



Disciplinary Policy (Managing Conduct)

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V4.0	Approved	
V5.0	March 2013	Revision to the authority to dismiss
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V8.0	04 November 2014	Minor amendment to demotion sections.
V9.0	10 th November 2014	Revisions to encourage informal resolution, provide clarity and reduce timescales for investigations and hearings.
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V10	2 February 2015	Final updates and sent to EMB for noting

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V11	10 December 2015	Approved extension to review date by SPF to October 2016
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Dissemination requirements	All Trust employees by Intranet Public- To be published on the Trust’s website
Part of Trust’s publication scheme	All Trust employees by Intranet Public- To be published on the Trust’s website

The East of England Ambulance Service NHS Trust has made every effort to ensure this policy does not have the effect of unlawful discrimination on the grounds of the protected characteristics of: age, disability, gender reassignment, race, religion/belief, sex, sexual orientation, marriage/civil partnership, pregnancy/maternity. The Trust will not tolerate unfair discrimination on the basis of spent criminal convictions, Trade Union membership or non-membership. In addition, the Trust will have due regard to advancing equality of opportunity between people from different groups and foster good relations between people from different groups. This policy applies to all individuals working at all levels and grades for the Trust, including senior managers, officers, directors, non-executive directors, all employees (whether permanent, fixed term or temporary) and staff on secondment.

All Trust policies can be provided in alternative formats.

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1. Policy Statement

- 1.1 This document outlines the Disciplinary Policy (Managing Conduct and Performance) (the Policy) and procedures for the East of England Ambulance Service NHS Trust (the Trust).
- 1.2 This policy observes current employment legislation, the ACAS Code of Practice on Disciplinary and Grievance procedures, and the ACAS guide to discipline and grievances at work which compliments the Code of Practice, to ensure fair and consistent treatment.
- 1.3 The policy aims to promote, encourage and support all employees, including contractors and volunteers to achieve and maintain high standards of conduct and work performance through the application of a fair, effective and consistent approach when managing staff conduct and performance issues.
- 1.4 This policy has been written in partnership by management and staff side, and in accordance with current employment legislation.
- 1.5 Due to us being an employer of Trust, all Trust employees (regardless of position within the Trust), any volunteer, commissioned services or persons associated with delivering services on behalf of the Trust, must not act in a way that breaches any of the following:
- 1.6 Behaviour that has harmed, or may harm, a child, young person or vulnerable adult Possibly committed a criminal offence against, or related to, a child, young person or vulnerable adult. Behaved

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towards a child, young person or vulnerable adult in a way that indicates s/he is unsuitable to work in a position of Trust (Appendix 1).

- 1.7 In circumstances where a complaint is raised against an Agency Worker, please refer to section 6, of the Agency Worker Policy.
- 1.8 In circumstances where a complaint raised is of a significant concern, it may be necessary for the Trust to raise the concern with a regulatory body if this is applicable, such as HCPC, NMC, CIPD, AAT/MAAT or any other relevant regulatory body.

2. Scope

- 2.1 This policy applies to all staff employed by the Trust. Allegations and concerns made against Bank Workers or agency workers may be investigated using an approach aligned to that outlined in this policy. Where the Trust is not the employer of the individual an approach will be agreed with the employer.
- 2.2 Seconded to the organisation are also subject to the Trust's policies and procedures. Any allegations in respect to breach of the policies and procedures of EEAST or misconduct will be addressed in liaison with their statutory employer.
- 2.3 In some circumstances the Trust may consider it more appropriate for the Variations in Clinical Practice and Clinical Competence Policy to apply in the first instance.
- 2.4 Employees, and their representatives should co-operate fully with the operation of this policy including making every effort to attend investigatory meetings and disciplinary hearings/appeals and without causing unreasonable or unnecessary delay. This may necessitate attendance outside of the employee's and/or the companion's (where they are an employee of the Trust) rostered hours and/or normal working pattern (refer to Section 14. for "right to be accompanied") To avoid significant delays in the process discussions between the Trust and trade unions may take place to mutually agree

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alternative arrangements that support and enable statements to be submitted by witnesses, on different shifts and rest days.

3. Access to the Procedure

3.1 All employees are entitled to access this policy which is located in the HR Policies and Procedures Folders and/or on the Trust's Intranet. However, if you require this policy in any other format please seek guidance from the Human Resources Department, your line management or trade union representative.

3.2 Employees and managers may also wish to consult related Trust policies and National guidance documents, such as:

- Pre-Action Review Standard Operating Procedure
- Sickness Absence Management Policy.
- Cultural Ambassador Standard Operating Procedure
- Equality, Diversity and Inclusion Policy.
- Disability Policy.
- Secondment Policy.
- Grievance and Collective Grievance Policy
- Dignity at Work Policy.
- Change Management Policy,
- Variations in Clinical Practice and Clinical Competence Policy.
- Professional Registrations Policy.
- Standards of Business Conduct Policy.
- Conflicts of Interest and Secondary Employment Policy.
- DBS Policies Working Together to Safeguard Children Policy.
- A guide to inter-agency working to safeguard and promote the welfare of children (2010)",
- Caldicott Guardian Principles/CSOP 2.2 Patient Confidentiality,
- Forfeiture or Reduction in NHS Pension Scheme Benefits,
- Driving Licence Policy.
- No Smoking policy.
- Local Counter Fraud/HR Liaison Policy
- The National Audit Office guidance and The Management of Suspensions of Clinical Staff in NHS Hospital and

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Ambulance Trusts in England.

- Safeguarding Adults Policy,
- Social Media Policy & Persons in a position of Trust Policy.
- Line Manager Working Guide on Supporting Hybrid Working.
- Agency Worker Policy.

4. Roles and Responsibilities

4.1 Managers, HR staff and trade union representatives are responsible for providing advice and guidance to employees on the application of this policy and procedure. They are responsible for bringing any mutually beneficial improvements to this policy to the attention of the Trust.

- Executive Directors: Our executive directors are responsible for ensuring the fair and equitable implementation of this policy. A member of the executive team would chair a Pre-Action Review Meeting (P-ARM). The executive team may also be involved in making suspension decisions.
- Managers: Managers have a responsibility to manage conduct effectively in accordance with this policy and to offer support during and after this process, where it may be necessary and useful. Managers are expected to take and retain notes of conversations and meetings with employees and should always be able to justify their decision-making process. Where applicable, Manager's should ensure that an employee is kept regularly updated about their suspension, the ongoing reasons for it, and how much longer it is likely to last.
- Employees and companions: Employees and their companions are expected to co-operate with the Trust to ensure the successful operation of this policy and procedure.
- Trade Union (TU) representative: The role of a TU rep is wide ranging and includes giving advice to an employee

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and representing and accompanying an employee at disciplinary investigation meetings and hearings.

- A Representative: All employees have a statutory right to be accompanied at a disciplinary hearing. A representative can address a disciplinary hearing on an employee's behalf. A representative cannot answer questions on behalf of the employee however they can present and fully explain an employee's response to any allegation made against them.
- Employee Relation (ER) representative: The role of an ER representative, or senior member of Operational Human Resources, is to provide advice and guidance at all stages of the operation of this policy and procedure including formal investigation and/or a formal disciplinary hearing. An ER representative would be present at a Pre-Action Review Meeting. The Human Resources Department is responsible for keeping the provisions within this policy in line with employment legislation and best practice people management principles. They are also responsible for ensuring that any disciplinary venues provide suitable access and facilities for staff with disabilities.
- Commissioning Manager (CM): The Commissioning Manager appoints the Investigation officer. On conclusion of the investigation, the CM will decide, with advice from the Workforce Directorate what, if any further action will be taken, which may include convening a disciplinary hearing. If the employee is suspended, by a senior manager, the Commissioning Manager needs to confirm that the suspension and rules pertaining to it will continue and will write to the employee confirming this as soon as possible.
- Investigating Officer (IO): The role of the IO is to be fair and objective so that they can establish the essential facts of the matter and reach a conclusion on what did or did not happen, or what is likely to have happened or not happened. On the balance of probability. The IO should do this by looking for facts and evidence that supports the

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allegation and evidence that contradicts the allegation. In potential disciplinary matters, it is not the IO's role to prove the guilt of any party but to investigate and to make a recommendation based on the findings of the investigation for the CM's consideration if there is a possible case to answer at a formal hearing or no case to answer.

- Welfare Officer: The welfare of the victim or complainant and of the defendant need to be considered, especially in harassment cases. A Welfare officer is nominated to support and maintain regular contact with an employee during suspension. The Welfare officer will not be involved in the details of the disciplinary process but is available to signpost employees to available support, if required during the process.
- Cultural Ambassador (CA): The Cultural Ambassador's role is a voluntary role within the Trust. They will provide independent advice and guidance to investigating teams and disciplinary or grievance panels when they are investigating or considering allegations for or against a Black and Ethnic Minority member of staff. The CA is to be a full member of the team involved in any of the above. The CA is an equal member of investigation teams, disciplinary and grievance hearing panels. They will identify any issues of unconscious bias, conscious bias, being treated less favourably or discrimination. They will bring these to the notice of the other members of the team and ensure that they are taken into consideration in the decision-making process. The CA programme has the full support of the Executive Directors and is endorsed by the Trust's Equality, Diversity and Inclusion committee. A CA would be present at a Pre-Action Review Meeting, if applicable. Further information on the Cultural Ambassador programme is available in the Cultural Ambassador Standard Operating Procedure (SOP).

5. Support, during and after the process

- 5.1 It's important throughout this process to keep talking with both the employee subject to the disciplinary process and any other staff affected. The Directorate involved should take ownership of detailing this support structure.
- 5.2 Clear, regular and confidential communication can help avoid:
- misunderstandings
 - impact to work morale
 - stress or other mental health issues
 - further action, for example the employee raising a grievance.
 - legal action further down the line
- 5.3 Going through a disciplinary process can be very stressful, so it's important that the wellbeing and mental health of the employee is considered.

Looking out for the employee's wellbeing and offering support can help prevent:

- absence
- mental health issues arising
- existing mental health issues getting worse.

6. Timescales

- 6.1 All parties should endeavour to progress formal conduct cases in a timely manner in accordance with the timescales set out below. However, timescales may sometimes vary to assist either with ensuring that employee wellbeing issues can be addressed appropriately and or appropriate fact finding, and investigations can take place. In addition, as an employer of Persons in Positions of Trust, there may be some cases where the timescale parameters sit outside of our jurisdiction to manage e.g. cases where Safeguarding, Fraud or Criminal matters have been identified. Where a timescale is varied by the manager, the employee and their representative will be advised of the variation and will be provided with the reasons for the variation and a new timescale or review date confirmed.

