will normally be advised of the decision by the deputy medical director/manager or nominated deputy within 10 calendar days unless extensive investigation is required. The Deputy Medical Director or nominated deputy / GP Partner/senior manager will write to the trainee to confirm the decision enclosing a copy of the notes from the hearing within seven calendar days of the hearing or if applicable from the date of the decision being subsequently verbally communicated.

Should the trainee(s) remain dissatisfied following the outcome of the previous stages of the procedure, they have the right to appeal. To exercise this right, they should write to the Lead Employer Head of Human Resources within 7 calendar days of the written confirmation of the outcome of the Stage 2 hearing being sent, advising they wish to appeal against the decision and setting out the reasons for their appeal.

5.4 The Formal Procedure - Stage 3 Appeal

Upon receiving the written notification, the Lead Employer Head of Human Resources will convene an Appeal Hearing. This will consist of the Lead Employer Medical Director or deputy and the Lead Employer Head of HR or Assistant Director HR – Lead Employer in an advisory capacity. If a representative of the host organisation or university or Health Education England heard the Stage 2 hearing then normally another individual from that organisation not previously involved in the process should also attend the hearing in an advisor capacity. None of these managers should previously have been involved in the grievance at any earlier stage.

Where the appeal is process is being utilised as the final stage (Level 3) of the Work Schedule Review process under Schedule 5 of the junior doctors' 2016 TCS the Director of Medical Education (DME) or nominated deputy must also be present as a member of the panel. Where the doctor is appealing a decision previously taken by the guardian of safe working hours, the hearing panel will also include a representative from the BMA or other recognised trade union nominated from outside the employer/host organisation. NB See paragraphs 27 to 33 of Schedule 5 of the 2016 TCS for more detail.

5.5 Conduct of Hearings

Prior to the hearing the clinical supervisor/manager should familiarise themselves with the relevant paperwork including the trainee's letter(s) and any notes from any previous hearings. They should also ascertain in liaison with Lead Employer HR whether similar grievances have been raised before, how they have been resolved, and any follow-up action that has been necessary. This is to try and ensure consistency of treatment.

Particularly in complex cases where the clinical supervisor/manager is holding the hearing alone consideration should be given to arranging for someone who is not involved in the case to take a note of the meeting. This individual should play no active part in the hearing.

A grievance hearing is an occasion when discussion and dialogue may lead to an agreeable solution (see Appendix 1). Therefore the clinical supervisor/manager will invite the Trainee, the trade union representative, or work colleague to re-state the grievance and how they would like to see it resolved. The clinical supervisor/manager can put questions to the trainee

which the trainee should answer on their own behalf. Any witnesses should be then be invited in to be heard and questions can be put by both the clinical supervisor/manager and the trainee or their trade union representative/work colleague. The trainee or their trade union representative/work colleague will then be invited to sum up their case.

At any time during the hearing the trainee or their trade union representative/work colleague can seek an adjournment to confer about their case.

Clinical supervisors/managers holding a grievance hearing should put care and thought into resolving the grievance. Consideration should be given to adjourning the hearing if it is necessary to investigate any new facts which arise.

The hearing should always be adjourned before a decision is taken about how to deal with the trainee's grievance to allow time for reflection and proper consideration. This also allows for any further checking of any matters raised. After this final adjournment the clinical supervisor/manager should sum up the main points and inform the trainee of the outcome.

Alternatively in exceptional circumstances where more investigation or consideration is required the manager can tell the trainee when they might reasonably expect a response if one cannot be made at the time, This should be no later than 10 calendar days from the original hearing unless agreed by both parties.

5.6 General Points

At the conclusion of each formal stage of the procedure the clinical supervisor/manager conducting the hearing must confirm their decision to the trainee(s) in writing within 7 calendar days of the outcome of the hearing being reached. The letter should also record any terms of agreement reached in resolving the grievance. Where the trainee's grievance is not upheld the reasons must be carefully explained. At stage two of the procedure, the letter should also state the trainee's right to appeal.

When a grievance is resolved that requires some form of management action, the clinical supervisor/manager who heard the grievance must ensure that such action is implemented as agreed.

The timescales detailed in this policy are to ensure meetings are held without unreasonable delays however trainees will not be excluded from a fair process due to minor breaches of the time limits. All grievances should be dealt with as quickly as possible, and the time limits given within this procedure should be regarded as the maximum time that should be required at each stage. However, where circumstances dictate, both parties may agree to an extension of these time limits.

