

**LEAD EMPLOYER RESPECT AND
DIGNITY AT WORK POLICY**

Code:	
Policy Sponsor	Deputy Director of HR
Lead Executive	Director of HR
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:	Clinical Supervisors, Trust Management, host management, Lead Employer HR, Health Education England, University and trainees
Document purpose	To set out the measures the Trust has put in place to try and ensure that all its trainees are treated with fairness and respect. It further lays down the action that will be taken where behaviour falls short of that which is required in this regard.
Training requirements	Managers will be trained in both encouraging and engendering mutual respect amongst their team and ensuring that the appropriate action is carried out where a shortfall is identified. Staff will also be made aware of this policy and the unacceptability of bullying and harassment.
Associated documents and Key References	<p><u>External</u> Equality Act 2010 (Ref 1) NHS Constitution (Ref 5) Maintaining High Professional Standards in the Modern NHS (Ref 8)</p> <p><u>Internal</u> Equality and Diversity Policy (Ref 2) Grievance Policy and Procedure – Lead Employer (Ref 3) Disciplinary Policy and Procedure (Ref 4) Induction & Mandatory Training Policy (Ref 6) Discipline 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 Business Partner	January 2018	
External Stakeholders	N/A		
Trust Staff Consultation via Intranet	Start date: Consulted via Policy Subgroup		End Date: January 2018.

Describe the Implementation Plan for the Policy (and guideline if impacts upon policy)

(Considerations include; launch event, awareness sessions, communication / training via Divisions and management structures, etc)

This policy will be communicated to staff via Trust Corporate Services Website. Lead Employer HR Senior Manager and HR Advisor will receive additional awareness training. Trainees receive training through Health Education England, host organisation and University are responsible for their own training with reference to general respect at work issues.

Monitoring Compliance with the Policy

Describe Key Performance Indicators (KPIs)	Target	How will the KPI be Monitored?
Line management undertake their duties and responsibilities in line with the policy when staff raise concerns about bullying and/or harassment	No justifiable grievances or trade union concerns raised	See section 6
HR undertake their duties and responsibilities in line with the policy when staff raise concerns about bullying and/or harassment	No justifiable grievances or trade union concerns raised	See section 6
Training is conducted in line with the Induction & Mandatory Training Policy (Ref 6)	75% compliance	See section 6
Trends identified relating to respect and dignity at work	Positive trends	Staff survey

Performance Management of the Policy

Who is Responsible for Producing Action Plans if KPIs are not met?	Which committee will monitor plans?
HR Service Manager	Workforce Council

How will Learning occur?	Who is responsible
Following analysis a management action plan will be produced if KPIs are identified as not being met and additional instruction, coaching and training will be put in place. If the analysis identifies it as necessary this policy will be revised to ensure the required improvements are made.	Lead Employer 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
May 2016	2	HR Project Admin	Updated HEE references and contact number for Annette Cragh
April 2017	3	HR Project Admin	Extended review date to Oct 2017
Sep 2017	4	HR Project Admin	Extended review date to Dec 2017
Oct 2017	5	HR Project Admin	Extended review date to 31.01.18
December 2017	6	HR Business Partner	Inclusion of cyber-bullying.

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1. Policy Aim

The aim of this policy is to both engender a culture where all trainees are treated with fairness and respect and lays down the action that will be taken where behaviour falls short of that which is required in this regard.

2. Policy Description

This policy lays down how the Trust as Lead Employer ('the Trust') will both minimise the incidents of bullying and harassment to staff so that they are afforded the respect and dignity at work to which they are entitled while proscribing the action to be taken when such unacceptable behaviour occurs or is alleged to have occurred.

SECTION 1

1. Introduction

The Trust is committed to creating a safe and fair working environment where everybody is treated with dignity and respect. Bullying and harassment of trainees is completely unacceptable.

The Trust will make every effort to ensure that no trainee is disadvantaged, either directly or indirectly, on the basis that they possess any of the "protected characteristics" as defined by the [Equality Act 2010 \(Ref 1\)](#) (or are perceived to have a protected characteristic or because of their association with somebody having a particular protected characteristic) or any other individual characteristic, for example organisational position, employment status, social class or carer status.