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- 6.2 Managers should raise and deal with issues of misconduct promptly and should not unreasonably delay meetings, decisions following investigations or confirmation of those decisions following formal meetings. Any decisions which are taken should be fully documented and any delays explained setting out the reasons.
- 6.3 There should be an initial fact-finding investigation to be concluded within 7 calendar days from the date that the incident is known about or when the Trust is made aware, to then feed into the Pre-Action Review Meeting (P-ARM). The outcome of that meeting can be either training, supervision, informal conversation, or formal investigation.
- 6.4 If the Pre-Action Review Meeting determines that a full formal investigation is required, it should aim to be concluded within 6 weeks, from the date that the of the Pre-Action Review Meeting recommendation, except in exceptional circumstances. Following the investigation, a report must be generated by the investigating officer.
- 6.5 If a police investigation needs to take place prior to an internal investigation, the time frame for the investigation will begin at the end of the police investigation. However, in some serious circumstances, it may be appropriate to begin the investigation alongside the police investigation.
- 6.6 Employees, and their representatives should co-operate fully with the operation of this policy including making every effort to attend investigatory meetings and disciplinary hearings/appeals and without causing unreasonable or unnecessary delay. This may necessitate attendance outside of the employee's and/or the companion's (where they are an employee of the Trust) rostered hours and/or normal working pattern (refer to Section 14. for "right to be accompanied") To avoid significant delays in the process discussions between the Trust and trade unions may take place to mutually agree alternative arrangements that support and enable statements to

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be submitted by witnesses, on different shifts and rest days.

- 6.7 Where employees or their representative have any additional requirements due to disability, they should make their line manager or the Human Resources Operation team aware.
- 6.8 Decisions on the composition of appeal panels (and decision relating to non-attending witnesses, as referred to in Sections 10.4 and 12.7) will be made by one member of staff-side and one senior member of Operational Human Resources. Where mutual agreement cannot be reached, the final decision will rest with the Director of Workforce or in their absence, the Chief Executive.
- 6.9 If the employee who raised the allegation or the employee subject to allegations leaves prior to the formal process commencing or finishing, the Trust will make a decision around what process can be followed. (i.e. complete investigation, referrals to LADO, professional bodies, lessons learnt exercises etc). Each case will be considered on a case-by-case basis in liaison with the Head of HR.
- 6.10 A case management meeting must be set up to agree a way forward and next step, where breaches of case timescales which exceed 3 months. The case management team should be made up of senior management including an Executive Director, Staff side representative and a Senior HR representative

6.11 Disciplinary Process Timeframes

	Process	Timeline within
	Informal process	
1.	Initial fact-finding investigation	7 calendar days
2	Inform the employee of the outcome of the initial fact-finding investigation.	Immediately following the Fact-finding investigation

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	Process	Timeline within
3	Pre-Action Review Meeting (P-ARM)	Immediately following the Fact-finding investigation
4	Inform the employee of the outcome of the P-ARM	Immediately following the P-ARM
	Formal process	
5	Decision to suspend	4 working days
6	Expediated Formal Hearing Process	
6	Full formal investigation including submission of Management report by the Investigating officer.	6 weeks
7	Decision to proceed to formal Disciplinary Hearing following receipt of report.	7 calendar days
8	Arrange Disciplinary Hearing	28 calendar days
9	Rescheduled Disciplinary Hearing	within 14 days
10	Management provides the employee with copy of Management case	14 calendar days prior to hearing
11	Employee will provide a written statement of their case and names of witnesses	7 calendar days prior to the hearing
12	Outcome of formal hearings written and sent out	7 calendar days
	Appeal Process	
13	Appeal application stating on what grounds appeal is made (Section 18)	7 calendar days
14	Employee will provide a written statement of their case of appeal and names of witnesses	14 calendar days prior to hearing

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	Process	Timeline within
15	Management provides the employee with copy of Management response and names of witnesses	7 calendar days prior to the hearing
16	Appeal heard	28 calendar days
17	Rescheduled Appeal Hearing	within 14 days
17.	Outcome of Appeal hearing written and sent out	7 calendar days

7. Principles

7.1 The following procedure will be applied in all instances where disciplinary action is regarded as necessary by the Trust's management, except where an informal resolution or management resolution is given for a minor act of misconduct, or minor conduct concerns, committed by an employee (refer to Section 8).

7.2 Under this policy outcomes will range from there being:

- no case to answer
- informal measures being taken, through to formal sanctions by way of formal warnings,
- actions short of dismissal, dismissal with notice and summary dismissal.

These outcomes do not have to run in sequence but will take into account the alleged misconduct in each specific case. Employees will not ordinarily be dismissed for a first disciplinary offence unless it is regarded as gross misconduct.

7.3 The Trust and employees will be expected to meet their requirements with regards to reporting matters to professional

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bodies e.g. HCPC, GMC and Nursing and Midwifery Council (NMC) (as per the Trust's Variations in Clinical Practice and Clinical Competence and Professional Registrations Policies). Failure to do so may in itself may be subject to investigation in line with the principles of this Policy.

- 7.4 The Trust will act in accordance with the Caldicott Guardian Principles (and CSOP 2.2 Patient Confidentiality).
- 7.5 The Trust will work within the principles of Appendix 1 which details the safeguarding of children and adults who may be at risk.

8. Grievance or Dignity at work complaints raised during Disciplinary Procedures

- 8.1 In line with ACAS guidance, we will consider combining or suspending disciplinary procedures where a grievance or dignity at work complaint is raised at any point during the disciplinary process where the cases are interlinked. It is particularly important in cases that could result in dismissal that serious consideration is given to suspending the disciplinary process until the grievance or dignity at work complaint is fully investigated and the outcome reached.
- 8.2 If a decision is made by the Commissioning Manager not to suspend, the employee can request that the joint chairs of SPF review the decision and make a recommendation. If the decision is to combine the disciplinary process following a grievance, or dignity at work complaint being raised, the employee could also request that the joint chairs of SPF review the decision and make a recommendation. Where the joint chairs are unable to reach an agreement, the decision will be made by the Chief Executive.

PAUSE AND REVIEW

9. Pre-Action Review Meeting (P-ARM)

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- 9.1 The Trust has introduced “Pause and Review” prior to any disciplinary action being taken.
- 9.2 To reduce inequalities, the Trust needs to ensure that there is no differential experience for any staff working at EEAST and that regardless of any protected characteristic, no staff member is treated less favourably than another.
- 9.3 A pre-action review meeting has been developed in order to mitigate any risk of ‘rush to judgement’ in entering any staff into the disciplinary process. The Line Manager will initiate a request by completing the Pro-forma section 1 of the checklist (Appendix4) and submit it to the P-ARM panel 48 hours before the meeting is scheduled to allow for consideration & review.
- 9.4 At the P-ARM meeting a checklist (Appendix 4) is to be completed by the Executive Director (or Sector Head, if Executive Director is not available), before a decision to formally investigate an employee is made. As a result of using the checklist, it allows issues to be addressed appropriately prior to escalation which will improve overall employee wellbeing, reduce cost of absence, improve employee relations, the reputation of the Trust and reduce Management costs and time.

The outcome of the Pre-Action Review Meeting, should be fed back to the employee by the Line Manager and will include one of the following:

- It is informal in nature (Section 10) and can be best resolved via a management instruction as below.
- An alternative to a disciplinary sanction is more appropriate based on the initial fact finding.
- To progress to the Formal Stage (section 12) and be investigated further.

10. Informal Approach

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- 10.1 The Trust recognises that minor cases of misconduct, will be best be dealt with by informal measures rather than through the formal disciplinary procedure. This should be viewed as the day-to-day management of the employee.
- 10.2 Informal measures may include one or a combination of the following: a management instruction regarding future acceptable conduct, advice, coaching, mediation, mentoring, training, and retraining, if appropriate. An Occupational Health recommendation may be required to agree the best informal measure option.
- 10.3 Informal measures are not part of the formal disciplinary procedure (see section 10 below) and therefore there is no right of appeal against informal outcomes.
- 10.4 An informal resolution may include a management instruction, which is issued to the employee for their own personal records and recorded electronically, in line with data protection guidelines.
- 10.5 An employee would not normally be required to be represented at informal meetings with their line manager, which include for example, meetings aimed at addressing minor cases of misconduct issues. The Trust will occasionally allow an employee to have representation at informal meetings if they so wish, but this should be arranged within the 7-calendar day notice of the meeting.

11. Suspension

- 11.1 Suspension is where an employee continues to be employed but must not attend work or do any work.
- 11.2 The use of suspension within this policy is a neutral act and is not considered as disciplinary action. As the employee continues to be employed by the Trust throughout their

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suspension, they remain bound by The Trust's NHS terms and conditions of employment.

- 11.3 Any decision to suspend will be subsequently confirmed in writing to the employee no longer than 4 working days (extended by any bank holiday's falling within that time period). This will outline the reason for the suspension and the details of their nominated welfare contact. The manager should contact Human Resources Department to obtain the standard format letter.
- 11.4 In certain circumstances, consideration should be given to a period of suspension. These would include, for example, potential cases of gross misconduct, fundamental breach of contract, safeguarding allegations, potential concerns regarding patient care and safety, where there is a perceived risk(s) to the individual, colleagues, patients, damage to Trust property, responsibilities to other parties, or to aid an unhindered investigation that cannot be mitigated with the employee remaining in the workplace. This may include matters outside of work which have the potential to affect employee/patient relations or the reputation of the Trust for example where the employee is the subject of criminal proceedings which may affect whether they can do their job. All suspensions will be considered by a multi-disciplinary panel (a panel with a diverse range of expertise) and a Risk Matrix (Appendix 7) will be completed before the decision to suspend is made.
- 11.5 All clinical staff suspensions within the Trust will be managed in accordance with The National Audit Office guidance 'The Management of Suspensions of Clinical Staff in NHS Hospital and Ambulance Trusts in England'.
<https://www.nao.org.uk/report/the-management-of-suspensions-of-clinical-staff-in-nhs-hospital-and-ambulance-trusts-in-england>.
- 11.6 The decision to suspend should be taken after careful consideration and will not be used as a form of punishment. In

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order to justify the use of a suspension, the decision-making process should be fully evidenced and recorded so that the practice is always used as a neutral and protective act. Where an employee is involved in a patient safety incident work through the NHS confederation Incident Decision Tree (Managing NHS Suspensions) (Appendix 5) should be used to inform the decision.

- 11.7 Whilst it is recognised there will be specific instances where suspension is required the Trust is committed to following good management principles by regularly reviewing individual suspension cases circumstances and duration and will seek to identify alternatives to suspension where it is appropriate to do so, such as consideration to alternative working duties, hours or location. (Appendix 7)
- 11.8 Alternative duties must take into account the contractual hours, including rota patterns, particularly in the case of flexible working agreements. Any decision to offer alternative duties must be discussed and mutual agreement made between the Trust and employee and new manager, if hours of work or base location need to be varied. The new line manager must be made aware of any risk and the management of suspension conditions. The Trust may require employees to undertake alternative duties at a lower band, as an alternative to suspension. Employees will continue to be paid at their substantive band if the alternative duty they are re-deployed into is a lower banded role.
- 11.9 It is recognised that a decision to suspend can have an impact to an employee's wellbeing. The Trust will further follow good management principles via the provision of welfare support to ensure the suspended employee's psychological well-being is monitored and appropriate signposting to the Trust's Employee Assistance Provider is offered. The Employee Assistance Programme (EAP) can be contacted on; 0808 196 2374.

