

**TRUST CORPORATE POLICY  
DISCIPLINARY POLICY**

<b>APPROVING COMMITTEE(S)</b>	Interim Partnership Board: 27 Mar 2012 JCC Chair's Action: 27 Mar 2012, HR Governance Group at Newham: 27 Mar 2012, Trust Policy Working Group Chair's Action Barts and The London: 27 Mar 2012	Date approved:	27 March 2012
<b>EFFECTIVE FROM</b>	27 March 2012		
<b>DISTRIBUTION</b>	All Managers in CAGs, Corporate Services and Non-Clinical Services via Trust Bulletin dated [date], all employees via Trust Intranet		
<b>RELATED DOCUMENTS</b>	ACAS Code of Practice 2009 NHS Constitution Trust Recognition Agreement		
<b>OWNER</b>	(Designate) Director of HR and (Designate) CEO		
<b>AUTHOR/FURTHER INFORMATION</b>	Author: HR Policy Development Workforce Specialist		
<b>EXTERNAL REFERENCES</b>			
<b>SUPERCEDED DOCUMENTS</b>	Disciplinary Policy, Procedure and Rules Trust Core Policy (Barts and The London NHS Trust), Disciplinary Policy and Procedure (Newham University Hospitals NHS Trust and Whipps Cross University Hospital NHS Trust and BLT Community Health Services)		
<b>REVIEW DUE</b>	Three years from the date of approval shown or earlier subject to legislative or national policy changes or organisational need.		
<b>KEYWORDS</b>	Policy, disciplinary, conduct		
<b>INTRANET LOCATION(S)</b>	<a href="http://bartshealthintranet/Policies/Policies.aspx?">http://bartshealthintranet/Policies/Policies.aspx?</a>		

<b>CONSULTATION</b>	<i>Barts Health Working Groups</i>	Policy Development Working Group Merger Governance Lead
	<i>Barts and the London NHS Trust (BLT)</i>	Trust Policy Working Group
	<i>Newham University Hospitals NHS Trust (NUHT)</i>	HR Governance Group
	<i>Whipps Cross University Hospital (WXUH)</i>	JCC
	<i>External Partners</i>	-
<b>SCOPE</b>	<i>For the groups listed below, failure to comply with this policy may result in investigation and management action which may include formal action in line with the Trust's disciplinary or capability procedures for Trust employees, and other action in relation to organisations contracted to the Trust, which may result in the termination of a contract, assignment, placement, secondment or honorary arrangement.</i>	
	Application: All Trust staff employed on a contract of employment (for medical and dental staff, this policy must be applied in accordance with the [Maintaining High Professional Standards] national framework and policy)	
	Exclusions: e.g. students, agency workers, Bank (only) staff, honorary contracts, junior doctors on training and contractors working within the Trust	

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Please note that where words/phrases are inside square brackets [ ], this indicates that you can click on the word/phrase when and it will send you to the relevant area of the policy or (if you are using a Trust PC) the relevant supporting document/template.

This Policy is available in Braille, large print, Easy-Read and alternative languages by request. It is a manager's responsibility to ensure employees are aware of these options.

**DISCIPLINARY POLICY**

**1 INTRODUCTION AND AIMS OF POLICY**

- 1.1 Barts Health (“The Trust”) is committed to promoting high standards of behaviour and conduct for all employees in order to deliver an efficient and consistently high standard of care to its patients and service users.
- 1.2 Where those standards are not met, the Trust encourage employees to improve their behaviour and commits to deal with cases of misconduct in line with the aims of this policy.
- 1.3 The Trust encourages open and honest conversations between managers and their employees so that both can work together to ensure the right support is in place to meet the aims of this policy (see 1.5).
- 1.4 Misconduct and poor behaviour at work has a disruptive effect on all employees involved and their ability to deliver a consistently high standard of care. Therefore this policy sets out a consistent and proactive approach to the management of these situations.
- 1.5 The aim of this policy is to ensure that the management of employee conduct:
  - Is fair, consistent, impartial and proactive and without discrimination in relation to any of the [\[protected characteristics\]](#)
  - Take the individual’s circumstances and needs into consideration
  - Ensure that expectations about employee behaviour are clear to all
  - Ensure that conduct issues are managed in an effective and efficient manner without unnecessary delay
  - Is carried out in line with the [\[Equality Act 2010\]](#) and [\[ACAS Code of Practice 2009\]](#)
  - Ensure efficient and high quality care for our patients
  - Are monitored to identify effectiveness of implementation
- 1.6 This policy contains the process and principles for managing disciplinary cases only. For further details please read the supporting [Management Guide].

