

25th February 2026

By email

████████████████████

Our Ref: FOI 2734

Dear ██████████

I am writing to you in response to your Freedom of Information request received by the Northern Ireland Medical and Dental Training Agency (NIMDTA) on 22nd January 2026 in which you requested information relating to internal frameworks:

All relevant policies, procedures, guidance, governance documents, and internal frameworks relating to:

- **Equality and disability within NIMDTA.**
- **Reasonable adjustments for trainees.**
- **The handling and escalation of equality-related concerns.**
- **The governance structure and designated responsibilities for equality and disability matters.**
- **The role of SLE in equality or disability-related processes.**

Please find attached all relevant policies, some of which fall under the remit of NIMDTA Postgraduate Education & Training teams and are managed by the same teams; and some which are applicable to the entire organisation but are managed by the employment team (SLE).

Please note that NIMDTA is responsible for both the postgraduate education of resident doctors in training, and the employment relationship under the Single Lead Employer.

Education Policies include the following:

1.Transfer of Information Policy (attached): – which aims to ensure that a Local Education Provider (LEP) is aware of the need for support and/or reasonable adjustments

2.Allocation of Placements - Special Circumstances Policy and Appeal Process (linked below): - which considers medical condition or disability which requires a trainee to remain within a specific geographical area for management of the condition and general health

[All Trainees – Guidance & Policies](#)

Employment Policies include the following:

1. Equality, Diversity and Inclusion Policy
2. Attendance at Work Policy
3. Grievance Policy
4. Conflict, Bullying and Harassment Policy

I hope that the information provided assists you. If you are dissatisfied in any way with the handling of your request, you have the right to request a review. You should do this as soon as possible or in any case within two months of the date of issue of this letter, as NIMDTA, along with all other public authorities are not obliged to accept internal review requests after this period has lapsed.

In the event that you require a review to be undertaken, you can do so by writing to The Business Services Organisation (BSO), which provides an Information Governance service on our behalf:

Post: Information Governance Manager,
2 Franklin Street,
Belfast,
BT2 8DQ

Email: foi.bso@hscni.net

If, following an internal review, carried out by an independent decision making panel, you remain dissatisfied in any way with the handling of the request, you may make a complaint to the Information Commissioner's Office and ask that they investigate whether NIMDTA has complied with the terms of the Freedom of Information Act

The Information Commissioner's Office – Northern Ireland
10th Floor
Causeway Tower
9 James Street South
Belfast
BT2 8DN

Telephone: 0303 123 1114
Email: ni@ico.org.uk

In most circumstances the Information Commissioner will not investigate a complaint unless an internal review procedure has been carried out. However the Commissioner has the option to investigate the matter at his discretion.

Yours Sincerely,



Aaron McClelland
Senior Governance, IT and Facilities Manager, NIMDTA

POLICY DOCUMENT

Transfer of Information Policy

Policy Review Schedule

Date first Approved by the QMG: February 2019

Last Approved by the QMG: January 2022

Date of Next Review: February 2027

Policy Owner: Senior Professional Support Manager

Amendment Overview

Version	Date	Pages	Comments	Actioned
1.1	June 2018	9	TOI process removed from PSU guidance as separate policy	G Dennison
1.2	August 2018	9	Revised following feedback from with TRG members	D Hughes
1.3	August 2018	9	Revised to include sharing of FtP concerns on completion of training	D Hughes
1.4	August 2018	11	Revision to reasons for transferring of information	D Hughes
1.5	April 2019	11	Amended to include review of DDRG trainee list	D Hughes
1.6	February 2020	12	Revised to include STEP process, removal of GP TAP section & information in regard to SharePoint	D Hughes
1.7	December 2021	11	Complete policy revision	G Dennison
1.8	February 2025		Complete policy revision to support the implementation of a live TOI system covering all NIMDTA trainees.	G Dennison

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Role of the Northern Ireland Medical and Dental Training Agency

The Northern Ireland Medical and Dental Training Agency (NIMDTA) is an Arm's Length Body sponsored by the Department of Health (DoH) to train postgraduate medical and dental professionals for Northern Ireland. NIMDTA also seeks to serve the government, public and patients of Northern Ireland by providing specialist advice, listening to local needs and having the agility to respond to regional and national requirements.

NIMDTA commissions, promotes and oversees postgraduate medical and dental education and training throughout Northern Ireland. NIMDTA endeavours to attract and appoint individuals of the highest calibre to recognised training posts and programmes. NIMDTA encourages doctors to train and remain in NI so that Health and Social Care (HSC) has a highly competent medical and dental workforce with the essential skills to meet the changing health needs of its population.

NIMDTA organises and delivers the recruitment, selection and allocation of doctors and dentists to foundation, core and specialty training programmes. NIMDTA supports trainees with the aim of maximising their potential to successfully progress, complete training and be appointed to permanent posts in NI. NIMDTA manages the quality of postgraduate medical and dental education in HSC Trusts and in general medical and dental practices through learning and development agreements, the receipt of reports, regular meetings, trainee surveys and inspection visits. It works in close partnership with local education providers to ensure that both the training and supervision of trainees support the delivery of high quality safe patient care. NIMDTA provides trainees with a wide range of opportunities to gain experience in leadership, quality improvement, research and teaching.

NIMDTA trains clinical and educational supervisors and recommends them to the General Medical Council (GMC) for recognition of their role. NIMDTA selects, appoints, trains and develops educational leaders for foundation, core and specialty medical and dental training programmes throughout NI.

NIMDTA is accountable to the GMC for ensuring that the standards set by the GMC for medical training, educational structures and processes are achieved. Revalidation is the process by which the GMC confirms that doctors are up to date and fit to practice. NIMDTA is the Designated Body for doctors in training and has a statutory role in making recommendations to the GMC to support the revalidation of trainees. NIMDTA is also responsible to the GDC for the Standards for Specialty Education.

NIMDTA enhances the standard and safety of patient care through the organisation and delivery of career development for general medical and dental practitioners and dental care professionals. It also supports the career development of general medical practitioners and the requirements for revalidation through the management and delivery of GP appraisal.

NIMDTA has been integrated as lead employer for Doctors and Dentists in training (DDiT) across the HSC. The aim of this service is to provide a high quality continuous employment experience for DDiT.

NIMDTA plays a key role in attracting DDiT to the HSC, and in creating an environment where they wish to continue to remain practising within the HSC.

NIMDTA carries out these roles on behalf of the DoH by focussing on the needs of people (population, trainees, trainers and NIMDTA staff), in partnership with key stakeholders and by upholding the HSC Values - openness and honesty, compassion, excellence and working together.

Policy Influences

This policy has been influenced by the following:

- Maintaining High Professional Standards (MHPS): A framework for the handling of concerns about doctors and dentists in the modern HPSS (DoH)
- A Reference Guide for Postgraduate Foundation and Specialty Training in the UK (*The Gold Guide 8th Edition 2020*)
- Supporting Trainees Entering Practice (STEP) (*UKFPO*)
- Promoting excellence: Standards for Medical Education and Training (*GMC*)
- UK Committee of Postgraduate Dental Deans and Directors (*COPDEND Dental Gold Guide*)
- Handling concerns about practitioners' health: A manager's guide (*PPA*)
- Revalidation Requirements for Doctors in Training (*GMC*)
- Integrated Guidance on Health Clearance of Healthcare Workers and the Management of Healthcare Workers Living with Bloodborne Viruses (Hepatitis B, Hepatitis C and HIV) (*UK Advisory Panel for Healthcare Workers Living with Bloodborne Viruses – UKAP*)
- Doctors in Training with Bloodborne Virus Infection (*4 Nations*)

Policy Impact

This policy may have an impact on the following:

- Professional Support Unit Policy
- Learning and Development Agreement
- Allocations of Placement Policy
- Special Circumstances Policy
- Revalidation Operational Policy
- Failure to Comply with the Requirements of the Training Programme Policy
- Fitness to Practise Policy

1.0 Definition

The Transfer of Information process is a means of supporting doctors and dentists in training and protecting patients as trainees move between Local Education Providers (LEPs). In particular, this process seeks to highlight doctors who require additional support during their training programmes. The process is one of the mechanisms by which NIMDTA passes on information relating to doctors and dentists in order to safeguard patient safety.

2.0 General Principles

2.1 The purpose of transferring information is to ensure that the LEP is aware of any support and/or reasonable adjustments that the trainee may require and whether the trainee has been the subject of an investigation or restrictions to their practice. Information shared may be sensitive and therefore it must be treated as confidential.

2.2 There are two processes for transferring information, as follows:

- Process 1: Foundation Supporting Trainees Entering Practice (STEP) process in relation to medical students progressing to Foundation training. See section 3.0 for further details.
- Process 2: NIMDTA Transfer of Information process for trainees within Dental, Foundation, General Practice and Hospital Specialty Training programmes. See section 4.0 for further details.

3.0 Medical School Supporting Trainees Entering Practice (STEP) Process

3.1 This is a national process to transfer information from the medical school to the receiving Foundation school. This process is designed to support students in the transition from medical school to postgraduate training and employment.

3.2 UK Final Year medical students complete the STEP online form in March, which includes declarations in relation to health and welfare, educational progress and professional performance. A copy of the form is available at [Preparing for F1 - UK Foundation Programme](#)

3.3 Following submission of the form, the Medical School representative will review the details on the form and confirm if the details are correct. The Medical School will either “Approve” or “Reject” each student’s declarations. If the Medical School rejects and requests amendments, the form will be sent back to the student to amend.

- 3.4 Medical Students from outside the UK will complete the STEP form in paper format. The form is forwarded to NIMDTA by the university or student before the national deadline (usually May).
- 3.5 Details from all forms received will be collated in an excel spreadsheet by the Foundation Team. The information is reviewed by the Foundation School Director (or deputy) with consideration given to any adjustments or additional support that may be required. If the student has declared information in any of the three areas on the form, they will be asked to consent to the Foundation School Director contacting them to discuss the contents of their form. If consent has been provided, the Foundation School Director (or deputy) will meet with those who have highlighted significant issues to provide support. If consent is not provided the student will be directed to the relevant NIMDTA policy to establish what further action is required (if any).
- 3.6 The spreadsheet is shared with their Foundation Programme Director and Director of Medical Education, and others as deemed necessary by the Foundation School Director.
- 3.7 Information in relation to health and welfare will be shared with Occupational Health in the Local Education Provider (LEP) where the trainee is due to commence placement. The student will have provided consent to do so on the STEP form. Any trainees who require adjustments will also be referred to Professional Support and Wellbeing for support and for consideration of transferring information on the Transfer of Information form for subsequent rotations (see section 4.0). A summary of health and welfare declarations and educational progress declarations will be reviewed by the Trainee Review Group.
- 3.8 A summary of professional performance issues will be reviewed by the Doctors and Dentists Review Group (DDRG) to establish if the information provided on the form is likely to have an impact on the trainee's Fitness to Practise or if further action is required.
- 3.9 Foundation trainees who have been allocated to the Northern Ireland Foundation School through the pre-allocation process will be provided with information about the NIMDTA Special Circumstances Policy in case a further application is required in relation to their posting. If their Special Circumstances relate to significant health issues, Occupational Health will also be informed as indicated in 3.7.
- 3.10 When trainees rotate to a different LEP site during the Foundation programme, it may be necessary for the current Foundation Programme Director to share information with the next Foundation Programme Director.
- 3.11 The Foundation School will transfer information regarding progress or concerns about Foundation year 1 doctors to the relevant medical school, as required.

4.0 Transfer of Information (TOI) Process

4.1 The NIMDTA TOI process will be facilitated by the use of a *Transfer of Information SharePoint* (see Appendix 1 for an illustration of the structure). This will be completed for all doctors and dentists in training who require additional support for the following reasons:

- have been diagnosed with a health issue which requires workplace adjustments and/or has the potential to impact on their training
- have been diagnosed with a disability which requires workplace adjustments and/or has the potential to impact on their training
- are currently under investigation by the Police, GMC/GDC, local education provider or other regulatory body which has not reached a conclusion
- are subject to GMC/GDC restrictions (conditions or undertakings)
- have received a warning which is currently active or was active in the last 12 months
- are or have been subject to any remediation process, involving NHS Resolution Practitioner Performance Advice (formerly NCAS), addressing deficits in clinical performance during the last 12 months
- may require additional support or supervision for another reason

4.2 TOIs may also be required in the following circumstances :

- trainees newly appointed to the Northern Ireland Deanery
- trainees taking up a post outside the Northern Ireland Deanery which will include OOP or Interdeanery Transfers
- trainees who are leaving training in Northern Ireland (see section 5).

4.3 TOI's in relation to fitness to practise issues will take place in advance of trainee's rotating to a new trust.

4.4 Information in relation to adjustments resulting from management referrals to occupational health will be added to the TOI SharePoint as reports become available. The TOI SharePoint will be the central portal to share health adjustments for all doctors in training, therefore it will incorporate referrals by training teams, the employment team, lead educators or supervisors.

