This Policy supersedes the following Policy which must now be destroyed:

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# Dignity and Respect at Work Policy

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1 Introduction

1.1 Northumberland, Tyne and Wear NHS Foundation Trust (the Trust) recognises that discrimination, harassment, bullying and victimisation of any type can create a threatening and intimidating work environment, which can adversely affect the job performance, health and well-being of employees.

2 Purpose

2.1 The purpose of this Policy and Procedure is to provide proper redress for individuals facing discrimination, harassment, bullying or victimisation and to assist in identifying and dealing with these issues in line with the correct Trust Policies and processes. This procedure will help to promote fair treatment and good working relations within the Trust and therefore promote the provision of good health care through improved team working and staff morale.

2.2 The Trust will not tolerate acts of discrimination, harassment, bullying or victimisation.

2.3 The Policy applies to all staff on and off the premises, including those working away from base and work-related social events. Bullying or harassment of staff by other staff or visitors to the Trust will not be tolerated.

2.4 Where staff are adversely affected by harassment from service users or relatives, they should raise their concern with their manager.

2.5 Many incidents and patterns of behaviour can be dealt with effectively in an informal way and every effort should be made to resolve matters informally before a formal approach is adopted, although it is acknowledged this may not always be possible or appropriate.

2.6 This Policy is designed to support all staff that feel they have suffered from discrimination, harassment, bullying or victimisation. It has been drawn up in line with other Trust Policies, for example, Equality, Diversity and Human Rights Policy - NTW(O)42 and supports the Staff Charter and the NHS Constitution.

3 Duties, Accountability and Responsibilities

3.1 The Trust is committed, along with its staff side partners, to providing an environment where staff are treated with dignity and respect in all areas of their work.

3.2 The Trust views any discrimination, harassment, bullying or victimisation as a serious contravention of its commitment to equal opportunities and all associated policies and is fully committed to their elimination. Any perpetrator of such action may be subject to disciplinary action up to and including dismissal, as per the Trust’s Disciplinary Policy - NTW(HR)04.
3.3 The Trust gives an assurance that there will be no victimisation against an employee making a complaint under this Policy or against employees who assist or support a colleague in making a complaint. However, disciplinary action may be taken if a complaint is found to have been made maliciously or in bad faith.

3.4 The Trust has moral obligations to ensure fair treatment in all areas of its responsibilities, and aims to achieve this through the Trust's Equality, Diversity and Human Rights Policy - NTW(O)42.

3.5 Executive Directors and Chief Executive

3.5.1 Will support the implementation of this Policy by modelling appropriate behaviours.

3.5.2 Will support the promotion of a culture in which employees feel confident reporting complaints of harassment or bullying without fear of victimisation.

3.5.3 Will ensure appropriate action is taken within the organisation against anyone who is found to have perpetrated bullying or harassment.

3.6 Executive Director Workforce and Organisational Development

3.6.1 Will ensure compliance with employment legislation, in relation to the performance and actions of all staff employed by the Trust and for minimising the risks related to harassment and bullying at work.

3.6.2 Will advise managers, staff and staff representatives on the Policy and its interpretation.

3.6.3 Will be responsible for ensuring the correct implementation of this Policy.

3.6.4 Will monitor the Policy and its effectiveness.

3.6.5 Will review the Policy on a regular basis in consultation with staff representatives.

3.7 Workforce Managers

3.7.1 Will advise and support members of staff who are concerned about harassment, bullying or victimisation in the course of their employment by explaining the procedure for making a complaint both informally and formally.

3.7.2 Will advise managers on the application of the Policy and provide specialist advice in accordance with employment legislation.

3.7.3 Will support and advise managers when conducting an investigation following a formal complaint, and any subsequent formal proceedings, e.g. disciplinary hearings.
3.7.4 Will recommend the use of an appropriate mediator, when required, to resolve issues informally.

3.8 All Managers

3.8.1 Will be aware of how their own behaviour is perceived and set examples of standards of appropriate behaviour; they must ensure that their own behaviour cannot be construed as bullying, harassment or victimisation by acting with fairness and equality at all times.

3.8.2 Will develop and support an environment and culture free from discrimination, harassment, bullying and victimisation.

3.8.3 Will recognise inappropriate and destructive behaviour and taking appropriate and prompt action to correct it when it occurs.