Where appropriate, with agreement matters can be dealt with at a higher stage without recourse to intermediary levels.

All parties to the grievance must observe complete confidentiality at all times.

At the formal stages a grievance should be raised in writing. However in exceptional circumstances it is not essential that a complaint be in writing initially for it to be dealt with. If a trainee has difficulty setting out a grievance in writing then assistance will be made available e.g. trainees whose first language is not English, or have a disability. Trainees who require this assistance should contact their trade union or the Lead Employer HR department.

5.7 Collective Grievances

Where the grievance concerns a group of more than two trainees, the group must nominate two members to represent them at any stage during the procedure. This is in addition to any accredited trade union representative they may choose to have accompanied them. A Lead Employer HR Service Manager/Manager should always be present during collective grievance meetings/hearings unless the matter is delegated to an HR colleague from the host organisation.

With such grievances if requested the status quo will normally apply until the agreed grievance procedure has been exhausted and the completed proceedings indicate otherwise. However in exceptional circumstances e.g. dangerous working practices, danger to staff, patients or the general public and / or breach of statute it may be necessary to take appropriate interim action.

5.8 Raising a grievance during a disciplinary process

In exceptional circumstances, where an employee raises a grievance at any stage of the disciplinary procedure, a decision will be made as to whether the proceedings should be suspended until such time as the grievance is resolved. A decision will be made based on the seriousness of the allegations and whether or not they make it inappropriate for the disciplinary procedure to continue until the grievance outcome is known. In most cases, the two procedures will run parallel.

5.9 Grievances raised by former employees

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Where a trainee wishes to raise a grievance after their employment with the Lead Employer has ended, the trainee should submit their grievance in writing to the Lead Employer HR Department. The Lead Employer will respond to the points raised within the letter in writing within 14 calendar days.

6. Monitoring & Compliance

The Lead Employer HR Service Managers / HR Business Partner are responsible for the monitoring of compliance to ensure the effective use of the policy and enable action plans to be produced where there are trends or specific remedial steps are required e.g. where concerns are raised at appeals or from the trade unions that the processes are not being followed.

7. Equality Analysis

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Equality Analysis Stage 1 Screening

1	Title of Policy:	Grievance Policy and Procedure	
2	Policy Author(s):	HR Project Manager	
3	Lead Executive:	Director of HR	
4	Policy Sponsor	Deputy Director of HR	
5	Target Audience	All management and staff including trainees in the Lead Employer, Host Organisations, University and the Health Education England	
6	Document Purpose:		
7	Please state how the policy is relevant to the Trusts general equality duties to: <ul style="list-style-type: none"> eliminate discrimination advance equality of opportunity foster good relations 	This policy is designed to ensure that trainees are treated fairly, consistently and that any issues raised are dealt with in a fair and reasonable manner in order to ensure good employee relations are maintained.	
8	List key groups involved or to be involved in policy development (e.g. staff side reps, service users, partner agencies) and how these groups will be engaged	HR professionals, clinical supervisors /managers, Health Education England and staff side representatives	
<p><i>NB Having read the guidance notes provided when assessing the questions below you must consider,</i></p> <ul style="list-style-type: none"> Be very conscious of any indirect or unintentional outcomes of a potentially discriminatory nature Will the policy create any problems or barriers to any protected group? Will any protected group be excluded because of the policy? Will the policy have a negative impact on community relations? <p>If in any doubt please consult with the Patient and Workforce Equality Lead</p>			
9	Does the policy significantly affect one group less or more favourably than another on the basis of: answer 'Yes/No' (please add any qualification or explanation to your answer particularly if you answer yes)		
		Yes/No	Comments/ Rationale
	<ul style="list-style-type: none"> Race/ethnicity 	No	
	<ul style="list-style-type: none"> Disability (includes Learning Disability, physical or mental disability and sensory 	No	

	impairment)		
.	• Gender	No	
	• Religion/belief (including non-belief)	No	
	• Sexual orientation	No	
	• Age	No	
	• Gender reassignment	No	
	• Pregnancy and Maternity	No	
	• Marriage and Civil partnership	No	
	• Carer status	No	
10	Will the policy affect the Human Rights of any of the above protected groups?	No	
11	If you have identified potential discrimination, are there any exceptions valid, legal and/or justifiable?	No	
12	If you have identified a negative impact on any of the above protected groups can the impact be avoided or reduced by taking different action?	No	
13	How will the effect of the policy be reviewed after implementation?	Annually by Lead Employer HR or sooner if concerns are highlighted by managers or trade union representatives.	