There will be instances where individuals within Host organisations or Health Education England are better placed to deal with a concern raised under this procedure. Equally Lead Employer HR will need to liaise and seek assistance from HR colleagues in Host Trusts where applicable. Any formal investigation or disciplinary action carried out arising from a concern raised by a trainee under this policy will be enacted under the relevant policy (e.g. disciplinary or MHPS policy) of the organisation who employs the relevant employee (i.e. Lead Employer, Host organisation, University or Health Education England. Please see Appendix 1.

Where there is a concern being raised by a member of the host or university staff relating to a trainee this will be dealt with under the host or university Respect and Dignity at Work/ Bullying and Harassment policies and

procedures rather than this policy but the Trust will endeavour to ensure full cooperation. In such situations any formal investigation or disciplinary action relating to the trainee arising out of the concern will be carried out under the Trust's [Disciplinary Policy and Procedure - Lead Employer \(Ref 7\)](#).

This policy is in line with the [NHS Constitution \(Ref 5\)](#).

2. Policy Objectives

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

- Develops a culture in which bullying and harassment are known to be unacceptable and where individuals are confident enough to raise a complaint without fear of ridicule, discrimination or victimisation.
- Has staff safety and respect as a priority
- Is legally compliant
- Sets down the parameters of acceptable behaviour in relation to staff from other staff
- Provides a framework to ensure that allegations can be investigated promptly and in a manner which recognises the sensitivity of the issues raised and the rights of all parties involved.
- Promotes the policy within the organisation to improve knowledge and practice in the area of respect.

3. Definitions

Trainees - Specialty Trainees which includes the following:

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

Hereafter, 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 Student Physician Associates.

Host Managers - in the context of this procedure are Supervising

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Consultants/GPs from within the Host organisations or in the case of Student Physician Associates while on academic placements in University those managers designated as such by the University Programme Director.

Protected characteristics – these are laid down defined by the [Equality Act 2010 Ref 1](#) as follows: - race; disability; sex; religion or belief; sexual orientation; gender reassignment; marriage and civil partnership; pregnancy and maternity; and age.

Harassment - Harassment is “unwanted conduct, often related to a relevant protected characteristic, which has the purpose or effect of violating an individual’s dignity or creating an intimidating hostile, degrading, humiliating or offensive environment for that individual”.

Bullying - Bullying is unreasonable behaviour by one individual or group of individuals to another which makes the recipient feel upset, threatened, humiliated or vulnerable thereby undermining their self-confidence and potentially causing them to suffer stress. Bullying is often derived from hierarchical power relationships or physical strength and can include offensive, abusive, intimidating, malicious or insulting behaviour, abuse of power or unfair sanctions. It may undermine a person’s ability to function and can leave them feeling hurt, frightened, angry or powerless. However on occasion an employee’s perception of discrimination, harassment or bullying may be unreasonable or ill found e.g. managers will when necessary need to take a firm approach to managing performance to ensure services are delivered to the required standard and such legitimate management action, provided it is undertaken in a reasonable way is not bullying or harassment. No distinction will be made between ‘real-world’ and online bullying/harassment. Behaviour that is considered bullying/harassment on social media sites, or any other internet site/application/game will be treated in the same manner as if it occurred in the physical environment. Please refer to the Trust Social Media Policy.

SECTION 2

4. Duties, Accountabilities and Responsibilities

Tackling workplace bullying and harassment is a joint responsibility of the organisation and of the individuals working within it. Every employee must contribute to building an atmosphere of mutual trust and respect.

4.1 The Chief Executive

The ultimate responsibility in the area of Health and Safety and legislative 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 staff 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 any allegation of harassment and/or bullying is investigated and that appropriate action is taken to stop this behaviour and to prevent its recurrence. The monitoring of the impact of the policy will be delegated to the Workforce Council 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 is adhered to at all times and that complaints are promptly and competently investigated. 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.