**2 DEFINITIONS**

2.1 The following definitions are used in this policy:

<b>Commissioning Manager</b>	Normally the Line Manager of the individuals who may have committed the misconduct except where they have witnessed or been involved in the events. Where this is the case, it will be a more senior manager, typically the line manager’s manager.
<b>Exclusions from the policy</b>	Capability issues caused by an employee’s lack of knowledge or skill. These should be managed using the [Managing Employee Performance Policy]. Attendance problems as a result of sickness absence should be managed using the [Managing Sickness Absence Policy].
<b>Informal Conversation</b>	An informal meeting between the employee and their line manager (one-to-one). It allows the manager to raise concerns they may have about an employee’s conduct before they have become serious enough to warrant more formal disciplinary action and hopefully remedy any issues at an early stage. A file note should be kept for 12 months and a copy given to the employee (e.g. an email confirming the conversation).

	This may also be to inform the employee that the allegation is unfounded and no further action will be taken.
<b>Investigating Officer</b>	An impartial person who has had no previous knowledge of or involvement with the complaint or concern and is normally separate to the department/ward/environment in which it occurred unless it is mutually agreed otherwise. It is essential that they have undertaken investigation training. The employee may object to the choice of Investigating Officer where there may be a conflict of interest and request an alternative. The final decision of the who the Investigating Officer will be will rest with the Commissioning Manager.
<b>Investigation</b>	An impartial fact finding process. The investigation report will collate evidence collected including documentary evidence, witness statements and interviews and recommend whether or not, based on the evidence collected, the case proceed to a hearing. This would normally be carried out by an Investigating Officer who is external to the environment. Written records will be made of any interviews and a copy given to the interviewee to read and sign, with an opportunity to clarify or add to any points. Tape recording of the interview (by the interviewer or interviewee) is not permitted.
<b>Malicious allegation</b>	Complaints/allegations that are made and found to be without foundation (following an investigation), with the main intention to cause harm or upset other people. The Trust considers this misconduct and it may be gross misconduct.
<b>Mediation</b>	A voluntary process where an independent third party helps people in dispute to try to reach an agreement. This should be considered at all stages of the process. It may be appropriate to use an external agency to deliver the mediation.
<b>Minor Misconduct</b>	Straightforward and minor in their nature e.g. poor attendance, poor punctuality. Should be resolved through timely informal action.
<b>Misconduct</b>	An act of misconduct that is not serious enough to be considered 'gross misconduct' but is more than minor. This may also be repeated minor misconduct that has not been resolved following informal action. Typically this is a result of failure to meet the expected standards of conduct as stipulated in the Trusts policies and guidelines.
<b>Negligence</b>	A failure to exercise reasonable care and attention.
<b>Representative</b>	A representative of a recognised Trade Union, an accredited Staffside representative or an Employee of the Trust. Employees are not permitted to bring legal representation to internal formal or informal meetings.
<b>Serious/Gross misconduct</b>	A single act of misconduct that is serious enough on its own to justify the employee's summary dismissal. Where Gross Misconduct is suspected, an <a href="#">[investigation]</a> will always be required. See <a href="#">[appendix 1]</a> for examples of <a href="#">[Gross Misconduct]</a> .
<b>Serious/Gross negligence</b>	A conscious and voluntary disregard of the need to use reasonable care, which is likely to cause foreseeable grave injury or harm to persons, property, or both. It is conduct that is extreme when compared with ordinary negligence. Where Gross Negligence is suspected, an <a href="#">[investigation]</a> will always be required. This may result in summary dismissal.
<b>Temporary Redeployment and Suspension</b>	When there is a substantial risk posed to patients, the individual, other employees or the Trust (including <a href="#">[Trust reputation]</a> ) based on the allegations or actions or an investigation could be impeded by the individual remaining in work (e.g. theft, violence, malpractice, breaching confidentiality, serious patient complaints, Visa/Work Permit etc.) then it may be appropriate to suspend the individual. Suspension is a neutral act without prejudice, usually paid (except for visa/work permit concerns) whilst an investigation takes place and does not imply guilt (for further information please read the supporting <a href="#">[Management Guide]</a> ).

