Dignity at Work Policy
(Bullying and Harassment Policy Procedure)

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Ratified By: HR Committee, JNCC, JLNC
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Corresponding Author: HR Business Consultant
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### Revision History

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1. Circulation

The policy applies to all grades and levels of staff employed by Heart of England NHS Foundation Trust Hospital NHS Trust.

Agency and contract staff should familiarise themselves with this policy to ensure their actions do not contravene the expected standards of behaviour of the Trust.

2. Scope

Heart of England NHS Trust is committed to the belief that all staff has the right to be treated with dignity and respect at work and not to be subject to any form of unacceptable Behaviour (verbal or physical), including harassment and bullying. Such behaviour will not be tolerated by the Trust in any form, whether this is at the workplace or at work related events. The Trust will view such behaviour as a serious disciplinary offence that may lead to dismissal.

The Trust will continue to work towards promoting an environment where:

- Employees feel empowered to deal with conflicts and locally resolve issues
- All forms of harassment and/or bullying are known to be unacceptable
- Individuals feel confident enough to raise complaints without fear of reprisal or victimisation
- A system of support and counselling is provided for all parties involved as part of the resolution of a complaint
- Employees are encouraged to access their Trade Union representative for advice, support and representation at all stages of the process.

Principles and Values

The following principles underpin this policy:

- All staff will behave in line with the NHS Constitution
- Staff will treat each other, and their patients/customers with respect and dignity at all times
- Staff have the right to be treated with respect and dignity and not to suffer any form of harassment, bullying or discrimination whilst at work
- Managers have the right to manage and organise their services to ensure that appropriate quality and standards are achieved and that their staff are performing to an acceptable standard.
- Employees have the right to raise concerns, to be supported and not victimised for having done so
- Employees have a duty and responsibility to attempt to resolve all issues themselves and escalate as appropriate.
- Staff will be empowered and supported to resolve conflicts between themselves
• Serious complaints or those that cannot be resolved will be sympathetically, professionally, objectively and promptly investigated

3. Definitions

3.1 What is harassment?

Harassment can be defined as “any unwanted action, behaviour, comment, physical contact or passive intimidation that a person finds objectionable or offensive and which makes that individual feel threatened, humiliated, patronised or uncomfortable, leading to a loss of dignity or respect”. Harassment may be persistent or an isolated incident. Harassment can create an intimidating or hostile work environment.

Harassment may be directed towards people because of their gender, age, sexual orientation, race, colour, ethnic origin, religious beliefs, physical or mental disability, or some other characteristic.

It is important to remember that it is for the recipient to define what is and is not acceptable.

3.2 Racial Harassment

Racial harassment usually involves someone behaving or acting in a way that causes embarrassment, humiliation or is likely to intimidate or offend others on the grounds of their colour, race or religion.

In practice, racial harassment may include:

• display or circulation of racially offensive material, including computer based graphics and photographs
• verbal or physical threat or abuse
• innuendo, mockery or unwarranted remarks or jokes
• use of derogatory racial stereotypes.

Any comments, action or written material, which derides or insults someone’s race, colour, religion, nationality or ethnic origin are unacceptable.

3.3 Sexual Harassment

Sexual harassment can be difficult to define because types of behaviour which may cause distress, annoyance or embarrassment to one individual may be acceptable to another. It may, for example, be acceptable to remark upon someone’s appearance when it is clear that this will be welcome. However, persistent or inappropriate remarks of this type which are neither invited nor welcome may well cause offence and could, therefore, amount to sexual harassment, even if this was not the intention.
In general, sexual harassment can be distinguished from acceptable behaviour in that it involves unreciprocated and unwelcome actions, attention or behaviour, which is of a sexual nature.

Some forms of sexual harassment, such as assault, are obvious; others are much less so and may include:

- displays or circulation of sexually offensive material, for example pin-ups, calendars, photographs and computer based graphics
- innuendo
- obscene gestures, leering, staring
- unsolicited comments
- touching, hugging, pinching or pushing
- Suggestions that sexual favours may further a member of staff’s career or that not offering sexual favours may adversely affect a member of staff’s career.

Harassment in terms of sexual orientation or gender re-assignment may be related to the above, but is more likely to include:

- innuendo, mockery or remarks or jokes which may offend the individual
- verbal or physical threats or abuse
- use of derogatory sexual stereotypes.

3.4 What is bullying

The Trust finds bullying at work, in any form, unacceptable.