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- 11.10 Suspension should be carried out by the most senior manager available at the time after discussion with and with the prior agreement from a Senior Manager (Band 8c or above), Director or Deputy Director. Normally this will follow a suspension decision meeting. In exceptional circumstances where the decision to suspend needs to be taken before a meeting can be arranged then the meeting will happen after the suspension. The decision to suspend must be fully documented by the senior manager, to ensure the information known at the time of the decision is recorded. The use and duration of suspensions will be monitored by monthly reports to the Executive team and by the Workforce Directorate, by using the Suspension Review Meeting Pro-forma (Appendix 9).
- 11.11 The decision to suspend is not restricted to the point in time that the matter of concern comes to light, but can be made at any time, where it is deemed appropriate or necessary to do so. E.g. to impede an investigation, mitigate a potential risk to colleagues or patients etc
- 11.12 It is a condition of suspension that the employee does not undertake employment elsewhere, except where the Trust's prior written permission has been given as per the Secondary Employment Policy.
- 11.13 The employee must remain contactable throughout any period of suspension. This includes the requirement for the employee to notify their welfare officer of any change of address whether temporary or otherwise.
- 11.14 Employees under suspension must not enter Trust premises or use any Trust property without permission of an appropriate level manager unless specifically mentioned in the suspension letter. It is the suspending managers responsibility to ensure access cards are held securely and that the employee is informed of this provision. The employee's access to the Trust sites will be monitored and breaching this condition could lead to further disciplinary action.

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- 11.15 Should an employee wish to book annual leave whilst suspended then a request for annual leave must be made and approved by an appropriate level manager unless specifically mentioned in the suspension letter.
- 11.16 Should an employee become ill whilst suspended then normal sickness absence process will apply.
- 11.17 Where employees have been suspended and under investigation, resigned from the Trust and there are patient safety concerns, the Trust has a duty to inform other NHS employers in cases where the employee holds secondary employment and / or may be a prospective employee for another Trust.
- 11.18 Where employees have been suspended, while under criminal or police investigation, the Trust will not necessarily stop an internal investigation and reserves the right to continue depending on the particulars of the case.

12. Formal Approach

12.1. Formal Investigation

When the decision has been made that a formal investigation is required, the Commissioning Manager must appoint an Investigation officer (IO).

- 12.2 Once a fact-finding investigation has been conducted and formal proceedings instigated, the employee will be notified of this, and an investigation will be carried out in maximum 6 weeks. To reduce repetition, there would be occasions when the evidence gathered during the informal process, could be used as part of the formal process. Where deemed appropriate by the Trust, a thorough and prompt investigation will be undertaken by an investigating officer operating outside their normal area of responsibility/location, giving due consideration to any circumstances that may give rise to actual or potential conflict.

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However, in exceptional circumstances, the employee will not be notified of the investigation where it is being carried out under the Local Counter Fraud/HR Liaison Policy, at the request of the Police, serious safeguarding allegations or as a result of a high-level DBS notification. Due to the complexity of these investigations employees and their representatives will be kept updated with timescales of the investigations. These will be completed within a reasonable time period without any undue delay.

- 12.3 The methods of the investigation will vary depending on the circumstances. In some cases, this will require the holding of an investigatory meeting with the employee and/or obtaining a written statement from them. In others, this may not be necessary, and the investigatory stage will involve the collation of information. The Trust reserves the right to dispense with an investigatory interview and to proceed directly to a formal hearing where appropriate. This action would only take place where there is clear evidence of a breach of conduct.
- 12.4 Where appropriate, statements will be obtained from, or interviews conducted with, any relevant witnesses. Those making statements and/or being interviewed as part of the investigation will be told why they are being interviewed, and that, they may be required to attend any formal hearing to give evidence. Witnesses can have a companion with them for support if they so choose.
- 12.5 Employees, and their representatives, should co-operate fully with the operation of this policy including making every effort to attend investigatory meetings and doing so without causing unreasonable or unnecessary delay. This may necessitate attendance outside of the employee's and/or their representatives' (where they are an employee of the Trust) rostered hours and/or normal working pattern. If this were to occur, requests for TOIL, should be considered.

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- 12.6 If a witness or complainant has made a statement, but is not available for additional interviews or for attendance at a hearing, or it would not be appropriate or reasonable in the circumstances to invite them for questioning, all such statements will be included as part of the investigation and should be considered in the context of the overall investigation. For instance, in some circumstances it may not be viable, appropriate, or reasonable to undertake investigatory meetings with patients/clients, the relatives of patients/clients or members of the public. In such cases, written statements will be relied upon.
- 12.7 If a witness or complainant has requested that they remain anonymous, e.g. following whistleblowing or a patient, the Trust will endeavour to maintain their anonymity where there is a reasonable belief that not to do so could cause them personal detriment or harm. Any such decisions will be made bearing in mind the Trust's obligations to the employee to complete a fair and reasonable investigation. This means that there may be occasions when, for example, only the investigator and their HR support are aware of their name(s) or alternatively where, the necessity to conduct a fair and reasonable investigation may mean that details need to be disclosed despite it being against the witness's or complainant's wishes. This possibility should be outlined to witnesses and complainants at the beginning of the investigatory process.

12.8 Expediated Formal Hearing (Quick Resolution)

The employee may, at the outset or during the investigation, take the opportunity to accept responsibility for a breach of conduct, under an 'Expediated Hearing'". A full investigation may be forestalled by the individual substituting a full and detailed explanation for their conduct. This approach may be suggested via employee, management, or their representative. Disciplinary sanctions available under 'Expediated Hearing' are management instruction up to and including a final written

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warning. Employees will be invited to an “Expediated Hearing” meeting for a “without prejudice” discussion to be held. The meeting will be conducted by the Line Manager, upon advice of the Commissioning Manager (where these two roles are separate), with a member of the Human Resources Department present. This will enable all parties to agree whether this approach is appropriate in the circumstances and for the employee to be advised of the disciplinary sanction. By their nature without prejudice’ discussions should not form part of the investigation pack, any other documentation, any other formal process or be verbally referred to at a later date should the sanction not be accepted, and the employee wishes to proceed to a full formal investigation.

In an “Expediated Hearing” approach and sanction has been mutually agreed by all parties, there would be no right of appeal under section 18 of this policy.

In the event that all parties do not agree as to whether this approach is appropriate, then the case should go back to the P-ARM stage for next steps.

13. Outcome After Investigation

- 13.1 Once the investigation has been completed, the Investigating Officer will submit an Investigation Report to the Commissioning Manager (CM). The role of the Investigating Officer (IO) is to present a comprehensive investigation report. As in section 4.1 above, it is not the IO’s role to prove the guilt of any party but to investigate and to make a recommendation based on the findings of the investigation for the CM’s consideration, if there is a possible case to answer at a formal hearing or no case to answer.
 - . The Commissioning Manager, or other appropriate manager, will then take a view on whether there is no case to answer, deal with

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it informally, or arrange for it to proceed to a formal disciplinary hearing. A decision on whether to proceed with the disciplinary procedure or not, will be made within 7 calendar days of receipt of the investigation report. It would normally be best practice to seek the advice of the HR Operational team before proceeding.

No Case to Answer

- 13.2 Where the facts of the case indicate that there is no case to answer then no further action will be taken, and the employee should be notified in writing accordingly and a note for file made.
- 13.3 Where there is no case to answer, it may be appropriate for a management intervention to be recommended and alternative measures such as management instruction, coaching, mediation, mentoring, training and retraining, to be considered.
- 13.4 When appropriate, matters can be dealt with by informal mechanisms. This informal approach can be adopted where it is considered that the employee will fully co-operate and respond positively with this less formal approach. For example, a Commissioning Manager may find there is no case to answer but make a recommendation for coaching, mentoring, mediation or training to be offered to employees.
- 13.5 Where an informal approach is taken, the relevant manager tasked with dealing with the matter should ensure that problems are discussed with the objective of encouraging and helping employees to improve.
- 13.6 A note of any management instruction, coaching, mediation, mentoring, training or retraining should be kept. This may be done in the form of a 'letter of expectation' to the employee, as appropriate. This should outline the details of the conduct issue, the improvement and/or standard required, the time scale allowed for this and what action will be taken, if they fail to

improve behaviour. Where management instruction are issued, a record of this will be stored electronically.

- 13.7 If as part of an outcome of no case to answer, it is identified that a vexations or malicious complaint had been made, please refer to section 21 and appendix 12.

14. Right to be Accompanied

- 14.1 All employees will have the right, if they wish, to be represented by a work colleague, Trade Union representative, or an official employed by a trade union at all stages of the policy/procedure. This right must be brought to the attention of the employee by the manager. A trade union representative who is not an employed official must have been certified by their union as being competent to accompany a worker.
- 14.2 Employees will not be entitled to bring a person acting in a legal capacity.
- 14.3 To exercise the right to be accompanied employees must make a reasonable request identifying who, from those in paragraph 14.1 they wish to attend as their representative. What is reasonable will depend on the circumstances of each individual case. However, it will not normally be considered reasonable, and therefore employees would not be eligible to exercise their right to be accompanied, when they:
- insist on being accompanied by a representative whose presence would prejudice the hearing.
 - ask to be accompanied by a representative from a remote geographical location if someone suitable and willing was available on site.
 - insist on being accompanied by a specific representative in situations where this would cause unreasonable or unnecessary delay.
- 14.4 In respect to bullet point 3 above (section 14.3), the Trust will however, permit the employee to provide an alternative date for

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a disciplinary hearing or appeal in situations where the chosen representative cannot attend on the hearing date initially proposed by the Trust. This will only be permitted on one occasion. In this situation, the alternative date provided by the employee should fall within 14 calendar days of the original planned date. Where the Trust is unable to facilitate the offered alternative date, the Trust will reschedule a date as soon after the 14-calendar day period, as possible.

- 14.5 At disciplinary hearings and appeals, the representative should be allowed to address the hearing to put forward and sum up the employee's case, respond on behalf of the employee to any views expressed at the meeting and confer with the employee during the hearing. The representative does not, however, have the right to answer questions on the employee's behalf, address the hearing if the employee does not wish it or prevent the Trust from explaining the case.

15. Formal Disciplinary Hearing

- 15.1 A formal disciplinary hearing panel will be made up of:
- The Chair,
 - Senior manager supporting the Chair.
 - HR Support to the Chair
 - Cultural Ambassador (where applicable)
- 15.2 Where it is determined that the matter should be handled formally, a hearing will be arranged as soon as is reasonably practical, and in any case within 28 calendar days of the decision to proceed to one.
- 15.2 The employee will be notified in writing of the arrangements for the hearing together with the nature of the allegation(s) which are to be considered by the disciplinary panel and what the possible outcomes could be. They will also be advised of how

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they can exercise their right to be accompanied at the hearing (see Section 14).

- 15.3 Management is required to provide the employee with a written statement of its case, prepared by the Investigating office, at least 14 calendar days prior to the hearing including copies of any witness statements upon which management intends to rely. The employee will provide a written statement of their case at least 7 calendar days prior to the hearing, together with any witness statement(s) upon which they intend to rely. Both parties will agree which communication route is best to circulate these statements. At these times both parties will identify in their statement of case the name(s) of any witness(es) they intend to call.
- 15.4 Employees, and their representatives, should co-operate fully with the operation of this policy including making every effort to attend disciplinary hearings and do so without causing unreasonable or unnecessary delay. This may necessitate attendance outside of the employee's and/or their representative's (where they are an employee of the Trust) rostered hours and/or normal working pattern.
- 15.5 If a witness has made a statement but is not available for additional interviews or for attendance at a hearing, it would not be viable, appropriate, or reasonable in the circumstances to invite them to do so all such statements will be submitted to the disciplinary panel and should be considered in the context of the overall hearing. It is not normal Trust policy to involve patients/clients, the relatives of patients/clients, or members of the public as witnesses at disciplinary hearings and thus where available, the written statement of any such individuals will be relied upon for evidence.
- 15.6 It is the responsibility of the parties concerned to arrange for the attendance of their witnesses. Where this is not possible, HR may assist with the arrangement of witnesses. In the case where witnesses are employees of the organisation the respective

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managers should be informed. Time off with pay or time off in lieu will be granted for them to attend the hearing.