	<p>Where these risks can be mitigated by removing the individual from their normal place of work, by supervision or other restrictions then such measures as temporary suitable alternative redeployment should be taken as a preferable course of action to suspension. The short- and long-term implications of such action should be considered.</p> <p>Managers with the authority to suspend are described in <a href="#">[Appendix 1]</a>. The terms of the suspension should be reviewed when confirming the suspension in writing. Suspension should only be activated after having taken HR advice or, out of hours, having discussed the matter with the senior manager on-call.</p> <p>Temporary redeployment/suspension should be reviewed at least every 2 weeks and confirmed in writing.</p>
<b>Vexatious allegation</b>	<p>Complaints/allegations that are made and found to be without foundation (following an investigation), with the main intention of causing annoyance or in order to delay another process and for which there are no grounds.</p>

2.2 For a full list of terms, please see the [\[Glossary\]](#) in [\[Appendix 1\]](#)

### 3 DUTIES AND RESPONSIBILITIES

<b>Employee</b>	<ul style="list-style-type: none"> <li>• To carry out their work in a professional way which demonstrates the values of the Trust</li> <li>• Not to discuss the investigation with other colleagues (including those involved in the case) whilst the investigation is being carried out as it is a confidential matter. Breaching of confidentiality or prejudicing the investigation may result in disciplinary action itself</li> <li>• Request permission from the <a href="#">[Commissioning Manager]</a> if they need to access information or ask witnesses for statements</li> <li>• Make reasonable attempts to attend meetings (informal, formal and investigation) and co-operate with the investigation process</li> <li>• Check, sign and return records of interviews with any additions within 7 calendar days</li> <li>• Inform their line manager if criminal proceedings are being pursued for an offence(s) committed outside of the working environment. For the avoidance of doubt, all employees are obliged to declare during employment any interviews that they are required to attend with the police concerning allegations made against them, any criminal proceedings against them and any pending or actual criminal convictions, including cautions or (formal) reprimands (for further information please read the supporting <a href="#">[Management Guide]</a>)</li> <li>• Familiarise themselves with Trust and local policies and procedures and act within these</li> <li>• Exercise right to <a href="#">[representation]</a> at investigation meetings and hearings if they wish</li> <li>• Where a representative is unavailable on a proposed meeting date, the employee will provide their manager with a reasonable alternative within 7 calendar days of the original date or an extension to this by mutual agreement to take place within a reasonable timeframe</li> </ul>
<b>Witness</b>	<ul style="list-style-type: none"> <li>• Facilitate an investigation by providing statements and attending investigation interviews</li> <li>• Not to discuss the investigation with other colleagues (including those involved in the case) whilst the investigation is being carried out as it is a confidential matter. Breaching of confidentiality or prejudicing the investigation may result in disciplinary action itself</li> <li>• Check, sign and return records of interviews with any additions within 7 calendar days</li> </ul>

	<ul style="list-style-type: none"> <li>• Attend disciplinary hearings where required</li> <li>• Exercise right to <a href="#">representation</a> at investigation meetings and hearings if they wish</li> <li>• Where a representative is unavailable on a proposed meeting date, the employee will provide their manager with an alternative within 7 calendar days of the original date or an extension to this by mutual agreement to take place within a reasonable timeframe</li> <li>• Give an honest account of what they have witnessed in relation to the allegations</li> <li>• Understand that the employee suspected of misconduct will receive a copy of the notes from their investigation interview and statement as part of the investigation report if the case progresses to a disciplinary hearing. Where it doesn't progress to a hearing, only a summary report will be shared</li> </ul>
<p><b>Line Manager</b></p>	<ul style="list-style-type: none"> <li>• Ensure employees are aware of and understand the policy, their responsibilities (this may include helping them to get a copy in an alternative language, in Braille/large print or reading it to them)</li> <li>• Hold one-to-one meetings and informal 'catch-ups' and team communications to support an environment where employees understand the standards of conduct and behaviour that are expected of them and any issues can be proactively addressed as soon as they arise</li> <li>• Keep file notes about disclosed <a href="#">criminal proceedings</a> (see <a href="#">employee responsibilities</a>) in a secure manner and accordance with the Trust Data Protection Policy</li> <li>• Review active file notes about any misconduct during appraisal</li> <li>• Be sensitive to individual employee needs and discreet and consistent in their approach towards all employees who are involved in a disciplinary</li> <li>• Do not discuss the investigation with other employees unless it is for the purpose of the investigation</li> <li>• Proactively manage instances or allegations of misconduct in line with this policy in a timely manner and without unnecessary escalation</li> <li>• Remain impartial to all involved in the disciplinary case</li> <li>• Commission investigations where needed as part of the formal process</li> <li>• Seek Occupational Health advice about support or [reasonable adjustments] where needed or make a referral where employee stress is a concern</li> <li>• Carry out necessary risk assessments and consider application of [other Trust policies]</li> <li>• Monitor disciplinary levels and reasons in their team and take appropriate action</li> <li>• Suspending manager consider all information, guidance and alternatives before suspending an employee</li> <li>• Give the employee an opportunity to contact a Staffside/Trade Union Representative before being suspended, although this should not delay the suspension</li> <li>• Notify HR and the professional accountable officer of any suspension/temporary redeployment ahead of it taking place (except where this is not possible e.g. on a night shift. HR should be informed as soon as possible) and review suspension/temporary redeployment at least every 2 weeks (record kept on employee file and confirmed in writing)</li> <li>• Inform employees of their right to <a href="#">representation</a> at all formal disciplinary meetings, investigation meetings and any suspension review meetings</li> </ul>
<p><b>Commissioning Manager</b></p>	<ul style="list-style-type: none"> <li>• Refer to Counter Fraud team in suspected cases of fraud, theft or corruption</li> <li>• Commission an investigation within a maximum of 2 weeks of the misconduct occurring/being discovered</li> <li>• Identify an appropriate Investigating Officer to carry out the investigation, notify them</li> </ul>

