

Grievance Policy

July 2022-September 2024

CONTROL RECORD			
Reference Number HR-005	Version 1.2	Status Final	Author Head of Human Resources and Organisational Development
			Sponsor Director of Nursing
			Team Human Resources and Organisational Development
Title	Grievance Policy		
Amendments	Review Date amended to September 2024		
Purpose	This policy outlines the procedure to follow to resolve any grievances in a swift and confidential manner.		
Superseded Documents	Grievance Policy v1.1		
Audience	All staff in Nottingham and Nottinghamshire Integrated Care Board		
Consulted with	Integrated Care Board Senior Leadership Team and Staff Engagement Group		
Equality Impact Assessment	See Appendix C		
Approving Body	ICB Board	Date approved	1 July 2022
Date of Issue	July 2022		
Review Date	September 2024		
<p>This is a controlled document and whilst this policy may be printed, the electronic version available on the ICB's document management system is the only true copy. As a controlled document, this document should not be saved onto local or network drives.</p>			

NHS Nottingham and Nottinghamshire ICB's policies can be made available on request in a range of languages, large print, Braille, audio, electronic and other accessible formats from the Engagement and Communications Team at nnicb-nn.comms@nhs.net

Contents

	Page
1 Introduction	4
2 Purpose and Scope	5
3 Roles and Responsibilities	5
4 Procedure	6
5 Informal Procedure	7
6 Formal Procedure	7
7 Collective Grievance	9
8 Appeal	9
9 Equality and Diversity Statement	10
10 Communication, Monitoring and Review	11
11 Staff Training	11
12 Interaction with other ICB Policies	12
13 References	12
Appendix A: Scheme of Delegation	13
Appendix B: Possible Outcomes	14
Appendix C: Equality Impact Assessment	15

1. Introduction

- 1.1 This policy applies to the NHS Nottingham and Nottinghamshire Integrated Care Board, hereafter referred to as 'the ICB'.
- 1.2 The ICB places great importance on ensuring our employees are provided with a safe and productive working environment. The ICB recognises that it has a duty to provide a policy that gives employees a clear, simple and fair method of resolving grievances as quickly as possible.
- 1.2. Issues that could cause grievances may include:
 - (a) Terms and conditions of employment;
 - (b) Health and safety;
 - (c) Work relations;
 - (d) New working practices;
 - (e) Working environment.
- 1.3 We have a separate Acceptable Behaviours Policy that may be useful if an employee feels they have been the victim of bullying or harassment or wish to report an incident of bullying or harassment involving other people.
- 1.4 We also operate a separate Raising Concerns (Whistleblowing) Policy to enable employees to report illegal activities, wrongdoing or malpractice. However, if the employee feels they are directly affected by the matter in question, or feel they have been victimised for an act of whistleblowing, they may raise the matter under this Grievance Policy.
- 1.5 This policy should not be used in situations where the employee simply disagrees with a reasonable management instruction from a manager.
- 1.6 Any employee or group of employees wishing to express a grievance in relation to their employment has the right to do so. This policy outlines the procedure to follow to resolve any grievances in a swift and confidential manner.
- 1.7 Grievances should be raised promptly following the employee's concern(s) arising. Where grievances raised relate to historic issues, the ICB will assess whether it is reasonably practicable and in the interests of fairness to consider the employee's grievance.
- 1.8 Grievances raised by employees who have left the organisation will not be considered unless the ICB consider it necessary to do so.

2. Purpose and Scope

- 2.1 This policy applies to all staff regardless of length of service that are directly employed by the ICB. It does not apply to agency workers or self-employed contractors working for the organisation under a contract for service.
- 2.2 This policy meets the requirements of the ACAS Code of Practice on Disciplinary and Grievance Procedures.
- 2.3 It is expected that most issues arising in the workplace will be able to be dealt with informally between the individual and their line manager. This has advantages to everyone concerned, and helps to promote and maintain effective working relationships.
- 2.4 It is management's responsibility to ensure that grievances are dealt with promptly to avoid unnecessary escalation of issues.
- 2.5 Data that is held in relation to any grievance process will be retained and destroyed in accordance with the provisions of the General Data Protection Regulations 2018.