4.5 Information shared from occupational health reports will be limited to adjustments only, in line with the UK GDPR core principal of data minimisation, which is defined as '*adequate, relevant and limited to what is necessary in relation to the purposes for which they are processed*'. If LEP's feel that additional information or background is required, it is recommended that they request this information directly from the trainee.

4.6 Information in relation to adjustments resulting from pre-employment checks will be transferred to medical HR in advance of February and August start dates via the Pre-employment Checks SharePoint. If ongoing adjustments are required, they will be transferred to the TOI system so that they can be shared with subsequent trusts.

4.7 TOI information will be uploaded onto the following sections as appropriate:

Section of TOI SharePoint	Access Granted to
Trusts	Trust Medical Director, Director of Medical Education, Medical HR and other appointed individual
Dental	Postgraduate Dental Dean & Dental Training Manager
Foundation	Foundation School Director, Foundation School Manager & Co-ordinator
General Practice	Director of General Practice, Associate Directors and GP Training Manager
Hospital	Director of Hospital Specialty Training, Hospital Training Manager
Foundation Programme Directors	Relevant Foundation Programmes Directors across all trusts
Hospital Specialties Lead Educators	Relevant Head of School, Deputy Head of School, Training Programme Director
Occupational Health	Nominated contacts within each Trust OH department

4.8 TOIs will be shared with the receiving Occupational Health department if ongoing review is required by the new team.

4.9 Information in regard to trainees with a blood borne virus will be transferred using the following process:

- The trainee will declare their BBV on their PPHA questionnaire
- An OH review will be carried out and any requirement for restrictions, monitoring or adjustments will be noted on the Pre-employment Checks SharePoint. This information is shared with Trust Medical HR and the relevant NIMDTA Foundation Programme Director/specialty school. OH will seek the trainee's permission to share information directly with the trainee's subsequent OH department.
- When the trainee rotates, they will be included on the TOI report shared with the relevant DME, OH department and Foundation Programme Director/specialty school. The report will highlight that detailed information will be shared directly between OH departments.
- In advance of rotation, OH will transfer BBV information directly to the trainee's new OH department (as detailed in Appendix 2 of Integrated Guidance on Health Clearance of Healthcare Workers and the Management of Healthcare Workers Living with Bloodborne Viruses (Hepatitis B, Hepatitis C and HIV). OH will also provide the trainee with copies of relevant documentation to share with their next trust.

5.0 Transfer of Information for Trainees Leaving Programmes in Northern Ireland

5.1 It is possible that a trainee may complete training or resign from the training programme with one or more of the following:

- undergoing an investigation (by the police, GMC/GDC, NHS Resolution, local education provider or other regulatory body) which has not reached a conclusion
 - subject to GMC/GDC restrictions (conditions or undertakings)
 - in receipt of a warning from a local education provider or regulator which was active in their last placement
 - subject to a remediation process, involving NHS Resolution, addressing deficits in clinical performance in their last placement
- 5.2 The Medical Director, as Responsible Officer will share the trainee’s last ARCP following receipt of a request from another Responsible Officer. There may also be occasions where the Medical Director or Postgraduate Dean will make contact with a new Responsible Officer to make them aware of concerns (see Appendix 2 for TOI Form). For Dental trainees information will be shared via the Postgraduate Dental Dean.
- 5.3 The trainee will be advised that this information is being shared with their new Responsible Officer and they will be provided with a copy.

6.0 Roles and Responsibilities

- 6.1 All parties are responsible for sharing information to ensure that TOI’s are up to date and all relevant information is shared with other teams. Information can be forwarded to psw.nimdata@hscni.net
- 6.2 DME – the DME (or equivalent) should ensure that the information is cascaded appropriately through educational routes within the Trust. They will liaise with Medical HR and relevant supervisors to ensure that required adjustments are considered and implemented if appropriate. The DME may feel that it would be beneficial to meet with the trainee or to contact them for further information.
- 6.3 Medical HR - will liaise with the DME and SLE in regard to adjustments and will ensure that they are considered, and implemented within the trust if appropriate.
- 6.4 SLE – will liaise with medical HR (or equivalent) to agree implementation and financing of adjustments.
- 6.5 OH – the new OH team should arrange for the case to transfer to their trust and will arrange a review appointment as required. In cases involving a BBV, see section 4.8 for OH responsibilities.
- 6.6 Foundation Programme Directors/Hospital Specialty Lead Educators – may be required to make contact with the receiving department to ensure that all relevant information is transferred to the new Educational Supervisor.

- 6.5 General Practice – the GP Team will share information with the relevant Educational Supervisor, and where appropriate, the Clinical Supervisor of the GP placement. TOIs in relation to F2 doctors rotating to a General Practice will be shared with the Clinical Supervisor of the GP placement.
- 6.6 Dental – will share TOIs with the relevant Training Programme Director, Educational Supervisor and where appropriate, the Clinical Supervisor.

7 Contacts for Further Information

Contact Professional Support for further information via psw.nimdt@hscni.net or 028 9536 0136.

Appendix 1 Sample Transfer of Information Report

SUMMARY			
TOI Status	Active ▼	TOI For	Action ▼
Active Case With	PSW ▼	Programme	General Surgery ▼
Surname	Case3	Grade	ST5 ▼
Forename	Test	Trust	BHSCT ▼
Registration Number	1234569	Posted to Trust (From)	02/08/2023 📅
		Posted to Trust (To)	06/08/2024 📅
Reason Information Transferred	Has been diagnosed with a health issue which requires workplace adjustments and/or has the potential to impact on their ▼		
Comments	OH review 01/07/2023, remains fit for general ward duties including on-call, but should avoid working overnights for a 12 month period.		
Next OH Review	📅		
OH Referral By	SLE ▼		

Appendix 2. Transfer of Information – Responsible Officer to Responsible Officer

Information will be transferred for a trainee who has completed training or resign from the training programme with one or more of the following:

- undergoing an investigation (by the police, GMC/GDC, NHS Resolution, Local Education Provider or other regulatory body) which has not reached a conclusion
- subject to GMC/GDC restrictions (conditions or undertakings)
- in receipt of a warning from a local education provider or regulator which was active in their last placement
- subject to a remediation process, involving NHS Resolution, addressing deficits in clinical performance in their last placement
- may require additional support or supervision for another reason not included above

This form will be forwarded to the doctor's new Responsible Officer. The purpose of transferring information is to ensure that the new RO is aware of any issues or concerns and can ensure that support and/or reasonable adjustments that may be required can be accommodated for Trainees Leaving Programmes in Northern Ireland.

Information has transferred for the following reason(s).

Full Name			
GMC/GDC number:			
Grade/Specialty at time of TOI:			
ARCP Outcome			
Issue:	Health <input type="checkbox"/>	Performance <input type="checkbox"/>	Conduct <input type="checkbox"/> Other <input type="checkbox"/>
Comment			
For Information or For Action			
Occupational Health Review required			
Reasonable adjustments			
Additional Supervision			
Current LEP & unit (inc. dates)			
Current Educational Supervisor			
Future LEP & Unit (inc. dates)			
Contact for Further information:			
Signed:		Date:	
TOI copied to Trainee: <input type="checkbox"/>	TOI copied to Head of School: <input type="checkbox"/>	Date:	



POLICY DOCUMENT

Equality, Diversity and Inclusion Policy (Regional Policy) July 2023

Policy Review Schedule

Date first Approved:

April 2024

Last Approved by the Board:

Date of Next Review:

Policy Owner: **Senior Professional Support Manager**

Amendment Overview

Version	Date	Pages	Comments	Actioned
2024 – 1				Roisin Campbell

Links to other Policies, Procedures and Guidance:

- Regional Recruitment and Selection Framework
- Attendance at Work Policy
- Conflict, Bullying & Harassment in the Workplace Policy & Procedure (Regional)
- Regional Disciplinary Policy & Procedure
- Regional Grievance Policy & Procedure

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1 Introduction

- 1.1 The policy outlines the commitment of the Northern Ireland Medical and Dental Training Agency (hereafter referred to as NIMDTA) to promote equality of opportunity, good and harmonious working relations and the prevention of unlawful discrimination.
- 1.2 It sets out how the policy will be managed, communicated, implemented and monitored. It specifies NIMDTA's approach to recruitment and promotion, training, staff appraisal, work-life balance responsibilities and how complaints of discrimination will be managed.
- 1.3 The policy has been benchmarked against best practice and relevant codes of practice produced by the Equality Commission, agreed with the Trade Unions and will be reviewed periodically at least once every three years.

2 Purpose and Aims

- 2.1 This policy is concerned with the promotion of equality and the prevention of unlawful discrimination. However, the existence of the law cannot itself ensure that any policy of non-discrimination will work effectively. NIMDTA recognises that this will only be achieved if management and staff at all levels examine critically their attitudes to people and ensure that no trace of discrimination is allowed to affect their judgement. NIMDTA will endeavour to ensure that all staff are aware of the forms which unfair discrimination can take, guard against them and avoid any act which might influence others to discriminate unfairly. NIMDTA recognises its obligations under the anti-discrimination legislation, the Human Rights Act 1998 and the NI Act 1998 (refer to Appendix 1 for overview of equality legislation).
- 2.2 NIMDTA will have due regard to the need to promote equality of opportunity and good relations in line with Section 75 of the NI Act 1998. NIMDTA's Equality Scheme shows how the NIMDTA will fulfil its statutory duties as outlined within the NI Act 1998.

- 2.3 It is NIMDTA's intention to comply with the spirit as well as the letter of all the legislation detailed above. The current definitions of discrimination, victimisation and harassment relating to anti-discrimination legislation are contained within Appendix 1 of this policy.

3 Policy Statement

- 3.1 NIMDTA is committed to the promotion of equality and to creating and sustaining an environment that values and celebrates the diversity of its staff and service users. NIMDTA aims to be representative of the community it serves and for each employee to feel respected and able to give of their best.
- 3.2 NIMDTA is committed to the provision of equality for all staff regardless of gender, including gender identity and expression, religious belief, political opinion, marital/civil partnership or family status, race/ethnicity, age, sexual orientation, disability and whether or not they have dependants. Selection for employment and advancement will be on the basis of ability, qualifications and aptitude for the work.

4 Scope of Policy

- 4.1 This policy applies to all staff and covers recruitment, promotion, training, transfer and other benefits and facilities afforded to staff. It also includes conduct at work related events and work-related social events. NIMDTA will positively promote and rigorously observe the objectives and principles set out in this policy statement, and is committed to implementing policies to promote equality and fair participation within NIMDTA.
- 4.2 There must be no discrimination or victimisation against any applicant for employment, potential applicant for employment or member of staff on grounds of their gender, including gender identity and expression, religious belief, political opinion, marital/civil partnership or family status, race/ethnicity, age, sexual orientation, disability and whether or not they have dependants.
- 4.3 Care must be taken to guard against more subtle and unconscious forms of discrimination which may not be immediately obvious. This may result from generalisations about the capabilities, characteristics or interests of particular groups which influence the treatment of individuals or particular

groups e.g. preconceptions about their suitability for a particular post, level of management, location, training course or development opportunity etc.

- 4.4 There must be no discrimination in the form of harassment of any individual or group. This may constitute unlawful discrimination. Appendix 1 provides definitions of discrimination, victimisation and harassment as defined under the relevant pieces of legislation.
- 4.5 NIMDTA will promote a supportive, good and harmonious working environment free from material or behaviour likely to be offensive, provocative or intimidating or in any way likely to cause apprehension to any member of staff.
- 4.6 Managers and supervisors must be seen to be impartial in dealing with staff and ensure their conduct at all times accords with this policy. They must take appropriate action to deal with any difficulties arising from a lack of impartiality by any member of their staff and any other breaches of this policy within their area of responsibility.
- 4.7 All staff are bound by this policy to ensure that their behaviour at all times accords with the principles set out in this policy. Breaches will be dealt with under the disciplinary procedure.
- 4.8 There must be no discrimination against office holders, such as NIMDTA Board members, contract workers, agency workers, trainee workers, students on work placements, volunteers or former employees.
- 4.9 NIMDTA will obtain commitments from other persons or other organisations such as sub-contractors or recruitment agencies that they will comply with this policy.

5 Implementation

5.1 Management Responsibilities

The Senior Professional Support Manager is responsible for monitoring, co-ordinating and developing the policy under the direction of the Chief Executive.

Managers will ensure that staff for whom they are responsible are aware of and abide by this policy. The policy will be adopted at all levels of management. All staff employed by NIMDTA have a responsibility to accept their personal involvement in application of the Equality, Diversity and Inclusion Policy. NIMDTA will ensure that adequate resources are made available to fulfil the objectives of this policy.

5.2 Communicating the Policy

This policy will be publicised via NIMDTA's intranet site and drawn to the attention of all new staff.

