

Employee Relations Policy

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PURPOSE	This document outlines the Trust's framework for the management of specific employee relations matters. This is in compliance with the statutory requirements of Employment Law and National Terms and Conditions of Employment
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1.0	Employee Relations Policy	30/09/2019
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1. Policy Statement

- 1.1 Employee Relations can be defined as the policies, procedures and practices which are concerned with the management of relationships between University Hospitals Birmingham NHS Foundation Trust, the 'Trust', individual members of staff and collective groups of staff within the Trust.
- 1.2 The Trust recognises that effectively handling employee relations matters as they arise and in a fair, consistent and equitable manner plays an important role in maintaining strong employment relations and a high morale amongst its workforce, which in turn positively impacts on service delivery and the experience of the Trust's patients and their care.
- 1.3 The purpose of this policy is to ensure that employee relations matters are dealt with fairly, consistently, in a timely manner and, wherever possible, at their point of origin before they escalate into major problems. The main objective is to preserve and maintain the employment relationship and to work in the spirit of prompt and effective resolution of issues within the workplace. Focusing on resolution is consistent with the Trust's Just and Learning culture.
- 1.4 All Human Resources policies and procedures are underpinned by the partnership commitment between management and Staff Side representatives and the Trust's Vision and Values.

2. Scope

- 2.1 This policy and its associated procedures have different applications depending on the staff group. The table below identifies which procedures apply to which groups of staff.

Staff Group \ Procedure	Non-medical staff directly employed	Medical & Dental staff directly employed	Non-medical bank staff	Medical & Dental locums	Non-medical Honorary contracts	Medical Honorary Contracts
Disciplinary	√	X	√	X	√	X
Grievance	√	√	√	√	√	√
Dignity at Work (Bullying and Harassment)	√	√	√	√	√	√
Performance Improvement	√	X	√	X	√	X

Staff Group Procedure	Non-medical staff directly employed	Medical & Dental staff directly employed	Non-medical bank staff	Medical & Dental locums	Non-medical Honorary contracts	Medical Honorary Contracts
Organisational and Workforce Change	√	√	X	X	X	√
Sickness Absence and Attendance	√	√	X	√	√	√
Redeployment	√	√	X	X	X	X

2.2 Conduct and capability issues for substantive Medical and Dental staff including those on honorary contracts are managed under the Trust's Maintaining High Professional Standards in the Modern NHS (MHPS) procedure.

2.3 Ad-hoc Medical and Dental locums are engaged for individual bookings and have separate contractual arrangements.

2.4 In addition to the detail in the table above for Dignity at Work (Bullying and Harassment), the provisions under the procedure are extended to students, contractors, agency staff and volunteers.

3. Framework

3.1 This section describes the broad framework for the policy. Detailed instructions are provided in the associated procedures. The procedures may be amended from time to time by authority of the Chief People Officer, provided that such amendments are compliant with this policy.

3.2 There are a number of employee relations matters which are covered by this policy, as follows:

- Disciplinary
- Grievance and Disputes
- Dignity at Work (Prevention of Bullying and Harassment)
- Performance Improvement
- Organisational and Workforce Change
- Sickness Absence and Attendance at Work
- Redeployment.

3.3 Disciplinary

- 3.3.1 All staff are required to maintain certain standards of conduct. Any member of staff who fails to maintain acceptable standards of conduct in accordance with their contract of employment, job role requirements and/or the Trust's disciplinary standards, may be subject to disciplinary action. It is necessary to handle disciplinary issues effectively to assist and encourage all staff to maintain high standards of conduct and to provide a fair and consistent method of dealing with problems that individual staff may have in meeting these standards.
- 3.3.2 Where a disciplinary issue arises, all parties will ensure that the issue is managed in accordance with the Disciplinary Procedure. Disciplinary issues will normally be handled as soon as they arise, by an appropriate manager with the necessary authority. Disciplinary issues will be dealt with proportionately and without unreasonable delay to minimise distress and impact on service delivery.
- 3.3.3 Informal action, on a one-to-one basis, will be taken to resolve minor conduct issues or to set out standards of behaviour for first time offence, where appropriate.
- 3.3.4 For more serious or repeated disciplinary issues an investigation will be carried out to establish the facts. Staff will be advised of the nature of the allegations made against them and will be given the opportunity to state their case. No formal disciplinary action will be taken against a member of staff until the investigation is concluded.
- 3.3.5 At any point in cases of alleged misconduct or gross misconduct, it may be necessary to consider suspension. Suspension is not disciplinary action and does not imply any decision about the allegations. Suspension will be for no longer than necessary and will be as set out in the procedure.
- 3.3.6 Following conclusion of an investigation and where it has been determined that there may be a case to answer there are two potential routes where a disciplinary sanction can be issued - a Fast Track disciplinary meeting or a disciplinary hearing.
- 3.3.7 A disciplinary meeting (Fast Track) is a less formal disciplinary meeting attended by the member of staff and their representative, the disciplining manager and a representative from Human Resources. Sanctions up to and including a final written warning can be issued.
- 3.3.8 Consideration will only be given to holding a Fast Track disciplinary meeting where the member of staff has taken full