3. Roles and Responsibilities

- 3.1 Good working relationships are essential for the running and successful delivery of the ICB objectives. There is a joint responsibility for employees, managers and trade union partnerships to operate and work together in good faith and with the shared intention of working collaboratively.

Roles	Responsibilities
Human Resources	The HR team will provide fair and impartial advice to employees and line managers.
Line Managers	Line Managers have a responsibility to: <ul style="list-style-type: none">• To familiarise themselves with this policy and procedure.• Approach any grievance raised directly with them or upon request to investigate by a superior with an open mind and maintaining confidentiality at all times.
Employees	Employees have a responsibility to: <ul style="list-style-type: none">• Familiarise themselves with this policy and procedure.

Roles	Responsibilities
	<ul style="list-style-type: none"> • Be able to clearly and concisely explain the detail of their grievance. • Be clear on what they want to achieve from raising the grievance.

4. Procedure

- 4.1 All matters raised under this policy will be dealt with swiftly, fairly and confidentially.
- 4.2 All employees have the right to be represented at all formal stages of this policy. Employees can be accompanied to formal meetings by a Trade Union representative or colleague. At the meeting, the employee's companion may make representations and ask questions, but should not answer questions on the employee's behalf. The employee and their companion may talk privately at any time during the meeting. Acting as a companion is voluntary and colleagues are under no obligation to do so. If they agree to do so, they will be allowed reasonable time off from duties without loss of pay. If an employee's chosen companion is unavailable at the time a meeting is scheduled and will not be available for more than five working days afterwards, the ICB may ask you to choose someone else.
- 4.3 Normal working arrangements will continue throughout the grievance process. Where this is not considered possible by the employee or the line manager, advice should be sought from the HR team.
- 4.4 If a grievance is raised during a disciplinary process, ordinarily the grievance will not be heard until the conclusion of the disciplinary processes. However, if the grievance could have a bearing on the outcome of the disciplinary case then the disciplinary process may be suspended to allow the grievance to be appropriately investigated. If the two cases are related, it may be more appropriate to run the two processes concurrently. The Grievance Policy should not be used to complain about dismissal or disciplinary action. This should be dealt with by an appeal under the appropriate procedure.
- 4.5 Where more than one employee in a department or work area wishes to raise the same complaint they may do so as a collective grievance. It must be clear who is submitting the grievance by the employees printing and signing their names on the written grievance letter. If there are more than two people submitting a collective grievance, one or two of the group should be nominated to attend any

formal meeting and speak on behalf of the group. It is the responsibility of the employees submitting the grievance to nominate peers to speak on behalf of the group.

- 4.6 The ICB will ensure that all managers who form the Scheme of Delegation (**Appendix A**) and will be involved in the investigation and hearing of any grievance case will receive the appropriate training.
- 4.7 Potential outcomes of both the informal and formal stages are provided in **Appendix B**.

5. Informal Procedure

- 5.1 In the first instance employees and managers should attempt to resolve any issues as they arise informally.
- 5.2 Where an employee feels that they cannot raise their concerns with their direct Line Manager they should speak with their Line Manager's Manager to resolve any issues.
- 5.3 Employees are encouraged to raise and resolve, where possible, any concerns or complaints via the informal grievance stage.
- 5.4 Informal grievances should be handled promptly to prevent further issues arising e.g., within 5 working days.
- 5.5 There is no requirement for representation at the informal stage of this process.
- 5.6 Any agreed outcomes at the informal stage should be recorded and shared by both parties.

6. Formal Procedure

- 6.1 If a grievance has been unable to be resolved at the informal stage or is considered of sufficient seriousness, employees may use the formal stages of the procedure to seek resolution through the next level of management.
- 6.2 The employee is expected to outline the detail of their grievance and desired outcome in writing to the appropriate manager within the Scheme of Delegation (**Appendix A**). If employees do not feel that they can raise the grievance within the management structure they should seek further advice from the HR team.
- 6.3 A manager who receives a written grievance should look to act upon the grievance swiftly and confidentially. The manager should inform the HR team of the grievance. The HR team will then work with the manager to source an appropriate investigating manager.

6.4 The manager will acknowledge receipt of the grievance in writing, on the same day where possible but no later than 3 working days and outline the next stages of the process i.e. the appointment of the investigative manager.

