



# Dignity at Work Policy

## Document Control Sheet

QPulse Reference Number	POL-CE-ED-6
Document Type	Dignity at Work Policy
Original Policy Date	31 January 2014
Version Number	02
Document Author	Head of HR
Lead Director or Associate Director	Director of Strategy, Transformation and Workforce
Originating Directorate	Strategy, Transformation and Workforce
Subgroup agreeing policy content	JCC Policy Sub Group
Date Agreed by Subgroup	20 October 2015
Date Approved by Policy Review Group	08 January 2016
Ratifying Committee	Workforce Committee
Date of Ratification by Committee	15 January 2016
Signature of Chairman of Ratification Committee	
Job Title	Non Executive Director
Date Policy Effective from	15 January 2016
Next Review Date	15 January 2019
Target Audience	Trust Wide
Signed Paper Copy Held at	HQ
Status	Ratified
Confidentiality	Unrestricted
Keywords	Dignity, equality, bullying, harassment, discrimination

## Table of Revisions

Version number	Status	Document section	Description of change	Author	Date revised
02	Ratified	Full Document	Full revision	K Forsyth	01 October 2015

*Karen Forsyth*

## Executive Directors Signature

Directors signature	Print name	Date
	C Thurlbeck	1 <sup>st</sup> February 2016
	P Liversidge	1 <sup>st</sup> February 2016
	J Baxter	1 <sup>st</sup> February 2016
	R French	1 <sup>st</sup> February 2016

Executive Directors who will be responsible for ensuring staff within their directorates abide by the policy should sign here to evidence they have seen the policy and agree to its content.

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## 1. Introduction

- 1.1 The Trust is committed to developing a work environment in which all employees are treated with dignity and respect. Bullying and harassment and unlawful discrimination are not acceptable and will not be tolerated.
- 1.2 By building a dignified workplace, we will be successful in tackling bullying and harassment to ensure that our people feel valued, listened to and treated with respect.
- 1.3 This policy & procedure covers bullying or harassment that occurs at work and out of the workplace, such as on business trips or at work-related events or social functions. It covers bullying and harassment by staff (which may include consultants, contractors and agency workers) and also by third parties such as customers, suppliers or visitors to our premises.
- 1.4 This policy & procedure does not form part of any employee's contract of employment and we may amend it at any time. The most recent version of this document can be found on QPulse. If you print any part of this document and subsequently revisit it, it may not be the latest version and so you should always check.
- 1.5 This policy & procedure has been implemented following consultation with the recognised Trade Unions and Joint Consultative Committee (JCC).
- 1.6 Please help us to protect the environment by reducing the amount of paper that we print and viewing these policies on screen.

## 2. Purpose

- 2.1 In promoting a culture of dignity and respect it is necessary to be clear about behaviour that the Trust considers to be inappropriate and potentially unlawful and to specify how any such behaviour should be addressed and resolved.
- 2.2 This policy & procedure provides clear information as to what may constitute bullying and harassment and aims to ensure that all staff seek where appropriate, to prevent bullying and harassment and that they are aware of their individual responsibilities to act appropriately.
- 2.3 This policy sets out the process to be followed if a member of staff has or raises a Dignity and Work / Bullying and Harassment disclosure.

## 3. Scope

- 3.1 This policy & procedure covers all employees, officers, consultants, contractors, volunteers, casual workers and agency workers.
- 3.2 This Policy applies to informal complaints.
- 3.3 Where a complaint cannot be resolved informally, line managers should refer the member of staff to the Trust's Grievance Policy and the member of staff should follow the Trust's Grievance Procedure

## 4. Roles & Responsibilities/Duties

- 4.1 All members of staff are responsible for treating all colleagues, students and visitors to the Trust with dignity and respect.
- 4.2 Line Managers are responsible for ensuring that they are aware of their responsibilities to seek to prevent bullying and harassment in the workplace and to take all reasonable steps to seek to prevent any forms of unlawful discrimination. Managers are responsible for taking prompt and timely action (i.e. within 2 weeks but always as quickly as possible) in response to a complaint to ensure that the behaviour is nipped in the bud.
- 4.3 The Head of Human Resources is responsible for ensuring the implementation of this policy and for the regular review of the policy. Details of any complaints will be retained for monitoring purposes on an anonymous basis and where appropriate reported to the Equality and Diversity Monitoring Group.
- 4.4 This policy has been revised in partnership with the recognised Trade Unions which support the aim of resolving any complaints of harassment or bullying informally.