Bullying may include:

- Persistent or recurrent behaviour which is offensive, abusive, demeaning, malicious or insulting.
- Verbal or physical intimidation.
- Persistent unjustified criticism.
- Humiliating people in front of others.
- Penal sanctions or detrimental changes in the member of staff’s duties or responsibilities imposed without reasonable justification or notification.
- Setting unrealistic deadlines or targets or constantly changing these for no good reason.

3.5 Other behaviour which the Trust finds unacceptable

- Omission from general conversation and social activity.
- Being continually given duties that are considered to be stereo typically gender specific.
- Shouting and swearing, not necessarily directed at staff.
4. **Reason for Development**

This policy provides a framework consistent with the NHS Constitution and the Staff Pledges, whereby the Trust guarantees that all complaints or concerns raised will be taken seriously. Various processes are in existence to support staff and where these do not achieve satisfactory solutions, formal investigation will be undertaken.

5. **Aims and Objectives**

The aim of this policy is to promote mutual respect at work without discrimination and draw attention to and make clear all forms of unacceptable behaviour. If a breach occurs the policy will also provide practical guidance and support for those who make a complaint, those whom the complaint is against and those involved in dealing with such complaints. The policy also aims to:

- set standards required by the Trust
- reduce incidences of harassment and when they occur, ensure that they are dealt with effectively
- outline the Trust managers’ and members of staff’s responsibilities
- provide guidelines for managers when dealing with complaints
- explain to members of staff how to obtain help and advice and where necessary how to complain about harassment.

6. **Standards**

The Procedure for the reporting and management of harassment and bullying is included in **Appendix 1**

6.1 **General**

All Managers must ensure that they treat all staff fairly and consistently and that the process identified in the policy and procedure is followed.

Staff and managers must ensure they treat colleagues, patients and visitors with dignity and respect at all time ensuring their behaviour is appropriate and not discriminatory.

Individuals who perceive themselves as being bullied or harassed should seek appropriate support from either: Employee Assistance Programme, Confidential Contacts, Independent Resolution Facilitators, Occupational Health department, Trade Union representative, Line Manager or HR Consultancy Department. In all cases, the Trust will encourage individuals to seek to resolve issues informally and locally by supporting staff through independent resolution (mediation). The Trust takes complaints of this nature extremely seriously and believes that it is best for all parties, where possible, to resolve issues informally. There will, however, be exceptional circumstances where this is not deemed appropriate.
Any individual who is accused of bullying or harassing an individual must reflect on their behaviour and ensure it does not re-occur.

6.2 Legal Framework

The Trust has a legal and ethical responsibility as a reasonable employer to ensure that staff are not subject to inappropriate behaviour which may not only affect their performance but more importantly their health and well-being.

6.3 Sources of Support

The Trust recognises that involvement in this procedure can be a stressful process for all the parties concerned.

There are a number of sources of support for employees including Occupational Health Department where counselling can be accessed, the 24 hour free advice line - Employee Assistance Programme, Trade Union Representative, Royal Colleges, Human Resources and / or confidential contacts (all details can be found on either the HR or Occupational Health and Wellbeing websites)

A full list of External support agencies is included in Appendix 3

Accessing a Confidential Contact or using the Independent Resolution Process

Wherever possible, the Trust believes it is in the best interests of all parties to attempt to resolve conflicts and complaints informally and locally. This does not take away from the seriousness of issues but helps to maintain relationships both at individual and team level, aid a more speedy resolution and remove the stress that formal processes can induce. It is recognised that in some cases, a member of staff may find it difficult to discuss their concerns with the individual directly, or with his/her manager or colleagues and may find it helpful to seek confidential and independent advice and support, without obligation to take the complaint further.

The Trust has appointed a number of Confidential Contacts to provide impartial and confidential advice and guidance to staff within the terms of this policy.

The names of the Confidential Contact can be obtained from the Human Resources Consultancy Department or by access the HR Intranet. The Confidential Contacts are there to:

- support staff who feel they have been harassed or bullied;
- clarify individual's rights and responsibilities;
- point out that union/staff side Organisations can help as well
- explore options open to them;
- help formulate an action plan and identify the appropriate management intervention;
- assist in coming to a decision on how best to resolve the matter;
- advisors are not there to represent staff, to take action on behalf of staff, or to provide counselling.
Confidential Contacts are provided with appropriate training and support in order to assist them in their role. Confidential Contacts will keep anonymous records of discussions to provide the Trust with the ability to monitor issues, using the form attached at Appendix 2.

Independent Resolution Process
The Trust has recognised that individuals who are in conflict with a colleague, or their manager, or feels harassed or bullied, can be empowered to resolve these issues informally. To facilitate this, there are a number of trained Independent Resolution Facilitators who have been given skills in mediation. The Trust will always ask individuals to consider using this process before any formal process is launched.