6.5 Once identified, the Investigating Manager is responsible for establishing the facts of the case.

This may include:

- Reviewing relevant documentation
- Interviewing witnesses
- Checking policies and procedures
- Accessing the employee's file
- Holding preliminary grievance meetings

6.6 Once identified, the Investigating Manager should aim to formally meet with the employee to discuss the grievance in detail. This meeting should take place ideally within 5 working days of receipt of the formal grievance but if this is not practically possible the meeting should take place no later than 10 working days after receipt of the formal grievance.

6.7 If these timescales cannot be met either by the Investigating Manager or the employee these reasons should be recorded and communicated as appropriate.

6.8 Any extensions to the deadlines set out in this procedure should, if possible, be agreed with the complainant. Reasons for the extensions must be recorded and an estimation of the revised timescale given.

6.9 The employee should attend the formal grievance meeting prepared to discuss the grievance in detail, providing examples where practical. The employee should also prepare to present and discuss possible resolutions to the grievance that has been raised. Similarly the Investigating Manager should also prepare to present possible resolutions to the grievance.

6.10 It may be necessary to adjourn the formal grievance meeting to further investigate any issues that are raised. The amount of any investigation required will depend on the nature of the allegations and will vary from case to case. It may involve interviewing and taking statements from the employee and any witnesses, and/or reviewing relevant documents. The employee raising the grievance must co-operate fully and promptly in any investigation. This may include informing the Investigating Manager of the names of any relevant witnesses, disclosing any relevant documents and attending interviews, as part of the investigation. Any further investigation should aim to be concluded within ten working days of the adjournment of the formal meeting.

- 6.11 The Investigating Managers should aim to conclude the grievance within 10 working days of the formal meeting, writing to the employee with the outcome and proposed resolutions. The employee will be notified in writing of the delay and of any extension(s) beyond these timescales, and provided the reasons for the delay. Agreeing to extensions may lead to the stalling of the process as the employee may not agree to the delay or keep delaying the process.

7. Collective Grievance

- 7.1 Where a grievance involves more than one employee, a single written grievance should be raised, and this should include the names of all those involved and the detailed reason(s) for their grievance. In the event of a grievance involving a large number of staff, a list of all job role(s) and department(s) must be given. The group must identify a nominee amongst those aggrieved who will be the single point of contact for all communications. The group must also identify one or two individuals to attend all meetings on behalf of the group.
- 7.2 Employees who are trade union members should identify a single trade union representative to represent them. Where there are members from a number of trade unions as party to the collective grievance there should be representation from each union.
- 7.3 Employees who are not trade union members may identify a colleague (not acting in a legal capacity) to represent this group.

8. Appeal

- 8.1 If the grievance has not been resolved to the employee's satisfaction, there is a right of appeal. Appeals will be heard in line with the details provided in the Scheme of Delegation (**Appendix A**).
- 8.2 The employee may refer the matter to the appeal stage by writing to the relevant senior manager (see **Appendix A**), within 5 working days of the date on the outcome letter. The appeal letter must state the grounds for appeal, setting out their original grievance and providing explanation why they are not satisfied with the decision at Stage 1.
- 8.3 The manager will acknowledge the appeal letter within 5 working days of the date of the appeal letter.
- 8.4 The manager will arrange a meeting to hear the appeal without undue delay. This meeting will usually take place within 10 working days of receipt of the grievance, but where this is not practical the manager will inform the individual of

the reason why and will mutually agree the earliest possible date for the meeting. The manager should write to the employee and confirm the date, time and location of the meeting.

- 8.5 The Chair of the original Grievance Panel will present the management case supported by the relevant HR Team member.

The manager should produce a statement of the case which will include;

- A new summary of case
- The outcome letter from the Grievance Hearing
- The notes of the Hearing
- All other documents used in support of the Grievance Hearing

- 8.6 The management side will then be able to ask any questions about the case the employee(s) have presented.

- 8.7 The employee should be informed of the outcome of the appeal in writing within 10 working days.

- 8.8 Under normal circumstances this is the final stage in the appeal process and the employee will have no further right to appeal.

9. Equality and Diversity Statement

- 9.1 The Nottingham and Nottinghamshire ICB pay due regard to the requirements of the Public Sector Equality Duty (PSED) of the Equality Act 2010 in policy development and implementation as a commissioner and provider of services as well as an employer.