4.4 Clinical Supervisors and Host/University Managers

Clinical Supervisors and Managers must:

- Treat trainees with respect
- Act as a role model for others by ensuring that their behaviour cannot reasonably be construed as bullying and harassment while at the same time ensuring that matters of misconduct or poor performance are dealt with assertively and professionally.
- Raise awareness of harassment and bullying behaviour amongst their staff and trainees making it clear that such behaviour is unacceptable and ensure that staff are aware of what this policy means to them.
- Develop their skills to deal with issues relating to all forms of discrimination, harassment, bullying and victimisation. They have a responsibility to ensure that concerns raised are taken seriously and recognise that raising a concern can be a difficult decision for an employee to take.
- Work with the Human Resources both within the Lead Employer and where applicable within host organisations/Universities to ensure the resolution of issues relating to harassment, bullying and victimisation in

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the workplace in accordance with this policy together with the appropriate disciplinary policy.

- Investigate allegations of bullying and harassment as required.

NB Managers involved in this policy maybe from the Lead Employer. Host organisations, Universities or Health Education England dependent on the nature and location of the concern raised.

4.5 Trainees

All trainees must:

- Take personal responsibility for their own behaviour, treating colleagues with respect and for ensuring that they comply with this policy
- Take reasonable steps to ensure that harassment and/or bullying in any form does not occur in the workplace.
- Ensure that such incidents are reported to their clinical supervisor and cooperate with any investigation
- Ensure that they attend training as designated.

4.6 Lead Employer Human Resources Staff and Management

The Lead Employer HR Service Managers must:

- Liaise with clinical supervisors/managers involved to determine who is best placed to deal with any investigation arising out to the concern raised i.e. a member of the host management, university management or a member of the Health Education England management or a member of the Trust's management team as Lead Employer.
- Where the alleged perpetrator is a doctor ensure that any formal investigation complies with the processes laid down in [Maintaining High Professional Standards in the Modern NHS \(Ref 8\)](#) e.g. as laid down in the investigatory element of the Trust's [Disciplinary Policy and Procedure - Lead Employer \(Ref 7\)](#).
- Ensure that clinical supervisors/managers are provided with appropriate advice and guidance on this policy, including training and coaching as required.
- Work with clinical supervisors/managers to ensure the resolution of issues relating to harassment, bullying and victimisation in the workplace in accordance with the appropriate Equality and Diversity and Disciplinary Policy.
- Act as a workplace mediator or arrange for workplace mediation when appropriate through appropriate external support e.g. ACAS
- Provide support to clinical and investigation officers/case investigators in individual cases as necessary.

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- Review the workings of this policy when shortfalls are identified in the reviews of the KPIs

4.7 Trade Union Representatives

The Trust recognises that trainees may wish to seek advice and be accompanied by their trade union or professional body. The representatives of these organisations must therefore:

- Familiarise themselves with this policy and procedure
- Advise members in accordance with this policy and procedure
- If necessary assist a trainee in preparing a written statement if required, providing a clear explanation of their concern with supporting evidence wherever possible
- Agree a reasonable amount of time off to fulfil their responsibility to accompany the trainee.

4.8 Health, Work and Well Being Service

Any member of staff who is involved in a claim of harassment or bullying may find it helpful to contact the Trust's Health, Work and Well Being (HWWB) Service which provides a confidential counselling service and physiological support as required. Trainees are able to contact HWWB via well.being@sthk.nhs.uk or 0151 430 1985 .In addition trainees can seek assistance from the Health Education England.

4.9 Workforce Council

The Workforce 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

5.1 Raising a Concern - Staff Guidance & Process

Trainee's who believe that they are being subjected to harassment and/or bullying should consider making notes about how they feel and any details which will help them to recall events clearly at a later date. Such details could include dates, times, names of witnesses, memos, notes or any meetings that relate to the concerns. If the bullying/harassment has occurred online, trainees should attempt to get screenshots and print /save these as well as any links to the offending behaviour which should also be saved.