Trade Unions/Staff Organisations
The Staff Side members fully support the implementation of this Policy. If at any stage representation or support is required a member of staff should contact his/her local Trade Union/Staff Organisation Representative.

Work and Wellbeing Department
The Work and Wellbeing Department will provide support, advice and counselling to any member of staff who believes they are experiencing bullying or harassment and will also provide support to any individual accused of, or having witnessed, harassment and bullying.

Human Resources Consultancy Department
The Human Resources Consultancy Department will provide support, advice and guidance to managers who are investigating issues of harassment. They will also provide support and guidance to any individual experiencing, accused of, or witnessing, harassment and bullying.

The Human Resources Consultancy Department will ensure that the policy is adopted fairly and consistently in all cases.

6.4 Dealing with complaints

Any actions that can be described or construed as harassment or bullying will be thoroughly investigated, if not resolved informally, and may be treated as a disciplinary matter by the Trust. All concerns and complaints will be taken seriously, in a non-judgmental manner and dealt with promptly.

The Trust will not tolerate victimisation as a result of reporting incidents of harassment or bullying. If a member of staff feels that he/she is being victimised, then support will be given. All matters will be treated in the strictest confidence to ensure dignity of the person(s) concerned.

Malicious allegations of harassment or bullying will be treated as a disciplinary matter by the Trust.
Staff experiencing, accused of, or having witnessed harassment or bullying will be offered the appropriate support through Occupational Health, Human Resources or external agencies as listed in Appendix 3.

6.5 Temporary redeployment or suspension (without prejudice)

If the complaint involves someone in the direct working area consideration will be given to removing either individual from the situation on a temporary basis and allowing him/her to undertake alternative duties until the complaint has been resolved.

In some circumstances consideration will be given to suspending the person against whom allegations have been made on full pay until the complaint has been resolved.

In extremely exceptional circumstances consideration will be given to suspending both individuals on full pay until the complaint has been resolved. This will only be used as a last resort where there is a need for protection of both parties

6.6 Independent Resolution (Mediation)

Individuals who have a complaint or concern will be asked to partake in independent resolution (mediation) in an attempt to informally and locally resolve the matter before any formal process is launched. It is recognised that there will be cases/circumstances where this is not appropriate. Each case will be assessed independently. Independent Resolution (mediation) is a completely voluntary and confidential form of alternative dispute resolution. It involves an independent, impartial person helping two or more individuals or groups reach a solution that's acceptable to everyone. Mediation assists individuals:

- by exploring the issues, feelings and concerns of all participants and rebuilding relationships using joint problem solving
- by allowing those involved to understand and empathise with the feelings of those they are in conflict with
- by helping participants develop the skills to resolve workplace difficulties for themselves in future
- by encouraging communication and helping the people involved to find a solution that both sides feel fair and offers a solution that favours them

The Independent Resolution Facilitator can facilitate dialogue and can talk to both sides separately or together. They do not make judgments or determine outcomes - they ask questions that help to uncover underlying problems, assist the parties to understand the issues and help them to clarify the options for resolving their difference or dispute.
The overriding aim of the process is to restore and maintain the employment relationship wherever possible. This means the focus is on working together to go forward, not determining who was right or wrong in the past.

Many kinds of dispute can be independently resolved between parties if those involved want to find a way forward. It can be used at any stage in a dispute but is most effective before positions become entrenched.

6.7 Future Working Relationships

Where a formal investigation takes place, the manager who has conducted or commissioned the investigation will need to meet both parties. This may be initially separate but at some point both parties will need to meet with the manager to discuss the most appropriate way forward and reach agreement on future working relationships.

This meeting may be informal or formal and both parties may choose to have representation. The outcome of this meeting should be both constructive and positive and may include the manager helping to normalise working relationships. This meeting should be documented and retained with the investigation file.

After 3 months a review meeting should be held with both parties to confirm that working arrangements have returned to normal and that no further issues have arisen. Again this meeting should be documented and retained with the investigation file.

In exceptional circumstances where the working relationship has deteriorated beyond repair consideration could be given to the voluntary transfer of one of the individuals rather than requiring them to work together against their wishes. This will clearly be dependent upon business requirements.

De-briefing Witnesses

The manager will also need to arrange to de-brief witnesses that have been involved in an investigation to inform them, confidentially and sensitively, of the outcome.