## 5. Principles

- 5.1 The Trust operates this policy & procedure in accordance with the following principles:
  - 5.1.1 The Trust will value the contribution of each individual;
  - 5.1.2 All members of staff have the right to be treated fairly and with dignity and respect;
  - 5.1.3 All members of staff have the right not be subjected to unlawful discrimination;
  - 5.1.4 All alleged bullying or harassment will be addressed in accordance with this policy & procedure in the first instance;
  - 5.1.5 Bullying and harassment are best dealt with when staff members, their representatives and managers work in partnership. Where information is shared, instances of bullying and harassment issues can be resolved quickly;
  - 5.1.6 It is essential that managers have the confidence and capability to manage and recognise their responsibility to manage. Managers are encouraged to notify the Trust of any specific training needs in that regard;
  - 5.1.7 Managers will treat any complaint under this policy as a priority and will take steps to try to resolve the matter quickly (i.e. within 2 weeks but always as quickly as possible);
  - 5.1.8 Personal conflicts, which can be extremely unpleasant and have a damaging effect around the workplace where they exist, are not bullying as such but need to be addressed. Conversation and mediation are effective first steps in resolving working relationship differences;
  - 5.1.9 In the event that a complaint an individual's Line Manager as either alleged perpetrator or witness the complaint should be reported to the next level of management;

- 5.1.10 Any concerns raised will be dealt with confidentially by management, and with fairness and sensitivity. Disclosure of the complaint will usually only be made to the person against whom the complaint is made, although it may be necessary for relevant witnesses also to be informed as part of any investigation (which will usually only be the case where a formal process is carried out);
- 5.1.11 There may be exceptional circumstances where it will be necessary to disclose to others concerns that have been raised, for instance where the person making the complaint, or other individuals, may be at risk. In such circumstances the Trust would, where reasonably possible, try to agree a course of action with you before others are involved. If agreement cannot be reached, the Trust will need to consider whether it is nevertheless appropriate for disclosure to be made;
- 5.1.12 Individuals are encouraged to try to resolve complaints through the informal procedure set out within this document as a first resort;
- 5.1.13 Mediation (by a trained person) either internally or from an external source will be considered where appropriate as part of the informal procedure;
- 5.1.14 Employees who are the subject of an alleged complaint are entitled to be provided with details of the alleged complaint and to respond.

## 6. Relationship With Other Policies And Procedures

- 6.1 During the informal resolution stage, with which this policy & procedure is concerned, it may become necessary to carry out a disciplinary investigation under the Trust's Disciplinary Policy & Procedure.
- 6.2 Any malicious or vexatious complaints will result in the Disciplinary Policy & Procedure being invoked.
- 6.3 The Trust's Grievance Procedure is available where this policy & procedure is not appropriate for the level of the complaint or where either party refuses to engage in informal resolution.

## 7. What Is Bullying And Harassment?

### **Bullying**

- 7.1 Bullying is offensive, intimidating, malicious or insulting behaviour involving the misuse of power that can make a person feel vulnerable, upset, humiliated, undermined or threatened. Power does not always mean being in a position of authority, but can include both personal strength and the power to coerce through fear or intimidation.
- 7.2 Bullying can take the form of physical, verbal and non-verbal conduct. Bullying may include, by way of example:
  - 7.2.1 physical or psychological threats;
  - 7.2.2 overbearing and intimidating levels of supervision;
  - 7.2.3 inappropriate derogatory remarks about someone's performance;

- 7.3 Legitimate, reasonable and constructive criticism of a worker's performance or behaviour, or reasonable instructions given to workers in the course of their employment, will not amount to bullying on their own.