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In the interests of natural justice particularly in relation to any investigation it is best if any concern is raised as soon as practical and wherever possible no later than three months after the alleged incident. It must be recognised however that bullying and/or harassment incidents are often prolonged and also that it sometimes takes a significant period of time for the alleged victim to feel sufficiently empowered to raise the matter. It must be understood however that the longer the time that has elapsed it will become increasingly hard to conduct a reasonable and fair investigation.

A trainee can raise a concern through their clinical supervisor, their clinical supervisor's manager, their education supervisor, their university manager HR Department, Trade Union representative or Lead Employer Health Work and Well Being Service. After discussion with the trainee raising the concern the matter should be brought to the attention of the manager of the individual or individuals about whom the concern is being raised. Where the trainee does not wish this to occur they must confirm this in writing. There must never be an attempt to hide the problem.

When a concern is raised by a trainee the host clinical supervisor/university manager will liaise directly with their Trust Medical Staffing department//GP Practice Manager/university management. Medical Staffing//GP Practice Manager/university management will then contact the Lead Employer HR Department to agree who is best placed to deal with this concern under this policy i.e. a member of the host/university management or a member of the Health Education England management team or a member of the Trust's management team as Lead Employer. This equally applies at each stage throughout paragraphs 5.2 and 5.3. It must be noted that in these instances the individual(s) about whom the concern is being raised maybe an employee(s) of the Trust, host, University or Health Education England and this will inform who is best placed to deal with it.

Except in cases of serious bullying and harassment or where the complainant believes that matters have gone too far, the option of achieving an informal solution to a complaint relating to harassment and/or bullying should be considered. At this stage mediation and counselling can be offered. NB This must never be seen by the complainant as sweeping their concerns under the carpet.

If the case is serious or the matter remains unresolved or the complainant wants more formal action taken the formal stage will be invoked. This will involve a grievance being raised and/or an investigation being carried out. NB Even if the complainant declines to raise a formal grievance the manager of the person being complained about (under guidance from their own HR if applicable and Lead Employer HR) may elect to institute an investigation in

order to fulfil their duty of care to staff. This is particularly the case where the allegations are serious or there is concern that there may be a wider problem.

If the allegation of bullying and harassment is upheld the outcome could include:

- Mentoring
- Mediation
- Performance Management
- Training, e.g. conflict resolution, communication skills, behaviour modification
- Transfer of staff
- Disciplinary action including dismissal under the appropriate disciplinary policy. N.B Serious allegations of bullying and harassment are potentially acts of Gross Misconduct and in such cases the alleged perpetrator could be suspended/excluded from work while either the investigation is completed and/or awaiting the outcome of the disciplinary hearing. NB In cases where the alleged perpetrator is employed by the host or University or by the Health Education England any investigation, suspension/exclusion or disciplinary action will be carried out under their procedure.

Where appropriate, at any stage of the process, the trainee raising the concern can be referred to the Trust's Health, Work and Well-Being Service for support who will consider whether counselling or physiological support would be of assistance. The employee subject to the investigation will also be offered the appropriate level of support as outlined above.

5.2 Informal Process

If a trainee raises a concern or complaint relating to harassment and/or bullying the option of achieving an informal solution should be considered by both the trainee and the manager taking responsibility for the case (normally the manager of the person being complained about). This must never be seen this as sweeping these concerns under the carpet and this option must never be imposed upon the trainee. Equally the manager considering the case can elect to move straight to the formal stage of the process if the concerns are sufficiently serious or if there are indications that the alleged bullying and/or harassment may be widespread or systemic within the department concerned.

5.2.1 It is recognised that staff subject to harassment and/or bullying often feel a loss of empowerment and confidence and will find it extremely difficult to raise their concerns with the alleged perpetrator(s). However if this is not the case trainees can consider telling the person responsible that they find their conduct offensive and wish it to stop immediately. In such cases they should make it clear that they will take this further if the behaviour does not

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stop. The trainee raising the concern should always listen to the response from the other person.