6.8 Bullying and Harassment by carers, relatives, visitors or patients

- Staff have the right to be treated with respect and dignity at all times.
- Staff who perceive they are subject to incidents of bullying or harassment by carers, relatives, visitors or patients should complete an incident report form and report the matter to their line manager
- The management of perceived bullying/harassment by patients should be undertaken within the remit of the Withholding Treatment from Violent and Abusive Patients Procedure, which can be found within the Violence and Aggression Policy.

6.9 Bullying/ Harassment by contractors and staff from other organisations
• In cases where a Trust employee perceive they are subject to alleged bullying or harassment by contractors or staff from other agencies the Trust employee should seek to resolve their concerns in accordance with the informal process outlined above. Where such action does not resolve the employee’s concerns, the employee should complete an incident form and raise the matter formally with their line manager who will take the following steps:

- The manager will contact the nominated Trust employee responsible for contract monitoring to advise them of the situation who will ensure details of the allegations are confirmed to the employer of the contractor/agency worker in writing. The manager must also inform the HR Consultancy Department of the complaint.

- The employing contractor/agency will be asked to investigate the concerns raised and take appropriate action.

- Consideration will be given by the Trust to request the contractor/agency remove the alleged bully/harasser either during or as a result of the investigation.

7. Responsibilities:

Chief Executive
The Chief Executive places great importance on tackling harassment and bullying at work and will not tolerate this sort of behaviour at any level in the organisation.

Director of Human Resources
The Director of Human Resources and Organisational Development has lead responsibility for the implementation of this Policy, for the aims set out in the introduction and monitoring its effectiveness.

Managers’ Responsibilities
It is a manager’s responsibility to create a culture of respect and dignity within their departments and to set clear standards of expected behaviour within their teams. Managers should be familiar with the policy and seek advice when needed. Managers have responsibility for:

• ensuring staff understand what behaviour is and is not appropriate, and what constitutes harassment and bullying promoting the Trust’s Dignity at Work Policy;
• ensuring employees are protected from abuse and treated with dignity and respect;
• taking prompt action to stop any form of harassment or bullying as soon as it is identified. In some cases, by pointing out that the behaviour is unacceptable, may effectively put a stop to the problem without the need for further action;
• ensuring potentially offensive material is not displayed or circulated in the workplace;
• where inappropriate behaviour or offensive comments/discussion is taking place, bringing this to the attention of the individual concerned, advising them to stop immediately;
• being supportive of individuals who state they have been harassed or bullied and take full account of their feelings and perception of the situation;
• promoting independent resolution and empowering staff to resolve their own conflicts and issues

Managers must also:

• ensure they fully understand the Trust’s Dignity at Work Policy and are able to offer advice on the procedure when required to do so;
• maintain complete confidentiality relating to all aspects of cases of harassment or bullying at all times and do not mention or discuss the case with any person not involved in the investigation;
• attend any training sessions, which may be arranged to increase their awareness.

Individual Responsibilities

• All new members of staff will be made aware of the policy so that they understand what the Trust regards as inappropriate behaviour and also what action can be taken if they feel they have been harassed or bullied. Attention will also be drawn to the policy and the responsibilities of staff on the Trust’s induction programme
• Every member of staff of Heart of England NHS Foundation Trust has a responsibility for ensuring that he/she does not harass, bully or contribute to the harassment or bullying of a colleague or colleagues or condone harassment or bullying by others.
• Any member of staff, regardless of grade or position, found to be responsible for enticing, perpetrating or condoning harassment or bullying may face disciplinary action up to and including dismissal.
• In cases of harassment where the person who has been harassed undertakes legal proceedings, the harasser can be held personally liable and may be deemed to have committed a criminal act and be liable for prosecution.
• If a complaint is made, which following investigation proves to have been deliberately fabricated with either malicious or frivolous intent, the matter will be dealt with under the Trust’s Disciplinary Procedure.
• Members of staff are encouraged to report any cases of harassment or bullying they witness and to support any colleague who experience harassment or bullying at work.

Trade Unions/Staff Organisations

The Staff Side members fully support the implementation of this Policy. If at any stage representation or support is required a member of staff should contact his/her local Trade Union/Staff Organisation Representative.

Occupational Health Department

The Occupational Health Department will provide support, advice and counselling to any member of staff who believes they are experiencing bullying or harassment and will also
provide support to any individual accused of, or having witnessed, harassment and bullying.

Human Resources Consultancy Department

The Human Resources Consultancy Department will provide support, advice and guidance to managers who are investigating issues of harassment. They will also provide support and guidance to any individual experiencing, accused of, or witnessing, harassment and bullying. The Human Resources Consultancy Department will ensure that the policy is adopted fairly and consistently in all cases.