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	<p>of the allegation(s) and Terms of Reference in writing and supply them with any documentary evidence that is available</p> <ul style="list-style-type: none"> <li>• Notify HR of the investigation</li> <li>• Remain impartial throughout the investigation</li> <li>• Monitor investigation to ensure it is concluded in a timely manner and a maximum of 3 months unless mutually agreed with the Investigating Officer and Employee. Escalate where necessary</li> <li>• Provide the employee with a copy of the allegation(s) against them, the Terms of Reference for the investigation and any relevant (anonymised) documentary evidence and notify them who they can seek <a href="#">[support]</a> from (may include those listed in <a href="#">[Appendix 3]</a>) as soon as the investigation is commissioned</li> <li>• Decide whether a hearing is required or not based on the investigation report or management case</li> <li>• If the allegations are unfounded, confirm in writing to the employee and keep a copy on the employee file</li> <li>• Will often chair the hearing, except where they are not of sufficient seniority e.g. where the outcome may be dismissal. In which case the Chair will be a manager of suitable seniority and the commissioning manager will be a second manager on the panel</li> <li>• Notify employees involved in the investigation of any delays in writing</li> </ul>
<p><b>Investigating Officer</b></p>	<ul style="list-style-type: none"> <li>• Remain impartial throughout the investigation process</li> <li>• Collect information relating to the incident e.g. documentary evidence, CCTV, interviews and witness statements</li> <li>• Provide written records of the investigation interviews within 7 calendar days of it taking place to the interviewee to check, make additions and sign</li> <li>• Do not provide opinion in the report except in conclusions and recommendations, which must be evidence based</li> <li>• Include relevant documents and those referenced as appendices to the investigation report</li> <li>• Complete the investigation in a timely manner and within a maximum of 3 months unless mutually agreed with the Commissioning Manager and Employee</li> <li>• If delays occur during the investigation, provide a written explanation and anticipated completion date to the commissioning manager as soon as it is apparent</li> <li>• Present the Commissioning Manager with an investigation report which summarises the facts of the investigation and directs them to which appendices will provide further detail and make recommendations about whether the case should progress to a hearing or not</li> <li>• Disclose any prior relationships with those involved or conflicts of interest before starting the investigation</li> </ul>
<p><b>Occupational Health (OH)</b></p>	<ul style="list-style-type: none"> <li>• Provide advice to managers about how to support employees who are under stress as a result of going through the disciplinary process or for further support</li> </ul>
<p><b>Human Resources</b></p>	<ul style="list-style-type: none"> <li>• Advise managers about how to use this policy</li> <li>• Provide guidance to the Investigating Officer including review of final investigation report in a timely manner</li> <li>• Attend Disciplinary Hearing as a panel member where dismissal may be a possible outcome to provide specialist advice to the Chair</li> </ul>
<p><b>Staffside/ Trade Union representative</b></p>	<ul style="list-style-type: none"> <li>• Represent members at formal meetings where requested by employee</li> </ul>