responsibility for their actions and accepted the allegations against them.

3.3.9 A disciplinary hearing will be convened as detailed in the Disciplinary Procedure if the findings of an investigation are that the case is particularly complex, or it is serious enough to potentially result in dismissal (in the case of serious and/or gross misconduct), or if:

- a member of staff has a live final warning; or
- the member of staff disputes the findings of the investigation; or
- the member of staff has requested a formal hearing rather than accept a sanction through the Fast Track process; or
- the member of staff rejects a sanction offered through Fast Track.

3.3.10 Potential outcomes from a disciplinary hearing are:

- No case to answer
- First written warning
- Final written warning
- Dismissal
- Action short of dismissal / alternatives to dismissal (e.g. redeployment to a lower banded role)

3.3.11 Where appropriate, and depending on the severity of the offence, the Trust may determine a Final Written Warning is an appropriate level of sanction for a first offence, i.e. staff do not necessarily progress in a linear fashion through the warning stages.

3.3.12 No member of staff will be dismissed for a first offence of misconduct unless this is very serious or gross misconduct.

3.3.13 In cases where the outcome of a disciplinary hearing is dismissal on the grounds of gross misconduct, staff may be dismissed without notice or payment in lieu of notice.

- 3.3.14 Staff will be given a written explanation of any disciplinary action taken. Where recommendations have been made the letter must also give clarification of what actions are required to be achieved and timescales set.
- 3.3.15 Staff who are issued with a first or final written disciplinary warning will have any due increment/ pay step deferred for the duration of the warning. (Please see the Pay Progression Procedure.)
- 3.3.16 Staff will have the right to appeal against disciplinary warnings or dismissal.
- 3.3.17 Where there is a suspicion of fraud or criminal activity, the case will be referred to Counter Fraud and/or the Police as required, as per the Counter Fraud and Corruption Policy.
- 3.3.18 If a member of staff is subject to investigation by the police for alleged offences or is subject to investigation by their professional body, the Trust will be entitled to pursue its own enquiries within the application of this policy and its associated procedure. Investigations and disciplinary action will not necessarily wait for, or be dependent on, the outcome of police enquiries or legal proceedings. Any conditions, restrictions or custodial sentences imposed by the Police or courts which prevent a member of staff from attending work will be dealt with as an unauthorised absence and pay will be withheld. Further advice must be sought from Human Resources if this situation arises.
- 3.3.19 Criminal offences, cautions, convictions or arrests unconnected with a member of staff's employment will not automatically lead to the application of the Disciplinary Procedure; however all staff are required to declare these to their manager at the earliest opportunity. Failure to declare such situations will be treated as a serious matter and will be investigated accordingly.

3.4 Grievance and Disputes

- 3.4.1 A grievance is a complaint, concern or problem raised by a member of staff about a decision, action or omission which the Trust, or a member of staff acting for the Trust, has taken or is contemplating taking in relation to them.
- 3.4.2 A dispute is a collective grievance raised by a group of staff, or on their behalf by a recognised trade union or professional body. In such circumstances, a representative of the group or a Staff Side representative will raise the matter on behalf of the

group, stating the names of the staff who are signatories to the dispute.