Trust Board

The Trust Board and Chief Executive place great importance on tackling harassment and bullying at work and will not tolerate this sort of behaviour at any level in the organisation.

HR Committee

The HR Committee is responsible for the ratification of this policy and ongoing monitoring of its implementation.

8. Training

Bullying and Harassment Awareness training is mandatory for all new permanent staff and is included in the Trust Induction.

All staff and managers must familiarise themselves with this policy.

Managers are encouraged to attend training session on managing bullying and harassment which can be assessed by the HR Consultancy department.

9. Monitoring and Compliance

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Attendance at Bullying and Harassment Awareness training will be monitored via Mandatory Training Committee.

An annual report of all cases dealt with in line with this policy and procedure, broken down by directorate, and lessons learnt will be provided to HR Committee for review and action.

This policy will be reviewed periodically by the Head of HR Consultancy and will be agreed through JNNC and JLNC.

*This should include details of how the standards defined in the policy will be audited.*

10 Attachments

Attachment 1: Consultation and Ratification
Attachment 2: Equality Impact Assessment (EIA)
Attachment 3: Launch and Implementation Plan
## 1 Harassment and Bullying Complaints Procedure

**Incident of harassment or bullying occurs**

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**Who will provide advice and guidance to help the member of staff determine a way forward?**

**What do I do if I want to take my complaint forward?**

There are three routes available to the member of staff. The Trust will always recommend and support that matters are attempted to be dealt with informally and/or through independent resolution (mediation) before formal procedures are considered. There will always be exceptional circumstances where informal processes are inappropriate.

1. To attempt to resolve the concern or complaint through the informal procedure
2. To take part in independent resolution (mediation) to resolve the matter
3. If not resolved at informal or mediation stages (or these stages are not appropriate), to take the concern/complaint forward through the formal procedure

**Informal Procedure**

The member of staff:

1. Verbally requests the alleged harasser or bully to stop
2. Writes to the alleged harasser or bully to stop
3. Asks a colleague or trade union representative to speak to the alleged harasser or bully.
4. Requests Independent Resolution through the HR Consultancy Department

**What information should be recorded?**

Any information or action taken to prevent further harassment or bullying should be recorded and dated, noting what was said by all parties.

This information needs to be retained in the event of future action and should be stored securely within the individual’s ward / department and destroyed after 2 years.

**What if the harassment or bullying fails to stop?**

If the matter continues following the request to stop the member of staff should report the matter in confidence to one of the following:

- Immediate line manager
- Next level of manager if immediate line manager is implicated
- Confidential Contact Advisor

Who will provide advice and guidance to help the member of staff determine a way forward?
2 Formal Procedure

**Formal Procedure**
Is used when the informal procedure has not resolved the matter satisfactorily or the member of staff considers the matter warrants an immediate formal complaint.

**Who should I notify?**
Member of staff reports the alleged harassment or bullying using appendix 2 “Complaint of Harassment or Bullying”.

**How will my complaint be investigated?**
An initial discussion with you will take place to assess the best route forward. A confidential investigation will be conducted by an appropriate manager, supported by a Human Resources representative.

During the investigation the member of staff, the alleged harasser or bully and any witnesses will be interviewed and written statements taken which will form part of the investigation report.

Unless the investigation is particularly complex the report should be completed within 12 weeks of the manager receiving the written complaint.

**Representation**
The complainant, alleged harasser / bully and any witnesses have the right to representation by their trade union representative or friend or colleague not acting in an official capacity if they so wish.

**Recommendations for Further Action**
A meeting will be held individually with the complainant and alleged harasser / bully to notify them of the outcome of the investigation and any further action. This will be followed up in writing. See also Section 11 Other Considerations “Future Working Relationships” and “Debriefing Witnesses”

**Complaint not Upheld**
If it is established that the complaint has been deliberately fabricated with malicious intent this will be treated as a disciplinary offence under the Trust’s Disciplinary Procedure.

**Insufficient Evidence**
There is insufficient information to uphold the complaint, but both parties agree to mediation to agree a way forward to rebuild working relationships.

**Complaint Upheld**
Where harassment or bullying is established this will be treated as a disciplinary offence under the Trust’s Disciplinary Procedure.

**Disciplinary Hearing**
If a claim is found to be malicious in nature then the individual may find themselves subject for formal disciplinary action.
### Appeals
Once the outcome has been confirmed in writing, the member of staff or alleged harasser / bully can appeal the decision by lodging a grievance at stage 3 of the Trust’s Grievance Procedure.