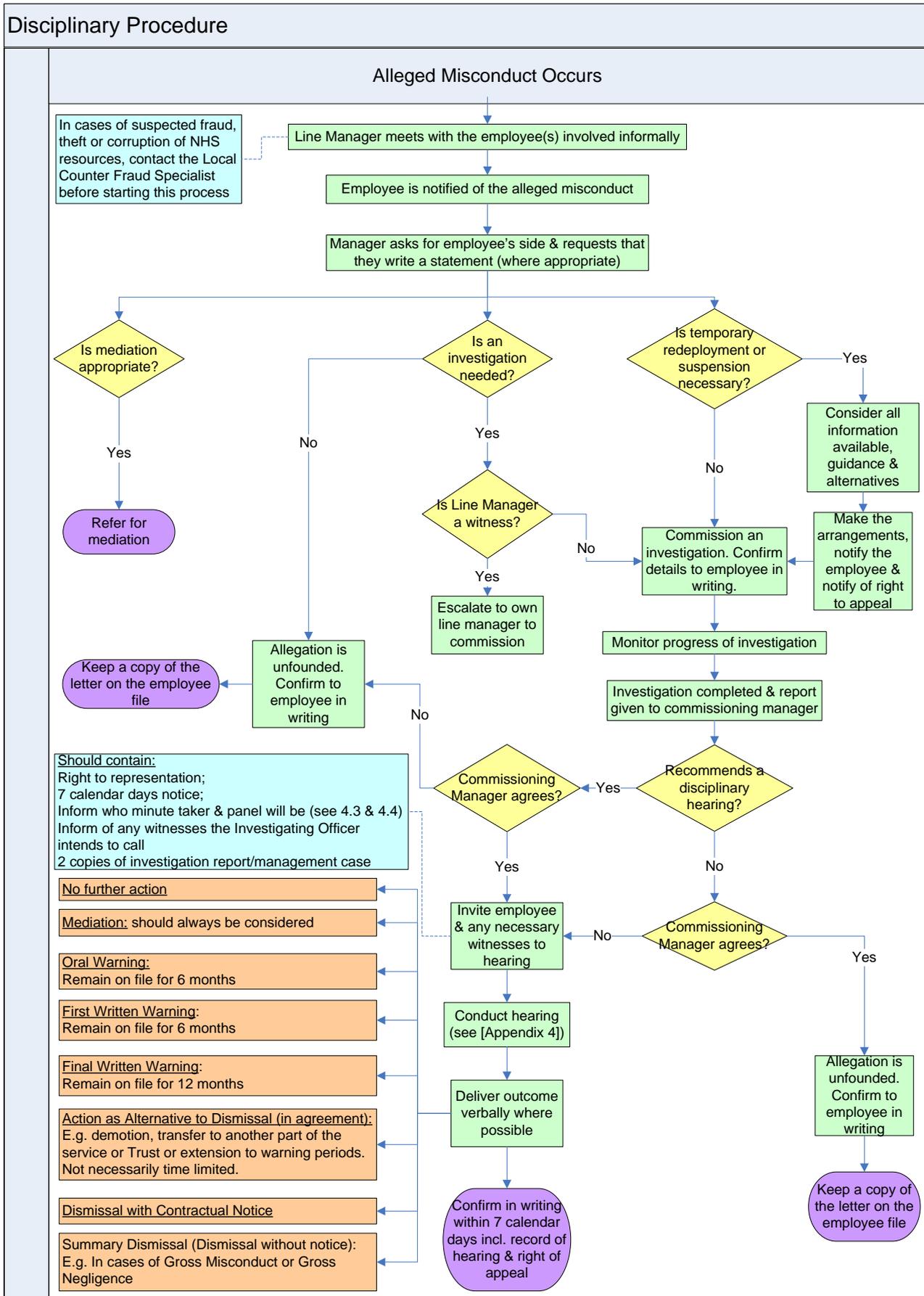
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- 3.1 Only straight forward cases of misconduct e.g. poor punctuality or poor attendance (unrelated to the employee's health) will not require an investigation to be conducted. The line manager should assemble relevant evidence and should speak with the employee to clarify why the incident occurred and whether there are any mitigating circumstances. This information should be included in a management case which the line manager will write and present to their own line manager. In this case, rather than an investigating officer attending any hearing, it will be a 'presenting manager' with their management case. The presenting manager's own line manager will normally Chair the Disciplinary Hearing (see [Appendix 4](#)).
- 3.2 In cases of suspected fraud, theft or corruption of NHS resources, the Trust's Local Counter Fraud Specialist must be consulted before further action is taken and await their advice.
- 3.3 If the employee feels that this policy is being applied unreasonably they should follow the process laid out in the [Grievance Policy].

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**4 MANAGING DISCIPLINARY CASE**