If you have entered yes in any of the above boxes you **must** contact the Patient and Workforce Equality Lead (0151 430 1042/ Annette.craghill@sthk.nhs.uk) to discuss the outcome and ascertain whether a **Stage 2 Equality Analysis Assessment** must be completed.

Name of manager completing assessment: (must one of the authors)	Jim Flynn
Job Title of Manager completing assessment	HR Project Manager
Date of Completion:	

8. Training

The Lead Employer HR Service Manager will provide coaching and mentoring as required for clinical supervisors/managers.

In specific cases when training issues are identified through a review of a case an individual training needs analysis will be carried out by Lead Employer HR Service Manager as required. Any training needs identified should be included in the clinical supervisor/manager's personal development plan after liaison with the host organisation.

Appendix 1

Procedure at the Hearing

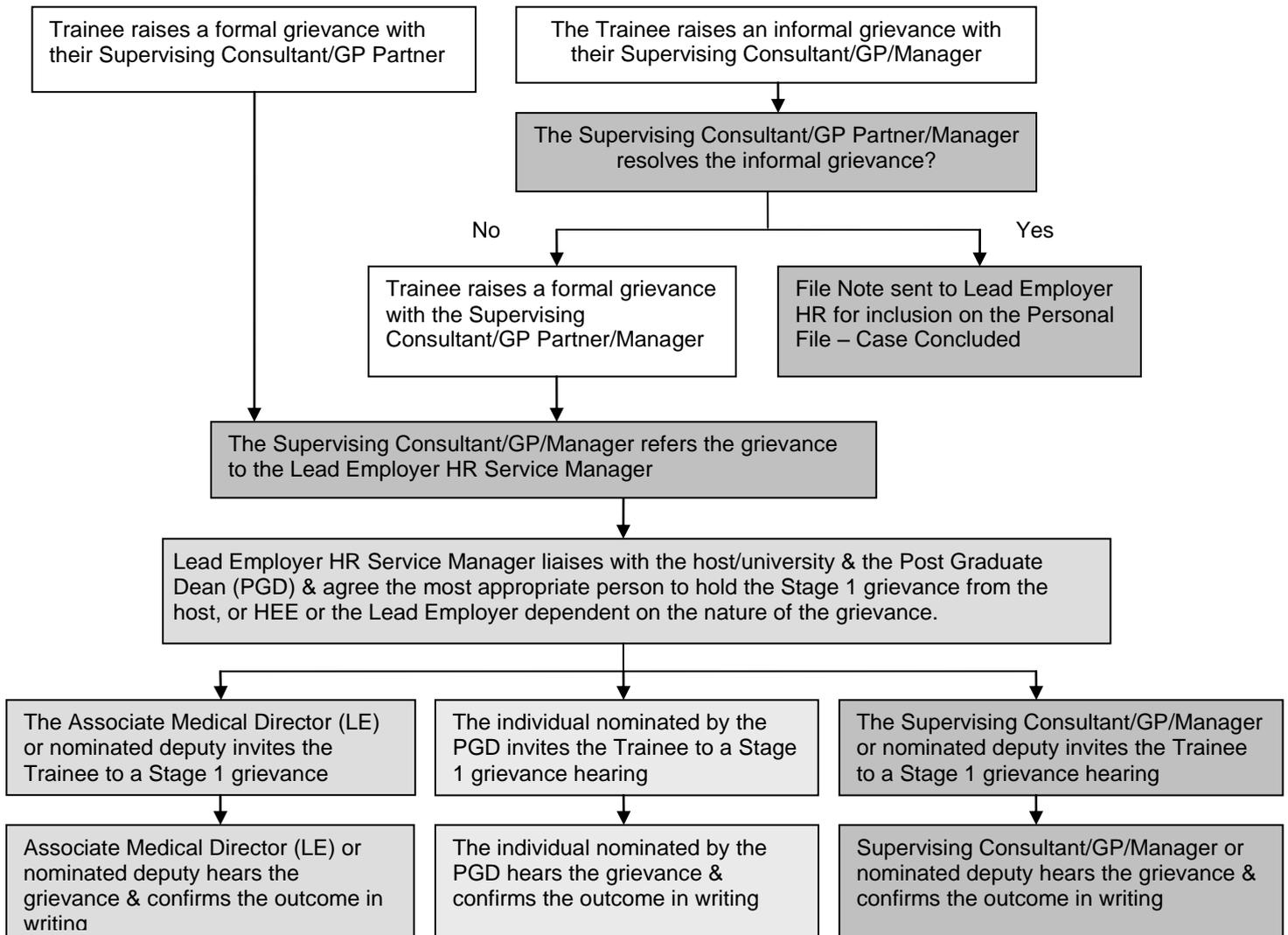
1. The clinical supervisor/manager hearing the grievance/appeal will facilitate the introductions and refer to the contents of the grievance letter. The clinical supervisor/manager, HR representative if present (plus host organisation/ university/Health Education England representative at Stage 3 level if applicable), the trainee and their representative will have had sight of the notes from any earlier hearing(s) and copies of any reports, statements or information that were referred to. The clinical supervisor/manager will therefore make it clear that these will be taken as read.
2. The trainee and/or their representative will present their case and call witnesses if necessary. NB Witnesses who attended any previous hearings should only be called again if they can provide significant additional evidence to that which was presented previously.
3. The clinical supervisor/manager and HR Representative (plus host organisation/university/ Health Education England representative at Stage 3 level if applicable), if present will have the opportunity to ask questions of the Trainee and these witnesses. Each witness shall withdraw after giving their evidence and answering questions but maybe invited back into the hearing if required by the clinical supervisor/manager.
4. The clinical supervisor/manager will then consider whether it is necessary to call any person being grieved against, clinical supervisor/managers from previous hearings or any other witness to seek clarification. They should therefore be on standby to be called if necessary. If they are called the clinical supervisor/manager, the HR Representative if present, trainee and/or their representative will have the opportunity to ask questions.
5. The trainee or their representative may sum up their case if they so wish without introducing any new matter.
6. Nothing in the foregoing procedure shall prevent the clinical supervisor/manager and HR Representative if present (plus host organisation/ university/ Health Education England representative at Stage 3 level if applicable) from inviting any witness, the trainee or a representative to clarify or amplify any statement they may have made.
7. The clinical supervisor/manager may, at their discretion, adjourn the hearing in order that further evidence may be produced or for any other reason.