5.2.2 Where the response is not felt to be adequate or the behaviour continues or the trainee feels unable to raise the matter with the individual(s) concerned they should raise their concern through their clinical supervisor, their clinical supervisor's manager, university manager, their educational supervisor, Lead Employer HR, trade union representative or Health, Work & Well Being Service. For resolution to be obtained after due consultation with the trainee the concern expressed must be brought to the attention of the manager of the employee about whom the concerns are being raised (the responsible manager). If the trainee does not wish this to occur they must confirm this in writing.

5.2.3 At this stage the responsible manager/clinical lead must carry out a preliminary review of the case. If the alleged bullying and harassment is not of a very serious nature (see 5.1) and there are issues of genuine concern then both parties should be offered the opportunity to resolve the matter locally through a mediation process to bring about effective resolution at the earliest stage possible. The process offers a safe confidential space for participants to find their own answers with the support of a mediator. If the manager/clinical lead has any concerns as to whether this is an appropriate offer to make then they should seek advice from their own HR (if applicable) and the Lead Employer HR Service Manager. NB This must not be seen as sweeping the trainee's concerns under the carpet and this option must never be imposed. The trainee should always be offered the opportunity of seeking advice from their trade union representative or where appropriate to speak to their counsellor before accepting the offer.

5.2.4 Such mediation can be conducted by the manager/clinical lead themselves and/or by own HR (if applicable) and/or the Lead Employer HR Service Manager, if appropriate given the nature of the concerns and agreement from both parties. However in some cases mediation is better carried out by an external third party and this can be arranged by the manager/clinical lead through their own HR department (if applicable) and/or the Lead Employer HR Service Manager who will make the arrangements e.g. with ACAS or other external resource as appropriate.

5.3 Formal Process

If the case is serious or the matter remains unresolved following the informal stage or the trainee wishes the case to be handled formally from the outset the formal stage will be invoked either by the trainee or the manager/clinical lead handling the case (the responsible manager). Where the alleged perpetrator is a doctor ensure that any formal investigation complies with the

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processes laid down in [Maintaining High Professional Standards in the Modern NHS \(Ref 8\)](#).

5.3.1 If the trainee wishes to raise a formal complaint this must be made in writing to the Head of HR, Lead Employer and should include where applicable the following information:

- As accurately as possible, the dates and times of incidents and names of witnesses where appropriate
- Factual descriptions of events, including direct quotations
- How each incident made them feel
- An explanation of why they consider the behaviour constitutes harassment, bullying, discrimination or victimisation
- What they have personally done so far to try and resolve the situation

5.3.2 However even if the trainee elects not to make a formal complaint in order to fulfil their duty of care the responsible manager/clinical supervisor after taking advice from own HR (if applicable) and the Lead Employer HR Service Manager, can elect to continue with the formal process if they regard the case as sufficiently serious (see 5.1). In such cases all parties should co-operate with the investigation.

5.3.3 An investigation officer or case investigator (if the alleged perpetrator is a doctor) will be appointed. If the alleged perpetrator is a doctor this will be undertaken in compliance with [Maintaining High Professional Standards in the Modern NHS \(Ref 8\)](#). This individual will be independent and will be responsible for arranging a full investigation of the complaint which will involve meeting with each party and named witnesses. This investigation will be conducted in line with the investigation process set out in the appropriate host organisation or university or Health Education England policy (e.g. MHPS or disciplinary policy) or [Disciplinary Policy and Procedure – Lead Employer \(Ref 7\)](#) as appropriate and therefore their own HR if applicable and the Lead Employer HR Service Manager will be available for guidance, advice and support. Given the potential stress involved for all parties it is imperative that the investigation is carried out as quickly as practically possible without threatening the objectivity and thoroughness required.

5.3.4 As part of the investigation the trainee who has raised the concern or complaint must be asked how they think the situation could be settled.

5.3.5 The investigating officer/case investigator will review all the evidence and make a report in writing on the facts.

5.3.6 It will be the responsibility of the responsible manager to consider the facts and the recommendations and come to a decision as to the best way forward.

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5.3.7 It will be the responsibility of the responsible manager to ensure that the appropriate action is carried out including any disciplinary action required in line with the appropriate disciplinary procedure applicable to the alleged perpetrator. In very serious cases where gross misconduct is alleged the alleged perpetrator should be suspended/excluded in line with the appropriate disciplinary procedure applicable to the alleged perpetrator.