Grievances will be limited to individuals’ concerns about how the investigation was carried out and how this might have influenced the outcome, rather than the outcome itself.

### Recording and Monitoring
A copy of the investigation report and outcome (whether the complaint related to a member of staff or a visitor) must be reported to the Head of HR Consultancy so that the level and type of harassment and bullying can be monitored.

Monitoring of such complaints will form part of the HR Committee’s annual report to the Trust Board, as submitted by the Director of Human Resources and Organisational Development.
Appendix 2

Complaint of Harassment or Bullying

Section 1 Complainant’s Details

Name:  
Job Title:  
Grade:  
Ward / Department:  
Contact Tel:  
Line Manager: 

Section 2 Alleged Harasser / Bully Details

Please complete as much information as possible. Where the alleged harassment / bullying is by a patient or member of the public please complete the Name field only providing further details in section 3. More information can be written on a separate sheet

Name:  
Job Title:  
Grade:  
Ward / Department:  
Contact Tel: 

Section 3 Allegation

Dates and times of alleged behaviour

The impact of the behaviour and how this made you feel

The names of any witnesses to these events

Action already taken at an informal level

Section 4 Desired Outcome

The outcome sought

Signed:  

--------------------------------------------------------------------------------------------------
Name: 

Date: 

Please return the completed form to your immediate line manager or to the next level of management if your immediate line manager is implicated.
It may be appropriate to refer a member of staff to an external support agency.

- Some trade unions have counselling services available.
- Citizens Advice Bureau
  - City Centre Office – 0121-248 4950
  - Sutton Coldfield Office – 0121-687 5305
- Equal Opportunities Commission – 0161-833 9244
- Birmingham Rape and Sexual Violence Project – 0121-233 3818
- Women Against Sexual Harassment – 01932 221708
- Commission for Racial Equality – 0121-710 3000
- Police Racial Attack Helpline – 01426 951380
### Attachment 1: Ratification Checklist

**Title**  
Bullying and Harassment Policy & Procedure

<table>
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<tbody>
<tr>
<td>1</td>
<td>Is this a: Combined Policy &amp; Procedure</td>
</tr>
<tr>
<td>2</td>
<td>Is this Revised</td>
</tr>
<tr>
<td>3*</td>
<td>Format matches Policies and Procedures Template (Organisation-wide)</td>
</tr>
<tr>
<td></td>
<td>Yes</td>
</tr>
<tr>
<td>4*</td>
<td>Consultation with range of internal /external groups/ individuals</td>
</tr>
<tr>
<td></td>
<td>JNCC, JLNC, HR Committee, HR Consultancy Team</td>
</tr>
<tr>
<td>5*</td>
<td>Equality Impact Assessment completed</td>
</tr>
<tr>
<td></td>
<td>Yes.</td>
</tr>
<tr>
<td>6</td>
<td>Are there any governance or risk implications? (e.g. patient safety, clinical effectiveness, compliance with or deviation from National guidance or legislation etc)</td>
</tr>
<tr>
<td></td>
<td>Compliance with Employment Law</td>
</tr>
<tr>
<td>7</td>
<td>Are there any operational implications?</td>
</tr>
<tr>
<td></td>
<td>Ensure policy effectively implemented</td>
</tr>
<tr>
<td>8</td>
<td>Are there any educational or training implications?</td>
</tr>
<tr>
<td></td>
<td>n/a</td>
</tr>
<tr>
<td>9</td>
<td>Are there any clinical implications?</td>
</tr>
<tr>
<td></td>
<td>n/a</td>
</tr>
<tr>
<td>10</td>
<td>Are there any nursing implications?</td>
</tr>
<tr>
<td></td>
<td>n/a</td>
</tr>
<tr>
<td>11</td>
<td>Does the document have financial implications?</td>
</tr>
<tr>
<td></td>
<td>n/a</td>
</tr>
<tr>
<td>12</td>
<td>Does the document have HR implications?</td>
</tr>
<tr>
<td></td>
<td>Ensure staff receive support as and when necessary</td>
</tr>
<tr>
<td>Question</td>
<td>Answer</td>
</tr>
<tr>
<td>-------------------------------------------------------------------------</td>
<td>----------</td>
</tr>
<tr>
<td>13* Is there a launch/communication/implementation plan within the document?</td>
<td>Yes</td>
</tr>
<tr>
<td>14* Is there a monitoring plan within the document?</td>
<td>Yes</td>
</tr>
<tr>
<td>15* Does the document have a review date in line with the Policies and Procedures Framework?</td>
<td>Yes</td>
</tr>
<tr>
<td>16* Is there a named Director responsible for review of the document?</td>
<td>HR &amp; OD Director</td>
</tr>
<tr>
<td>17* Is there a named committee with clearly stated responsibility for approval monitoring and review of the document?</td>
<td>HR Committee</td>
</tr>
</tbody>
</table>