- 15.7 At the request of the employee an alternative arrangement to Hearing attire may be agreed by the panel Chair, each request will be considered on a case-by-case basis.
- 15.8 There is the expectation that the employee takes all reasonable steps to attend the Hearing. Failure to attend without good reason could result in the hearing being held, and a decision being taken, in the employee's absence. However, if the employee fails to attend through circumstances completely outside of their control and which are unforeseeable, the Trust will arrange another Hearing. Thereafter, if the employee fails to attend for a second time, the hearing will be held, and a decision will be taken, in the employee's absence.
- 15.9 Employees, and anyone accompanying employees (including witnesses and note takers), must not make electronic recordings of any meetings or hearings conducted under this procedure. This rule helps us to comply with the Data Protection Act 1998. Any employee who breaches this rule will be subject to disciplinary action.

16. Formal Disciplinary Hearing Outcomes

- 16.1 Following the hearing, the panel must decide whether disciplinary action is justified or not. The decision of the panel may initially be provided verbally in the first instance. In all cases, the employee will be provided with the outcome in writing normally within 7 calendar days unless advised by the panel that a longer time period is required.
- 16.2 In the event of a longer time period being required for the Panel to reach its decision, mutual agreement between panel members and all parties will be sought on the best way to deliver the outcome to the individual(s). Options may include either a face-

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to-face meeting, videocall or telephone conversation with the Panel Chair and the employee and their representative.

- 16.3 The Trust should not disclose previous disciplinary sanctions that have expired with the panel at any stage of the hearing or on deciding outcomes. This does not apply to allegations relating to safeguarding concerns.
- 16.4 Current sanctions may be disclosed during the course of the investigation to the Commissioning Manager, only if they are relevant to the allegations and a decision will be made in conjunction with HR advice.
- 16.5 Where a current sanction is not relevant to the allegation subject to the investigation, the Trust should only disclose them to the panel when they are considering the level of sanction to apply, and not during the hearing or prior to a decision being made over whether there is a case to answer.
- 16.6 Where the facts of the case indicate that there is no case to answer the individual will be notified in writing. The panel may require the individual to undertake certain actions short of a disciplinary sanction. Such actions may include training, a piece of reflective practice or coaching/mentoring support.
- 16.6 Outcomes where there is a case to answer and disciplinary action is justified, the panel will consider what outcome is appropriate. The outcomes listed below do not need to be applied sequentially but should be determined based on the seriousness of the case. Before making their decision, the panel will take account of the following when determining which of the potential outcomes available to them will be applied:
- the employee's current disciplinary and general record.
 - actions taken in any previous similar case.
 - the explanations or extenuating circumstances provided by the employee; and most importantly,

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- whether the intended action is reasonable under the circumstances.

The potential outcomes following a hearing could therefore be as follows:

16.7 No Further Action

Applied exceptionally where the facts of the case indicate that there is a case to answer but where the panel determines that the existence of significant or fundamental contributory factors would make the issuing of a formal sanction or management instruction unwarranted and other informal measures would serve no purpose.

16.8 Where the facts of the case indicate that the matter should be handled informally, this may include use of management instructions, coaching, mentoring, training and re-training.

16.9 Formal Disciplinary Action

Where the facts of a case call for formal action then the following may be imposed as outlined under Section 17 below:

- ii) First Written Warning
- iii) Final Written Warning
- iv) Dismissal or Action Short of Dismissal
- v) Summary Dismissal

17. **Formal Disciplinary Action Sanctions**

17.1 First Written Warning:

- If the breach of the Trust's disciplinary rules is regarded as more serious, or if following informal action, the desired improvements have not been achieved, then the employee should be given a first written warning. The employee should be advised in writing of the warning, the nature of the conduct issue, the improvement and/or standard required, the time scale allowed for this and be notified of the period of time that the

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warning will remain live. The employee will also be notified that failure to improve, modify behaviour or achieve the required standard of conduct may lead to further disciplinary action under this policy. The employee will also be advised of their right of appeal.

- A copy of the letter notifying the employee of the First Written Warning will be kept on the employee's personnel file and recorded by the HR Operational team.
- A first written warning will apply for a period no longer than 12 months in line with data protection guidelines and be disregarded after that time, provided there are no further and similar instances of misconduct or during this time.

17.2 Final Written Warning

- Where a previous written warning exists, or where the breach of Trust disciplinary policy is sufficiently serious, the employee should normally be given a final written warning.
- The employee should be advised in writing of the warning, the nature of the conduct or performance issue, the improvement and/or standard required, the time scale allowed for that and be notified of the period of time that the warning will remain live. The employee will also be notified that failure to improve or modify behaviour may lead to further disciplinary action under this policy, including dismissal or action short of dismissal. The employee will also be advised of their right of appeal.
- A copy of the letter notifying the employee of the Final Written Warning will be kept on the employee's personal file and recorded by the Workforce Directorate.

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- A final written warning will apply for a period of no longer than 12 months and be disregarded after that time provided there are no further and similar instances of misconduct during this time.

17.3 Dismissal or Action Short of Dismissal

- Where there is a failure to improve or achieve/maintain the required standard of conduct despite having been subject to a prior warning, or in cases where the infringement, conduct is sufficiently serious, or where there has been a serious breach of contract, then the decision may be to dismiss with notice or issue another sanction amounting to 'action short of dismissal'.
- Action short of dismissal may include;
 - a change in role either on a permanent or temporary basis (where a suitable role is available)
 - demotion to a lower grade job either on a permanent or temporary basis (where a suitable role is available).
- These would generally be issued as an alternative to dismissal and would normally be done in conjunction with the issuing of a formal warning. Where a change in role or demotion is sanctioned, the terms and conditions including salary for that post will apply.
- A letter should be sent to the employee confirming the reasons for the dismissal or other sanction (including any relevant pay and/or terms and conditions changes) within 7 calendar days. An HR2 should be enclosed for the employee to accept the terms of action short of dismissal. If the employee does not agree to the action by signing and returning the HR2 within 7 calendar days of receipt or rejects a change of role then the Trust will impose the change to the role and if the employee chooses not to attend work, the Trust may commence a new process. In the case of dismissal, the letter should give the date of termination of employment, setting out the period of

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notice or payment in lieu of notice to which the employee is entitled and advise them of their right of appeal.

- Authority to dismiss within the Trust falls within the responsibilities of persons.
 - Substantive positions of Agenda for Change Band 8c or above
 - Seconded managers in roles attracting AfC Band 8c or above (who have gone through the normal/full recruitment and selection process). This does not apply to those on development opportunities.
 - Substantive band 8b post holders with the agreement of the joint SPF chairs

For any managers that fall out of these parameters, the appropriateness of them being permitted to dismiss would need to be considered by the SPF joint chairs on an individual basis.

Managers undertaking these responsibilities will be supported by a member of the HR Operational Team.

17.4 Summary Dismissal

- There are certain offences that are regarded as so serious that if they are committed by an employee then dismissal would normally follow. These offences are regarded as gross misconduct, and some examples of gross misconduct likely to result in dismissal are listed in Appendix 13. In the event that an employee commits an act of gross misconduct, the Trust will be entitled to terminate summarily the employee's contract of employment without notice or pay in lieu of notice.
- A letter should be sent to the employee confirming the reasons for the dismissal, the date of termination of employment and their right of appeal within 7 calendar days. The line manager is responsible for ensuring the collection/return of all Trust property.

- Authority to summarily dismiss within the Trust falls within the responsibilities of the persons identified in bullet point 5 in section 17.3 above.

18. Disciplinary Appeals Procedure

A formal disciplinary appeal hearing panel will be made up of:

- The Chair,
- Senior manager supporting the Chair.
- HR Support to the Chair
- Cultural Ambassador or Safeguarding official (where applicable)

18.1 An employee may appeal against any formal disciplinary sanction imposed.

18.2 How to Appeal.

- Appeals should be made in writing to the Director of Workforce within 7 calendar days of receipt of the letter informing them of the outcome of the formal hearing.
- When lodging an appeal, the employee should state the grounds of their appeal, which are likely to fall into three categories:
 - the outcome (finding that they have committed the alleged act(s) of misconduct or poor performance).
 - the level of the sanction imposed.
 - procedural issues
- The grounds on which the employee chooses to appeal will be considered when determining how the appeal will be handled. For example, if the grounds for the appeal relate to the level of the sanction imposed, then the appeals panel may confine their

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deliberations to this issue. If it is claimed that there are procedural irregularities, it may be necessary to conduct the appeal on the basis of a re-hearing to remedy any potential previous failings.

- Any appeal will normally be heard within 28 calendar days of receipt of the appeal letter, unless circumstances arise including, for example, issues regarding the availability of the relevant parties. In such cases, the HR Operations team will notify the employee of the delay, which will not normally be more than an additional 14 calendar days, and reason for it.
- In cases where ACAS pre conciliation has been instigated following a formal disciplinary sanction being imposed, such as a dismissal, an appeal may be postponed pending the outcome of the conciliation in agreement with the employee instigating ACAS action.
- The employee should provide management with a written statement of the grounds of their case at least 14 calendar days prior to the appeal hearing including copies of any witness statements upon which they intend to rely. Management will provide a written statement of response at least 7 calendar days prior to the appeal hearing, together with any witness statement upon which they intend to rely. Both parties should identify in their statement of case any witnesses they intend to call. All statements will be submitted to the hearing(s) and where statements are not agreed this will be identified to the Chair, who will make the final decision regarding the validity of the content of the statement.
- It is the responsibility of the parties concerned to arrange for the attendance of their witnesses. Where this is not possible, HR may assist with the arrangement of witnesses. In the case where witnesses are employees of the organisation, time off with pay, or time off in lieu will be granted for them to attend the hearing. It is not normal Trust policy to involve patients/clients/relatives or members of the public as witnesses at the meeting and the written statement will be relied on for evidence.

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- There is the expectation that the employee takes all reasonable steps to attend the Appeal Hearing. Failure to attend without good reason could result in the appeal hearing being held, and a decision being taken, in the employee's absence. However, if the employee fails to attend through circumstances completely outside of their control and which are unforeseeable, the Trust will arrange another Appeal Hearing. Thereafter, if the employee fails to attend for a second time, the Appeal Hearing will be held, and a decision will be taken, in the employee's absence.

18.3 Level of Manager to hear an Appeal.

- Warning

An employee's appeal against a first or final warning will be heard by a more senior manager than the person who issued the warning.

- Dismissal or Action Short of Dismissal

An employee's appeal against dismissal or action short of dismissal will be heard by a panel of two, one of which must be an Executive Director decided by the Joint Chairs of SPF. There will also be support from the HR Operations team. Where the Executive Director on the panel is the Director of Workforce, support from the HR Operations team would not be required by the panel members.

18.4 Appeal Outcome

- Upon completion of the appeal, and after adjournment, the Chair of the hearing will convey the decision to the employee. This decision is final. The decision will be confirmed in writing within 7 calendar days from the receipt of the outcome. In exceptional circumstances, the Chair of the panel may extend this deadline and will provide written explanation for the delay to the employee.