4.1 The process of managing issues of misconduct is set out in the flowchart below:



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- 4.2 The duration of all warnings and file notes listed could be reduced at management discretion. If the act that warranted a sanction is repeated once a warning has expired it may need to be considered by a subsequent panel.
- 4.3 Disciplinary panels should be made up of two managers: one to Chair the hearing and make the final decision; and the other to provide advice e.g. where the disciplinary relates to professional codes of conduct, at least one of the panel members should belong to that profession. The panel must be made up of at least two people.
- 4.4 Where the misconduct could constitute gross misconduct/gross negligence or where the employee already has a final written warning on file, a representative of HR should also attend the hearing and sit on the panel in addition to the Chair and manager to provide advice to the Chair.
- 4.5 The Chair must arrange for someone to take minutes at hearings. This must not be a member of the panel. This is to ensure an accurate record (though not word-for-word) is kept of the hearing which is able to be shared with the employee being disciplined (see also [Appendix 4](#)).
- 4.6 Hearings and investigation meetings will normally only be postponed once and where at least 24 hours' notice of the request to postpone is received. Where this is due to employee sickness absence, a referral to Occupational Health will be made by the Chair (line manager when during investigation) and a [Fit Note](#) may need to be provided. Where this is due to availability of the representative, the employee must provide the Chair with an alternative date for the hearing to take place within 7 calendar days of the original hearing or an extension to this by mutual agreement, to take place within a reasonable timeframe.
- 4.7 Where less than 24 hours' notice of the request to postpone is received (without reasonable grounds), the hearing may go ahead in the employee's absence. This will be the Chair's decision, following advice from Human Resources (or OH where necessary).
- 4.8 If the employee who is suspected of misconduct is a Trade Union/Staffside representative, if they give their consent, a Full-Time Officer of their union should be notified prior to any formal meetings or suspension taking place (except in exceptional circumstances e.g. short notice suspensions).
- 4.9 Where an employee who belongs to a professional body and has a professional registration is suspended or dismissed for professional or gross misconduct, the professional accountable officer (e.g. Chief Nurse) will refer the case to the appropriate professional body.
- 4.10 Dismissals must be confirmed in writing and sent by Recorded Delivery.

## 5 APPEAL AGAINST DISCIPLINARY SANCTION

- 5.1 All employees have the right to appeal against any formal sanction applied under this policy.
- 5.2 To appeal against any sanction *except* dismissal, the employee should write to the manager of the person chairing the hearing within 14 calendar days of the letter confirming the sanction and confirm the reason for making the appeal.
- 5.3 To appeal against dismissal (with or without notice) the appeal should be made in writing to the Director of HR within 14 calendar days of the letter confirming the dismissal and confirm the reason for making the appeal.
- 5.4 Receipt of appeals will be acknowledged within 7 calendar days. The hearing will normally held within 28 calendar days. If this is not possible, reasons will be provided in writing to the person raising the appeal.
- 5.5 Reasons for appeal should be based on the following areas:
- Evidence of unfairness by comparison to how the policy has been applied to others or bias of the panel

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- Incorrect outcome and/or disciplinary action is too severe based on the evidence provided to the panel
- Did not follow the principles/procedure detailed in the policy
- New evidence has come to light since the sanction that would have affected the decision

## 6 IMPACT AND EQUALITIES ANALYSIS

6.1 An Equality Analysis has been carried out for this policy and has concluded that there are no detrimental effects and some positive effects of this policy. The analysis has been included here:



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Policy EqAnalysis.doc

## 7 MONITORING THE EFFECTIVENESS OF THIS POLICY

Issue being monitored	Monitoring method	Responsibility	Frequency	Reviewed and followed up by
Overall policy compliance	Review of work of Corporate Policy Review Group and related policy bodies	Chair of Corporate Policy Review Group	Annual	Trust Management Executive
Compliance with duties within Equality Act	Report on demographics for outcomes and types of allegation	Human Resources	Bi-Annual (every 6 months)	CAG Partnership Board & Partnership Board
Disciplinary Levels	Report on duration of investigation, suspension and total length of case	Human Resources	Bi-Annual (every 6 months)	Interim Partnership Board
	Report on number of cases, types of allegation, areas of occurrence	Human Resources	Bi-Annual (every 6 months)	Interim Partnership Board
Suspensions	Current suspensions in the CAG, start date, reason for suspension and area the individual works in (maintaining confidentiality at all times). Review rationale for extension to suspension.	Commissioning managers/CAG Managers	Bi-Annual (every 6 months)	Interim Partnership Board

Please note the above table will be updated once new governance structures are in place.