3.8.4 Will ensure staff know about the Policy and how to raise a bullying or harassment issue.

3.8.5 Will work effectively to find solutions to bullying and harassment cases.

3.8.6 Will support staff who may feel they are being bullied or harassed.

3.8.7 Will ensure they deal with any complaints fairly, thoroughly, confidentially and in a timely manner, respecting the feelings of all concerned.

3.8.8 Will ensure there is no retaliation against anyone involved in bullying and harassment complaints, including witnesses.

3.9 All Employees

3.9.1 Have a personal responsibility for their own behaviour and ensure their conduct is in line with the standards set out in this Policy and the staff charter.

3.9.2 Will set a positive example by treating others with dignity and respect at all times, for example not making personal or offensive comments and will be aware of how their behaviour can affect other people.

3.9.3 Will challenge inappropriate behaviour when it occurs and take positive action to ensure that it is challenged and / or reported.

3.9.4 Should familiarise themselves with the contents of this Policy attending training / awareness sessions, when required, to comply with the Policy.

3.9.5 Will report incidents of bullying and harassment to their manager, even if they are not the victim.

3.9.6 Will be supportive of colleagues who may be subject to bullying and / or harassment and victimisation.
3.9.7 Will listen if someone tells you they feel bullied by you and take action to address their concerns.

3.9.8 Will co-operate with measures to address bullying and harassment in a positive way.

3.10 Trade Union / Professional Organisation Representatives

3.10.1 Will provide support by listening to concerns and providing an independent view.

3.10.2 Will explain how the procedures for making a complaint operate both informally and informally.

3.10.3 Will provide independent guidance, support and representation throughout the informal and formal process.

3.10.4 Will maintain confidentiality throughout and help to facilitate an effective resolution.

3.11 The Corporate Decisions Team, which reports into the Board of Directors, will have responsibility for monitoring the effectiveness of this Policy, which in turn will be regularly reviewed.

4. Advice and Support

4.1 It is recognised that being the subject of discrimination, harassment, bullying or victimisation and making a complaint can be an extremely distressing experience. No employee needs to suffer in silence and all employees are urged to seek help, support and advice available within the Trust.

4.2 Staff who feel that they are suffering from discrimination, harassment, bullying or victimisation at work should contact their manager, Workforce representative, TU representative or professional organisation representative.

4.3 The Trust provides an independent counselling service which can be contacted directly, via Workforce, line management or any staff side representative.

4.4 Likewise, support should be offered to those staff against whom allegations are made and staff in such a position may also access support from the aforementioned services or people.

4.5 Copies of this policy are freely available to employees and can be obtained from their ward / department or the intranet.
5 Statutory Background

5.1 The Trust has certain legal responsibilities in relation to discrimination, harassment, bullying and victimisation. In October 2010, the Equality Act became law and covered the same groups (protected characteristics) that were protected by existing equality legislation:

- Age;
- Disability;
- Gender Reassignment;
- Race;
- Religion or Belief;
- Sex;
- Sexual Orientation;
- Marriage and Civil Partnership;
- Pregnancy and Maternity.

5.2 The Equality Act 2010 replaced the Equal Pay Act 1970, Sex Discrimination Act 1975, Race Relations Act 1976 and the Disability Discrimination Act 1995. It also updated and amended other regulations relating to discrimination (see below) so that there remains differences between the various strands of discrimination law:

- Equality Act 2006;
- Employment Equality (Religion or Belief) Regulations 2003;
- Employment Equality (Sexual Orientation) Regulations 2003;
- Employment Equality (Age) Regulations 2006;

6 Definition of Terms

6.1 Direct Discrimination

6.1.1 Occurs when someone is treated less favourably than another person because of a protected characteristic they have or are thought to have, or because they associate with someone who has a protected characteristic.
6.2 Associative Discrimination

6.2.1 Applies to age, disability, race, religion or belief, gender reassignment, sex and sexual orientation. This is direct discrimination against someone because they associate with another person who possesses a protected characteristic.

6.3 Perceptive Discrimination

6.3.1 Applies to race, age, religion or belief and sexual orientation and under the Equality Act 2010 has now been extended to cover disability, gender reassignment and sex. This is direct discrimination against an individual because others think they possess a particular protected characteristic. It applies even if the person does not actually possess that characteristic.