5.3.8 If the alleged perpetrator is a doctor points 5.3.5, 5.3.6. and 5.3.7 must be carried out in compliance with [Maintaining High Professional Standards in the Modern NHS \(Ref 8\)](#).

5.3.9 The trainee raising the concerns and the alleged perpetrator will be informed promptly and in writing of the outcome of the investigation. If the trainee raising the concerns is not satisfied with the outcome they may raise the matter at Stage 2 of the [Grievance Policy and Procedure – Lead Employer \(Ref 3\)](#).

6. Monitoring & Compliance

The Lead Employer HR Service Manager is responsible for the monitoring of compliance with respect at work issues to ensure the effective use of the policy and enable action plans to be produced where are trends or specific remedial steps are required e.g. where concerns are raised through the grievance procedure or from the trade unions that the processes are not being followed.

The Head of HR, Lead Employer will produce a quarterly report on the number formal instances raised, this will be categorised by Equality Group. A quarterly report will be presented to the Workforce Council on trends and action taken where required to improve the application of the policy.

7. Equality Analysis

<u>Equality Analysis Stage 1 Screening</u>		
1	Title of Policy:	Respect at Work and Dignity at Work Policy
2	Policy Author(s):	HR Project Manager
3	Lead Executive:	Director of HR

4	Policy Sponsor	Deputy Director of HR	
5	Target Audience	All trainees, host management, Health Education England, university and Lead Employer HR	
6	Document Purpose:	This policy sets out to engender of culture where all trainees are treated with fairness and respect by colleagues. It lays down the action that will be taken where behaviour falls short of that which is required in this regard.	
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 	The policy is designed to ensure that no employee is disadvantaged, either directly or indirectly, on the basis that they possess any “protected characteristics” (or are perceived to have a protected characteristic or because of their association with somebody having a particular protected characteristic)	
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	Trade union representatives have been consulted along with management and comments invited from members of staff before being reviewed by HR Policy Group and Workforce Council	
<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 impairment) 	No	

	• 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?	There will be an annual review of outcomes of the policy including the number of incidents of bullying, harassment, violence or intimidation	

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:	Feb 2016

8. Training

All trainees should receive training through the Equality and Diversity module in Health Education England's MMT Digital e-learning system which includes training on Bullying & Harassment. This is compulsory for all trainees with the exception of GP trainees but at the time of writing this policy this matter is under review.

Training in the hosts will be subject to their own training policies but clinical supervisors/managers will be coached by Lead Employer HR as required.

When training issues are identified through the management of case these may relate to the trainee raising the concern or the perpetrator where a case has been proven.

Any training needs identified will be included in the employees personal development plan and study leave/ funding will be approved in line with policy.

Appendix 1

Responsibility and Policy Matrix for Guidance

Person Raising Concern	Person who is being complained about	Concern Raised under whose Policy?	Investigation/ Discipline/Exclusion or Suspension
Trainee	Another Trainee	Lead Employer Respect and Dignity at Work Policy	Lead Employer Disciplinary Policy
Trainee	Trust Employee as a representative of the Lead Employer	Lead Employer Respect and Dignity at Work Policy	Trust Disciplinary Policy
Trainee	Host organisation/ University employee	Lead Employer Respect and Dignity at Work Policy	Host Organisation's or University's Disciplinary or MHPS policy
Trainee	Health Education England employee	Lead Employer Respect and Dignity at Work Policy	Health Education England's Disciplinary or MHPS policy
Trust Employee as a representative of the Lead Employer	Trainee	Trust's Respect and Dignity at Work Policy	Lead Employer Disciplinary Policy
Host organisation/ University employee	Trainee	Host Organisation/ University's Respect and Dignity at Work or Bullying and Harassment Policy	Lead Employer Disciplinary Policy
Health Education England employee	Trainee	Health Education England's Respect and Dignity at Work or Bullying and Harassment Policy	Lead Employer Disciplinary Policy