5.3 Monitoring Positive and Affirmative Action

The composition of staff, applicants for employment and appointees will be monitored on the basis of gender, age, religious belief, community background, political opinion, race/ethnicity, nationality, disability, sexual orientation, marital status and dependants. The purpose of regular monitoring is to provide the information required to measure the effectiveness of this policy and provide an objective view on the existence and progress of equality of opportunity. To this end, an information system has been established and staff are encouraged to provide accurate and up to date information in line with data protection principles. For staff who have employee self-service access to HRPTS, information can be updated directly via this system.

Policies and procedures in respect of employment and advancement will be periodically reviewed to maintain a system where individuals are treated solely on the basis of their merits and abilities.

NIMDTA will take such positive and affirmative action as is deemed lawful, appropriate and necessary to ensure equality. Goals and timetables, where appropriate, will be set to measure progress which can reasonably be expected as a result of positive and affirmative action.

6 Recruitment and Promotion

- 6.1 NIMDTA will ensure that recruitment and selection procedures are fair and based upon the principle of appointing the best person for the job. Advertisements will not indicate or appear to indicate an intention to discrimination in selection for recruitment, promotion or training. Advertisements will not be confined unjustifiably to areas or publications which would exclude or disproportionately reduce the number of applicants of a particular group. Advertisements will include an equality statement and, if appropriate, a welcoming statement.
- 6.2 Opportunities to obtain information on careers in NIMDTA must be available to existing and potential staff and all interested parties.
- 6.3 Eligibility criteria for recruitment or advancement must be related to ability to do the job and will be non-discriminatory.
- 6.4 Applications must be submitted on official application forms and appointment will be made following a selection process which provides for shortlisting and interview panels.
- 6.5 Tests used in selection, recruitment, promotion or training will be regularly reviewed to ensure they are related to job performance and do not unlawfully discriminate. The results of these tests will be monitored in order to identify any issues of concern or patterns which may suggest direct or indirect discrimination.
- 6.6 Staff involved in the selection process should consult the HSC framework on recruitment and selection which promotes best practice in this area. Decisions relating to the selection process and the reasons for such decisions will be recorded at each stage of the selection and/or promotion process. These will be kept for a minimum of 3 years after appointments have been made.

7 Training

- 7.1 All NIMDTA staff are required to complete the Equality, Good Relations and Human Rights–Making a Difference eLearning training every 3 years during the course of their employment. All staff must complete Part 1 of the training. Managers and those with supervisory responsibilities must complete both Parts 1 and 2.

Staff should also read and familiarise themselves with the content of the Equality, Good Relations and Human Rights Staff Training Manual which is available on SharePoint.

- 7.2 Staff involved in selection and appointment panels will undertake the regionally agreed training that accompanies the HSC Recruitment and Selection Framework.
- 7.3 This policy will also be included as appropriate in all management and supervisory development programmes so that those with managerial and supervisory responsibility perform their duties with a full knowledge of the implications of equality legislation.
- 7.4 All staff will be encouraged to take advantage of the training and career development opportunities available to them to develop the necessary skills and provide the opportunity for them to achieve their full potential.

8 Personal Development Review

- 8.1 Personal development review within NIMDTA will be based solely on an objective assessment of the individual's performance against agreed objectives which will link to NIMDTA's corporate objectives. Staff will also be developed against the Knowledge and Skills Framework with all staff being required to have a personal development plan. Reviews must not reflect an assumption or prejudice of the reviewer about the individual being reviewed. This could be discriminatory and as such must not be tolerated.

9 Work Life Balance

- 9.1 NIMDTA recognises the importance of flexible working in the promotion of equality and the retention of staff. NIMDTA's Work Life Balance Policy will be widely promoted across the organisation. A copy of the NIMDTA's Work Life Balance Policy is available on the intranet.

10 Complaints of Discrimination

- 10.1 NIMDTA will treat seriously and take prompt action on any grievance concerning discrimination, harassment, victimisation or maladministration raised under the grievance procedure or Conflict, Bullying and Harassment Policy, as appropriate. Every effort will be

made to resolve issues e.g. via mediation, without affecting the individual's right to lodge proceedings.

- 10.2 Those who think they have been discriminated against may seek help and advice from the Equality Commission for NI. Those who feel they have suffered an injustice as a result of maladministration have access to the NI Public Services Ombudsman. The time limits for making a complaint to various statutory agencies are outlined in Appendix 1.
- 10.3 Staff who make a complaint in respect of alleged discrimination or harassment will be protected from victimisation. Acts of discrimination, victimisation or harassment perpetrated by a NIMDTA member of staff against any other member of staff will result in disciplinary action up to and including dismissal.

11 Agreement

- 11.1 This policy has been agreed by the HSC and NIMDTA and in so doing, the HSC and NIMDTA affirms full support for the principles of equality and diversity. NIMDTA is determined that everything possible will be done to ensure its full and effective implementation.
- 11.2 This policy has been drawn up in consultation with trade unions and staff organisations.
- 11.3 NIMDTA also recognises the support of trade unions for the principles of equality and diversity and their commitment to the content and implementation of this policy statement.

12 Review

- 12.1 In order to assess the operational effectiveness of the Equality, Diversity and Inclusion Policy a review will be undertaken at regular intervals and not later than three years following implementation. The HSC have consulted with external and internal groups and Trade Unions in the development of this Policy.

13 Equality and Human Rights Considerations

- 13.1 This policy has been screened for equality implications as required by Section 75 and Schedule 9 of the Northern Ireland Act 1998. Equality Commission guidance states that the purpose of screening is to identify

those policies which are likely to have a significant impact on equality of opportunity so that greatest resources can be devoted to these.

- 13.2 Similarly, this policy has been considered under the terms of the Human Rights Act 1998, and was deemed compatible with the European Convention Rights contained in the Act.

14 Alternative Formats

- 14.1 This document can be made available on request in alternative formats, e.g. plain English, easy read, Braille, audio formats, large print and in other languages to meet the needs of those who are not fluent in English.

15 Copyright

- 15.1 The supply of information under the Freedom of Information does not give the recipient or organisation that receives it the automatic right to re-use it in any way that would infringe copyright. This includes, for example, making multiple copies, publishing and issuing copies to the public. Permission to re-use the information must be obtained in advance from NIMDTA.

Appendix 1

Overview of Equality Legislation:

- Fair Employment and Treatment (NI) Order 1998 (as amended)
- Sex Discrimination (NI) Orders 1976 and 1988 (as amended)
- Equal Pay Act (NI) 1970 (as amended)
- Race Relations (NI) Order 1997 (as amended)
- Disability Discrimination Act 1995 (as amended)
- Employment Equality (Sexual Orientation) Regulations (NI) 2003
- Employment Equality (Age) Regulations (NI) 2006
- Section 75 Northern Ireland Act 1998
- Human Rights Act 1998
- Northern Ireland (Executive Formation) Act 2022

Definitions:

Direct Discrimination occurs where one person treats another person less favourably than other in the same or similar circumstances and the reason for that treatment is based on one of the statutory equality grounds.

Indirect Discrimination occurs where a provision, criterion or practice is applied which has the effect of putting people of a particular protected group at a disadvantage and which cannot be shown to be a proportionate means of meeting a legitimate aim.

Harassment is unwanted conduct based on one or more of the equality grounds, which adversely affects the dignity of women and men at work. It can include physical, verbal or non-verbal conduct.

Victimisation occurs where one person treats another person less favourably than another person is, or would be, treated because the person has exercised, or sought to exercise, his or her rights under the equality laws, or has assisted another person to do so.

Disability-related Discrimination occurs where, for a reason related to a disabled person's disability, a person treats the disabled person less favourably than he treats, or would treat, other persons to whom that reason does not apply, and he cannot show that the treatment in question is justified.

Failure to comply with the reasonable adjustment duty: disability discrimination in employment can also occur where an employer fails to comply with a duty to make reasonable adjustments in respect of either a job applicant or an employee with a disability. The reasonable adjustment duty is placed on an employer where a provision, criterion or practice is applied by the employer, or the physical features of the employer's premises places persons with disabilities at a substantial disadvantage compared to persons without disabilities.

Time limits for complaints: If your complaint is about an employment matter, you normally have 3 months from the date of the incident to register your complaint with the Office of the Industrial Tribunal and the Fair Employment Tribunal (OITFET). Please refer to the NI Direct or Equality Commission for NI websites for detailed guidance.

Appendix 2

Management and Trade Unions representing the employees of Health and Social Care jointly agree the following principles to support a harmonious working environment.

1. Declare that we shall work together to ensure that our workplaces are harmonious and inclusive, where individual differences are valued and respected in line with the commitments and values of the organisation.
2. Will promote equality of opportunity and fair participation in employment for all persons and ensure that every employee has the right to work free from intimidation or harassment on the grounds of religious belief, political opinion, racial group, age, marital status, sexual orientation, gender including gender identity and expression, disability and persons with or without dependants.
3. Declare and fully accept that discrimination or victimisation in employment is unlawful and unacceptable. We are committed to ensuring that any discrimination or victimisation carried out by employees will be vigorously opposed and addressed by both the employer and the trade unions.
4. Prohibit the display of flags, emblems, posters, graffiti or the circulation of any material or deliberate articulation of slogans or songs which are likely to give offence or cause apprehension to a particular group of employees.
5. Condemn intimidation or harassment by word or actions, and commit ourselves to take all reasonable steps to secure the protection of employees from intimidation or harassment in the workplace.
6. Oppose any attempt to prevent the employment, continued employment or career development of any person in contravention of the legislation in Northern Ireland which prohibits discrimination on the grounds of religious belief, political opinion, racial group, age, marital status, sexual orientation, gender including gender identity and expression, disability and persons with or without dependants.
7. Recognise(s) that employees who believe that they have suffered any form of discrimination, harassment or victimisation are entitled to raise the matter through the agreed procedures. We are committed to introducing, maintaining and, as appropriate, revising agreed procedures. All complaints of discrimination will be dealt with seriously, promptly and confidentially. Every effort will be made to ensure that employees who make complaints will not be victimised. Any complaint of victimisation will be dealt with seriously, promptly and confidentially.
8. Regard all breaches of this policy as misconduct, which could lead to disciplinary proceedings.



This Statement has been agreed between HSC senior management and the Trade Unions representing employees of NIMDTA in support of the Joint Declaration of Protection (for Dignity at Work and Inclusive Working Environment) launched by the NI Employment Relations Roundtable 2017. It recognises the moral and legal obligations placed on employers and trade unions by Northern Ireland employment equality legislation and aims to provide a good and harmonious work environment, which respects the dignity of employees in the workplace and provides an environment where individuals feel comfortable to work and where they do not feel threatened, intimidated, offended or unwelcome. The statement should be read in conjunction with the HSC Equality, Diversity and Inclusion Policy, Conflict, Bullying and Harassment Policy and Good Relations Statement.

This Statement will be prominently displayed throughout the workplace, drawn to the attention of all staff at induction and mandatory equality training and placed on the NIMDTA Intranet. This policy will be kept under review and NIMDTA will consult with trade union representatives on any changes which may be required in the future

Northern Ireland



POLICY DOCUMENT

Attendance at Work Policy

Policy Review Schedule

Date first Approved: November 2019
Last Approved by the Board: November 2019
Date of Next Review: As per regional schedule
Policy Owner: **Professional Support Manager**

Amendment Overview

Version	Date	Pages	Comments	Actioned
2019-1.0				

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ATTENDANCE AT WORK

DEALING WITH HEALTH AND SICKNESS ISSUES

1. Introduction and key aims

1.1 Introduction

The Northern Ireland Medical and Dental Training Agency (NIMDTA) recognises that the health and well-being of the workforce is critical to the effective functioning of the organisation. It is set in the context of the regional policy framework of best practice for managing attendance, compliance with employment legislation including the Disability Discrimination Act, the relevant terms and conditions handbooks.

In developing this policy NIMDTA recognises that it has a duty to support staff when they become ill, facilitating staff in so far as possible to safely return to work as early as they can. NIMDTA has a responsibility to actively encourage a culture of health and well-being within the workforce while equally expecting employees to take personal responsibility for their own health and well-being. NIMDTA recognises that staff sickness exacerbates service delivery problems and places additional pressure on other staff, as well as carrying a significant financial cost.

1.2 Purpose

The purpose of this policy is to set out how absence will be dealt with in a fair, consistent and proactive manner by providing clear and effective guidelines on the management and monitoring of absenteeism. This policy (and its associated procedure) will also focus on supporting managers and employees during periods of absence by providing a clear framework for progress. The Policy applies to all staff.

1.3 Key aims

The key aims of the policy are to

- Deal with absenteeism in a fair, consistent and proactive manner by providing clear and effective guidelines on the management and monitoring of absenteeism.
- Assist in the management of the cost to and the impact of absence on the organisation.
- Enable staff to return to work as soon as possible.
- Improve the health and well-being of all staff by facilitating and supporting initiatives, where appropriate, which enable staff to return to or remain in work.
- Clarify roles and responsibilities in relation to the management of attendance.
- Prevent and deal with instances of abuse of HSC Sick Pay provisions.