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- The outcome of an appeal will be to confirm, decrease or cancel the disciplinary sanction imposed.
- An appeal will never be used as an opportunity to punish the employee for appealing the original decision and will not result in any increase in sanction or penalty.
- If the panel issues or upholds action short of dismissal the same process as outlined in section 17.3 will be followed.
- An appeal panel, should they be concerned as to the way an investigation has been undertaken. The conduct of the original hearing may result in additional information being sought by the Investigating Officer and/or Commissioning Manager. The appeals panel may require that some or all of the case be re-investigated/reviewed to enable them to make an appropriate decision.
- The outcome of an appeal process, should also use this opportunity to build in a lessons learnt for each appeal hearing – e.g. circumstances, outcome, policy, process etc.

19. Confidentiality

19.1 All information at any stage of this procedure, whether it is written or verbal information, must be treated as confidential information by all parties. Failure to do so may result in disciplinary action being taken.

19.2 All records should be kept by all parties in accordance with current data protection legislation.

20. Dealing with Special Situations

20.1 Accredited Trade Union Representatives

Where disciplinary action is being considered against an employee who is a recognised trade union representative the normal disciplinary procedure should be followed. In such cases the HR Operations team will inform one of the staff side

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members of the Staff Partnership Forum and/or an official employed by the union after obtaining the employee's agreement. In these cases, circumstances considered unreasonable within section 14.3 may not apply.

20.2 Criminal Charges or Convictions Outside Employment

If an employee is charged with, or convicted of, a criminal offence consideration will be given to what effect it has, or will have, on the employee's suitability to work within the Trust, do their job, and the effect of the charge or conviction on their relationship with the Trust, work colleagues, customers and patients. In all cases the employee's line manager after consulting with their Employee Relations advisor and senior manager having considered the facts, will need to decide whether the conduct is sufficiently serious to warrant initiating the disciplinary procedure. The Trust's decision is independent of any criminal action. Charges or convictions are not automatic reasons for dismissal. If criminal charges or investigations are underway against an Trust member covered by this policy then the Trust will normally undertake its own investigation.

20.3 Where the police and/or Local Counter Fraud Specialist have to be involved in an investigation, (e.g. when an allegation of fraud or maltreatment of patients occurs), then advice from a member of the Employee Relations Team should be sought before an investigation commences.

20.4 Any employee who is being investigated, has been charged with or is being prosecuted for **any** criminal or motoring offences relating to them must inform their line manager in writing of the relevant details at the outset or the earliest opportunity.

20.5 Under the Forfeiture or Reduction of NHS Pension Scheme Benefits employees should be aware that in certain circumstances convictions may have a negative impact on their pension.

21. Vexatious and Malicious complaints

The procedure for dealing with complaints that are considered to be vexatious or malicious is contained in Appendix 12.

- a) The presumption should be that a complaint is made in good faith. If the Commissioning Manager becomes aware that the complaint is made with vexatious or malicious intent, they may make a decision and recommendations for further action on this basis.
- b) A vexatious complaint is one that is pursued, regardless of its merits, solely to harass, annoy or subdue somebody; something that is unreasonable, without foundation, frivolous, repetitive, burdensome or unwarranted.
- c) A complaint may be regarded as vexatious where the employee:
 - Persists in pursuing a complaint which has already been investigated by another or the same manager and provides no new or material information.
 - Seeks to prolong contact by continually changing the substance of a complaint or by continually raising further concerns or questions whilst the complaint is being addressed.
 - Fails to clearly identify the substance of a complaint, or the precise issues which may need to be investigated despite reasonable efforts by the manager to assist them.
 - Complains solely about trivial matters to an extent which is out of proportion to their significance.
 - Makes excessive contact with the manager or seeks to impose unreasonable demands or expectations on resources, such as responses being provided more urgently than is reasonable or necessary.
- d) A malicious complaint is one that is made with the intention of causing harm, for example:
 - deliberately seeking to defame a colleague or manager and raising a complaint with this intent;
 - through lying about an issue or incident in the knowledge that this will cause harm;
 - through knowingly basing a complaint on rumour and gossip with the intention of causing harm.

- e) A malicious complaint is defined as either:
- one that the investigation has shown to be without foundation.
 - one where the investigation evidence demonstrates that the complainant knowingly lied to the Investigating Officer; and there is sufficient evidence to demonstrate this at a disciplinary hearing on the basis of the balance of probabilities.
- f) Vexatious or malicious use of the grievance or dignity at work procedures is not an acceptable way to deal with underlying concerns. If there is evidence that an employee is making vexatious or malicious use of the grievance procedure, the matter may be investigated under this policy.

22. Governance Process

This policy has been written by the Trust's policy subgroup and approved by the Trust's Executive Directors.

23. Policy Review

22.1 This policy will be reviewed on an annual basis or amended in the light of new employment legislation and/or relevant case law.

Appendix 1

Safeguarding Children and Vulnerable Adults



All Trust staff (regardless of position within the Trust), any volunteer, commissioned service or person associated with delivering services on behalf of the Trust, must not have acted in a way that breaches any of the following:

- Behaved in a way that has harmed, or may harm, a child, young person or adult at risk
- Possibly committed a criminal offence against, or related to, a child, young person or adult at risk
- Behaved towards a child, young person or adult, that may indicate s/he is unsuitable to work position of Trust

Any member of staff identified to behave in such a way as to indicate one or more of the above statements. Either within their work or as a consequence of actions within their personal life may be subject to Trust disciplinary procedures. A Local Authority and criminal investigation may be instigated and a referral to their registering body (examples such as the General Medical Council (GMC), Nursing & Midwifery Council (NMC) or Health Care Professional Council (HCPC)).

Identification of such incidents can come from various different sources. The Trust will take due regard of all allegations. The Trust will work within the required multi-agency agreements considering recommendations and actions necessary to protect the public. This can/may include a member of staff being suspended, and possibly dismissed from the Trust. A Disclosure Barring Service (DBS) referral will be made by the Trust as part of the investigation.

The Care Act statutory guidance (March 2016, 14.120 to 14.132) sets out the responsibilities of the Safeguarding Adults Board, its partners, and those providing universal care and support services, when managing allegations in relation to 'people in positions of trust' who may pose a risk to adults with care and support needs. This guidance replaces the Local Authority Designated Officer (LADO) role within Adult and Community Services Safeguarding Service to ensure that there is an

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appropriate mechanism to manage allegations against those employed within a position of trust in accordance with the Care Act 2016.

This Protocol must be followed in all cases by the organisation which first becomes aware of a concern. Working Together 2015 requires Local Authorities to have a Local Authority Designated Officer (LADO) who is responsible for dealing with such allegations made against adults who are employed in posts where they have direct contact with children and young people and allegations have been made that require consideration of their suitability to work/volunteer with these groups.

An employee, volunteer, or student (paid or unpaid) working with an adult with care and support needs will be referred to a 'person in a position of trust'. The term 'employer' refers to organisations providing care and support that have a working relationship with the 'person in a position of trust'.

The term 'individual of concern' will be used to describe a person in a position of trust who is alleged to have abused an adult with care and support needs or may pose a risk to an adult with care and support needs.

Whilst the focus of safeguarding adults work is to safeguard one or more identified adults with care and support needs, there are occasions when incidents are reported that do not involve an adult with care and support needs, but indicate, nevertheless, that a risk may be posed to adults with care and support needs by a person in a position of trust.

Please see Safeguarding Policies & Position of Trust Policy for further details.

Appendix 2

Situations where instigation of an investigation and sharing of information with a LADO should be considered.



Where an individual*:

- Behaved in a way that has harmed, or may harm, a child
- Possibly committed a criminal offence against, or related to, a child;
or
- Behaved towards a child or children in a way that indicates s/he is unsuitable to work with children.

Also, situations where an allegation indicates that the alleged individual might be deemed unsuitable to continue to work with children, where;

- There is an allegation that they have accessed inappropriate materials, for example on the internet, an example being accessing websites which show children being abused.
- Where there is an allegation that they have downloaded inappropriate images of a similar nature
 - Where there have been allegations in relation to activities that an individual may have been involved in outside of their employment (this includes allegations of Domestic violence).
 - Having a sexual relationship with a person under the age of 18 if in a position of trust in respect of that child, even if consensual.
 - Grooming, i.e., meeting a child under 16 with intent to commit a relevant offence

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- Other 'grooming' behaviour giving rise to concerns of a broader child protection nature, e.g., inappropriate text / email messages or images, gifts, socialising etc.
- Possession of indecent photographs/pseudo-photographs of children

The above list is not exhaustive, and advice should always be sought if you are unsure.

*All references in this document to 'members of staff' should be interpreted as meaning all staff, whether they are in a paid or unpaid capacity

Appendix 3

Trust Safeguarding Contact

Dr Tom Davis

Medical Director and Named Doctor for Safeguarding

Email: tom.davis@eastamb.nhs.uk

Named Professional for Safeguarding and
Designated Senior Manager for Allegations against staff

Telephone: 07795 626946

Email: anna.price@eastamb.nhs.uk

Safeguarding Lead, email:

Email simon.chase@eastamb.nhs.uk

Safeguarding Team

Email safeguarding.team@eastamb.nhs.uk

Appendix 4

Pre-Action Review Meeting - Pro-forma V0.1



Line Manager to complete section 1 only

Email to ERCaseRegistration@eastamb.nhs.uk at least 48 hours before P-ARM call is to be held. Subject title in email to include ER Tracker number & employee initials

Section 1 - P-ARM Pro-forma

Requested date of P-ARM meeting:	
ER Tracker no:	
Line Manager or CM presenting at review meeting:	
HR Support:	
Staff Member name:	
Job Title:	
Department:	
Continuous service start date:	
Banding:	
Professional registration escalation:	Yes/No Please specify
Welfare Officer name:	

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Frequency of welfare contact:	
Union Representative/colleague name:	
Manager:	
Reason for possible investigation:	
Date of incident/issue:	

Is the staff member from a BAME background	Yes/No
Is Safeguarding an issue	Yes/No

Have you asked yourself the following questions before seeking P-ARM call?

Question	Answer
a. Did the employee intend to cause harm?	Yes/No/Unsure
b. Are there indications of substance misuse including alcohol?	Yes/No/Unsure
c. Are there indications of physical ill health?	Yes/No/Unsure
d. Are there indications of mental ill health?	Yes/No/Unsure
e. Is the employee aware of the relevant safe operating procedures (where applicable)?	Yes/No/Unsure

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Question	Answer
f. Were the protocols/accepted practice workable and in routine use?	Yes/No/Unsure
g. Has the employee had the relevant training to perform their roles and responsibilities?	Yes/No/Unsure
h. Would another similar trained and skilled employee in the same situation act in a similar manner?	Yes/No/Unsure
i. Any cultural points to consider? <i>(be prepared to expand)</i>	Yes/No/Unsure
j. Informal discussions with the employee about this issue/incident under review?	Yes/No/Unsure
k. Similar issues discussed in the past, formally or informally which add to the consideration of a formal disciplinary investigation?	Yes/No/Unsure
Comments:	

Pre-Action Review Checklist (review panel)

Section 2

To be completed by review panel

The panel will use Pro-Forma section 1 - submitted by the Line Manager.