## **Harassment**

- 7.4 Harassment is any unwanted physical, verbal or non-verbal conduct that has the purpose or effect of violating a person's dignity or creating an intimidating, hostile, degrading, humiliating or offensive environment for them. A single incident can amount to harassment. It also includes treating someone less favourably because they have submitted or refused to submit to such behaviour in the past.
- 7.5 Unlawful harassment may involve conduct of a sexual nature (sexual harassment), or it may be related to age, disability, gender reassignment, marital or civil partner status, pregnancy or maternity, race, colour, nationality, ethnic or national origin, religion or belief, sex or sexual orientation. Harassment is unacceptable even if it does not fall within any of these categories.
- 7.6 Harassment may include, for example:
- 7.6.1 unwanted physical conduct or "horseplay", including touching, pinching, pushing and grabbing;
  - 7.6.2 continued suggestions for social activity after it has been made clear that such suggestions are unwelcome;
  - 7.6.3 sending or displaying material that is pornographic or that some people may find offensive (including e-mails, text messages, video clips and images sent by mobile phone or posted on the internet);
  - 7.6.4 unwelcome sexual advances or suggestive behaviour (which the harasser may perceive as harmless);
  - 7.6.5 racist, sexist, homophobic or ageist jokes, or derogatory or stereotypical remarks about a particular ethnic or religious group or gender;
  - 7.6.6 outing or threatening to out someone as gay or lesbian;
  - 7.6.7 offensive e-mails, text messages or social media content; or
  - 7.6.8 mocking, mimicking or belittling a person's disability.
- 7.7 A person may be harassed even if they were not the intended "target". For example, a person may be harassed by racist jokes about a different ethnic group if the jokes create an offensive environment.
- 7.8 Even though the surrounding circumstances will be taken into account when considering whether conduct amounts to harassment, it is important to be aware that an important factor is the perception of the individual. Therefore, conduct can amount to harassment even where the person responsible does not intend the conduct to have that effect.
- 7.9 Harassment may occur in a number of areas and may be physical, verbal, and non-verbal. It is not always face to face and can be through written communication, e.g. e-mail. Harassment includes gossip, jokes and innuendo. It may take place over a period of time. However, depending on the circumstances, one instance may also constitute harassment.

- 7.10 Any member of staff who is subject to harassment or bullying should follow the procedure outlined in this policy.
- 7.11 Any difficulty in defining what constitutes harassment or bullying should not deter staff from complaining of behaviour that causes them distress. Differences of attitude or culture and the misinterpretation of social signals can mean that what is perceived as harassment or bullying by one person may not seem so to another. The defining features, however, are that the behaviour is unwanted by the recipient and would be regarded as harassment by any reasonable person.
- 7.12 No-one should be deterred from making a complaint because of embarrassment or fear of intimidation or publicity. In such cases the Trust would recommend contacting one of the sources of support set out in Appendix A. The Trust will respect the particular sensitivity of harassment or bullying complaints and their consequences as well as the need for the utmost confidentiality. If you feel that you are being harassed or bullied do not think that it is your fault or that you have to tolerate it.
- 7.13 Where appropriate, staff are encouraged to try and resolve matters on an informal basis with recourse to the formal Grievance Procedure only where efforts at an informal resolution have been attempted.
- 7.14 Usually the most sought after outcome is for the alleged behaviour to stop and this can often be achieved through an informal process. Members of staff are encouraged to seek guidance from any of the sources of support listed in Appendix A if they wish to discuss how to proceed.
- 7.15 In circumstances where a member of staff has expressed a concern about inappropriate behaviour in terms of the Dignity & Respect Policy, but feels unable, at that time, to allow their identity to be made known to the person concerned, the Trust is very limited in the action it can take, if any, in relation to the complaint. The recommended route for resolution of issues is the complaints procedure as noted below.

### **Complaints procedure - initial steps**

- 7.16 You should make a written note of any behaviour that you consider to be inappropriate, describing what has happened with the date and time and the names of any witnesses. This will assist you in setting out your complaint and understand whether it is necessary to proceed under the formal Grievance Procedure.
- 7.17 You should seek advice from HR, E&D, Occupational health or your local Trade Union Representative
- 7.18 Wherever possible, attempts should be made to address issues under the informal procedure as noted below.