2. Roles and Responsibilities

All employees have a fundamental role to play in the management of attendance and it is expected that all staff will undertake their roles and responsibilities, in accordance with the Attendance at Work Policy.

2.1 Managers' Responsibilities

- 2.1.1 To manage absence in accordance with this policy by recording, monitoring and investigating the absence levels of all employees for whom she or he is responsible and by taking appropriate and timely action when required to ensure that all staff are aware of their obligations under the policy and the importance of good management attendance.
- 2.1.2 To respect the confidentiality of any information provided to them through the operation of this policy.
- 2.1.3 To ensure that all employees are aware of their obligations within the Attendance at Work policy including the correct notification procedures when reporting sick for work and in particular to whom they should report.
- 2.1.4 To maintain regular and effective contact with employees who are on sick leave. The frequency of which will depend upon the circumstances of the absence and normally agreed with the employee.
- 2.1.5 To maintain accurate absence records which includes timely recording of absence on the Human Resources, Payroll, Travel and Subsistence (HRPTS) system, conducting return to work interviews and processing the appropriate medical certification.
- 2.1.6 To seek specialist advice from Human Resources (HR) and Occupational Health (OH) when appropriate.
- 2.1.7 Arrange and participate in case management meetings and all other relevant meetings with OH and HR, the employee and the employee's representative when appropriate.
- 2.1.8 To facilitate and support employees when possible in relation to adjustments and rehabilitation programmes as recommended by OH and other medical and allied health professionals.
- 2.1.9 To encourage participation in internal Health Promotion initiatives in line with the health and well-being strategy.
- 2.1.10 To ensure completion of Incident Forms when an employee has suffered an injury or other condition associated with their employment.
- 2.1.11 Where necessary, initiate action in accordance with the Disciplinary or Capability procedures to deal with poor attendance and/or failure to comply with the Attendance at Work Policy.

2.1.12 To reassure staff with genuine medical conditions that where possible reasonable adjustments will be made to facilitate their ongoing employment.

Managers should note the importance of accurate and timely recording of sick absence and advising NIMDTA Employment Department of sick absences. This information will ensure employees are paid appropriately during their period of absence.

2.2 Employees' Responsibilities

2.2.1 To ensure regular attendance at work in accordance with their contractual obligations.

2.2.2 Notify their Line Manager of absence in accordance with notification procedures.

2.2.3 Agree a timetable for regular appropriate contact with their manager during the period of absence.

2.2.4 Ensure they are aware of and meet their obligations under the attendance at work policy (and associated procedure) and recognise the consequences of poor attendance at work.

2.2.5 Ensure that relevant sick certificates and medical reports are forwarded without delay to NIMDTA Employment Department for appropriate action, and that they cover the whole period of absence.

2.2.6 Comply with requests to attend Occupational Health Service on time unless for some exceptional reason they cannot attend. In those exceptional circumstances they must notify NIMDTA Employment Department who will re-schedule the appointment. Failure to attend Occupational Health may result salary being withheld and disciplinary proceedings may be initiated. Employees who have to attend Occupational Health outside of their normal work location may claim travel expenses at public transport rate only.

2.2.7 Participate, when requested in meetings relating to their absence and co-operate in the development of return to work and rehabilitation plans with managers, HR and trade union representatives as required.

2.2.8 Refrain from any activity (social or sporting) which may be prejudicial to recovery or be likely to bring into question the reason for continuing absence. There may be times when sporting activity/exercise is recommended by a G.P. as being beneficial to recovery. In these circumstances, advice from Human Resources and / or Occupational Health should be sought.

2.2.9 Not work elsewhere in paid or unpaid employment whilst on sick leave unless prior permission is received from NIMDTA Employment Department and their Manager. Employees who are found to be working elsewhere and have not

complied with the above requirements may be subject to disciplinary proceedings.

2.2.10 Understand that sick pay is for absence due to ill health and not for other purposes such as carrying out caring responsibilities which are covered by other policies.

2.2.11 On a strictly confidential basis to make their managers aware of any issue which may interfere with their normal attendance at work.

2.3 Role of NIMDTA Employment Department

2.3.1 Provide absence information on a regular basis and as required, to assist the management of attendance within NIMDTA.

2.3.2 Provide specialist advice and guidance to Managers on overall absence levels and specific complex cases.

2.3.3 Participate in case management meetings with Managers to review and progress complex absence cases.

2.3.4 Assist in the development of Rehabilitation Programmes and reasonable adjustments as recommended by Occupational Health Professionals for employees returning from long term sick leave.

2.3.5 Meet with Managers, staff and if requested, Trade Union Representatives relating to the procedures for ill health termination and/or ill health retirement.

2.3.6 Develop and deliver training sessions for Managers on all aspects of this policy.

2.3.7 To monitor the application of this policy on a regular basis.

2.4 Role of Occupational Health (OH)

OH Professionals will:

2.4.1 Assess employee health (the effects of) in terms of fitness for work considering the effects of work on health/health on work with the aim being to assist management and employees in (making plans to) facilitating / supporting a return to work.

2.4.2 Offer support and advice to employees reporting work related health and safety and well-being issues (affecting employees).

2.4.3 Provide advice to managers on employees fitness for work for those who have health or attendance issues which may be affecting attendance, performance

or behaviour in the workplace particularly for those staff covered by the Disability Discrimination legislation.

- 2.4.4 Provide reports to managers and NIMDTA Employment Department following the employee's appointment at OH.
- 2.4.5 Advise HR of cases that require their specialist involvement such as complex health and work situations, ill health termination, re-deployment or retirements.
- 2.4.6 Provide appropriate advice to employees regarding their health. This will include guidance for support options such as counselling; stress management and health education to employees as required.
- 2.4.7 Provide advice to management regarding workplace adjustments in sickness absence cases, rehabilitation, re-deployment or modification of hours due to other work place.
- 2.4.8 Provide health awareness sessions/health improvement training in accordance with the Service Level Agreement.
- 2.4.9 Participate in meetings with Managers, Human Resources, Employees and Trade Union Representatives as appropriate.

2.5 Role of Trade Union Representatives

- 2.5.1 Support the implementation of the policy and work with management, HR, Occupational Health and other Health Professionals that may be necessary when representing their members during the process.
- 2.5.2 Encourage employees to comply with the Attendance at Work Policy within NIMDTA.
- 2.5.3 Provide support to the employee encouraging compliance with any recommendations made to assist individuals to obtain the maximum benefits from the agreed arrangements.
- 2.5.4 Participate in case conferences and rehabilitation reviews at the request of the employee
- 2.5.5 Participate in initiatives and work in partnership with management to reduce absence levels within the organisation.

Review

This policy will be reviewed no later than two years from its implementation.



**PROCEDURE, GUIDANCE and TEMPLATES
FOR MANAGING ATTENDANCE**

**(to be read in conjunction with the
Attendance at Work Policy)**

Policy Review Schedule

Date first Approved: November 2019

Last Approved by the Board: November 2019

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Amendment Overview

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Introduction and Purpose

This procedure has been written to compliment the Attendance at Work Policy and provides a practical framework within which managers and employees can obtain guidance on the day to day management of attendance. This procedure document will provide advice on the issues such as certification, absence triggers, occupational health and ill health retirement, termination and redeployment.

1. Notification and Certification

Both managers and employees have a responsibility in the notification of absence.

1.1 Employees' Responsibilities

Employees must notify their line manager or appropriate designated officer as early as possible before the scheduled commencement of duty and no later than 9.30am on the first day of absence. Any employee working on an early shift must report as soon as possible before commencement and no later than 30 minutes after your expected start time.

Notification must be by telephone to the manager. An email should also be sent to NIMDTA Employment Department for payroll purposes.

Employees must indicate the reason for absence, the expected duration of the absence and whether or not a medical practitioner will be seen.

Employees should also indicate what tasks need to be completed in their absence.

Throughout the absence the employee must maintain regular contact with the Manager, the frequency of which should be agreed with the Manager at the outset of the absence, taking consideration of the circumstances of the sickness. It is not acceptable for employees to send certificates without regular verbal communication with their manager. Failure to contact the line manager will mean that the manager will make efforts to contact the employee either by telephone or in writing.

Failure to provide appropriate certification for absence may result in sick pay being withheld. Continued failure to maintain contact or respond to contact from the manager as agreed may result sick pay being withheld and disciplinary proceedings.

1.2 Managers' Responsibilities

Managers must ensure that all new and existing employees are familiar with their responsibilities in absence reporting, in particular, the person to whom they should report on the first day of absence.

Upon the employee's return to work, the return to work interview (Appendix C) should be completed should be returned to NIMDTA Employment Department.

1.3 Certification Procedure

Under the Occupational Sick Pay Scheme employees are required to submit the following certificates as appropriate to NIMDTA Employment Department:

- 1.3.1 1 to 3 calendar days - No certification is required
- 1.3.2 Up to 7 calendar days - A self-certificate form must be submitted by the employee within 7 calendar days of the 1st day of absence dated from the 1st day of absence.
- 1.3.3 8 calendar days or more - If an employee is off sick for more than 7 calendar days then they are required to submit a self-certificate and a statement of fitness for work (commonly known as a sick line) to cover their absence from day 8. If a statement of fitness for work is obtained from day 1 then a self-certificate will not be required.
- 1.3.4 In all situations the manager should discuss certification during initial contact and further agreed contact with the employee and must remind the employee of their obligation to provide appropriate certification throughout their absence.
- 1.3.5 If an employee has been admitted to hospital then a hospital certificate can be accepted from the 1st day of illness.
- 1.3.6 It should be noted that failure to provide appropriate certification within 7 calendar days of expiry of either a self-certificate or a statement of fitness for work may result in salary being withheld and it may also lead to disciplinary proceedings. In circumstances where there is a delay in forwarding the certificate, employees must communicate this to their manager at the earliest opportunity.
- 1.3.7 Managers should ensure that the original documentation is forwarded to NIMDTA Employment Department.
- 1.3.8 The email sent to the Payroll Shared Service Centre should include in the subject line the employee's name, staff number and organisation and the manager's contact details should be included in the body of the email.

1.3.9 A return to work interview form (Appendix C) should be completed after all periods of absence as detailed previously.

1.4 Statement of Fitness for Work

This document is provided by a General Practitioner (GP) and will advise if an employee is unfit for work or fit for work with reasonable adjustments.

Where the GP has recommended reasonable adjustments the line manager should;

- 1.4.1 Contact the employee to discuss, and where the adjustments are considered reasonable and can be accommodated, the line manager should make the necessary arrangements with the employee and agree a return to work date. A manager can request advice from OH in relation to adjustments.
- 1.4.2 In exceptional circumstances where the line manager cannot facilitate the adjustments, the manager should use the statement of fitness for work as stating the employee is not fit.
- 1.4.3 There may be occasions when an employee is able to return to work before the end of the period detailed on the statement of fitness for work. The employee should discuss this with their manager and OH if necessary.
- 1.4.4 Please note employees no longer require a signing off line.
- 1.4.5 There may be occasions when the opinion of OH and the GP will differ and the OH report may state that the employee is fit for work while the GP may provide a further statement of fitness for work stating that the employee is not fit to return to work. In these situations the manager should contact the employee immediately and discuss what may have changed since the employee attended OH and then subsequently attended their GP. The employee should be advised that the final advice will be taken from OH rather than the employees' GP and if there has been no change the employee will be expected to return to work on the date suggested by OH or on the Monday following the date of the report and will not be entitled to sick pay as the absence will no longer be related to sickness.
- 1.4.6 There may be occasions where an employee submits a statement of fitness for work certificate that contains a different reason for absence than what was originally received. At this point the manager should discuss the change in reason with the employee.

2. Management of Short Term Absence

Short term absence is a single period of absence lasting less than 20 days. The pattern is usually 1, 2 or 3 days at regular intervals. It can also manifest itself in excessive use of certification processes of more than 3 days which would fall below 20 days.

2.1 Triggers

The triggers for management action in respect of short term absence, in line with the Regional Attendance Framework, are as follows:

- 3 episodes of absence within a 12 months rolling period.
- 2 episodes of absence totalling 10 working days or 2 calendar weeks within a 12 month rolling period.
- 1 episode of 10 working days within a 12 month rolling period.

After all periods of absence a return to work interview must be completed (Appendix C) and forwarded to NIMDTA Employment Department by the manager so that the date of the return to work interview can be input into HRPTS. The purpose of the interview is to discuss the circumstances of the absence and to enable appropriate monitoring and action to be taken.

2.2 Courses of Action (Management Action)

Once a trigger point, as set out above, is reached the manager should consider the circumstances of the case and take action as appropriate. Management Action could include;

- 1) Formal meeting with the employee,
- 2) Referral to Occupational Health (OH),
- 3) Disciplinary action.