6.4 Indirect Discrimination

6.4.1 Applies to race, age, religion or belief and sexual orientation and marriage and civil partnership. Under the Equality Act 2010, this has been extended to cover disability and gender reassignment.

6.4.2 Indirect discrimination can occur when there is a condition, rule, policy or even practice in the organisation that applies to everyone but particularly disadvantages people who share a protected characteristic. Indirect discrimination can be justified if you can show that you acted reasonably in managing the business i.e. that is ‘a proportionate means of achieving a legitimate aim’. A legitimate aim may be any lawful decision which is made in running the organisation, but if there is a discriminatory effect, the sole aim of reducing costs is likely to be unlawful.

6.5 Harassment

6.5.1 Defined as ‘unwanted conduct related to a relevant protected characteristic, which has the purpose or effect of violating an individual’s dignity or creating an intimidating, hostile, degrading, humiliating or offensive environment for that individual’.

6.5.2 Harassment applies to all protected characteristics except for pregnancy and maternity and marriage and civil partnership. Staff will be able to complain of behaviour that they find offensive even if it is not directed at them, and the complainant need not possess the relevant characteristics themselves. Staff are also protected from harassment because of perception and association (ACAS).

6.6 Third Party Harassment

6.6.1 On 1st October, 2013 the provisions in the Equality Act 2010 making employers liable for third party harassment were abolished.
However, any form of harassment at work, whether from third parties or colleagues, is not acceptable and the removal from the Act does not remove the Trust’s risk of liability to an employee for harassment by third parties, as employees can claim under the General Harassment Provisions of the Act. Employers are still at risk if they become aware of any harassment or potential harassment of their employees by third parties and do nothing about it.

6.7 Victimisation

6.7.1 This occurs when a member of staff is subject to detriment because they have made or supported a complaint of discrimination or raised a grievance under the Equality Act, or because they are suspected of doing so. A member of staff is not protected from victimisation if they have maliciously made or supported an untrue complaint.

6.8 Bullying

6.8.1 This is the misuse of power or position that undermines a person’s ability or leaves them feeling hurt, frightened, angry or powerless.

6.8.2 Examples of unacceptable behaviour that can be considered to constitute discrimination, harassment, bullying and victimisation:

- Bullying by exclusion - this may take the form of social isolation and/or exclusion from meetings;
- The deliberate withholding of information with the intention of affecting a colleague’s performance;
- Unfair and destructive criticism;
- Undermining an individual’s self esteem by condescending, patronising or threatening behaviour;
- Intimidating behaviour, including physical abuse or the threat of physical abuse;
- Verbal abuse, abuse in correspondence and e-mails and the spreading of unfounded rumours;
- Humiliation or ridicule;
- Coercion for sexual favours;
- Setting of unrealistic targets which are unreasonable and/or changed with limited notice or consultation;
- Copying memos that are critical about someone to others that do not need to know;
• Turning down reasonable requests without a good reason;
• Misrepresentation of the views of others.

6.8.3  **This list is neither exhaustive nor exclusive**

6.8.4 Where there is no intention to violate a member of staff’s dignity or create such an environment, the behaviour is to be regarded as having the effect of doing so only if, having regard to all the circumstances, including in particular the perception of the other person, it should reasonably be considered having that effect.

6.8.5 The use of the Trust's Policies and Procedures to manage the behaviour, sickness absence and performance of staff will not normally constitute bullying, harassment, victimisation or discrimination, unless the policies are determined to have been applied in an inappropriate or inconsistent manner by an individual manager.

7  **Making a Complaint**

7.1 When an employee has suffered an incident or incidents of discrimination, harassment, bullying or victimisation, they should follow the procedure outlined below in Section 8 – Stage 1: Informal Resolution or alternatively in cases of bullying staff can email their concerns to equality@ntw.nhs.uk

7.2 The Trust acknowledges that bringing a complaint may be difficult for an employee but all incidents will be treated fairly and sensitively.

7.3 There is a separate formal Complaints Procedure for Clinical concerns which is administered by the Secretary to the Board.