**END**

**APPENDIX 1: GLOSSARY OF TERMS**

<b>ACAS</b>	Advisory, Conciliation and Arbitration Service
<b>ACAS Code of Practice on Disciplinary and Grievance Procedures 2009 and The Employment Act 2008</b>	Before The Employment Act 2008 there was statutory guidance in The Employment Act 2002 that gave a process for managing grievances. This has now been repealed ( <i>made null and void</i> ) and replaced by The Employment Act 2008, which directs employers to the ACAS Code of Practice on Disciplinary and Grievance Procedures 2009. This code of practice has been used to structure this policy.
<b>Equality Act 2010</b>	Replaces previous discrimination law (e.g. Disability Discrimination Act 1995) and includes the following: <ul style="list-style-type: none"> <li>• Extends the groups protected (protected characteristics)</li> <li>• Removal of health questionnaires</li> <li>• Bans discrimination by association</li> <li>• Bans direct and indirect discrimination</li> <li>• Bans harassment, victimisation and failure to make reasonable adjustments</li> <li>• Replaces all previous discrimination law</li> <li>• Introduces harassment by third parties</li> <li>• Also relates to provision of services to patients, not just employment</li> </ul>
<b>Protected Characteristics (part of the Equality Act 2010)</b>	<ul style="list-style-type: none"> <li>• Age</li> <li>• Disability</li> <li>• Gender Reassignment</li> <li>• Marriage and Civil Partnership</li> <li>• Race</li> <li>• Religion or Belief</li> <li>• Sex</li> <li>• Sexual Orientation</li> <li>• (Pregnancy and Maternity – only some elements apply)</li> </ul>
<b>Reasonable Adjustments (part of the Equality Act 2010)</b>	<p>An 'adjustment' is a change. This can be a physical change or a change in the way something is done.</p> <p>'Reasonable' will depend on a number of circumstances but the tests include:</p> <ul style="list-style-type: none"> <li>• How much will a reasonable adjustment reduce the disadvantage</li> <li>• The practicality of the change</li> <li>• The financial &amp; other costs &amp; the extent of any disruption caused</li> <li>• The extent of the Trust's financial &amp; other resources</li> </ul> <p>Although the Trust must consider reasonable adjustments for employees who have a disability or are pregnant, it is best practice for them to be considered for all employees to facilitate attendance &amp; implemented where service delivery allows.</p>
<b>Fit Note</b>	<p>GPs issue this so that managers know whether the employee is either not fit for work, may be fit for work/some work, or is fit for work: it also gives an expected timescale for this.</p> <p>A Fit Note may give advice about rehabilitation into work or amended duties or work hours or workplace adaptations.</p> <p>Employees who are sick for more than 7 calendar days must get a Fit Note from their GP from the 8<sup>th</sup> calendar day that they are sick. If they continue to be sick, they should continue to get a Fit Note from their GP so that there are no breaks in the dates that the Fit Notes cover. Employees must submit <a href="#">Fit Notes</a> to their manager within 3 working days of the 8<sup>th</sup> calendar day of the absence</p>

	<p>or expiration (<i>i.e. the end date</i>) of the last Fit Note (<i>i.e. the manager must receive it by the 3<sup>rd</sup> working day</i>).</p> <p>Managers will file these on the local employee file.</p> <p>Where the employee is sick outside the UK, they should still obtain a medical certificate from a registered medical practitioner (in English or translated by a registered translator) and ensure that it contains the same information that a UK Fit Note would contain. Original copies should be sent to the Manager as above.</p>
<p><b>Authority to Suspend or Dismiss</b></p>	<p>Managers with the authority to suspend or dismiss are senior managers in their area or field.</p> <p>Typically they will be at Band 8A or above to suspend and Band 8C or above, or in a comparative medical post, usually within the same area or field, to dismiss</p> <p><i>(This list is subject to review, but the types of role this is intended to cover are:</i></p> <p><i>Non Executive Director</i></p> <p><i>Chief Executive</i></p> <p><i>Executive Directors</i></p> <p><i>Directors</i></p> <p><i>Deputy Directors</i></p> <p><i>Assistant/Associate Directors</i></p> <p><i>Hospital Manager</i></p> <p><i>General Managers</i></p> <p><i>Head of Nursing/Therapies/Corporate Head of Service or Department</i></p> <p><i>Matron/Clinical Site Manager/Service Manager</i></p> <p><i>This list is not exhaustive and may be amended from time to time)</i></p>
<p><b>Gross Misconduct</b></p>	<p>The list below contains examples of actions which may be constituted as gross misconduct following reasonable consideration of evidence presented to a disciplinary panel and the application of proportionality:</p> <ul style="list-style-type: none"> <li>• Theft</li> <li>• Fraud/Deliberate Falsification of Records</li> <li>• Assault/threatening behaviour/violence</li> <li>• Abuse of patients</li> <li>• Bullying/Harassing behaviour</li> <li>• Unlawful Discrimination</li> <li>• Malicious Damage to Trust/Patient/Fellow Employee's Property</li> <li>• Corruption/Bribery</li> <li>• (Deliberate) Breach of Health and Safety Rules</li> <li>• Breach of Statutory Requirements</li> <li>• Serious breach of professional code of practice</li> <li>• Serious refusal to carry out a reasonable management instruction</li> <li>• The commission of criminal offences outside the place of work which may in particular circumstance amount to misconduct</li> <li>• Serious Misuse of Trust's Property or Name</li> <li>• Deliberately accessing internet sites containing pornographic, offensive or obscene material which is not relevant to work activity whilst in the workplace, using the Trust's property/equipment or network</li> <li>• Action calculated or likely to bring the Trust into disrepute and which is not brought under the provisions of the Public Interest Disclosure Act, Health &amp;</li> </ul>