Account should be taken of the individual's circumstances and when a trigger point is reached discussions at the return to work interview along with the previous history/action will determine one of the following three courses of action to be taken:

- Mitigation
- Manage in context of medical condition
- Manage in context of no medical condition

2.3 Evidence of mitigation

Following a review of the circumstances of each case which may establish extenuating personal circumstances (previous history and/or job related factors) which may contribute to the absence level a decision may be taken

that a verbal warning under the disciplinary procedure may not be appropriate at this stage.

Particular care must be taken when dealing with staff who have a disability, caring responsibilities for people who have a disability or pregnancy related absences and advice from HR must be requested.

However, managers should in all circumstances reinforce the need for improvement in the level of attendance and discuss options including a reduction in hours (temporary or permanent) and different start and finishing times.

It is essential that the employee understands that it is expected that they will demonstrate and sustain an improvement in attendance.

If the employee is unable to sustain an improvement and the Manager is satisfied that circumstances of the case have been addressed and there are no health issues to explore consideration should be given to taking disciplinary action as detailed below.

2.4 Management action where there is evidence of a medical condition/ health issue

- 2.4.1 If there is a common reason for short term absence or where the employee indicates at the return to work interview that they have a medical condition which is contributing to their absence level a referral should be made to OH to determine if there is an underlying health problem (See Appendix F).
- 2.4.2 If it has been established by OH that periods of short term absence are caused by an underlying health condition managers should consider the information provided by OH and consider what appropriate adjustments could be made. In these circumstances managers should not attempt to reinterpret medical advice, but should seek advice relating to adjustments. These adjustments must be with a view to enabling the employee to stay in work.
- 2.4.3 Adjustments may include:
- Changes to the employee's working pattern;
 - Reduction in hours;
 - Changes to work tasks or work environment if possible;
 - Redeployment to a different job;
 - Reasonable adjustments in accordance with the disability discrimination legislation.
- 2.4.4 Such adjustments may be for a temporary period only and it is important to remind the employee that they are responsible for their own attendance and as such must contribute to finding solutions which will enable them to provide regular attendance.

- 2.4.5 Confirmation of a medical condition/illness does not preclude further action being taken and the employee should be advised that an improvement in attendance is expected. Any agreed adjustments should be confirmed to the employee in writing, outlining agreed time periods and the requirement for monitoring.
- 2.4.6 Should there continue to be an unacceptable level of short term absence, discussion at the return to work interview should include reference to previous meetings and action that has been taken to assist the employee.
- 2.4.7 Further advice should be sought from OH if appropriate and if there are no further adjustments that could reasonably be made the employee should be advised that consideration may have to be given to re-deployment or termination on the grounds of ill health.
- 2.4.8 Where there is no improvement in attendance but the reasons for absence are unrelated to the health issue, consideration may be given to further disciplinary actions which may result in the contract being terminated in accordance with relevant incapability or disciplinary procedure.

2.5 Management action where there is no underlying medical condition

- 2.5.1 If a manager is satisfied after discussion with the employee that the short term absences are not related and that there are no mitigating circumstances, underlying medical condition or a disability under the Disability Discrimination Act, then an employee should be advised during return to work interviews that a further period of absence may lead to an informal warning under the disciplinary procedure. This is to caution the employee that an improvement in attendance is expected and this should be recorded.
- 2.5.2 The employee should be provided with a copy of the attendance policy and procedure, and this should be recorded in the return to work interview documentation.
- 2.5.3 Should there be a further period of absence and after investigation of the circumstances at the return to work interview the manager should refer to the previous discussions and advise that an informal warning is now being considered. The employee should be issued with a letter inviting them to a separate meeting and given the opportunity to bring a representative in accordance with the Disciplinary Procedure (Appendix H)
- 2.5.4 At the meeting under the Disciplinary Procedure, the Manager should outline the absences to date and refer as appropriate to previous discussions at return to work interviews. The employee will be advised that an informal warning is being issued in accordance with the

Disciplinary Procedure and they are expected to demonstrate and sustain an improvement in their level of attendance.

- 2.5.5 The informal warning must be confirmed, in writing, to the employee advising of the right of appeal to the next line manager and that the warning will be active for a period of 6 months (Appendix K).
- 2.5.6 The employee should be advised that a further absence during this 6 month period may lead directly to a formal Disciplinary Hearing.
- 2.5.7 There may be cases where the informal warning has lapsed and the employee falls back into a pattern of poor attendance record. In these circumstances, where the informal warning has not had the desired effect on improvement to attendance, the manager may move to instigate formal disciplinary proceedings.

2.6 Formal Disciplinary Action where there is no underlying medical condition

Where there is no improvement in the level of attendance and there is sufficient evidence that informal action has been taken to address the level of absence it may be necessary to commence formal disciplinary proceedings. It should be noted that absenteeism is listed as misconduct.

Disciplinary action may also be appropriate where there is evidence of non-compliance with the policy and procedure, failure to provide appropriate certification, failure to report absent for work or misuse of sick pay provisions.

The Manager should ensure that the employee understands that formal disciplinary proceedings are being instigated and the case is being referred to NIMDTA Employment Department.

The Disciplinary Panel will be constituted in accordance with the Disciplinary Procedure. The Line Manager of the employee will present all the facts of the case and the employee will have the opportunity to present a response and raise any issues which they consider to be relevant. The employee will have the right to be accompanied in line with the disciplinary procedure.

3. Management of Long Term Absence

Long term absence is defined as continuous absence of 4 calendar weeks or more. It is important that the manager establishes the reason for absence and establishes a frequency and method of contact from the outset. The normal expectation would be that weekly or fortnightly contact is maintained throughout the period of illness depending upon the circumstances of the sickness.

Early interventions in a period of sickness absence which is likely to be long term are more effective than waiting for a 4 week indicator to trigger action. The management of long term absence may be assisted by the efficient medical management of the case in close co-operation (where appropriate) between OH Service and the GP. This may minimise time off and identify at an early stage the employee's capacity to return to work. In some circumstances it is appropriate to make an immediate referral. These include injury at work, musculoskeletal injury and absence following maternity leave. In dealing with instances of work related stress, the manager should meet with the employee to assess the reasons for stress and attempt to resolve the matter, and provide any support necessary prior to making an OH referral. Advice should be sought from HR where necessary.

4. Referring to Occupational Health (OH)

A manager should assess the reasons for absence and determine if a referral to OH is appropriate. If an employee has been hospitalised or is undergoing treatment it may be better to defer making the appointment to a more suitable time. The manager should seek to take advice from OH on specific conditions if necessary.

The manager should complete the management referral form (Appendix F) ensuring they complete all sections and detail all relevant background information. The manager should specify the questions they would like the OH nurse to address and the manager should ensure the questions are medical related. The questions should not be questions that the manager should ask the employee such as how the employee is feeling. A manager should always ask if adjustments need to be made. Appendix G provides guidance on the type of questions the manager should ask. Referral forms which do not contain relevant questions will be referred back to the manager for amendment.

The contents of the referral form including the questions that are being asked should be discussed with the employee before the form is sent to HR for the appointment to be made.

A manager should also consider a referral to OH even before a period of absence if they are concerned about an employee.

4.1 OH Report

Whilst at OH, the employee will be told the content of any report to management and the likely consequences of the report. They will be offered the opportunity to see the written report before it is sent to their manager and may choose to withdraw their consent at any stage to forward the report. Employees should, where possible, take advice from their representative if they are considering withdrawing consent as managers will then have no alternative but to take action without medical guidance and based on the information they have.

If on receipt of a report anything is unclear, managers should ring, email or write to the OH professional who provided the report to seek clarification.

4.2 Failure to attend OH

If an employee is unable to attend OH they must contact their Line Manager in good time to provide a reason for this. If no reasonable explanation is given, the manager should advise the employee of their contractual obligation to attend, and link with NIMDTA Employment Department to arrange for a new appointment.

Failure to attend again may lead to disciplinary action being taken.

Where an employee fails to attend OH and fails to make contact in relation to their non-attendance, the Manager should immediately make contact with the employee to ascertain the reasons for this. Employees must be reminded of their contractual obligations and a new appointment date provided. The employee should be advised in writing that disciplinary action will be considered and salary withheld if this is repeated. Appendix H provides a template letter.

Employees required to attend OH may be able to claim travel expenses at public transport rate.

4.3 Self-Referrals

Employees can 'self-refer' to the OH Service at any time for advice about their own health at work. Self-referral appointments are confidential, however if a self-referral is made and the Manager also refers the employee, both appointments will be linked and the employee asked to give consent to OH to provide a report to management.

4.4 Maintaining Contact during Periods of Absence

It is an employee's responsibility to maintain regular contact with their line manager while they are absent from work. The frequency of contact should be agreed at the outset of the absence and if the absence is long term the manager should arrange to meet with the employee every 6 to 8 weeks. The purpose of the meeting is to discuss the employee's current state of health, the OH report, the return to work date and any updates from the workplace. Appendix I provides a template for the meetings. The frequency of contact meetings will be determined by the reason for absence and the duration of the absence. In certain circumstances, the employee may be more comfortable maintaining contact with a more senior manager. In these circumstances, this should be agreed at the outset of the absence period.

4.5 Phased Return Recommended by Occupational Health

In exceptional circumstances, especially where there has been a lengthy period of absence, OH may recommend a phased return to work. An

employee returning from long term sickness absence on a rehabilitation programme with a phased return, recommended by OH (and agreed with management) will receive no loss of normal pay during the rehabilitation period.

The employee will return to work on an agreed phased rehabilitation programme for a period not exceeding six weeks. The phased return will generally include reduced working hours and may also include some adjustment to tasks. This should be clarified and agreed with OH and the member of staff prior to the return to work. It should also be clear how working hours will increase throughout the phased return so that by the end of the agreed period the employee is ready to commence normal working (this should be agreed between the Manager and the employee). During the phased return period the employee will receive normal pay. It is important to note that a phased return may be recommended for a period less than 6 weeks.

It is important that during the phased return that the manager monitors the arrangement. Before the end of the phased return the Manager should meet with the employee to review progress and confirm the return to normal working arrangements.

If it is clear that the employee requires more time, this should be discussed and a further time limited period agreed. It should be made clear to the employee that this further period does not attract full pay (if it is beyond 6 weeks) and will be paid either at the reduced hours or using accrued annual leave.

The employee should be reminded that it is expected that there will be a return to full duties and working hours. If at the end of the agreed extension the employee feels that they would like to continue working reduced hours, the Manager must decide if this can be granted on a permanent basis and should confirm any decision in writing. Where an employee indicates that they cannot carry out the full range of duties associated with their post, the Manager should contact OH for further guidance.

4.6 Request for Phased Return

Where a phased return has not been recommended by OH but has been requested by the employee or on the fit note issued by a GP, consideration should be given to granting this request as it may enable the employee to return to work earlier.

Any adjustments to working patterns, hours or alternative duties, should be discussed, agreed and confirmed in writing. In cases, where a phased return to work was not recommended by OH, yet agreed between the Manager and employee at local level, staff can use accrued annual leave to reduce hours or should be paid according to the reduced hours.

Managers should also consider if re-training is required and should be guided by the employee and their rate of progress when they return to work. It should be noted that training includes “on the job” training and will not always mean formal training programmes.

It may be useful to enable the employee to shadow / spend time with colleagues rather than expect them to commence work immediately.

The extent and length of reintegration will depend upon the needs of the employee balanced with the requirements of the service.

In all cases Managers are responsible for monitoring arrangements and again employees should be reminded that this is for a temporary period only and it is expected that they will return to normal working, subject to reasonable adjustments.

5. Other Related Issues

In situations where there is a combination of both long and short term absence the Manager must explore the reasons for both at the return to work interview before taking action. If the short term absences are unrelated to a health issue and the employee has reached a trigger point it may be necessary to proceed with action under the disciplinary procedure.

5.1 Failure to Attend Meetings

It should be noted that at any stage of this process if an employee is unable to attend a meeting, contact should be made with their manager advising of the reason for non-attendance in advance of the meeting taking place. Where failure to attend is due to circumstances outside of the employee's control then another date will be offered. Where there is no reason for non-attendance or evidence of repeated cancellation the employee should be aware that decisions may be made in their absence and disciplinary action may be taken.

5.2 Having Surgery Outside the UK/EU

Employees who are travelling overseas for surgery may be entitled to Occupational Sick Pay. They should discuss the medical requirement for surgery with their Manager to ensure that arrangements for communication are agreed and that they provide appropriate medical certification throughout their period of absence. Managers should seek advice from HR before the employee commences sick leave.

5.3 Sickness and Annual Leave

Where an employee has booked a period of annual leave and either becomes sick before or during a period of annual leave they must immediately report sick for work in the normal way so that the annual leave can be returned to them where appropriate. If the absence is for 8 calendar days or more, the employee will require a statement of fitness for work.

If an employee is on sick leave and has been advised by their medical advisor that a holiday would be beneficial to their recuperation then the employee must make contact with their manager to discuss their intention in consideration of the nature of their absence, prior to travel.