- 9.2 The ICB is committed to ensuring that the way we provide services to the public and the experiences of our staff does not discriminate against any individuals or groups on the basis of their age, disability, gender identity (trans, non-binary), marriage or civil partnership status, pregnancy or maternity, race, religion or belief, gender or sexual orientation.

- 9.3 We are committed to ensuring that our activities also consider the disadvantages that some people in our diverse population experience when accessing health services. Such disadvantaged groups include people experiencing economic and social deprivation, carers, refugees and asylum seekers, people who are homeless, workers in stigmatised occupations, people who are geographically isolated, gypsies, roma and travellers.

- 9.4 As employers, we are committed to promoting equality of opportunity in recruitment, training and career progression and to valuing and increasing diversity within our workforce.
- 9.5 To help ensure that these commitments are embedded in our day-to-day working practices, an Equality Impact Assessment has been completed for, and is attached to, this policy.

10. Communication, Monitoring and Review

- 10.1 The Grievance Policy will be highlighted to new employees at staff induction and is stored on the ICB's HR/OD Intranet pages and by the ICB's HR&OD Team.
- 10.2 This Policy will be reviewed periodically every three years (or earlier if changes in the law or any other circumstances require it) and will be approved by the Remuneration Committee.
- 10.3 The application of this policy and the effectiveness of the provision of awareness training will be monitored by the HR team as and when required and in line with the requirements within the NHS Resolution Risk Management Standards, Equality statutory duties and Care Quality Commission. These require the ICB to record, analyse and publish employee relations activity to ensure the ICB are eliminating discrimination and promoting equality of opportunity. In accordance with this requirement, summary reports will be submitted to the Integrated Care Board. Any suspected discriminatory trend will be investigated.
- 10.4 To ensure compliance of this policy, reviews will be carried out on a regular basis by the most suitable lead individual. Any outcomes of reviews will be reported to the relevant committees appropriate to the ICB who will review the results and delegate actions/planning for any issues/outcomes that have been identified to the most appropriate lead individual.
- 10.5 Any individual who has queries regarding the content of this policy, or has difficulty understanding how this policy relates to their role, should contact the HR Lead.

11. Staff Training

- 11.1 All staff will be offered relevant training commensurate with their duties and responsibilities. Staff requiring support should speak to their line manager in the first instance. Support may also be obtained through their HR Department.

11.2 Any individual who has queries regarding the content of this policy, or has difficulty understanding how this policy relates to their role, should contact the HR Team via email at nnicb-nn.hr@nhs.net

12. Interaction with other ICB Policies

12.1 This policy should be read in conjunction with the following ICB policies:

- Acceptable Behaviours Policy
- Freedom to Speak Up Policy

13. References

13.1 The following legislation and guidance has been taken into consideration in the development of this procedural document:

- Equality Act 2010.
- ACAS Code of Practice on Disciplinary and Grievance Procedures.
- General Data Protection Regulations 2018.

APPENDIX A: Scheme of Delegation

The Scheme of Delegation has been developed to manage any disciplinary or grievance processes within the ICB. The table provides detail of the lowest grade officer that can take specified action or issue a disciplinary sanction.

Staff Group	Written Warning	Final Written Warning	Dismissal	Suspension from Duty	Appeals
Chief Executive Officer	ICB Chair in consultation with NHS England	ICB Chair in consultation with NHS England	ICB Chair in consultation with NHS England	ICB Chair in consultation with NHS England and Head of HR & OD	ICB Chair from a different footprint in consultation with NHS England and Head of HR & OD
Directors	Chief Executive	Chief Executive	ICB Chair	Chief Executive in consultation with Head of HR & OD	ICB Chair in consultation with NHS England and Head of HR & OD
Employees who report directly to a Director	Director	Director	Director from a different directorate	Director in consultation with Head of HR & OD	Chief Executive in consultation with Head of HR & OD
All other employees	Line Manager (Band 4 and above)	Line Manager (Band 4 and above)	Director	Director in consultation with Head of HR & OD	Director from a different directorate in consultation with Head of HR & OD

APPENDIX B: Possible Outcomes

Mediation

Mediation is a voluntary process that may be considered at any stage of this process.