- 3.4.3 Grievances or disputes must be in relation to specific decisions, actions or omissions taken by management on behalf of the Trust.
- 3.4.4 Details of the types of issues that might give rise to a grievance can be found in the Grievance Procedure.
- 3.4.5 The Grievance Procedure does not cover issues relating to:
- Bullying and Harassment, which is dealt with under the Trust's Dignity at Work (Prevention of Bullying and Harassment) Procedure;
 - Performance management, dismissal or disciplinary matters (which are dealt with under their respective procedures);
 - Nationally agreed terms and conditions of employment, or matters that are within the scope of formal negotiations at national level;
 - National insurance, income tax and rules of pension schemes outside of the Trust's control
 - Where staff wish to raise a concern through a protected public interest disclosure (to 'whistleblow'), they must refer to the Trust's Raising Concerns at Work policy.
- 3.4.6 Informal action will be considered, where appropriate, to resolve problems.
- 3.4.7 Where a grievance is lodged, all parties will ensure that the grievance is being managed in accordance with the Grievance Procedure. The procedure must be followed by both the member of staff and manager working with each other.
- 3.4.8 Where a formal investigation has been initiated, the process is only considered to be concluded after written feedback has been given to the member of staff. Any holding action in place during the investigation will remain in place until the complete process is considered by management to be closed.
- 3.4.9 Where a member of staff raises a grievance during a disciplinary or performance management process, the two processes will normally run concurrently. Where the grievance is related to the application of the Disciplinary, Maintaining High

Professional Standards (for Medical and Dental staff) or Performance Improvement procedures, advice must be sought from Human Resources.

3.4.10 Staff will be given a written explanation of the outcome of any grievance. Where appropriate and applicable, clarification will be provided of what actions are required to be achieved and timescales will be set.

3.4.11 The complainant will have the right to appeal against the outcome.

3.5 Dignity at Work (Prevention of Bullying and Harassment)

3.5.1 Bullying or harassment are not acceptable under any circumstances, or at any level in the Trust. The Trust will take any allegations of bullying or harassment seriously and will deal with them promptly and confidentially. Serious cases of bullying or harassment may constitute gross misconduct leading to dismissal.

3.5.2 Bullying is offensive, intimidating, malicious or insulting behaviour, an abuse or misuse of power through means that undermine, humiliate or injure the recipient.

3.5.3 Harassment is any unwanted behaviour that violates an individual's dignity or creates an intimidating, hostile, degrading, humiliating or offensive environment for them.

3.5.4 If a member of staff feels that they are being bullied or harassed, they can seek advice from their line manager, Human Resources, Occupational Health, staff counselling services, the Freedom to Speak Up Guardian, Confidential Contacts or a Staff Side representative.

3.5.5 Generally, the decision whether to pursue a complaint is up to the member of staff. However, the Trust has a duty to protect all staff and may pursue the matter independently if it considers it appropriate to do so.

3.5.6 In the event of a complaint of bullying or harassment, every effort should be made by all those involved to resolve the issue informally at an early stage. In cases where the informal approach has not been successful, or in more serious cases, it may be necessary to use a formal process. The process set out in the Dignity at Work (Prevention of Bullying and Harassment) Procedure must be followed in these circumstances.

- 3.5.7 Facilitated meetings or mediation may be an appropriate course of action to be taken at any point in the process with the agreement of all parties involved.
- 3.5.8 Possible outcomes from an investigation may include recommendations for re-training, support structures, team building or disciplinary action.
- 3.5.9 Victimisation or retaliation against any party will not be tolerated and will result in disciplinary action in accordance with the Disciplinary Procedure.
- 3.5.10 False allegations will be taken seriously and will result in disciplinary action in accordance with the Disciplinary Procedure.
- 3.5.11 Managers might have to take actions such as outlining expected standards of performance, asking for improvements in performance, and making clear the consequences of poor performance to staff. Whilst this may make the member of staff feel uncomfortable, these do not in themselves constitute bullying or harassment and normal performance processes will be expected to continue.