Employees continue to accrue annual leave whilst on sick leave. Employees, who return to work with accrued annual leave, should discuss this with their Manager so that the leave can be used appropriately. This may include returning on a part time basis due to the accrued leave. Where an employee remains on sick leave and the new leave year

commences the employee can carry over a maximum of 28 days (pro rata for part time staff)

Employees will not be entitled to an additional day off if sick on a public holiday.

5.4 Sickness as a Result of Sports Injury/Secondary Employment

An employee should seek to refrain from any secondary employment or activities that may affect their capacity to provide regular and effective employment. Where an absence has been attributable to a sports injury or secondary employment managers should remind employees of this at the earliest opportunity. Where there is evidence of recurring frequencies or excessive amounts of absence due to either of the above, this may affect the employee's entitlement to Occupational Sick Pay in the future. Statutory sick pay will continue to be paid.

5.5 Sickness during Pregnancy

Periods of sickness during pregnancy which are directly related to that pregnancy should not be counted towards the trigger points for managing short term absence. The absence should be recorded as normal and the Manager should carry out a return to work interview to discuss and explore options that will support the employee. It may be necessary to temporarily adjust the employees work tasks or work environment for an agreed period of time to enable the employee to remain in work. This should be progressed following a risk assessment for pregnant employees.

5.6 Going Home Sick

Where an employee reports for work but then has to leave due to sickness it should be recorded as 'gone home sick' on HRPTS. If this happens for a third occasion within a 12 month rolling period this should be recorded as a sick day on HRPTS, and regarded as such when monitoring absence towards the trigger for management action. The first two episodes should remain recorded as 'gone home sick'.

5.7 New Employees and Probationary Period

Employees should be aware that their absence record is considered during their probationary period, and the manager can take action if this is not satisfactory, including termination of the contract of employment. The probationary period of the contract of employment should be used constructively to assess, amongst other things, the employee's attendance record. If attendance is poor or gives cause for concern during the probationary period, managers should make the employee aware of that concern during the probationary period and give them an opportunity to improve at the earliest opportunity. Employees should also be advised of the consequences of absence and that it may result in the termination of their contract of employment.

During the probationary period, the following trigger points will apply and a formal meeting will be held and consideration given to the appropriate disciplinary action.

- Following a single episode which lasted for 5 working days (or one calendar week pro rata) or
- Following 2 episodes of absence.

An extension of the probationary period would only be in exceptional circumstances. Such exceptional circumstances might be hospitalisation or bereavement. The extension of the probationary period would be for the sole purpose of allowing the manager the opportunity to properly assess the individual's performance, which due to the length of the employee's absence, they have not been in a position to do during the six-month period.

If managers are considering the extension of the probationary period solely on the basis of the employee's attendance record, they should always seek advice from NIMDTA Employment Department before doing so.

In other cases where the absence has been addressed with the employee during their probationary period and their attendance has not improved or been maintained at a satisfactory level, the disciplinary procedure should be initiated, which may ultimately lead to termination of the contract of employment.

6. Disability Discrimination Act (DDA) 1995

In accordance with discrimination legislation NIMDTA has a legal requirement to make reasonable adjustments which would enable an employee with a disability to remain in work and provide reliable and effective service. Serious consideration must be given to making temporary or permanent adjustments to working practices or premises and in all cases advice and guidance should be sought from the OH and HR. It should be noted that consideration of reasonable adjustments should also be made in relation to employees who are not covered by disability legislation.

OH cannot confirm whether or not an employee has a condition which falls within the statutory definition of disability. Equally the employer and/or the employee may not be able to determine this and in these cases it is important that all parties consider the definition and establish whether it is likely that the employee would meet the definition. In order to avoid discrimination, managers are encouraged not to attempt to make a judgement as to whether a particular individual falls within the statutory definition of disability, but to instead focus on meeting the requirements of each employee on a case by case basis.

The Act defines a disabled person as someone who has a physical or mental impairment that has a substantial and long-term adverse effect on a person's ability to carry out normal day-to-day activities.

Examples of reasonable adjustments may include:-

- Allowing absence during working hours for assessment or treatment.
- Allocation of some duties to others.
- Making adjustments to premises.
- Acquiring or modifying equipment.
- Change of hours or work patterns and availing of work-life balance policies.

Adjustments made for the purposes of retaining staff will require managers to make a judgement as to whether or not the adjustment is reasonable. Factors which may have some bearing can include:

- Disruption to service and other colleagues.
- How effective the adjustments are in preventing the disadvantage.
- How practical it is.
- Its financial and other costs.

6.1 Managing Absence

Periods of sickness which are directly related to a disability should be recorded as such on HRPTS in the free form notes section. Whilst it is not appropriate to deal with absence related to a disability under the

Disciplinary Procedure, the Manager should ensure that levels of absence are addressed directly with the employee at the return to work interview and that the employee is aware of their responsibility to contribute to finding solutions which will enable them to provide regular service.

Where the employee would have reached a trigger point in respect of their level of short term absence (or before this if absences can be prevented) action must be taken. The Manager should discuss and explore options with the employee that will support the employee and enable them to provide regular and effective service. It may be necessary to adjust the employees work tasks or work environment and advice should be sought from OH in relation to any proposed adjustments and whether the adjustment would sufficiently support the employee. This should be confirmed to the employee in writing and again the employee reminded that it is expected that they demonstrate and sustain an improvement in attendance.

Where adjustments have been made and where there is evidence that there are no further adjustments which could be reasonably made and the employee remains unable to provide regular and effective service, consideration may be given to termination on the grounds of ill health or retirement due to ill-health (section 11). Advice should be sought from HR in these circumstances.

7. Redeployment on Health Grounds

- 7.1** Where an employee is not able to return to their post due to health reasons, OH will consider and make recommendations on whether the employee should be considered for redeployment. This may be on a permanent or temporary basis depending on the circumstances of the case.
- 7.2** Where alternative employment is being sought for an employee who is found unable to return to their post as a result of health-related problems, this search will take place during a time limited period of no longer than 8 weeks from the point when it was agreed that the search should begin. Consideration for redeployment is limited to vacant posts which OH deem suitable on health grounds. The employee must meet the basic criteria or have equivalent experience to be considered for redeployment for the vacancy. It is expected the employee will show flexibility in the posts being considered. In the first instance, managers should explore any potential vacancies or opportunities (eg covering of sick leave, maternity leave or project) within their own team/department and directorate.
- 7.3** It is the responsibility of all Managers to support the redeployment process by giving due consideration to redeployment cases presented to them.
- 7.4** If a vacancy is identified and the employee meets the criteria for the post and is deemed fit for the post by OH or the post meets OH recommendations, the employee will be allocated to the vacant post. If the employee refuses to consider the post on offer or fails to report for duty in the allocated/redeployed post the manager of the previous post should initiate a discussion with HR about next steps.
- 7.5** Alternative employment at the same grade and hours cannot be guaranteed and protection of pay will not apply. Payment will be made at the appropriate grade for the new role. If the employee states after starting the post that they do not like the post, the manager should initiate a discussion with HR.
- 7.6** Where employees have been redeployed the suitability of the redeployment must be formally reviewed after 4 weeks. The purpose of the 4 week review period is to enable both the employee and the new manager to assess the suitability of the redeployment and the employee's capability to complete the duties of the post.
- 7.7** Whilst redeployment will not be overturned on the basis of the employee not liking the new post, there may be occasions when redeployment is unsuccessful. In these cases advice should be sought from OH and a decision on the way to progress the case will be taken.

7.8 NIMDTA will ensure every opportunity is made to redeploy staff where necessary. However, NIMDTA may not always be able to facilitate redeployment. If this is the case, consideration will be given to termination of the contract of employment on the grounds of ill-health or retirement on the health grounds.

8. Ill Health Retirement and Ill Health Termination / Redeployment Process

For information, managers and employees should note that ill health retirement may be applicable where an employee contributes to the HSC Pension Scheme. Ill health termination will not apply to those who do not contribute to the HSC Pension Scheme, or are over the normal retirement age.

8.1 Ill Health Termination Procedure

Termination of the contract of employment should only be considered if absence has become unsustainable and there is evidence from OH that a return to work within the organisation cannot be accommodated due to ill health (i.e. permanently unfit for work or unlikely to make a recovery within the foreseeable future).

Ill health termination will be applicable if the employee is over normal retirement age (in relation to their membership of the HSC Pension Scheme), or doesn't contribute to the pension scheme. If neither of these applies, the employee may apply for ill health retirement.

It should be noted that a process for ill health termination can commence before occupational sick pay is exhausted and that there is no automatic entitlement to exhaustion of sick pay before a contract can be terminated.

Before proceeding with an ill health termination the following should be in place:

- An up to date opinion from OH that an employee is permanently unfit for work;
- Evidence of engagement in the review process i.e. review meetings;
- Consider if the employee has been unsuccessful with an application for ill health retirement. In these circumstances a termination is not automatic, and before a termination is considered, reasonable adjustments and redeployment should be considered (see flow chart).

8.2 Final Review Meeting

The final review meeting should take place within 2 weeks of the OH report becoming available. If it is satisfied that the employee will remain unfit for work and there is no further action which can be taken (i.e. adjustments to current role or redeployment), it is appropriate for termination to be considered.

The review meeting should include the manager, employee, union representative or colleague (if applicable) and a representative of NIMDTA Employment Department. The final review process should involve the following:

Step 1

Invite the employee to a meeting advising them by letter that the organisation is contemplating the termination of their contract of employment on ill health grounds.

Step 2

Hold the meeting and consider all evidence provided, including any new evidence. If there is agreement by the employee that the only option available is termination of the contract, a decision should then be taken to terminate employment following advice from the HR representative.

In consideration of statutory obligations, the decision to terminate the contract of employment must be communicated to the employee in writing within one week of the meeting providing a right of appeal to the decision.

Step 3

Provide the right of appeal to the decision, as soon as reasonably practicable.

8.3 Formal and Independent Hearing and Management Presentation

There may be times when the outcome of the final review meeting is disputed by the employee or their representative. In these circumstances, the HR representative should arrange a formal, independent hearing. The hearing will consist of a presenting officer (this should be the manager who was involved in the final review meeting) who will present the facts of the case, and right to Trade Union representation.

The panel will be constituted to make a decision on termination of the contract of employment on behalf of the organisation, and should consist of one appropriate officer from within the department and one from outside, where practicable. The employee, if they are in attendance, may respond to the detail of the case presented, assisted by their trade union representative (if applicable). A decision will be taken by the panel based on the evidence submitted.

8.4 Appeal

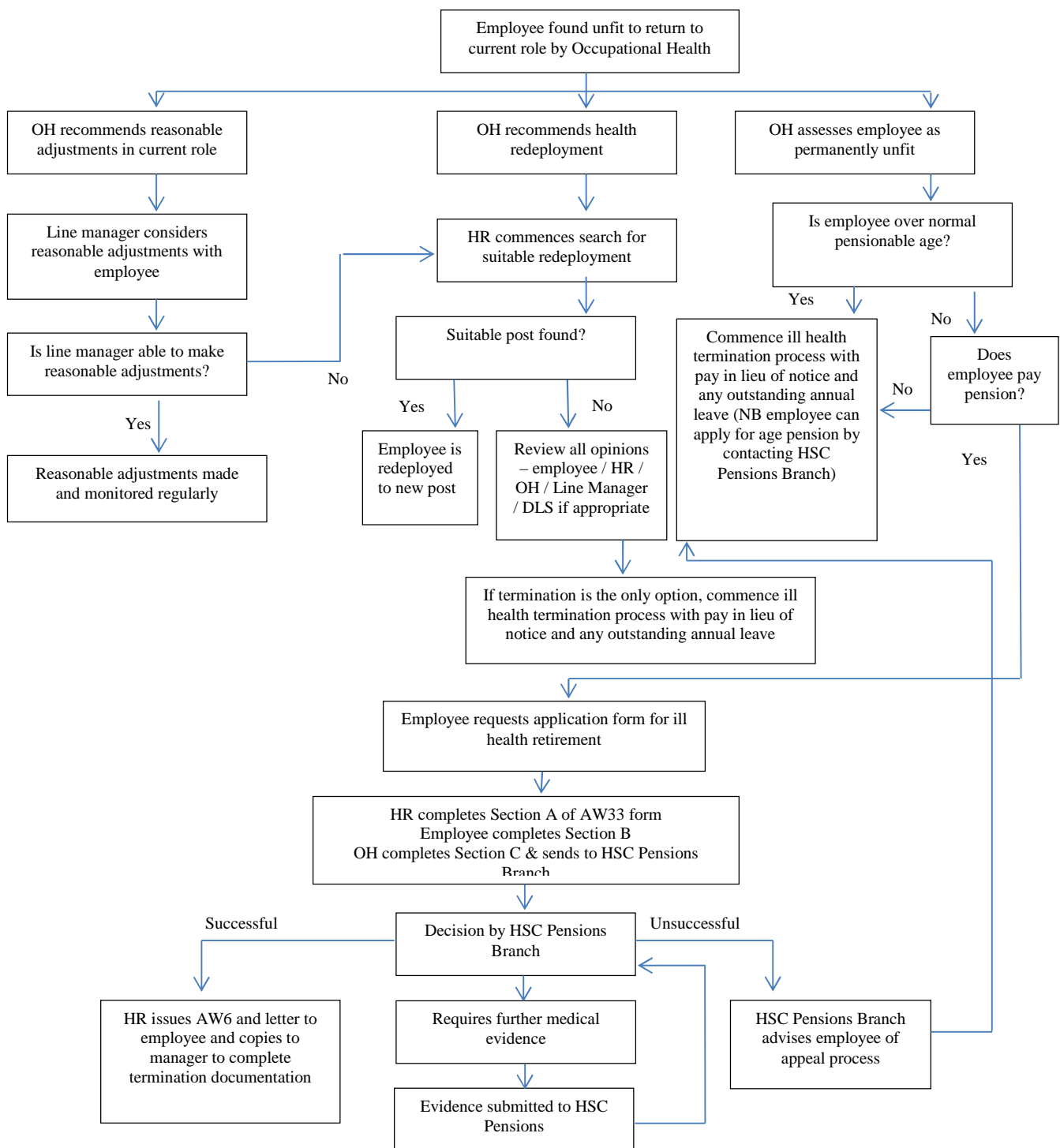
The decision to terminate will be communicated to the employee offering the right to appeal (within 7 days of receipt of the letter confirming termination).