### **Informal approach/mediation**

- 7.19 If you feel you are in a position to do so, you should approach the person against whom you have a complaint directly and explain to that person what is concerning you.
- 7.20 If you feel unable to approach the person directly, you should approach your Line Manager for a confidential discussion. Your Line Manager will then contact the person and where both parties are willing to participate in the informal process seek to resolve the matter through informal discussion. Your Line Manager will keep a note of discussions and agreed actions.

- 7.21 Any issues raised informally with a Line Manager that fall within the scope of this policy and on which he/she considers action may be required will be referred by the Manager to HR for advice.
- 7.22 Where the complaint concerns your Line Manager you should report the problem to their Line Manager or equivalent person who will take advice from HR to identify another manager to work with who will seek to resolve the issue in the manner described above.
- 7.23 Where informal routes to resolution are not considered appropriate or have failed to resolve the issue, the Manager receiving the complaint will seek advice from HR on the potential use of mediation.
- 7.24 Mediation is a process whereby a trained mediator assists both parties to find a mutually acceptable solution to a problem raised. The mediator will seek to work with both parties towards an outcome in which neither party feels that they are the “loser” and is aimed at future good working relationships. It is a voluntary and confidential process and mediation will normally take no longer than one day. Mediation can be a very useful way for issues to be aired and resolved.

PLEASE NOTE: In the event of a bullying or harassment complaint, should either party already be involved in another formal procedure such as a disciplinary investigation or management under the Capability Policy, it may be necessary for the formal procedure to be temporarily suspended whilst the Dignity at Work investigation is completed. The HR Team will confirm there are no other policies currently being followed.

### **Formal Approach**

- 7.25 If you are dissatisfied with the outcome of the informal approach or if the conduct complained of does not cease, or if the informal approach is not appropriate, then you may raise the matter under the Grievance Policy and Procedure, starting at stage 2 of the formal procedure and omitting the informal stage.
- 7.26 Please refer to the Trust’s Grievance Policy and Procedure for further details. Your complaint should be set out and submitted in accordance with the Grievance policy.

## **8. Equality and Diversity**

- 8.1 The Trust is committed to ensuring that, as far as is reasonably practicable, the way we provide services to the public and the way we treat our staff reflects their individual needs and does not discriminate against individuals or groups on the grounds of any protected characteristic (Equality Act 2010). An equality analysis has been undertaken for this policy, in accordance with the Equality Act (2010).
- 8.2 An equality analysis has been undertaken for this policy, in accordance with the internal Equality Policy and the Equality Act (2010).
- 8.3 Details of this assessment are stored within the central register for Equality Analysis Assessments maintained within the Equality and Diversity team within the Communications and Engagement department.

## **9. Monitoring**

Monitoring Criterion	Response
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Dignity At Work Policy

Who will perform the monitoring?	E&D Advisor and HR
What are you monitoring?	Compliance with the policy, hotspots and trends, any imbalance or potential discriminatory behaviours or increase in issues
When will the monitoring be performed?	Monthly through the workforce metrics report
How are you going to monitor?	Monitor the number of informal and formal cases and any hotspots/trends
What will happen if any shortfalls are identified?	Any issues identified will be reported to the HR Strategy Group and the Equality Group
Where will the results of the monitoring be reported?	HR Strategy Group and Equality Group
How will the resulting action plan be progressed and monitored?	Any action to address identified issues will be reported to the HR Strategy group and Equality group. Also, analysis will form part of the annual Equality Analysis
How will learning take place?	Through Essential Annual Training, equality and diversity training and any guidance documents

## 10. References

This document refers to the following guidance, including national and international standards:

## 11. Associated Documentation

This document refers to the following Trust policies and procedures:

Grievance Policy & Procedure

Disciplinary Policy & Procedure

Capability Procedure

Equality Act 2010

NHS Terms and Conditions of Service

## 12. Appendices

Appendix 1 Review Process Checklist – Author to complete

Appendix 2 Compliance Checklist – Policy Review Group

Appendix 3 Quality Team Checklist

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**APPENDIX 1  
REVIEW PROCESS CHECKLIST – AUTHOR TO COMPLETE**

Compliance Checks	Author to Complete			
	Yes/ No	Details	Comments	Action Needed
Has the document been consulted upon? (please detail stakeholders that have been consulted)	Yes	JCC Sub Group		No
Has the document been agreed by a sub group of the relevant Approval Committee? (if so, please specify the subgroup(s) here and confirm the date the document was endorsed by the group.	Yes	JCC Sub Group		
Approval: JCC (if appropriate)?	Yes			
Why has this document been amended? i.e. full review, particular section/new etc.	Yes	Full review		
Has table of revisions been completed?	Yes			
Has the document author clearly identified?	Yes			
Has the document sponsor been identified and consulted with	Yes			
Has the date of the Ratifying Committee meeting to which the document will be submitted been specified?	Yes			
Has the Ratifying Committee been correctly identified?	Yes			
Has the Originating Directorate been notified?	Yes			
Has the scope of the document been identified?	Yes			
Content: intended outcomes clearly described?	Yes			
Has the date the Document will next be reviewed been noted? (If less than the standard 3 years, please provide an explanation why)	Yes			
Has the monitoring table been correctly completed?	Yes			
Has the Equality Impact Screening been completed?	Yes			
If warranted from the above has the Equality Impact Assessment been completed?	N/A			
Has the financial implications been considered?	Yes			
Has the Document been assessed as to whether its circulation should be restricted/unrestricted? If so, the outcome of this assessment should be noted on the front sheet	Yes	Unrestricted		
Does the policy need to be available to the public? If so once ratified Communication team need a copy	No			
Name a member from the subgroup to be present to respond to any questions if author unavailable		Karen Forsyth		

Date of Policy Review Group Submitted to

JCC sub group 19.10.2015

Authors Name

Karen Forsyth

Authors Signature

*Karen Forsyth*

**APPENDIX 2  
COMPLIANCE CHECKLIST – POLICY REVIEW GROUP**

Approving Sub Committee:	JCC Sub Group		
Compliance Checks	Yes/No	Comments	Actions Needed
Has the front page document been completed fully?	Yes		
Has the author completed checklist? And has this been checked by the group?	Yes		
<b>Style and Format</b>			
Has the correct template been used?	Yes		
Procedural Documents must use the Arial font style bold text size 12	Yes		
Section and paragraph heading should be numbered and in bold.	Yes		
Is it the EIS and EIA if applicable the latest version?	Yes		
Is the title of the Document clear and unambiguous?	Yes		
Has the new version number been amended on the Control Sheet, and Footer of each section?	Yes		
Has the version control/revision table been updated?	Yes		
Has the Document type been identified? (Policy/Procedure?)	Yes		
<b>Explanation of Terms Used</b>			
Acronyms are first used with explanation.	Yes		
Glossary of Terms used if helpful to the procedural documents understanding.	No	Explanations of terms included in text	
<b>Consultation &amp; Review Arrangements</b>			
Is it clearly apparent that the document has been consulted upon?	Yes		
Has the monitoring table been completed?	Yes		
If the monitoring of this document involves members of other teams or Health Groups, have they been informed?	Yes		
Has the name/job title of the Non Executive Chairman of the Approval Committee been correctly identified?	Yes		
<b>Associated documents and supporting references</b>			
Are there full references to other Trust Policies that the Policy refers to or is associated with.	Yes		
<b>Following satisfactory review by Policy Review Group</b>			
Has the ratification Committee been identified and is this the right committee?	Yes		
Is there timescales identified for monitoring and reporting to appropriate committee?	Yes		

Policy Review Group Outcome	Reviewed successful
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**APPENDIX 3 - QUALITY TEAM CHECKLIST**

Quality Team Checklist	Yes/No	Comments
Document Control Sheet complete with signatures?	yes	
Table of revisions complete?	Yes	
All footers and watermark updated?	Yes	
Page numbers updated?	Yes	
Review process checklist and compliance checklist complete?	Yes	
Previous version of policy archived?	Yes	
QPulse upload date complete?	Yes	
Policy available to relevant staff groups?	yes	Live on Q-Pulse
Process completed: Quality Team	Date 15/01/2016	Signature Paul McFarlane