3.6 Performance Improvement

- 3.6.1 A performance or capability issue is the inability to reach satisfactory standards of competence, or any decline in normal levels of performance below a satisfactory level. They may be of a clinical, technical, professional or managerial nature, and may be due to a lack of knowledge, skills or aptitude.
- 3.6.2 Whilst it can be hard for managers to have difficult conversations about work performance, ignoring issues can demotivate other staff and impact on service delivery. It is therefore essential that managers have such conversations as soon as matters arise. Most performance or capability issues can be identified and assessed through normal day-to-day management processes e.g. 1-1 meetings, supervision. However, there may be occasions when problems relating to an individual's performance need a more structured approach using the formal stages in the Performance Improvement procedure.
- 3.6.3 There are three formal stages in the Performance Improvement procedure:
- First Formal Management of Performance Issues – Stage 1;

- Final Formal Management of Performance Issues – Stage 2;
- Hearing Stage 3.

3.6.4 The possible outcomes of Hearing Stage – 3 are:

- For the process to be stopped if performance is now satisfactory;
- Dismissal, or
- Alternatives to dismissal, e.g. redeployment to a lower banded post.

3.6.5 An exception to the above procedure is a member of staff who is been supported through any type of preceptorship, induction programme (e.g. Healthcare Practitioner Induction Programme or Care Certificate), a trainee or an individual in a development role where, despite being given training and support, they have been unable to meet contractual expectations. Here, the member of staff will go directly to Stage 3 without the need for the previous stages if there is clear evidence that they have failed to meet the minimum standards.

3.6.6 Where a member of staff is confirmed as having a disability which may be impacting on their performance, reasonable adjustments will be made to help the individual meet the required standards. If all reasonable adjustments have been made and the member of staff still does not meet the required standards, it will be necessary to initiate the formal performance management procedure.

3.7 Organisational Change

3.7.1 Organisational changes can range from minor changes e.g. changes in shift patterns to major changes e.g. re-organisation of a department resulting in redundancies.

3.7.2 As there will be different circumstances for each organisational change, a fair process will be determined at the outset. Staff side will be notified of any potential changes at the earliest possible opportunity.

3.7.3 If the change is minor, for instance without direct impact on the Terms and Conditions/Contract of Employment of the staff member, the line manager must have a discussion with the Workforce Transformation Team. If it is perceived that staff are

unlikely to be concerned, there is no need for consultation with staff representatives. If at any stage staff request consultation with staff representatives, this will be arranged.

3.7.4 If there are significant changes which will affect staff, a formal proposal paper must be drawn up and shared with Staff Side. This will include an option appraisal with timescales which will be presented to the Divisional Management Team or, in some, circumstances to the relevant Directors and/or Board of Directors.

3.7.5 If there are likely to be 20 or more redundancies, the following must be notified:

- Board of Directors;
- Trade Union or staff representatives of the sections of staff that are affected by the redundancy process to enable the statutory collective consultation process to commence;
- The Redundancy Payments Service (RPS). Evidence of this will also be forwarded to staff side representatives;
- NHS England.

3.7.6 Irrespective of the above, the Joint Negotiating Consultative Committee (JNCC) will be informed of any potential redundancies. Formal consultation begins once the information required under statute is provided to the relevant trade unions. In the case of Medical or Dental staff, the Joint Local Negotiating Committee (JLNC) will be informed.

3.7.7 Consultation with trade unions and individuals must be carefully and appropriately timed, and will commence prior to any public announcement of the redundancy programme.

3.7.8 Consultation and notification of any redundancies will begin at the earliest opportunity and in any event:

- 30 days before the first of the dismissals takes effect where between 20 and 99 redundancy dismissals are proposed at one establishment within a period of 90 days or less; or
- 45 days before the first of the dismissals takes effect where 100 or more redundancy dismissals are proposed at one establishment within a period of 90 days or less.

3.7.9 The Trust has a duty to make known the proposals and to consult affected staff and representatives as soon as possible, and at least adhere to the minimum periods for consultation laid down by legislation. Irrespective of the number of potential redundancies individual consultation must take place with each member of staff to ensure a fair process is followed. A one to one meeting will take place with all staff placed at risk of redundancy, with their line manager or departmental manager, a Human Resources manager and Staff Side representative or workplace colleague.

3.7.10 The Trust will disclose in writing to Staff Side/trade unions:

- the reasons for redundancy proposals;
- the number and descriptions of staff who are likely to be affected;
- total number of staff of any such description;
- proposed method of selecting staff;
- steps to keep the number of dismissals to a minimum; and
- proposed method of carrying out redundancies, including notice period and how redundancy payments will be calculated.