If the decision to terminate the contract is upheld, the dismissal will be effective from the date of the hearing. Notice pay will be paid in line with the contractual position. This will be communicated to the employee in writing. If the employee is over 60 and contributes to the HSC Pension Scheme, details should be provided on how the employee can claim their pension benefits.

If the decision is taken to overturn the original decision to terminate, the employee will be reinstated onto the payroll from the date of termination. Discussion should then commence on where the employee should be placed by considering OH advice on adjustments or redeployment.

This procedure is supported by the attached flowchart, checklist and regional best practice guidelines

III Health Redeployment / Retirement / Termination Process



Ill Health Termination Checklist

The purpose of this checklist is to ensure all necessary steps have been taken prior to considering ill health termination:

Is the employee a member of the HSC Pension Scheme?	
HRPTS Sickness print contained on file?	
Evidence on file of all absence related meetings and correspondence with employee?	

Summary of Occupational Health Report: (Ensure all relevant Occupational Health reports have been reviewed and are available on file)	
Ill health retirement details: (Ensure copy of application form and relevant correspondence is on file)	
Details of any rehabilitation options / adjustments:	
Details of any redeployment options:	
Review Meeting – to explain employment at risk	
Reason for termination:	

Decision letter issued to employee outlining reason for termination and appeal process	<input checked="" type="checkbox"/>
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8.5 Ill Health Terminations - Best Practice Principles

- 8.5.1 Ensure the staff member is fully engaged and consulted with throughout the course of their absence by:
- 8.5.2 Holding regular and early meetings with the staff member in accordance with the Attendance at Work Policy.
- 8.5.3 Explaining the potential options available and the implications for the staff member ensuring they are alerted in advance of the potential termination of the contract of employment if there is further absence.
- 8.5.4 Ensure there is an up to date OH opinion which has been discussed with both the staff member and line management prior to a decision being taken regarding termination of contract.
- 8.5.5 Consider all alternatives and / or adjustments in conjunction with the employee to enable them to remain in employment, including all 'reasonable adjustments' and redeployment options taking cognisance of all relevant legislation such as DDA, Health and Safety, New and Expectant mothers. This should include organisation-wide redeployment searches in all suitable posts. Staff member to be advised that pay protection does not apply for health redeployments.
- 8.5.6 Consider the impact of the absence on the delivery of service and other staff members.
- 8.5.7 If termination is the only option, review of all actions and opinions sought to ensure all courses of action have been exhausted and ensure the three step statutory dismissal procedure is adhered to. In certain cases, advice may be required from DLS. Ensure staff member is advised that there is no entitlement to exhaust sick pay before termination stage commences.
- 8.5.8 Invite the staff member to a meeting advising them by letter that the organisation is contemplating the termination of their contract of employment on ill health grounds.
- 8.5.9 Hold the meeting and consider all evidence provided, including any new evidence.
- 8.5.10 Communicate the decision to the staff member by letter.
- 8.5.11 Provide the right of appeal to the decision, as soon as reasonably practicable.
- 8.5.12 Provide right of representation throughout the process.

8.5.13 Ensure the entire process and all communications with the staff member and all others involved are fully documented.

8.6 Ill Health Retirement – Best Practice Principles

8.6.1 Applications for ill health retirement can be made by employees who are members of the HSC Pension Scheme. Applications are made on a voluntary basis and cannot be processed against the wishes of the employee.

8.6.2 HR should discuss the option of ill health retirement and seek any information regarding benefits when OH indicate that an employee may not be able to return to work.

8.6.3 If OH declares that an employee is unfit to continue work and the employee is a member of HSC Pensions Scheme, the employee should be advised of the option to make an application for ill health retirement on form AW33. This should be the case even if sick pay allowance has not expired.

8.6.4 Ill health applications should be made at the earliest opportunity (at least 3 months before a potential retirement date) to ensure that the employee's sick pay does not expire before their pension is available.

8.6.5 If the employee does not wish to make an application for ill health retirement or does not pay superannuation, then the ill health termination process outlined above should be followed.

8.6.6 Where a member of staff becomes terminally ill and medical advice is available that they have a reduced life expectancy which on the balance of probabilities is less than 12 months, then they will be allowed to commute their pension for a one off lump sum.

8.6.7 Applications for ill health retirement may be progressed concurrently with the ill health termination process.

8.6.8 Where an application for ill health retirement is unsuccessful, HR and the line manager should meet with the employee and re-review all available options in line with OH guidance.

8.6.9 Ensure the entire process and all communications with the staff member and all others involved are fully documented.

Review

This policy will be regularly reviewed and updated to ensure it effectiveness.

Appendix A

Please double-click on the link/image below and select the Adobe Reader to view document.

How to create and edit sick leave

Appendix B

Attendance Management Checklist for Managers

Key Checks	Yes √	No x	N/A	Comment
Has the sickness absence been accurately recorded on HRPTS?				
Has the relevant certification been received and stored locally by the manager?				
Has an agreed format & frequency of contact been agreed with the employee?				
Has the record of communication with the employee during their absence been retained in the employee file?				
Has the employee been referred to OH?				
Has the OH report been received? Has the manager taken appropriate action re any OH recommendations?				
Has HR advice been sought re absence? To be added to case management meeting with HR Business Link.				
Has the return to work interview been conducted for every period of absence? Has appropriate action been taken? Has the RTW interview date been added to HRPTS?				
When the employee returns to work from sick leave, ensure period of absence on HRPTS is accurate.				
Has HR been involved re repeated causal absence with no underlying health condition?				

Appendix C

Northern Ireland Medical and Dental Training Agency

RETURN TO WORK INTERVIEW REPORT FORM

This form must be completed immediately on return to work

NAME: _____ **DEPARTMENT:** _____

STAFF NUMBER: _____ **GRADE:** _____

1st Day of return to work: _____ Nature of Absence: _____

Duration of absence: From _____ to _____

Working days _____

Was absence work related: YES NO

If Yes, How?

	Y	N	N/A
Notification process followed:			
Certification process followed:			
Doctor Consulted:			
Occupational Health Appointments kept:			
Absence Record shared with employee:			
Counselling appropriate:			
Discipline appropriate:			
Is a pattern emerging:			
Is Occupational Health referral appropriate:			

Management referral / Self-referral?

Comments: (including problems identified, action to be taken, re-interview arrangements)

Supervisor/Line Manager's Signature: _____

Date: _____

Employee's Signature: _____

Date: _____

Appendix D

CARRYING OUT A RETURN TO WORK INTERVIEW

Purpose

A return to work interview is one of the most important tools in reducing and controlling both long and short term absence from work.

The purpose of the return to work interview is:

- To make the employee feel welcome and valued upon return.
- To ensure that the employee is really fit to return.
- To discuss the cause of the absence.
- To address any problem that may be causing or contributing to the absence.
- To discuss advice/recommendations from OH where appropriate.
- To improve attendance.
- To update the employee on work issues.

Environment

The return to work interview often involves discussion of a sensitive and confidential nature. To ensure the interview is conducive and can facilitate such discussions Managers should:-

- Hold the interview in private and respect the confidentiality of issues discussed.
- Create an atmosphere of trust and support.
- Explain the purpose of the interview

A return to work interview should be carried out on the same day that the employee returns and as early as possible so that discussions and clarification on areas such as adjustments, phased return, reporting procedures or attendance levels can take place. Also, so that the employee can be updated on any relevant and important work related issues. Where a Manager is unable to carry out the return to work interview on the day of return the employee should be advised of this and arrangements made for the interview to take place within 2 days of the return date.

Preparation

In the majority of cases the return to work interview will be short involving a brief discussion about the absence and the reason for absence. However there may be occasions when a more detailed interview will be necessary where for example a trigger point has been reached, or where an employee is returning after a long period of sick leave or where there are OH recommendations to discuss.

Before beginning an interview, the Manager must **prepare** so that all aspects of the case can be discussed in full. It is important that all background information has been gathered including previous history, reasons for absence, patterns, reference to previous discussions/warnings where appropriate, OH opinion, personal circumstances etc.

It is also recommended that reference is made to the Attendance at Work Policy before and during the interview for guidance in relation to managing the case.

Structure

Welcome

Absence

Responsibility

Move on

The Welcome phase

An employee may have been absent from work for a long time or may have gone through a particularly difficult period in their life. As a Manager it is vital that you welcome the employee back to work and at the outset note their absence and the impact this may have had on them.

The Absence phase

This is the core of the interview. This is where you must discuss the recent period of absence including reference to previous absences where necessary. You should refer to the Attendance at Work Policy for guidance in the management of the short or long term absence.

On occasions the employee may present you with information relating to their personal circumstances that you may want to consider before initiating more formal action. If you consider the information to be mitigating then you must advise the employee that formal action will not be taken but that an improvement in attendance is still required. If the employee refers to issues caused by, or exacerbated by, work then you should be prepared to discuss it and help solve it. Here are some guidelines for the absence phase of the interview:

- Ascertain why the employee was absent and where appropriate explore what treatment if any they have taken/are undertaking.
- Place the absence in the context of any previous absences and, where appropriate, seek an explanation for any apparent patterns or trends.
- Be sensitive where personal problems and illnesses are being discussed and refer to the services of OH where appropriate or to recommendations made.

- Ask for further information/evidence if you are unclear about the reasons for absence. If you do have facts that appear to contradict the employee's statement, discuss these and give the employee an opportunity to explain.
- Offer and discuss solutions that will enable reliable and effective service or advise the employee that you will seek further advice.
- If an employee has a problem that is going to cause persistent absence, you must refer to the Attendance at Work policy and specifically to the section on managing short and long term absences. Any action taken should be done in accordance with the policy.

The Responsibility phase

Although the absence phase is the core of the interview, the responsibility phase is the part that has the greatest influence on improving attendance.

The responsibility phase is not always necessary or appropriate. Its purpose is to manage absence and to improve attendance in the future. If the absence is unlikely to recur, then you may well decide that a responsibility phase serves no purpose and to move directly to the final phase.

However where there is concern about the ability to provide regular service in the future or where the employee has a high level of absence, you may want to advise them that they must accept responsibility for their attendance and contribute to finding solutions that will enable them to provide regular service.

Move on

It is very important to leave the meeting on a positive note where all parties are clear about what was discussed and agreed. Express confidence in the employee's ability to attend in future and then move on to brief the employee on the events that occurred during their absence and what is now expected of them in terms of work.

Conclusion

The purpose of the return to work interview is to manage absence effectively and to support the employee to remain in work and provide regular and effective service. Most interviews will be straightforward and short however there may be occasions when the interview is difficult both for the Manager and the employee. In all cases the return to work interview should be used positively to manage absence effectively and the employee should leave the interview clear about what has been discussed and the way forward.

Appendix E

NAME

DATE

Dear XX,

RE: Conflict between the opinion of General Practitioner (GP) and Occupational Health (OH)

I refer to our meeting/telephone conversation on XX where I advised you that OH have confirmed that you were fit to return to work, however you have submitted a further statement of fitness for work certificate from your GP. In line with the Attendance at Work policy and procedure, Northern Ireland Medical and Dental Training Agency (NIMDTA) will consider the OH opinion to be the final opinion, therefore if you do not return to work by XX your salary will be withheld and disciplinary proceedings may be instigated.

I have attached/enclosed a copy of the Attendance at Work policy and procedure and the Disciplinary procedure for your information.