**Document Author / Sponsor**

Signed ……………………… ………….…………

Title…………………………………………………

Date…………………….………….………….……

**Ratified** by (Chair of Trust Committee or Executive Lead)

Signed ……………………… ………….…………

Title…………………………………………………

Date…………………….………….………….……
Attachment 2: Equality and Diversity - Policy Screening Checklist

Policy/Service Title: Bullying and Harassment Policy & Procedure
Directorate: HR Consultancy

Name of person/s auditing/developing/authoring a policy/service: Helen Barlow

Aims/Objectives of policy/service: Assist managers and staff in addressing bullying and harassment investigations

Policy Content:
- For each of the following check the policy/service is sensitive to people of different age, ethnicity, gender, disability, religion or belief, and sexual orientation?
- The checklists below will help you to see any strengths and/or highlight improvements required to ensure that the policy/service is compliant with equality legislation.

1. Check for DIRECT discrimination against any group of SERVICE USERS:

<table>
<thead>
<tr>
<th>Question</th>
<th>Response</th>
<th>Action required</th>
<th>Resource implication</th>
</tr>
</thead>
<tbody>
<tr>
<td>Does your policy/service contain any statements/functions which may exclude people from using the services who otherwise meet the criteria under the grounds of:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1.1 Age?</td>
<td>x</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1.2 Gender (Male, Female and Transsexual)?</td>
<td>x</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1.3 Disability?</td>
<td>x</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1.4 Race or Ethnicity?</td>
<td>x</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1.5 Religious, Spiritual belief (including other belief)?</td>
<td>x</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1.6 Sexual Orientation?</td>
<td>x</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1.7 Human Rights: Freedom of Information/Data Protection</td>
<td>x</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

If yes is answered to any of the above items the policy/service may be considered discriminatory and requires review and further work to ensure compliance with legislation.

2. Check for INDIRECT discrimination against any group of SERVICE USERS:

<table>
<thead>
<tr>
<th>Question</th>
<th>Response</th>
<th>Action required</th>
<th>Resource implication</th>
</tr>
</thead>
<tbody>
<tr>
<td>Does your policy/service contain any statements/functions which may exclude employees from operating the under the grounds of:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2.1 Age?</td>
<td>x</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2.2 Gender (Male, Female and Transsexual)?</td>
<td>x</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2.3 Disability?</td>
<td>x</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2.4 Race or Ethnicity?</td>
<td>x</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2.5 Religious, Spiritual belief (including other belief)?</td>
<td>x</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2.6 Sexual Orientation?</td>
<td>x</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2.7 Human Rights: Freedom of Information/Data Protection</td>
<td>x</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
If yes is answered to any of the above items the policy/service may be considered discriminatory and requires review and further work to ensure compliance with legislation.

**TOTAL NUMBER OF ITEMS ANSWERED ‘YES’ INDICATING DIRECT DISCRIMINATION =**

### 3. Check for DIRECT discrimination against any group relating to EMPLOYEES:

<table>
<thead>
<tr>
<th>Question</th>
<th>Response</th>
<th>Action required</th>
<th>Resource implication</th>
</tr>
</thead>
<tbody>
<tr>
<td>Does your policy/service contain any conditions or requirements which are applied equally to everyone, but disadvantage particular persons' because they cannot comply due to:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3.1 Age?</td>
<td>No</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>3.2 Gender (Male, Female and Transsexual)?</td>
<td>No</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>3.3 Disability?</td>
<td>No</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>3.4 Race or Ethnicity?</td>
<td>No</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>3.5 Religious, Spiritual belief (including other belief)?</td>
<td>No</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>3.6 Sexual Orientation?</td>
<td>No</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>3.7 Human Rights: Freedom of Information/Data Protection</td>
<td>No</td>
<td>No</td>
<td></td>
</tr>
</tbody>
</table>

If yes is answered to any of the above items the policy/service may be considered discriminatory and requires review and further work to ensure compliance with legislation.