3.7.11 Once the decision regarding the proposed change has been made, the new structure and workforce plan for the services affected and details of all current posts affected will be outlined to the affected staff as well as the methodology for filling posts.

3.8 Sickness Absence and Attendance at Work

3.8.1 The Trust is committed to supporting the optimum health of its staff and will act reasonably considering all circumstances, including the assessment of organisational factors that may lead to sickness absence. This includes the organisation of working patterns in accordance with the Working Time Regulations 1998. Information relating to additional health and wellbeing support mechanisms can be found on the Trust's intranet site.

3.8.2 Sickness absence is defined as the non-attendance for scheduled work by a member of staff due to illness.

- 3.8.3 All absences will be recorded and used to monitor absence levels and indicate where action may be needed.
- 3.8.4 Every member of staff must complete a sickness absence form immediately upon their return to work to ensure the absence is authorised. This will be available with the associated procedural guidance on the Trust intranet. Staff must also have a return to work interview with their manager at the earliest possible opportunity. This will facilitate the member of staff's effective and safe return to work as well as developing reasonable and practical steps to reduce likelihood of re-occurrence.
- 3.8.5 Advice and guidance will be obtained from Occupational Health and any other relevant advisors as appropriate in order to ensure a member of staff's fitness for work in accordance with the procedural document.
- 3.8.6 Where it has been determined that a member of staff has a condition that may fall under the disability provisions of the Equality Act 2010 adjustments must be explored and implemented where reasonable and appropriate.
- 3.8.7 Staff who fail to follow the reporting requirements of the Sickness Absence and Attendance procedure, or who are absent frequently, may face formal action with sanctions up to and including dismissal.
- 3.8.8 Staff who fail to attend regularly for work or are no longer capable of fulfilling their contractual requirements, may face dismissal on the grounds of capability.
- 3.8.9 Staff will be notified in writing of the outcome of any meetings and will have the right to appeal against any formal warnings issued under the Sickness Absence procedure.

3.9 Redeployment

- 3.9.1 Redeployment is the process of securing alternative employment for a member of staff who is not able to continue in their substantive post as a result of organisational change, or the application of formal processes relating to capability (whether due to ill-health or a long-term condition, or poor performance), or in advance of the non-renewal of a fixed-term contract. There may be other circumstances, determined on a case by case basis, where the Trust determines that redeployment may be appropriate.

- 3.9.2 Where staff face being displaced from their role whether through organisational change or capability, the Trust will look to successfully redeploy affected individuals to retain valuable knowledge, skills and experience which would otherwise be lost if the employment ended.
- 3.9.3 In redundancy situations, the Trust will seek to redeploy to 'suitable alternative employment'. 'Suitable' means employment that reflects the member of staff's current and/or recent skill set and/or experience, or with a reasonable amount of training the member of staff could undertake the role (i.e. full re-training would not be considered reasonable). Consideration will be given to the personal circumstances of the member of staff, but they will be expected to show some flexibility in terms of hours and location.
- 3.9.4 The job search period for 'at risk' staff under organisational change will be 8 weeks, or equivalent to contractual notice if longer. For staff being redeployed for any other reason their job search period will be for 8 weeks.
- 3.9.5 Displaced staff will receive appropriate support during the period in which alternative employment is being explored. This will include access to reasonable learning and development opportunities in order that the member of staff is more fully equipped to exploit all potential alternative employment opportunities.
- 3.9.6 Throughout the redeployment period and any work trial, the member of staff's line manager from their substantive post will maintain responsibility for the individual and will therefore maintain support and contact. The Human Resources professional providing support to the process will also maintain regular contact with the member of staff to ensure that they understand what action has been taken, what steps they can take, and what progress has been made if any.
- 3.9.7 Work-based trials run for a period of four weeks. In trials for those at risk of redundancy, an extension will only be granted for retraining purposes. In other scenarios it may be possible to extend a four-week trial, but this will only be in exceptional circumstances: an extension to a trial may be as a result of reasonable adjustments under the Equality Act 2010. The rationale and arrangements for any extension must be set out in writing. Weekly reviews need to be undertaken during the four-week trial period to ensure the individual is appropriately supported and to try and resolve any issues as they arise. A formal review will be undertaken at the end of the four-week trial period.