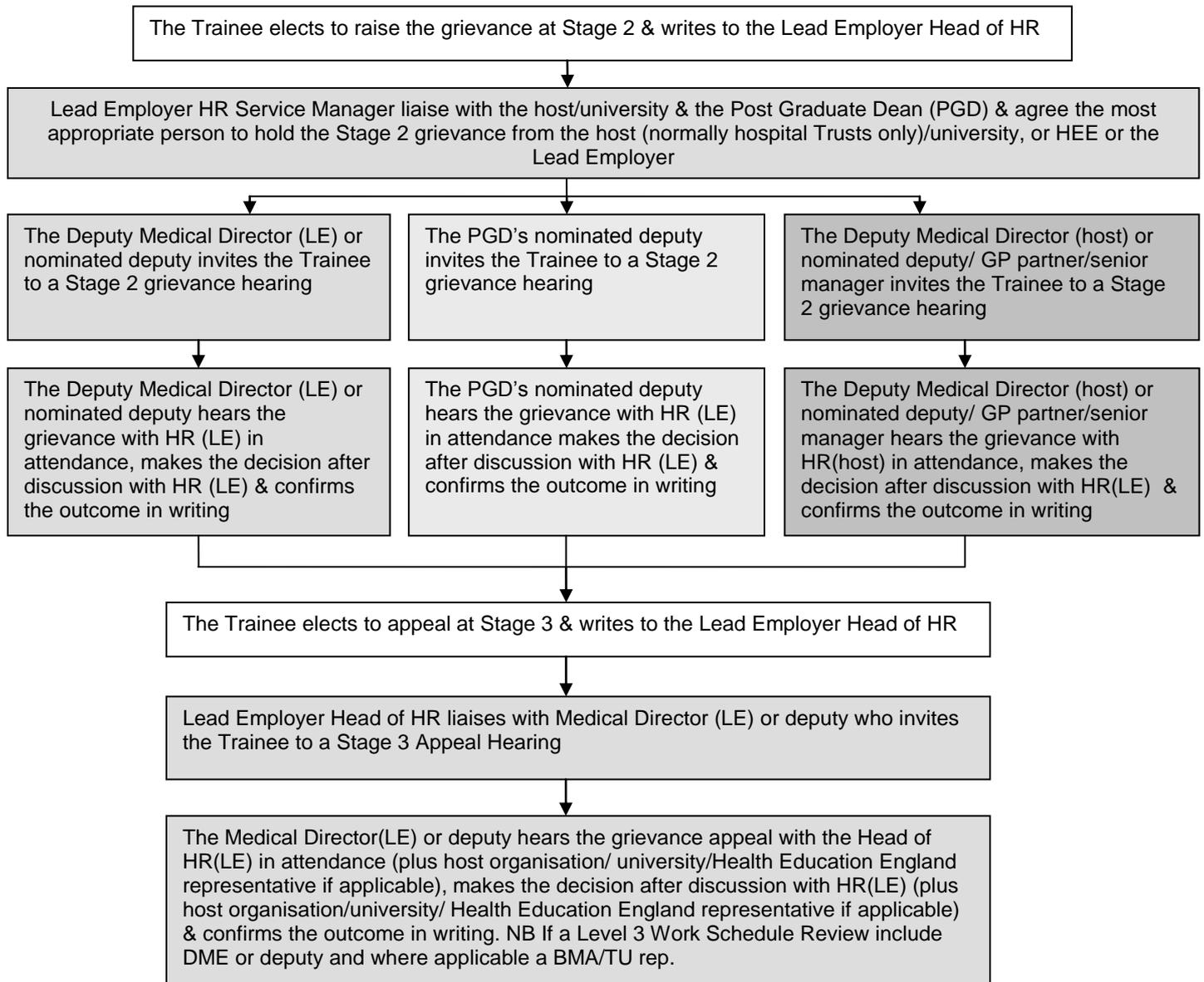
8. Following completion of the submission of all evidence and summing-up, the Trainee and the representative shall withdraw.
9. The clinical supervisor/manager and the HR Representative if present (plus host organisation/ university/ Health Education England representative at Stage 3 level if applicable), shall deliberate in private, only recalling the hearing to clear points of uncertainty on evidence already given. If recall is necessary, the trainee and his/her representative will be recalled, even where they are not concerned with the point in question. The final decision will be that of the clinical supervisor/manager and the HR Representative if present (plus host organisation/ university/ Health Education England representative at Stage 3 level if applicable) who will act in an advisory capacity.
10. A decision will normally be announced immediately following the hearing. Whenever this is not possible, the trainee will normally be advised of the decision by the clinical supervisor/manager within 10 calendar days unless extensive investigation is required.
11. Clinical supervisor/manager shall write to the trainee within 7 calendar days of the hearing to confirm their decision enclosing a copy of the notes from the hearing.