8  **Whistleblowing Concerns**

8.1 Whistleblowers who feel they are being subjected to bullying, harassment or victimisation should report this to their line manager. If they feel unable to raise this with their Line Manager, they should do so with that person’s Line Manager and so on. Alternatively you can contact the Trust’s Freedom to Speak Up Guardian by email at Neil.Cockling@ntw.nhs.uk or by telephone on 0781 0528169. Concerns of this nature can also be made to equality@ntw.nhs.uk

9  **Stage 1: Informal Resolution**

9.1 Many incidents can be dealt with effectively in an informal way. Often a person is unaware of the effect of their behaviour on others, and once made aware of the distress caused by their actions, the offensive behaviour ceases. Therefore, before the formal procedure is invoked, every effort should be made to use the informal procedure and to resolve issues as soon as possible after they arise.
9.2 Actions you can take yourself:

- Keep a diary of all incidents - records of dates, times, any witnesses, your feelings etc. Keep copies of any correspondence that may be relevant, for example, reports, letters, memos, notes of any meetings that relate to you;

- In many instances it is possible for the matter to be resolved quickly by explaining directly to the harasser the effect their behaviour is having and that you want it to stop;

- You should always make it clear that if it continues you will make a formal complaint.

9.3 If the behaviour of a person is aggressive when you speak to them it may be necessary to walk away making it clear you do not wish to be spoken to in that way.

9.4 If you do not feel able to raise your concerns with the person directly, you could write to them stating that you feel harassed, state where and when this occurred and how you wish to be treated. Always keep a copy.

9.5 In circumstances where an employee finds this difficult to do on their own, they can normally seek support from their Line Manager, a colleague or Union Representative.

9.6 If the complainant's Line Manager is the person alleged to have carried out the discrimination, harassment, bullying or victimisation, the matter should be reported to the manager above her / him. Where the employee indicates that he / she would prefer to discuss the matter with a person of the same sex / race etc., this will be arranged, wherever possible.

9.7 Where the employee seeks this initial advice, the discussion will be confidential and no further action will be taken without the consent of the employee concerned depending on the seriousness of the action or unless a criminal act has occurred or there is a serious risk to patients or staff.

9.8 Should the unwanted conduct persist or the informal approach is not considered appropriate for any reason, the formal procedure should be followed.

10. **Stage Two: Making a Formal Complaint**

10.1 Any individual suffering discrimination, harassment, bullying or victimisation is entitled to request the Trust institute formal investigation / proceedings where appropriate. This complaint will be taken forward in accordance with the Trust's Grievance Policy - NTW(HR)05, or depending on the nature of the complaint via the Trust's Disciplinary Policy - NTW(HR)04.
10.2 If the individual wishes to make a formal complaint, this should be put in writing to his / her Line Manager using the grievance form within the above Policy. If the Line Manager is involved in any of the incidents, then the complaint should be given to the Line Manager above him / her.

10.3 Alternatively, the complainant can raise the issue with the Workforce Directorate who will advise the individual on what steps should be taken next.

10.4 The grievance form should make it clear that it is a formal complaint under this procedure and should be fully explicit stating dates, times etc., of incidents. It should be marked “confidential” and preferably be delivered by hand to either the relevant manager or member of the Workforce Directorate. The employee is advised to seek early contact with her / his trade union or Workforce Manager to obtain advice and support in presenting a formal complaint.

10.5 The individual making the complaint should be made aware by the manager receiving the complaint of the process of investigation and their role in disciplinary proceedings, if instituted.

10.6 Employees need to be advised that, once a formal complaint is made, management will investigate the circumstances and take appropriate action.

10.7 In general, proceedings based on the individual’s complaint will not be instituted unless he / she wishes. However, in certain circumstances, the manager may wish to proceed with action against an alleged offender even where the complainant does not give evidence (if the situation is of a serious nature e.g., physical assault). In such cases, the manager will need to take into account any other evidence / witnesses in deciding whether or not they have sufficient evidence to proceed.

10.8 In relation to some professions, the professional lead may wish to consider the reporting of the incident to a professional body.

10.9 All Groups / Directorates are expected to co-operate in releasing staff from their normal duties to participate in the investigation as required.

11 Time Limits

11.1 The formal investigation should normally be completed in accordance with the timescales within the Grievance Policy / Disciplinary Policy where practicable. On occasions it will not be possible to keep within the timescale. In such cases the complainant and the alleged offender must both be kept informed of any need for an extension and the likely timescale for completion.