3.10 Support for all parties

It is recognised that involvement in employee relations matters can be distressing for all parties involved. The Trust has a range of support mechanisms available including support from management, Occupational Health and Wellbeing services, staff side/trade unions and the Freedom to Speak Up Guardian/ Confidential Contacts.

3.11 Representation

Staff have the right to be accompanied by their accredited Staff Side/ Trade Union representative or a workplace colleague at all formal stages of the procedures detailed previously.

3.12 Confidentiality

Confidentiality must be maintained by all parties and at all times during employee relations matters. Any breach of confidentiality by any party may result in disciplinary action in accordance with the Disciplinary Procedure.

4. Duties

4.1 Chief People Officer

The Chief People Officer is responsible for this policy and its implementation through the Deputy Director HR Operations and has the authority to approve all other procedural documents associated with this policy and any amendments to such documents in response to changes in legislation or best practice, and is responsible for ensuring that such documents are compliant with this policy.

4.2 Managing Directors and Corporate Equivalents

Managing Directors and Corporate Equivalents will ensure that:

- 4.2.1 They are fully conversant with this policy and its associated procedures;
- 4.2.2 All staff within their Division who hold line management responsibilities are familiar with this policy and are trained in applying all elements of the associated procedures;
- 4.2.3 All staff who hold line management responsibilities work effectively and consistently with Human Resources and Staff Side Representatives in the application of this policy and its associated procedures.

4.3 Deputy Director - HR Operations

The Deputy Director - HR Operations will ensure the following requirements are met:

- 4.3.1 The provision and maintenance of this policy and its associated procedures and guidance are part of the Trust's portfolio of controlled documents;
- 4.3.2 Human Resources staff who are required to deliver responsibilities arising from these documents are aware of, and competent, to deliver these responsibilities, providing leadership and support as required;
- 4.3.3 The provision of training for managers in support of this policy and its procedures;
- 4.3.4 To record and monitor all formal employee relations matters as outlined in this policy. Records will be retained in the Human Resources Department and will be formally reported annually to the Board of Directors via the Annual Workforce Report. Trends will be identified as appropriate and necessary action taken (if applicable).

4.4 Line Managers

All staff with line management responsibilities will ensure the following requirements are met:

- 4.4.1 They are fully conversant with this policy and the associated procedural documents and their application within their area of responsibility;
- 4.4.2 They have taken responsibility to ensure they are appropriately trained to implement this policy and its associated procedures in a consistent and fair manner and they maintain these skills via updates, ensuring that their Divisional Directors/ Corporate equivalents have recordable evidence to that effect;
- 4.4.3 They work collaboratively with Staff Side Representatives in applying this policy and its associated procedures;
- 4.4.4 They seek advice and work collaboratively as appropriate with Human Resources;
- 4.4.5 They make staff aware of the Trust procedures for employee relations matters;

- 4.4.6 Resolve employee relations matters at the lowest possible level quickly and effectively when these arise;
- 4.4.7 They appropriately document, store and retain any informal actions taken in accordance with the associated procedures;
- 4.4.8 In the giving of information or advice related to this policy and its associated procedure, they adhere to the requirements of the Trust's Equality and Diversity in Employment policy and practices in their dealings with staff.

4.5 Human Resources Staff

Human Resources staff are required to:

- 4.5.1 Provide fair, consistent and legally compliant advice to staff and line managers in their application of this policy and associated procedures;
- 4.5.2 Provide training to line managers in the application of this policy and its associated procedures;
- 4.5.3 Have detailed awareness of this policy and its associated procedures, and maintain their learning in order to support staff and those with line management responsibilities;
- 4.5.4 Advise staff and managers on courses of action which may avoid or minimise the likelihood of employee relations matters at the outset;
- 4.5.5 Identify trends, escalate as appropriate, put action plans in place and monitor outcomes;
- 4.5.6 Work collaboratively with Staff Side representatives.