Mediation is a mechanism to help to resolve issues between individuals or groups following dispute. Mediation can be used to help resolve issues and repair relationships in the following circumstances; however the list is not exhaustive:

- Dealing with conflict between employees or line managers and their teams.
- Repair and rebuild relationships following a formal employee relations process.
- Addressing a range of issues relating to communication breakdowns, personality clashes or relationship issues.

Should mediation be considered a possible option for resolution, investigating managers should discuss this with the Human Resources Team.

A trained mediator is engaged to conduct the mediation process. The mediator will facilitate the discussions between individuals or groups but it is not their role to agree the outcome. The responsibility of the outcome of the mediation process sits with the individuals or groups involved.

Coaching

Coaching targets improvement at work and usually focuses on specific skills and goals, although it may also have an impact on an individual's personal attributes (such as social interaction or confidence).

The process typically lasts for a relatively short defined period of time, or forms the basis of an on-going management style.

Mentoring

Mentoring in the workplace is described as a relationship in which a more experienced colleague uses his or her greater knowledge and understanding of the work or workplace to support the development of a more junior or inexperienced member of staff.

Mentoring relationships tend to be longer term than coaching arrangements.

Mentoring can help employees developing specific professional skills and to develop a sound understanding of the organisation as a whole in a supportive environment.

APPENDIX C: Equality Impact Assessment

Date of assessment:				
For the policy, and its implementation, please answer the questions against each of the protected characteristic and inclusion health groups:	Has the risk of any potential adverse impact on people in this protected characteristic group been identified, such as barriers to access or inequality of opportunity?	If yes, are there any mechanisms already in place to mitigate the adverse impacts identified?	Are there any remaining adverse impacts that need to be addressed? If so, please state any mitigating actions planned.	Are there any positive impacts identified for people within this protected characteristic group? If yes, please briefly describe.
Age ¹	None identified.	N/A	No	No
Disability ²	None identified.	N/A	No	No
Gender identity (trans, non-binary) ³	None identified.	N/A	No	No
Marriage or civil partnership status ⁴	None identified.	N/A	No	No
Pregnancy or maternity ⁵	None identified.	N/A	No	No

¹ A person belonging to a particular age (for example 32 year olds) or range of ages (for example 18 to 30 year olds).

² A person has a disability if she or he has a physical or mental impairment which has a substantial and long-term adverse effect on that person's ability to carry out normal day-to-day activities.

³ The process of transitioning from one gender to another.

⁴ Marriage is a union between a man and a woman or between a same-sex couple.

Same-sex couples can also have their relationships legally recognised as 'civil partnerships'.

⁵ Pregnancy is the condition of being pregnant or expecting a baby. Maternity refers to the period after the birth, and is linked to maternity leave in the employment context. In the non-work context, protection against maternity discrimination is for 26 weeks after giving birth, and this includes treating a woman unfavourably because she is breastfeeding.

Date of assessment:				
For the policy, and its implementation, please answer the questions against each of the protected characteristic and inclusion health groups:	Has the risk of any potential adverse impact on people in this protected characteristic group been identified, such as barriers to access or inequality of opportunity?	If yes, are there any mechanisms already in place to mitigate the adverse impacts identified?	Are there any remaining adverse impacts that need to be addressed? If so, please state any mitigating actions planned.	Are there any positive impacts identified for people within this protected characteristic group? If yes, please briefly describe.
Race ⁶	None identified.	N/A	No	No
Religion or belief ⁷	None identified.	N/A	No	No
Gender ⁸	None identified.	N/A	No	No
Sexual orientation ⁹	None identified.	N/A	No	No
Carers ¹⁰	None identified.	N/A	No	No

⁶ Refers to the protected characteristic of race. It refers to a group of people defined by their race, colour, and nationality (including citizenship) ethnic or national origins.

⁷ Religion refers to any religion, including a lack of religion. Belief refers to any religious or philosophical belief and includes a lack of belief. Generally, a belief should affect your life choices or the way you live for it to be included in the definition.

⁸ A man or a woman.

⁹ Whether a person's sexual attraction is towards their own sex, the opposite sex, to both sexes or none. <https://www.equalityhumanrights.com/en/equality-act/protected-characteristics>

¹⁰ Individuals within the ICB which may have carer responsibilities.