11.2 Investigations of this nature can be lengthy and involved, especially when there are several people to be interviewed and complicated allegations. However, it is in everyone’s interest that investigations are concluded as soon as possible and the Trust will take reasonable steps to ensure this happens.
This will require employees to make themselves available for meetings and may mean that an alternative Trade Union representative or fellow worker has to be identified to allow meetings to proceed without unnecessary delays.

12 How the Formal Complaint will be Investigated

12.1 For more information on the formal grievance process please refer to the Grievance Policy - NTW(HR)05 and / or the Disciplinary Policy - NTW(HR)04.

13 Important Notes Regarding the Formal Investigation Process

13.1 The purpose of the meetings is to establish the facts. They are not a disciplinary hearing of any sort. All those giving information to the manager / designated investigating officer will do so privately and not in the presence of any other person involved in or present during the alleged incident(s).

13.2 Whilst the manager / designated investigating officer will seek to resolve the matter as quickly as possible, the meetings with all those involved will not necessarily follow immediately after each other and the manager / designated investigating officer may at any time adjourn.

13.3 The Investigating Officer will ensure that appropriate feedback is given to the individual against whom the complaint has been made.

14 Action when the Complainant is Dissatisfied

14.1 If the complainant disagrees with the decision taken above, they may appeal in accordance with the appeal process within the Trust’s Grievance Policy – NTW(HR)05.

15 The Disciplinary Process

15.1 If the Manager / Investigating Officer has decided that the instigation of the Trust’s Disciplinary Policy - NTW(HR)04 is necessary, he / she should consider how to deal with this matter sensitively knowing the nature of the allegations. The following should be taken into account:

- The complainant will normally be required to partake in the disciplinary process as a witness, unless the circumstances are such that they are unable to do so.

  A signed declaration / witness statement must be provided in these circumstances and used in their absence.
16 Transfer Consideration

16.1 If disciplinary action is taken, the Trust will consider whether contact between the two parties is likely to occur during the course of their job and whether this is acceptable. Management will consult the complainant and as far as possible, take all views into account, also considering possible impacts on service delivery. In cases where contact is considered unacceptable, every effort should be made in the first instance to transfer the person against whom the complaint has been made.

16.2 Where disciplinary action is not taken following a full investigation, then the complainant may request a transfer. In this case the manager, in consultation with a Workforce Manager, will try to accommodate this request. A transfer, even when no disciplinary action is taken, may still be advisable, whether or not the individual requests it.

17 Police Involvement

17.1 In cases of alleged assault or alleged behaviour that is considered to be a criminal offence, the Trust will contact the Police for appropriate action if the complainant so wishes and / or if the incident is considered to be a serious criminal matter.

18 Privacy / Confidentiality

18.1 At all times both parties’ right to privacy will be respected and the release of information regarding the complaint will always be discussed with the parties involved prior to such release. It is recognised that confidentiality is essential, and those investigating complaints will make arrangements to ensure secure storage of papers etc. Individuals must respect this aspect of the policy and not discuss matters openly within the Trust.

18.2 Breaches in confidentiality may be subject to disciplinary action. This does not remove the right of an employee involved in a complaint or an investigation to discuss the details with his or her companion (as set out above) or in a confidential counselling environment.

18.3 A complaint under this procedure presents a particularly sensitive problem for those responsible for investigating the allegations. The investigator is required to protect the rights of the person accused as well as protecting the rights of the individual making the allegations. All employees are entitled to a full and fair opportunity to present their version of the events.
18.4 Records relating to grievances will be kept confidentially by the Workforce Directorate, in line with the Data Protection Act 1998, which gives individuals the right to request access to certain personal data. Records would normally include a copy of the written statement, the response, correspondence about the formal procedure, the outcome, documents relating to any appeal and any subsequent developments. Copies of meeting records will be given to the employee, including any formal minutes that may have been taken. In certain circumstances (for example, to protect a witness) some information may be withheld from the employee.

18.5 A record of complaints and the action taken to address them will be retained indefinitely.

19 Procedure for dealing with Incidents of Harassment, Bullying, Discrimination or Victimisation which involves external parties

19.1 Where the alleged complaint involves an external party, the Trust will take all reasonable steps to address the complaint in line with the principles of this policy, in consultation with the employee making the complaint. These steps may include reporting the incident to the individual’s manager, reviewing or terminating a contract, or requiring an external party to deal with another member of staff.