4.6 Occupational Health Professionals

- 4.6.1 Occupational Health professionals will provide advice to managers, staff, Human Resources professionals and Staff Side representatives about any area of support for health-related issues which may affect a member of staff during their employment.
- 4.6.2 This may include, but is not limited to, providing advice on an individual's fitness to work, rehabilitation, return to work including any requirements for work adaptation as required by disability legislation, discharge on medical grounds, ill-health retirement, incapacity and injury benefits.

4.7 Staff Side/Trade Union Representatives

- 4.7.1 Accredited Staff Side/Trade Union Representatives will be familiar with this policy and its associated procedures in order to provide advice and support to their members if requested to do so.
- 4.7.2 Staff Side representatives will work collaboratively with line managers and Human Resources staff.

4.8 All Staff

All staff will ensure that they:

- 4.8.1 Attend work when they are contracted to and perform their duties as required by their job role;
- 4.8.2 Comply with any relevant professional codes of conduct in addition to all Trust policies, procedures and systems as non-adherence may lead to disciplinary action;
- 4.8.3 Recognise that workplace issues can often be resolved informally in the first instance, and should consider alternatives to formal processes e.g. discussing concerns with the relevant person; and
- 4.8.4 Recognise that any formal employee relations matters must be raised in accordance with Trust policy and procedures.

5 Implementation and Monitoring

- 5.1 The Employee Relations Policy and its associated procedures will be circulated throughout the Trust to ensure accessibility via Trust newsletters, intranet and team briefing.
- 5.2 Appendix A provides full details of how the policy and its associated procedural documents will be monitored by the Trust.

6 References

ACAS Disciplinary and Grievances at Work: Guide and Code of Conduct

Employment Act 2008

Employment Relations Act 2004

Employment Rights Act 1996

Equality Act 2010

Fixed Term Employees (Prevention of Less Favourable Treatment) Regulations 2002

Health and Safety at Work Act 1974

NHS Terms and Conditions of Employment

Protection from Harassment Act 1997

7 Associated Policy and Procedural Documentation.

Counter Fraud and Corruption Policy

Dignity at Work (Prevention of Bullying and Harassment) Procedure

Disciplinary Procedure

Equal Opportunities in Employment Policy

Grievance Procedure

Maintaining High Professional Standards in the Modern NHS (MHPS) Procedure

Pay Progression Procedure

Performance Improvement Procedure

Raising Concerns at Work Policy and Procedure

Redeployment Procedure

Sickness Absence Procedure

Organisational and Workforce Change Procedure

Appendix A

Monitoring Matrix

MONITORING OF IMPLEMENTATION	MONITORING LEAD	REPORTED TO PERSON/GROUP	MONITORING PROCESS	MONITORING FREQUENCY
Number of formal disciplinary matters	Deputy Director - HR Operations	Board of Directors	Annual Workforce Report	Annual
Likelihood of entry of BAME and White staff progressing through formal disciplinary	Deputy Director HR Operations	Board of Directors	Workforce Race Equality Standard Report	Annual
Numbers of staff raising grievances, and the outcomes	Deputy Director HR Operations	Board of Directors	Annual Workforce Report	Annually
Number of formal bullying and harassment cases, including timescales and outcomes	Deputy Director HR Operations	Board of Directors	Annual Workforce Report	Annual
Likelihood of BAME and White staff reporting discrimination at work	Deputy Director HR Operations	Board of Directors	Workforce Race Equality Standard Report	Annual
Number of staff managed under the formal stages of the Managing Poor Performance Procedure	Deputy Director HR Operations	Board of Directors	Annual Workforce Report	Annually
Number of Organisational Change projects, staff affected and outcomes including number of redundancies if appropriate.	Head of Workforce OD	Board of Directors	Annual Workforce Report	Annually

Number of staff managed under the Redeployment Procedure, the broad reasons why, and the outcomes	Deputy Director HR Operations	Board of Directors	Annual Workforce Report	Annually
Sickness levels and reasons for absence.	Deputy Director HR Operations	Divisional Partnership Committees	Report	Monthly
		Board of Directors	Annual Workforce Report	Annual
A training programme appropriate to the need/role for Trust staff on the requirements of this policy and its associated procedures is provided and implemented.	Director of Human Resources	Board of Directors	Numbers of staff trained are reported in the Trust's Annual Workforce Report	Available on a monthly rolling programme, and on demand Annually