NB For clinical supervisor/manager read more senior manager for the later stages of the process

Appendix 2a

Lead Employer Grievance Flowchart – Stage 1





Appendix 3

Responsibility and Policy Matrix for Guidance

Person Raising Grievance	Organisation whose actions or decision caused the concern	Stage of the procedure	Who Hears the Grievance
Trainee	Lead Employer	Stages 1 & 2	Manager from the Lead Employer*
		Stage 3 Appeal	Lead Employer Medical Director or deputy#
Trainee	Host organisation	Stages 1 & 2	Manager/Clinical Supervisor from the host*
		Stage 3 Appeal	Lead Employer Medical Director or deputy + a representative of the host in advisory capacity##+
Trainee	University	Stages 1 & 2	Manager from the university*
		Stage 3 Appeal	Lead Employer Medical Director or deputy + a representative of the university in advisory capacity#
Trainee	Health Education England	Stages 1 & 2	Manager from Health Education England *
		Stage 3 Appeal	Lead Employer Medical Director or deputy + a representative of the Health Education England in advisory capacity#

*Manager hearing stage 2 will always be different and normally more senior than at stage 1. Relevant HR representative present at stage 2 in an advisory capacity

Lead Employer HR representative present in an advisory capacity

+ If a Level 3 Work Schedule Review include the DME or deputy and where applicable a BMA/TU rep.