Complete the following sections:

P-ARM review date:	
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Name:	Job role:
	Executive Director (or Sector Head if Executive Director is not available)
	SMG
	ER Lead
	Safeguarding (If applicable)
	Cultural Ambassador (If applicable)

Ensure conflict of interest and unconscious bias has been considered.

The following questions should be considered before making a decision to formally investigate the individual concerned. (Check & challenge)

Question	Answer
l. Did the employee intend to cause harm?	Yes/No/Unsure
m. Are there indications of substance misuse including alcohol?	Yes/No/Unsure
n. Are there indications of physical ill health?	Yes/No/Unsure
o. Are there indications of mental ill health?	Yes/No/Unsure
p. Is the employee aware of the relevant safe operating procedures (where applicable)?	Yes/No/Unsure
q. Were the protocols/accepted practice workable and in routine use?	Yes/No/Unsure
r. Has the employee had the relevant training to perform their roles and responsibilities?	Yes/No/Unsure
s. Would another similar trained and skilled employee in the same situation act in a similar manner?	Yes/No/Unsure

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Question	Answer
t. Any cultural points to consider?	
Comments:	

Given that the Trust emphasises improvement and learning and not blame, has there been:

Question	Answer
Informal discussions with the employee about this issue/incident under review?	Yes/No
Similar issues discussed in the past, formally or informally which add to the consideration of a formal disciplinary investigation?	Yes/No

Issues previously discussed:	
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OUTCOME MEASURES:

a. If, based on the above, it is clear that there is a training or learning deficiency, is a period of supervision or more training required rather than formal disciplinary action?	Yes/No
Comments:	

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Outcome agreed additional Training/Development (go to section 5)	
<p>b. Based on the above, is an informal sanction required (e.g. informal verbal warning) and followed up with a management letter/file note/1:1</p> <p>Support to be looked at could include:</p> <ul style="list-style-type: none"> – Line management support/supervision – Coaching / development plan – Review of department practice – Health Issues – OH/Health Assured – Other (please specify) 	Yes/No
Comments:	
Outcome agreed - Informal Management (go to section 5)	
c. If based on the review, the issue has reached the threshold for a formal investigation what are the reasons for this?	
Comments:	
Outcome agreed - Formal Investigation (go to section 4)	

Section 4 – Formal Investigation:

Does the above action require discussion/advice from the relevant professional body, safeguarding?	Yes/No
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Comments:		
Does the information known at this time require discussion in regard to potential suspension? <i>*Involve the Workforce Directorate</i>		Yes/No
Comments:		

Is the decision consistent with how other employees have been treated for the same or similar misconduct/action?	Yes/No
Comments:	

Discussion who maybe suitable as an Investigating Officer, ensuring conflict of interest and unconscious bias is considered	Yes/No
Comments:	
Ensure employee has support and contact details been shared for example, OH, Health Assured, Chaplaincy, Union etc.	
Comments:	

Section 5 – Sign Off:

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Divisional Board representative (Name):	
Signed:	
Date:	
Comments/Action:	

If required:

Cultural Ambassador:	
Signed:	
Date:	
Comments/Action:	

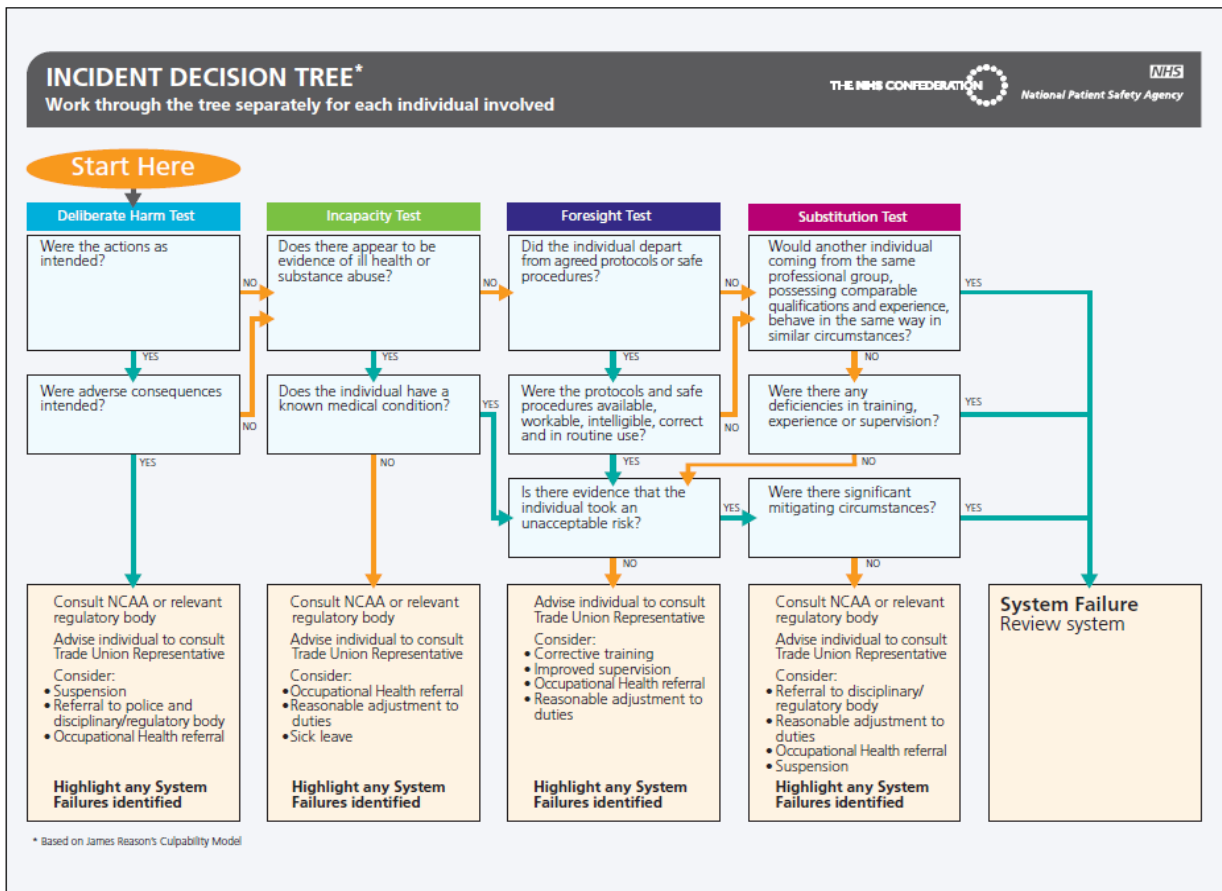
Action	By whom
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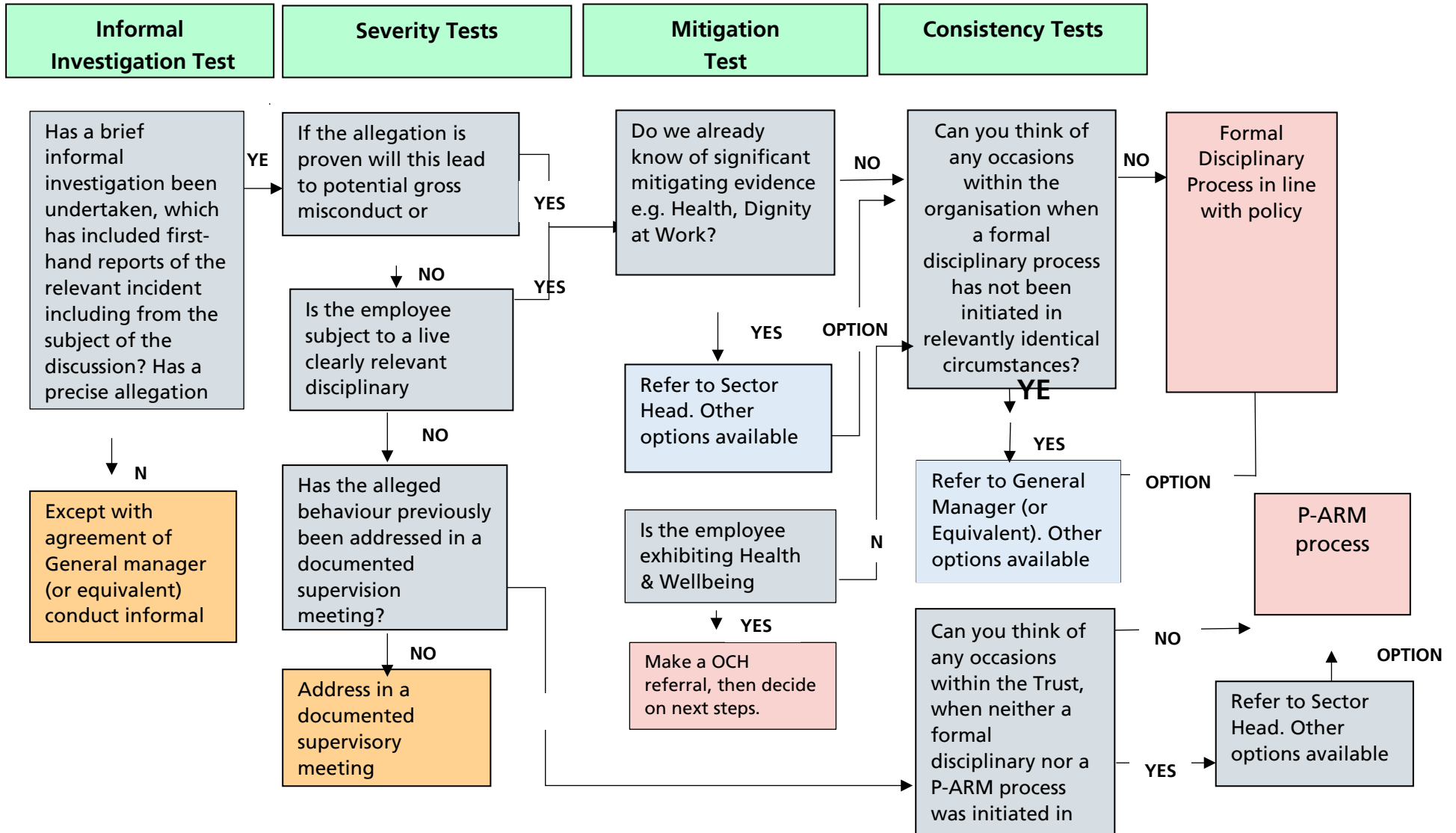
Outcome of pre-action tool review meeting and next steps communicated to relevant line manager.	
Outcome of pre-action review meeting and next steps communicated to member of staff who is the subject of the review.	

FOR ADMIN USE ONLY:	
Employee Relations representative to log and file	Actioned by:
Date case logged:	

Appendix 5



Appendix 6 Disciplinary Decision Tree [To be used in the P-ARM meeting, by the Commissioning Manager, HR and CA (where applicable)]



Appendix 7

Risk Matrix for Considering Suspension



<p>Suspension should only be considered if one or more of the conditions outlined in section 11.4.</p> <p><i>(Policies this could apply to: Disciplinary, Safeguarding, Dignity at Work, Freedom to Speak Up and Grievance)</i></p>			
Date:			
Name of Individual:			
Criteria	No	Yes	Comments
Suspension consideration			
Is there a severe allegation of misconduct?			
Is there a requirement to work with a victim/complainant of an alleged sexual harassment?			
Is there a workplace risk to the employee, if you do not suspend?			
Is the employee subject of criminal proceedings which may affect whether they can do their job?			
Have working relationships severely broken down?			
Is the individual able to			

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continue doing their normal role while the matter is investigated.			
Could a temporary adjustment to the employee’s working arrangements remove the need to suspend?			
Could the employee hamper or affect an investigation?			
Alternatives to Suspension			
Is the individual able to move to a different area of the workplace			
Can working from home be considered as an alternative?			
Can changing their working hours be considered as an alternative?			
Is the individual able to be placed on restricted duties?			
Could working under supervision be considered as an option?			
Wellbeing Implications			
Are there medical grounds to suspend?			
Are there risks to the employee’s safety if they remain at work?			