### 4. Check for INDIRECT discrimination against any group relating to EMPLOYEES:

<table>
<thead>
<tr>
<th>Question</th>
<th>Response</th>
<th>Action required</th>
<th>Resource implication</th>
</tr>
</thead>
<tbody>
<tr>
<td>Does your policy/service contain any statements which may exclude employees from operating the under the grounds of:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4.1 Age?</td>
<td>No</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>4.2 Gender (Male, Female and Transsexual)?</td>
<td>No</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>4.3 Disability?</td>
<td>No</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>4.4 Race or Ethnicity?</td>
<td>No</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>4.5 Religious, Spiritual belief (including other belief)?</td>
<td>No</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>4.6 Sexual Orientation?</td>
<td>No</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>4.7 Human Rights: Freedom of Information/Data Protection</td>
<td>No</td>
<td>No</td>
<td></td>
</tr>
</tbody>
</table>

If yes is answered to any of the above items the policy/service may be considered discriminatory and requires review and further work to ensure compliance with legislation.

**TOTAL NUMBER OF ITEMS ANSWERED ‘YES’ INDICATING INDIRECT DISCRIMINATION = 0**

Signatures of authors / auditors: ____________________________ Date of signing: ____________________________
### Equality Action Plan/Report

**Directorate:** HR Consultancy  
**Service/Policy:** Bullying and Harassment Policy & Procedure

**Responsible Manager:** HR Business Consultant  
**Name of Person Developing the Action Plan:** Helen Barlow  
**Consultation Group(s):** JNCC, JLNC, HR Committee  
**Review Date:** October 2012

The above service/policy has been reviewed and the following actions identified and prioritised. All identified actions must be completed by:

<table>
<thead>
<tr>
<th>Action:</th>
<th>Lead:</th>
<th>Timescale:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rewriting policies or procedures</td>
<td>H Barlow</td>
<td></td>
</tr>
<tr>
<td>Stopping or introducing a new policy or service</td>
<td>H Barlow via briefings</td>
<td></td>
</tr>
<tr>
<td>Improve /increased consultation</td>
<td>Discuss with JNCC and JL</td>
<td>n/a</td>
</tr>
<tr>
<td>A different approach to how that service is managed or delivered</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Increase in partnership working</td>
<td>JLNC and JNCC consulted</td>
<td></td>
</tr>
<tr>
<td>Monitoring</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Training/Awareness Raising/Learning</td>
<td>Briefing sessions to line managers and staff</td>
<td></td>
</tr>
<tr>
<td>Positive action</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Reviewing supplier profiles/procurement arrangements</td>
<td></td>
<td></td>
</tr>
<tr>
<td>A rethink as to how things are publicised</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Review date of policy/service and EIA: this information will form part of the Governance Performance Reviews</td>
<td></td>
<td></td>
</tr>
<tr>
<td>If risk identified, add to risk register. Complete an Incident Form where appropriate.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
When completed please return this action plan to the Trust Equality and Diversity Lead; Pamela Chandler or Jane Turvey. The plan will form part of the quarterly Governance Performance Reviews.

Signed by Responsible Manager: ___________________________ Date: ___________________________
Attachment 3: Launch and Implementation Plan

To be completed and attached to any document which guides practice when submitted to the appropriate committee for consideration and approval.

<table>
<thead>
<tr>
<th>Action</th>
<th>Who</th>
<th>When</th>
<th>How</th>
</tr>
</thead>
<tbody>
<tr>
<td>Identify key users / policy writers</td>
<td>HR Consultancy</td>
<td>Prior to ratification</td>
<td>Through briefings to managers and Heartbeat</td>
</tr>
<tr>
<td>Present Policy to key user groups</td>
<td>HR Consultancy</td>
<td>Following ratification</td>
<td>Presentation of Policy to Managers</td>
</tr>
<tr>
<td>Add to Policies and Procedures intranet page / document management system.</td>
<td>Wendy Stock</td>
<td>Following ratification</td>
<td>As per Gatekeeper process</td>
</tr>
<tr>
<td>Offer awareness training / incorporate within existing training programmes</td>
<td>HR Consultancy</td>
<td>Following ratification</td>
<td></td>
</tr>
<tr>
<td>Circulation of document(electronic)</td>
<td>HR Consultancy</td>
<td>Following ratification</td>
<td>Not applicable</td>
</tr>
</tbody>
</table>

Dissemination Record - to be used once document is approved
(This dissemination record is not mandatory)

<table>
<thead>
<tr>
<th>Date put on register / library of procedural documents</th>
<th>Date due to be reviewed</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Disseminated to: (either directly or via meetings, etc)</th>
<th>Format (i.e. paper or electronic)</th>
<th>Date Disseminated</th>
<th>No. of Copies Sent</th>
<th>Contact Details / Comments</th>
</tr>
</thead>
<tbody>
<tr>
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</table>