	<p>Safety at Work Act or internal Trust procedures for raising matters of concern. This may include communications that reference the Trust on social network sites.</p> <ul style="list-style-type: none"> <li>• Misuse of, or failure to safeguard, confidential information and/or patient data</li> <li>• Serious breach of confidence, subject to the terms of the Public Interest (Disclosure) Act (see the Trust Whistleblowing Policy)</li> <li>• Incapability whilst at work or on call brought on by alcohol, illegal drug use (except where the Alcohol and Substance Abuse/Misuse Policy applies)</li> <li>• Incapability whilst at work brought on by being asleep whilst on duty</li> <li>• Loss of legal authority to continue employment (e.g. loss of professional registration or lapse in visa).</li> <li>• Unauthorised absence without reasonable explanation</li> <li>• Deliberate breaches of the European Working Time Directive e.g. back-to-back shift working</li> <li>• Failure to disclose a criminal conviction, (formal) reprimand or caution issued since employment commenced</li> <li>• Serious breaches of trust and confidence</li> </ul> <p>This list is not exhaustive</p>
<p><b>Trust Reputation</b></p>	<p>This is the commonly held opinion of the Trust. This may be the opinion held by the public, our patients and service users, other NHS Trusts and other Healthcare Organisations in the UK and internationally.</p> <p>All employees have a collective responsibility to uphold the reputation of the Trust and should be aware that (for example) they are representing the Trust whenever they are wearing their Trust uniform or ID.</p> <p>Trust reputation may be affected by actions such as the following examples: behaving inappropriately whilst wearing Trust uniform or ID; uploading images of the Trust or making derogatory reference to the Trust/it's employees/patients/carers etc. on social networking/internet sites (outside of the Media Protocols agreed within the Trust); or discussing Trust business with the media (outside of the applicable communications policies and Whistleblowing policy). This list is not exhaustive and provides examples of how employees/people working on behalf of the Trust may bring the Trust into disrepute.</p>
<p><b>Flowchart Colour Key</b></p>	<p>In order to assist reading the flowcharts, please note that specific information has been colour coded.</p> <p>Orange hexagons = Start of process/specific milestones</p> <p>Green rectangles = the process to be followed</p> <p>Yellow diamonds = a decision to indicate which part of the process to follow</p> <p>Blue rectangles = provide further information (e.g. topics to be discussed, required information in written correspondence etc)</p> <p>Purple oval = end of process</p> <p>Orange rectangles = possible outcomes</p>

**APPENDIX 2: OTHER LINKED TRUST POLICIES AND GUIDELINES**

	<b>Title differences where policies have not been amalgamated</b>		
	<b>Barts and The London (CHS equivalent)</b>	<b>Newham University</b>	<b>Whipps Cross University</b>
<b>Bullying and Harassment Policy</b>	Harassment and Bullying Amongst Staff (CHS equivalent)	Dignity at Work Policy	
<b>Stress Management</b>	Managing Work Related Stress Policy and Guidance (CHS equivalent)	Policy for the Prevention and Management of Stress at Work	Stress Management Policy
<b>Grievance Policy</b>	n/a	n/a	n/a
<b>Whistleblowing Policy</b>	n/a	n/a	n/a
<b>Alcohol &amp; Substance Misuse/Abuse Policy</b>	Alcohol and Substance Abuse at Work Policy (CHS equivalent)		
<b>Professional Registration Policy</b>	Professional Registration for Clinical Practitioners (CHS equivalent)		
<b>Maintaining High Professional Standards Policy</b>	n/a	n/a	n/a

**APPENDIX 3: EXTRA SOURCES OF INFORMATION AND SUPPORT**

<b>Employee Assistant Programme</b> <i>provided by CiC</i>	A free service to all employees provided 24 hours 7 days a week which includes advice on debt, legal issues, caring and childcare and offers face to face counselling services. <b>Tel. 0800 085 1376</b> Or access them via <a href="http://www.well-online.co.uk">www.well-online.co.uk</a>
<b>Management Advice Line</b> <i>provided by CiC</i>	A dedicated helpline for managers, offering guidance and support on dealing with the interpersonal aspects of their role as a line manager, such as how best to manage a difficult situation or sensitive subject with an employee. If you are a Manager please call <b>0800 085 3805</b> to access the Managerial Advice Line. Or access them via <a href="http://www.well-online.co.uk">www.well-online.co.uk</a>

**APPENDIX 4: PROCESS FOR CARRYING OUT A DISCIPLINARY HEARING**