20 Consultation and Communication with Stakeholders

20.1 This Policy has been developed in consultation with Trust Managers and Staff Side Representatives.

20.2 The Policy has been circulated to Business Delivery Group for a two week consultation.

- North Locality Care Group
- Central Locality Care Group
- South Locality Care Group
- Corporate Decision Team
- Business Delivery Group
- Safer Care Group
- Communications, Finance, IM&T
- Commissioning and Quality Assurance
- Workforce and Organisational Development
- NTW Solutions
- Local Negotiating Committee
- Medical Directorate
- Staff Side
- Internal Audit
21 Implementation

21.1 The Policy has been widely circulated to Directors and Managers, is available via the Trust Intranet and should be fully implemented across the Trust by March 2016.

22 Equality Impact Assessment

22.1 In conjunction with the Trust’s Equality and Diversity Lead this Policy has undergone an Equality and Diversity Impact Assessment which has taken into account all human rights implications in relation to disability, ethnicity, age and gender. The Trust undertakes to improve the working experience of staff and to ensure everyone is treated in a fair and consistent manner.
Training and Implementation (Refer to Appendix B)

23.1 The Workforce Directorate and the Training and Development Department will ensure training on this Policy is included in the Workforce Policy Training Programme and that all new starters are made aware of the Policy through attendance of the Corporate Induction programme, Equality and Diversity Awareness and Trust Values Training.

23.2 All staff will be required to attend Equality and Diversity Awareness training and the Trust values training to ensure they are aware of the impact of their own behaviours and how to raise concerns relating to bullying and harassment.

23.3 Training on this Policy is also incorporated into the Equality and Diversity Training course for Managers.

23.4 All Supervisors identified within ESR will be expected to attend Workforce Policy Training on the following, in order to fully understand their roles and responsibilities in managing concerns relating to bullying and harassment

- Prevention of Bullying and Harassment;
- Equality and Diversity Manager Training;
- Disciplinary and Grievance Training;
- Recruitment and Selection Training;
- Management of Attendance Training.

23.5 The Workforce and Training Development Sub Group will regularly review training attendance at these courses and highlight areas of concern for relevant action within the Directorates / Groups.

23.6 Guidance will be provided by the Workforce Directorate to managers, members of any investigating team, disciplinary or grievance panel.

23.7 Levels of training are identified in the training needs analysis and are included within the Training Guide which can be accessed via this link

http://nww1.ntw.nhs.uk/services/index.php?id=3796&p=2780
Monitoring (Refer to Appendix C)

24.1 There will be ongoing monitoring of this Policy to ensure compliance via the reporting of the number of grievances by reason and attendance at relevant training via the Workforce Section of the Integrated Performance Report Information Report to the Workforce and Training Development Sub Group.

Fair Blame

25.1 The Trust is committed to developing an open learning culture. It has endorsed the view that, wherever possible, disciplinary action will not be taken against members of staff who report near misses and adverse incidents, although there may be clearly defined occasions where disciplinary action will be undertaken.

Fraud, Bribery and Corruption

26.1 In accordance with the Trust's Fraud, Bribery and Corruption / Response Plan Policy - NTW(0)23, all suspected cases of fraud and corruption should be reported immediately to the Trust's Local Counter Fraud Specialist or to the Executive Director of Finance.

Associated Documentation

- NTW Contract of Employment;
- Agenda for Change Terms and Conditions;
- Medical and Dental Terms and Conditions;
- NTW(HR)02 – Handling Concerns about Doctors;
- NTW(HR)04 – Disciplinary Policy;
- NTW(HR)05 - Grievance Policy;
- NTW(HR)10 - Sickness Absence Management Policy;
- NTW(HR)12 - Stress at Work Policy;
- NTW(O)42 – Equality, Diversity and Human Rights Policy;
- NTW(O)65 – Acceptable Use of Intranet and Internet Policy;
- Staff Charter;
- NHS Code of Conduct for Managers;
• The NHS Constitution.