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<p>Is there a risk to other employees, property, or patients if they remain at work?</p>			
<p>Are there external factors that may impact on the individual remaining in the workplace?</p>			
<p>Has the decision to suspend been satisfied?</p>	<p>No</p>	<p>Yes</p>	<p>Comments</p>

Appendix 8

Initial Suspension Pro-forma

Initial Decision to Suspension Pro-forma			
Date of Suspension Decision Meeting		Members Presenting the case & Required at Meeting:	
Employee		Suspended By:	
Job Role			
Banding		Date of Suspension	
Line Manager		Work Base/Location	
Commissioning Manager		HR Representative	
Investigating Officer		Professional Registration Escalation	
Reason-Suspension or other action			
Summary: Allegations			
Any other information			
Risks of maintaining in the workplace			
UNION Rep			

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Safeguarding Referral required?			
Decision & Rationale for decision			
Agreed Next Steps			
Wellbeing and mental health information			
Date of Next Suspension Review Meeting			

Appendix 9 Suspension Review Meeting Pro-forma

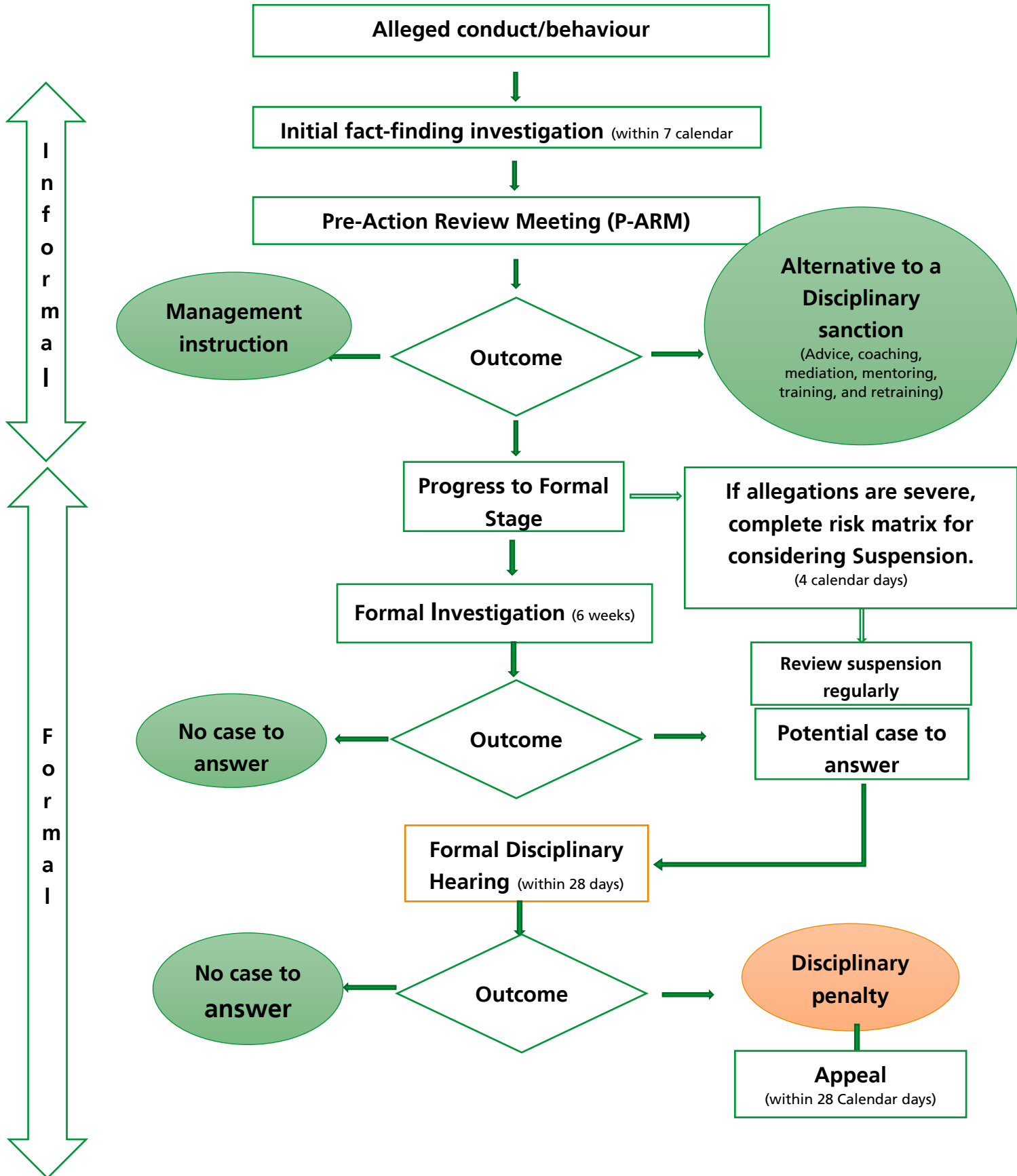
Suspension Review Meeting Pro-forma			
Date of Suspension Review Meeting		Members Presenting the case & Required at Meeting:	
Employee		Suspended By:	
Job Role			
Banding			Date of Suspension
Line Manager		Work Base/Location	
Commissioning Manager		HR Representative	
Investigating Officer		Professional Registration Escalation	
Reason for Suspension			
Summary: Allegations			
Welfare Officer		Frequency of Contact With Welfare Officer	
Name of Union Representative /Colleague		Is the post being back-filled	Yes/No
Health & Well-Being	OH Referral	Yes/No	
	Last OH Referral		

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	OH Outcome		
Safeguarding Referral	Yes / No *[If no please state reason]	Date of Last Safeguarding Review	
Case Update			
Agreed Next Steps			
Anticipated Date - Completing Investigation			
Anticipated Date Report Submission to Commissioning Manager			
Third party involvement. Police etc			
Date of Next Suspension Review Meeting			

Appendix 10

DISCIPLINARY PROCEDURE FLOWCHART



Appendix 11



Formal Disciplinary Hearing Checklist

Management case relevant to the disciplinary matter will be provided, 14 calendar days in advance of the hearing. The member of staff may also provide papers if they wish 7 days before the hearing following receipt of the management case.

The Chair of the panel will outline the procedure to be observed and detail the allegations to be heard.

Introductions

The Chair.

1. Will welcome attendees.
2. Request that all attendees turn off any electronic devices to avoid unnecessary interruptions during the hearing and advise that the Trust expressly prohibits the recording of meetings.
3. Introduce those present and their roles, (see guidance re: roles/responsibilities); this may include panel members, including a Cultural Ambassador (if applicable), any HR member supporting panel, note-taker, management representative, support for management side etc.
4. Representation of Employee – If accompanied confirm the role of the companion, i.e. that they will be able to address the hearing in order to: put the employee's case forward; sum up the case; respond on the employee's behalf to any view expressed at the hearing; and confer with the employee. However, the representative will not usually answer questions on behalf of the employee but may do so with the agreement of the panel.
5. If not accompanied note that the employee has been advised of their right to be accompanied but has chosen to attend unaccompanied.
6. Ask the employee to introduce themselves and any companion they may have with them. Check whether the participants are happy with use of first names.

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7. Confirm with the employee that they have received the letter notifying them of the hearing and the associated documentation providing advanced disclosure of the case.
8. Confirm with the employee that they understand that it is a formal disciplinary hearing which will be conducted in line with the Trust's Disciplinary procedure. [If appropriate, having first sought advice from HR, subject to previous action/warnings, advise that one potential outcome of the hearing could be dismissal – however in such as case it is essential that delegated authority is provided beforehand]
9. Ask that all communications go through you as the Chair during the hearing.

Outline Procedure

10. Advise of the procedure or if appropriate invite a HR representative (if applicable) to outline the procedure.
11. Confirm Documentation provided – Identifying, if appropriate, any other documentation the panel has at their disposal for reference purposes. Also confirm if the panel received any additional information/evidence from the employee.
12. Adjournments - Advise that should any party consider an adjournment necessary requests should be made via the chair. Identify the location of the rooms available to both management and employee.
13. Taking of Notes – Advise that the note-taker will take summary notes to support the panel's consideration. Should the employee want a summary of these notes these can be provided on request. Advise that both the employee and their representative would be welcome to make their own notes.
14. Respond to any procedural concerns/queries that may arise.

Running Order

15. The management representatives will be invited to present the allegation(s) against the employee and the evidence upon which this is based, which may include calling witnesses.
16. The staff member, their representative if applicable and the panel will be given the opportunity to ask questions of the management representatives and any witnesses, if present and to query the evidence provided.
17. The staff member and their representative are then invited to present their case, which again may rely on witnesses.

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18. The panel and the management representatives will correspondingly be allowed to ask questions of the employee and any witnesses.
19. Both the management representatives and the employee will be asked to provide a brief concluding statement.
20. The Panel will adjourn for the Panel to **consider the decision.**

Present Case

Hear case based on the above running order.

Adjournment & Decision

21. Panel either adjourns or closes the hearing to consider the case
22. If the panel is unable to make a decision as further information/time is required, inform the employee as to when they can expect written notification of the decision (or if further action was deemed necessary what this would entail)
23. When closing the hearing, ensuring that everyone understands what is going to happen.
24. Panel makes a decision (See the Disciplinary Policy for list of potential formal disciplinary hearing outcomes)
25. Advise that the outcome of the hearing should be confirmed to the employee in writing, usually within 7 days of the hearing. (The outcome Letter should include notification of their right to appeal and to whom any such appeal should be addressed)

Record

26. Record summary of the discussions, (including any agreed actions and timescales for improvement etc).
27. Ensure that the records are factual, unambiguous, and constructive (assume that the staff member may see these).
28. Write to employee summarising the outcome of hearing and any next steps.
29. Store records securely, as these may be subsequently required within later procedural stages and shared with all relevant parties, including the employee.

Appendix 12

Vexation and Malicious Complaints Process



How to recognise and deal with vexatious and malicious grievances

Contents:

- Identifying vexatious and malicious complaints What is a vexatious complaint?
- What is a malicious complaint?
- Handling vexatious and malicious complaints Introduction

Introduction:

1. The presumption should be that a complaint is made in good faith. If the commissioning manager becomes aware that the complaint is made with vexatious or malicious intent, they may make a decision and recommendations for further action on this basis.
2. Every complaint must be considered on its merits and, even if someone has made a vexatious or malicious complaint in the past, it must not be assumed that any other complaint they make will also be vexatious or malicious.
3. Commissioning managers should consider any known temporary or permanent outside factors, such as personal or health issues that may have affected the employee and which the employee is prepared to share. Managers should remind the employee about available support such as the Employee Assistance Programme (EAP).