28 References

• Care Quality Commission Core Standards 2009/10
• ACAS – The Equality Act 2010. What’s New for Employers?
• CIPD Factsheet – Discrimination
• Equality Act 2010
• Freedom to Speak up Review – Sir Robert Francis
## Equality Analysis Screening Toolkit

<table>
<thead>
<tr>
<th>Names of Individuals involved in Review</th>
<th>Date of Initial Screening</th>
<th>Review Date</th>
<th>Service Area / Locality</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jacqueline Tate</td>
<td>January 2016</td>
<td>March 2019</td>
<td>Trust-wide</td>
</tr>
</tbody>
</table>

### Policy to be analysed

- Dignity and Respect at Work Policy

### Is this policy new or existing?

- Existing

### What are the intended outcomes of this work? Include outline of objectives and function aims

To provide redress for individuals facing discrimination, harassment, bullying or victimisation and to assist in identifying and dealing with these issues in line with the current Trust Policies and Processes. This Policy will aim to promote fair treatment and ultimately good health and wellbeing.

### Who will be affected? e.g. staff, service users, carers, wider public etc

- Staff

### Protected Characteristics under the Equality Act 2010.

The following characteristics have protection under the Act and therefore require further analysis of the potential impact that the Policy may have upon them

<table>
<thead>
<tr>
<th>Characteristics</th>
<th>Impact</th>
</tr>
</thead>
<tbody>
<tr>
<td>Disability</td>
<td>Positive, will help ensure there is no discrimination</td>
</tr>
<tr>
<td>Sex</td>
<td>Positive, will help ensure there is no discrimination</td>
</tr>
<tr>
<td>Race</td>
<td>Positive, will help ensure there is no discrimination</td>
</tr>
<tr>
<td>Age</td>
<td>Positive, will help ensure there is no discrimination</td>
</tr>
<tr>
<td>Gender reassignment (including transgender)</td>
<td>Positive, will help ensure there is no discrimination</td>
</tr>
<tr>
<td>Sexual orientation</td>
<td>Positive, will help ensure there is no discrimination</td>
</tr>
<tr>
<td>Religion or belief/caste</td>
<td>Positive, will help ensure there is no discrimination</td>
</tr>
<tr>
<td><strong>Marriage and Civil Partnership</strong></td>
<td>Positive, will help ensure there is no discrimination</td>
</tr>
<tr>
<td>-------------------------------</td>
<td>--------------------------------------------------</td>
</tr>
<tr>
<td><strong>Pregnancy and Maternity</strong></td>
<td>Positive, will help ensure there is no discrimination</td>
</tr>
<tr>
<td><strong>Carers</strong></td>
<td>Positive, will help ensure there is no discrimination</td>
</tr>
<tr>
<td><strong>Other identified groups</strong></td>
<td>Positive, will help ensure there is no discrimination</td>
</tr>
</tbody>
</table>

**Have you engaged stakeholders in gathering evidence or testing the evidence available?**

Through standard consultation routes

**How have you engaged stakeholders in testing the policy or programme proposals?**

Though standard Policy Process Procedures

**For each engagement activity, please state who was involved, how and when they were engaged, and the key outputs:**

Appropriate Policy reviewed by Author / Team

**Summary of Analysis** Considering the evidence and engagement activity you listed above, please summarise the impact of your work. Consider whether the evidence shows potential for differential impact, if so state whether adverse or positive and for which groups. How you will mitigate any negative impacts. How you will include certain protected groups in services or expand their participation in public life.

Positive for all protected characteristics

**Now consider and detail below how the proposals impact on elimination of discrimination, harassment and victimisation, advance the equality of opportunity and promote good relations between groups. Where there is evidence, address each protected characteristic**

<table>
<thead>
<tr>
<th><strong>Eliminate discrimination, harassment and victimisation</strong></th>
<th>Applies to all protected characteristics and will promote good relations or health</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Advance equality of opportunity</strong></td>
<td>Yes</td>
</tr>
<tr>
<td><strong>Promote good relations between groups</strong></td>
<td>Yes</td>
</tr>
<tr>
<td><strong>What is the overall impact?</strong></td>
<td>Should help to eliminate all discrimination, harassment, bullying or victimisation and deal appropriately when those acts have occurred.</td>
</tr>
<tr>
<td>Addressing the impact on equalities</td>
<td>Not applicable</td>
</tr>
<tr>
<td>-----------------------------------</td>
<td>----------------</td>
</tr>
<tr>
<td>From the outcome of this Screening, have negative impacts been identified for any protected characteristics as defined by the Equality Act 2010?</td>
<td>NO</td>
</tr>
<tr>
<td>If yes, has a Full Impact Assessment been recommended? If not, why not?</td>
<td></td>
</tr>
<tr>
<td>Manager’s signature: Jacqueline Tate</td>
<td>Date: January 2016</td>
</tr>
</tbody>
</table>
## Communication and Training Check List for Policies

### Key Questions for the accountable Committees designing, reviewing or agreeing a new Trust Policy

<table>
<thead>
<tr>
<th>Is this a new Policy with new training requirements or a change to an existing Policy?</th>
<th>Existing policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>If it is a change to an existing Policy are there changes to the existing model of training delivery? If yes specify below.</td>
<td>No</td>
</tr>
<tr>
<td>Are the awareness / training needs required to deliver the changes by law, national or local standards or best practice?</td>
<td>No</td>
</tr>
<tr>
<td>Please give specific evidence that identifies the training need, e.g. National Guidance, CQC, NHS Resolutions etc.</td>
<td>No</td>
</tr>
<tr>
<td>Please identify the risks if training does not occur.</td>
<td></td>
</tr>
<tr>
<td>Please specify which staff groups need to undertake this awareness / training. Please be specific. It may well be the case that certain groups will require different levels e.g. staff group A requires awareness and staff group B requires training.</td>
<td>No</td>
</tr>
<tr>
<td>Is there a staff group that should be prioritised for this training / awareness?</td>
<td>Managers</td>
</tr>
<tr>
<td>Please outline how the training will be delivered. Include who will deliver it and by what method.</td>
<td>Trust Induction</td>
</tr>
<tr>
<td>The following may be useful to consider: Team brief / e bulletin of summary Management cascade Newsletter / leaflets / payslip attachment Focus groups for those concerned Local Induction Training Awareness sessions for those affected by the new Policy Local demonstrations of techniques/equipment with reference documentation Staff Handbook Summary for easy reference Taught Session E Learning</td>
<td>Policy will be available on Intranet and highlighted in Bulletin</td>
</tr>
<tr>
<td>Please identify a link person who will liaise with the training department to arrange details for the Trust Training Prospectus, Administration needs etc.</td>
<td>Jacqueline Tate</td>
</tr>
</tbody>
</table>
## Training Needs Analysis

<table>
<thead>
<tr>
<th>Staff / Professional Group</th>
<th>Type of Training</th>
<th>Duration of Training</th>
<th>Frequency of Training</th>
</tr>
</thead>
</table>

Copy of completed form to be sent to:
Training and Development Department,
St. Nicholas Hospital

Should any advice be required, please contact: - 0191 245 6777 (internal 56777- Option 1)
**Monitoring Tool**

**Statement**

The Trust is working towards effective clinical governance and governance systems. To demonstrate effective care delivery and compliance, Policy Authors are required to include how monitoring of this Policy is linked to Auditable Standards / Key Performance Indicators will be undertaken using this framework.

<table>
<thead>
<tr>
<th>NTW(HR)08 - Dignity and respect at Work Policy - Monitoring Framework</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Auditable Standard / Key Performance Indicators</strong></td>
</tr>
</tbody>
</table>
| 1 | Mandatory training courses - Induction programme, Equality and Diversity, Trust values training will include content relating to Dignity and Respect and how staff can raise concerns and receive support | **Bi-monthly** Report produced from ESR indicating completion of training for all supervisors, managers and new starters  
Annual review of the content of training courses by the Training Manager to ensure "fit for purpose" | Workforce Training and Development Group (sub group of Trust-wide Quality and Performance Group who will highlight areas of concern for relevant action within the Directorates / Groups) |
| 2 | Monitor grievance and disciplinary statistics relating to harassment, / bullying identifying areas of concern. | **Bi-monthly** Report produced by Capsticks, HRA | Workforce Training and Development Group (sub group of Trust-wide Quality and Performance Group who will highlight areas of concern for relevant action within the Directorates / Groups) |

The Author(s) of each Policy is required to complete this monitoring template and ensure that these results are taken to the appropriate Quality and Performance Governance Group in line with the frequency set out.