Identifying vexatious and malicious complaints What is a vexatious complaint?

4. A vexatious complaint is one that is pursued, regardless of its merits, solely to harass, annoy or subdue somebody; something that is unreasonable, without foundation, frivolous, repetitive, burdensome, or unwarranted.
5. In identifying vexatious complaints, managers must be careful to:

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- distinguish between employees who are raising genuine concerns; and
- recognise where people are simply being difficult.

6. This can be achieved by recognising that complainants may often be aggrieved, frustrated or have other reasons for their behaviour; the focus must be on careful consideration of the merits of the case rather than the attitude of the complainant.

However, a complaint may be regarded as vexatious where the employee:

- Persists in pursuing a complaint which has already been investigated by another or the same manager and provides no new or material information.
- Seeks to prolong contact by continually changing the substance of a complaint or by continually raising further concerns or questions whilst the complaint is being addressed.
- Fails to clearly identify the substance of a complaint, or the precise issues which may need to be investigated despite reasonable efforts by the manager to assist them.
- Complains solely about trivial matters to an extent which is out of proportion to their significance.
- Makes excessive contact with the manager or seeks to impose unreasonable demands or expectations on resources, such as responses being provided more urgently than is reasonable or necessary.

What is a malicious complaint?

7. A malicious complaint is one that is made with the intention of causing harm, for example:

- deliberately seeking to defame a colleague or manager and raising a complaint with this intent;
- through lying about an issue or incident in the knowledge that this will cause harm;

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- through knowingly basing a complaint on rumour and gossip with the intention of causing harm.

8. A malicious complaint is defined as either:

- one that the investigation has shown to be without foundation
- one where the investigation evidence demonstrates that the complainant knowingly lied to the Investigating Officer; and there is sufficient evidence to demonstrate this at a disciplinary hearing on the basis of the balance of probabilities.

Handling vexatious and malicious complaints

9. Vexatious and malicious complaints can be very difficult to identify. Largely, this must be a matter of professional judgement for the manager. However, once identified, such complaints should be tackled as soon as possible.

10. The Grievance Policy should be followed but commissioning managers may conclude as part of the investigation or decision that the complaint is vexatious and or malicious. Managers may also seek to limit the scope of the complaint to what is reasonable and relevant to the complaint itself.

11. The mere fact that an employee has brought a number of complaints in the past is not of itself sufficient grounds for refusing to consider a complaint if it raises new matters.

12. Commissioning managers should not treat anyone less favourably or subject them to a detriment because they have brought a complaint. This applies even where they are suspected to be vexatious, malicious or otherwise.

13. Each case must be considered on its merits, be evidence based and investigated, as appropriate. Any mitigating factors must be taken into account (for example, stress, and physical and mental illness, or certain behaviours which may be outward symptoms of underlying workplace problems such as bullying, harassment or

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discrimination) as these may have a significant bearing on the case.

14. Following investigation, and before reaching a decision that a complaint is vexatious or malicious, commissioning managers should seek advice from HR.
15. Vexatious or malicious use of the grievance or dignity at work procedures is not an acceptable way to deal with underlying concerns. If there is evidence that an employee is making vexatious or malicious use of the grievance procedure, the matter may be investigated under the disciplinary procedure.

Appendix 13

Examples of Misconduct and Gross Misconduct



This list is neither exclusive nor exhaustive. Whether or not a particular action constitutes an offence, which falls into this category, will depend upon a number of factors including the degree of seriousness and the responsibilities of the employee. Management action following an offence will take into account any extenuating circumstances together with the employee's previous record.

Examples of Misconduct

The following non exhaustive list sets out examples of misconduct:

- Unauthorised Absence.
- Poor or erratic time keeping.
- Failure to follow a reasonable management instruction.
- Minor breaches of procedure likely to undermine efficient management or jeopardise the safety of other employees, patients or members of the public.
- Failure to comply with requirements to declare interests, gifts and hospitality received.
- Minor occurrences of, misuse of, or failure to safeguard confidential information and/or patient data.
- Failure to follow Trust policies and/or procedures.

This list is neither exclusive nor exhaustive. Whether or not a particular action constitutes a breach of the Trust's disciplinary procedure, which falls into this category, will depend upon a number of factors including the degree of seriousness and the responsibilities of the employee. Management action following an offence will take into account any extenuating circumstances together with the employee's previous record.

2.5 Examples of Gross Misconduct

The following non exhaustive list sets out examples of gross misconduct:

- theft, fraud and deliberate falsification of records
- inappropriate behaviour including physical violence or sexual misconduct.
- serious bullying, harassment or unlawful discrimination
- deliberate and/or serious misuse or damage to Trust property or its name.
- bringing the Trust into serious disrepute
- incapability whilst on duty brought on by alcohol or illegal drugs.
- serious negligence which causes or might cause unacceptable loss, damage or injury.
- serious infringement of health and safety rules
- serious breach of confidence (subject to the Public Interest (Disclosure) Act 1998)
- serious act of insubordination
- criminal conviction outside work which could affect employee/patient relations or amount to a breach of trust.
- misuse of Trust IT and/or communications equipment and systems for example deliberately accessing pornographic, offensive or obscene material liable to cause offence.
- serious breach of confidentiality
- breach of contract of employment – any fundamental breach of contract or conduct which renders impracticable continuation of effective employment.
- misuse of or failure to safeguard confidential information and/or patient data.
- Serious or repeated breaches of Trust policies and procedures.

Appendix 14



Equality Impact Assessment

EIA Cover Sheet																	
Name of process/policy	Disciplinary Policy																
Is the process new or existing? If existing, state policy reference number	V13.0																
Person responsible for process/policy	HR																
Directorate and department/section	Workforce																
Name of assessment lead	Navrita Atwal																
Has consultation taken place? Was consultation internal or external? (please state below):	HR Policy Sub-Group, Heads of Operation, HR Team, Unison																
The assessment is being made on:	<table border="1"> <tr> <td>Guidelines</td> <td></td> </tr> <tr> <td>Written policy involving staff and patients</td> <td>X</td> </tr> <tr> <td>Strategy</td> <td></td> </tr> <tr> <td>Changes in practice</td> <td></td> </tr> <tr> <td>Department changes</td> <td></td> </tr> <tr> <td>Project plan</td> <td></td> </tr> <tr> <td>Action plan</td> <td></td> </tr> <tr> <td>Other (please state)</td> <td></td> </tr> </table>	Guidelines		Written policy involving staff and patients	X	Strategy		Changes in practice		Department changes		Project plan		Action plan		Other (please state)	
	Guidelines																
	Written policy involving staff and patients	X															
	Strategy																
	Changes in practice																
	Department changes																
	Project plan																
	Action plan																
Other (please state)																	
Training programme.																	

Equality Analysis

What is the aim of the policy/procedure/practice/event?

This document outlines the Disciplinary Policy (Managing Conduct and Performance) (the Policy) and procedures for the East of England Ambulance Service NHS Trust (the Trust).

This policy observes current employment legislation, the ACAS Code of Practice on Disciplinary and Grievance procedures, and the ACAS guide to discipline and grievances at work which compliments the Code of Practice, to ensure fair and consistent treatment.

The policy aims to promote, encourage and support all employees, including contractors and volunteers to achieve and maintain high standards of conduct and work performance through the application of a fair, effective and consistent approach when managing staff conduct and performance issues.

This policy has been written in partnership by management and staff side, and in accordance with current employment legislation.

This policy applies to all staff employed by the Trust. Allegations and concerns made against Bank Workers or agency workers may be investigated using an approach aligned to that outlined in this policy. Where the Trust is not the employer of the individual an approach will be agreed with the employer.

Who does the policy/procedure/practice/event impact on?

Race	×	Religion/belief	×	Marriage/Civil Partnership	×
Sex	×	Disability	×	Sexual orientation	×
Age	×	Gender re-assignment	×	Pregnancy/maternity	×

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Who is responsible for monitoring the policy/procedure/practice/event?

WORKFORCE DIRECTORATE

What information is currently available on the impact of this policy/procedure/practice/event?

This policy links into the following and has been updated taking into consideration the current legislation:

1. Maternity Leave Policy
2. Special Leave Policy
3. Adoption Leave Policy
4. Business Travel Policy
5. Standards of Business Conduct Policy (Conflicts of Interest)
6. Secondary Employment Policy
7. Flexible Working Arrangements Policy
8. Paternity Policy
9. Annual Leave Policy
10. Professional Registrations Policy
11. Recruitment and Selection Policy
12. Driving Standards Policy and Procedure
13. Sickness Absence Management Policy
14. Policy for Complaints and Compliments
15. Freedom to speak up: Raising Concerns (Whistleblowing) Policy for the NHS

Do you need more guidance before you can make an assessment about this policy/procedure/ practice/event? **No**

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Do you have any examples that show that this policy/procedure/practice/event is having a positive impact on any of the following protected characteristics? Yes/No, If yes please provide evidence/examples:

Race	×	Religion/belief	×	Marriage/Civil Partnership	×
Sex	×	Disability	×	Sexual orientation	×
Age	×	Gender re-assignment	×	Pregnancy/maternity	×

Please provide evidence: The Policy should have a positive impact on the above characteristics

Are there any concerns that this policy/procedure/practice/event could have a negative impact on any of the following characteristics? Yes/No, if so please provide evidence/examples:

Race	<input type="checkbox"/>	Religion/belief	<input type="checkbox"/>	Marriage/Civil Partnership	<input type="checkbox"/>
Sex	<input type="checkbox"/>	Disability	<input type="checkbox"/>	Sexual orientation	<input type="checkbox"/>
Age	<input type="checkbox"/>	Gender re-assignment	<input type="checkbox"/>	Pregnancy/maternity	<input type="checkbox"/>

Please provide evidence: **No Concerns**

Action Plan/Plans - SMART

Specific

Measurable

Achievable

Relevant

Time Limited

Evaluation Monitoring Plan/how will this be monitored?

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Who - **HR/WORKFORCE**

How

By

Reported to

Appendix 15 - Monitoring Table

What	Who	How	Frequency	Evidence	Reporting arrangements	Acting on recommendations	Change in practice and lessons to be shared
<p><i>The effectiveness of the P-ARM process.</i></p> <p><i>The number of disciplinary cases.</i></p> <p><i>The quality of disciplinary cases</i></p> <p><i>The equality breakdown of</i></p>	<p><i>Workforce committee</i></p>	<p><i>How are you going to do it?</i></p> <p><i>Via The ER Tracker.</i></p> <p><i>Produce a report</i></p>	<p><i>Quarterly</i></p>	<p><i>A report which includes audit or monitoring</i></p>	<p><i>The lead or committee is expected to read and interrogate any report to identify deficiencies in the system and act upon them.</i></p> <p><i>How each element of the monitoring table identify actions?</i></p>	<p><i>Required actions will be identified and completed in a specified timeframe.</i></p>	<p><i>Required changes to practice will be identified and actioned within a specific time frame.</i></p> <p><i>A lead member of the team will be identified to take each change forward where appropriate.</i></p> <p><i>Lessons learned will be shared with all the</i></p>

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What	Who	How	Frequency	Evidence	Reporting arrangements	Acting on recommendations	Change in practice and lessons to be shared
<p><i>disciplinary cases</i></p> <p><i>The number of suspensions</i></p>							<p><i>relevant stakeholders.</i></p>