Yours sincerely

Line manager

Appendix F

MANAGEMENT REQUEST FOR ADVICE FROM THE OCCUPATIONAL HEALTH SERVICE

Please complete **all** sections to avoid delay in being offered an appointment with an Occupational Health Professional.

Completed forms should be typed and sent by email to BSO.humanresources@hscni.net

Please note that incomplete forms will be returned

1. EMPLOYEE'S PERSONAL DETAILS

Surname:		Maiden Name:	
Circle as appropriate:	PROF/DR/MR/MRS/MISS/MS/OTHER		
Forename:		D.O.B.	

Job Title:		Weekly Hours of work:	
Department:		Superannuable:	YES / NO
Work Address/Location:			

Home Address:			
Tel No:		Mobile No:	
Employee's email			

Does this employee have any other job in NIMDTA or elsewhere in the HSC?	YES / NO
Details:	
Commenced employment on:	National Insurance No:

2. REASON FOR REFERRAL

Date sick leave commenced (if currently off work)		
Currently Off:	<input type="checkbox"/>	
Returned to Work:	<input type="checkbox"/>	Return date:
Not off work:	<input type="checkbox"/>	
Please give details of nature of illness/absence:		
Does the member of staff attribute the illness/absence to an accident/incident at work?		YES / NO

3. SUPPORTING INFORMATION (Background, discussions with employee, identified work issues) – this information is vital:

<p>Please provide background information, including any questions you would like the Occupational Health Professional to answer (please note if you do not include background information <u>and</u> questions, the referral will be returned to you for completion) – continue on a separate page if necessary:</p>
Specific questions you would like answered:

5. PREVIOUS REFERRALS

Has this person been referred to Occupational Health previously?	YES / NO
If Yes , please specify the number of occasions:	
Name of Occupational Health Professional(s):	

Please specify recommendations which were made by the Occupational Health professional in previous reports or adjustments which you as Line Manager have already put in place:	
Have these recommendations been actioned?	YES / NO
Please give details (including reasons why recommendations have not been actioned):	

6. CONFIRMATION OF THE EMPLOYER'S AWARENESS OF REFERRAL TO THE OCCUPATIONAL HEALTH SERVICE

I confirm that the <u>contents of this form</u> have been discussed with the employee, including the background information and questions which have been asked.		<input type="checkbox"/>	
I recognise that NIMDTA will be responsible for the fee for any G.P./ Specialist reports requested by an Occupational Health professional.		<input type="checkbox"/>	
Manager's Name:			
Manager's Work Location/full postal address:			
Job Title:		Service Group:	
Manager's Contact Tel. No:			
Manager's Email:			
Report to be sent to:			

Signed:		Date:	

OFFICE USE ONLY

Date referral form received by HR:	
---	--

Appointment to be made with:	
Date of appointment:	
Date appointment booked:	
Date appointment sent:	

Appointment sent by:	Letter/Phone/email
Appointment changed by:	OHD / Client / Manager

Date of new appointment:	
---------------------------------	--

Appendix G

Guidance on Questions for Occupational Health

How will an Occupational Health report help the manager?

Reports will usually focus on addressing the specific questions that have been asked in the referral. The following is an example of questions that OH can address for you:

1. What is the cause of the individual's absence?
2. What is preventing the individual returning to work?
3. Is there an underlying medical condition?
4. Is the employee fit to undertake their current role/duties of the post?
5. What (reasonable) support or adjustments can be put in place to facilitate an early return and/or rehabilitation back to the workplace?
6. Is the health problem work related or exacerbated by work?
7. Does the Disability Discrimination Act apply?

In some cases, advice may be limited if the OH practitioner has an incomplete understanding of an employee's health situation, and they may recommend obtaining a report from the employee's GP or specialist physician.

It is important to provide as much background information in the referral as is possible.

An OH advisor will be happy to talk to a manager if there are any concerns regarding a referral.

The limits of Occupational Health

It is helpful to consider three important points about your OH service:

- The role of OH is purely an advisory role,
- OH practitioners limit their advice to the health aspects only,
- Impartiality is critical to the success of the OH role.

Appendix H

NAME

DATE

Dear XX

I refer to our meeting/telephone conversation on XX

As you are aware it is a condition of your contract of employment to attend Occupational Health (OH) appointments when required.

As you failed to attend an OH appointment on XX, I write to advise you that I have instructed the Payroll Shared Service Centre to withhold payments under the sick pay scheme.

I would remind you that repeated non-compliance may result in disciplinary proceedings being instigated, as well as your salary being withheld.

Yours sincerely

Line Manager

Appendix I

Contact Meeting Proforma

Date, Time and Location of Meeting	
Names of Attendees	
Meeting Content	
Areas to be covered by manager; <ul style="list-style-type: none">• Employee's current state of health, rate of recovery and expected return to work date• OH report and opinion of any other medical professionals• Possible outcomes including reasonable adjustments• Updates from the workplace• Any other relevant areas	
Notes from the meeting:	
Signed:	Date:

Appendix J

NAME

DATE

Dear XX,

RE: Local Investigation meeting

I refer to our meeting on XX and in line with the Attendance at Work policy and procedure, and the Disciplinary procedure, I am required to investigate XX. You are invited to a meeting which will be held on **XX at XX in XX**.

I have attached a copy of the Attendance at Work policy and procedure and the Disciplinary procedure for your information. You should note you have the option of being accompanied by a Trade Union representative or a colleague.

If it is considered that there is a case to be answered, you may be issued with an informal warning or the case may be referred to the NIMDTA Employment Department, for consideration for further action.

Yours sincerely

Line manager

Appendix K

Date

Dear **XX**

Thank you for attending the meeting on ***DATE OF MEETING***. During this meeting we discussed **XX**. As a result of this and in line with Northern Ireland Medical and Dental Training Agency's Disciplinary procedure, I have decided that you should be issued with an informal warning which will be held locally for 6 months.

It should be noted that if there is no improvement in your **XX** in relation to the above or should there be any further non adherence to the procedures during this period, this may result in formal disciplinary action.

You have the right to appeal this informal warning, and if you wish to do so, please do this in writing to **XX** within 7 working days of the date of this letter.

If you have any further queries, please do not hesitate to contact me.

Yours sincerely,

Line manager

POLICY DOCUMENT

Grievance Procedure

Policy Review Schedule

Date first Approved: November 2019

Last Approved by the Board: November 2019

Date of Next Review: As per regional schedule

Policy Owner: **Professional Support Manager**

Amendment Overview

Version	Date	Pages	Comments	Actioned
2019- 1.0				Roisin Campbell

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1. Introduction

NIMDTA recognises that in the course of work, an employee may feel aggrieved and expects that normal day-to-day management should deal with the majority of work issues without the need to resort to formal procedures.

NIMDTA recognises the right of employees to seek a satisfactory resolution to their grievances. Employees should normally in the first instance give their immediate manager the opportunity of resolving the matter, before progressing their grievance formally.

The purpose of this procedure is to provide an employee or group of employees with the opportunity to have their grievance considered quickly and effectively. When a grievance is raised, it should, where possible be resolved at the earliest opportunity and at the most appropriate level of management.

There are some employment issues, which are excluded from being raised under this procedure, as there are other more appropriate NIMDTA policies and procedures in place which incorporate appeals provisions that assist in the resolution of specific issues. In those circumstances this Grievance Procedure will not be applied.

2. Guidance and Definitions

Employee - is anyone employed by NIMDTA.

Employee Representative - is any employee of NIMDTA who is an accredited representative of a trade union, professional organisation or staff organisation, a full time official of any of the above organisations or a fellow NIMDTA employee. Legal Representation, that is solicitors and/or professional legal counsel, will not be permitted at any stage of this Grievance Procedure.

Grievance Panel – the persons with the appropriate authority to resolve the grievance.

3. Principles

- a. The employee has the right to a personal hearing.

- b. Relevant witnesses may be called by the employee or by NIMDTA.
- c. Issues which may give rise to a grievance may include differences between NIMDTA and a NIMDTA employee on any employment matter generally, for example, on an illustrative but not exhaustive basis: a decision taken by management or the application of terms and conditions of employment etc.
- d. Management should seek to ensure that all grievances raised under this Procedure are addressed as quickly as practicable.
- e. In cases where the Chief Executive is the line manager, the employee may raise the grievance with the Chairperson of NIMDTA Board or his/her nominee.
- f. It is expected that when an employee has a grievance, that this will be raised as close to the issue / event as soon as is practically possible. This should not normally be later than four months after the issue / event other than in exceptional circumstances.
- g. All parties have the responsibility to respond to issues pertaining to this grievance process in a timely manner.
- h. Managers have a duty to make every effort to resolve issues at the earliest opportunity. They are accountable for maintaining good employee relations and must therefore ensure that unacceptable delays do not occur in responding to grievances.
- i. At all stages during the grievance procedure the employee will have the right to be accompanied and/or represented by an employee representative as defined in Section 2.
- j. At all stages, the grievance procedure will be completed as quickly as possible within the defined timelines unless by mutual agreement.
- k. An employee who has a grievance must exhaust each stage before proceeding to the next. The matter will not normally be progressed until the previous procedural stages have been concluded.
- l. In the event that the manager or grievance panel fails to meet the above deadlines, without prior agreement with the employee or their representative, the employee shall have the right to progress the grievance to the next stage.
- m. Managers should retain written records of all grievance hearings and meetings.

- n. All parties are expected to take all reasonable steps to participate fully with the grievance procedure.

4. Meetings/Hearings

Employees are expected to participate fully with the grievance process. If a NIMDTA employee cannot attend a meeting/hearing through circumstances outside her/his control and unforeseeable at the time the meeting/hearing was arranged they must notify NIMDTA Employment Department and provide reasons. NIMDTA will arrange one further meeting/hearing. Failure to attend this rearranged meeting/hearing may result in the grievance process continuing in their absence based on the information available.

5. Grievance Procedure

This procedure details the appropriate steps to be followed when pursuing and dealing with a grievance.

5.1 Informal Procedure

In the event of an employee being aggrieved, the matter should be informally discussed in the first instance with their line manager. If the line manager is directly involved in the grievance, the grievance can be discussed with the next level of line management. They will determine who it is appropriate for employees to informally discuss the grievance with. The line manager should facilitate this meeting within ten days of receipt of the request. There should be an open and frank discussion of the grievance and the management response should be explicit and timely. It may be appropriate to record the response in writing. If the employee should choose to be accompanied by an employee representative, the manager should facilitate this.

Only where it has not been possible to resolve the grievance through informal discussion and/or communication, should the formal procedure, as detailed below, be initiated.

5.2 Formal Procedure

Stage 1: Formal Discussion and Resolution of Grievance

- a. Where it has not been possible to resolve a grievance informally, an employee may raise a formal grievance. Employees are encouraged to do so by completing a Notice

of Reference, see Appendix 1. The grievance should be forwarded to NIMDTA Employment Department, who will acknowledge receipt of the grievance in writing and will arrange for a Grievance Panel to hear the grievance, normally within twenty working days or as soon as reasonably practicable. If it is not possible to hold the hearing within twenty working days the employee must be provided with an explanation for the delay by NIMDTA Employment Department.

- b. The Grievance Panel will consist of two managers at an appropriate level.
- c. The grievance panel may invite a management representative and/or other employees associated with the grievance to be present at the hearing, if considered necessary to clarify any points raised. The Grievance Panel may also seek additional information/clarification in the pursuit of resolution of the grievance.
- d. The decision of the Grievance Panel will normally be conveyed in writing to the employee within ten working days from the date of the hearing, stating clearly the reasons for the acceptance or rejection of the case. This letter will also provide details of how to appeal this decision, should the employee believe the matter has not been resolved.
- e. If the decision of the Grievance Panel cannot be given within ten working days, the chair of the grievance panel should provide the employee with an explanation for the delay.

Stage 2: Appeal

- a. An employee wishing to appeal the stage 1 decision should write to the Professional Support Manager within seven working days from the date of receipt of the letter containing the decision stating the grounds for their appeal. The employee must provide any other documents or detail relevant to the appeal no later than seven working days prior to the hearing.
- b. The Professional Support Manager NIMDTA will acknowledge receipt of the appeal letter in writing and will arrange for a Grievance Appeal Panel to hear the grievance within twenty working days or as soon as reasonably practicable.
- c. The Professional Support Manager or designated member of the NIMDTA Employment Department will be responsible for organising an appeal hearing. The panel for the hearing will normally comprise the relevant Director or suitable Senior Management delegate and a senior member of HR neither of who should have had previous involvement with the case. In circumstances where the Director has been previously involved in the case, the Employment Department may seek a senior nomination from another Department.

- d. Where appropriate, the appeal panel may invite a suitably qualified and experienced Senior Officer in the same profession as the aggrieved employee(s) from NIMDTA or outside NIMDTA to attend the hearing as an assessor. The assessor is there to provide professional advice to the panel as required and has no decision-making role.
- e. The Grievance Appeal panel may invite a management representative and/or other employees associated with the grievance to be present at the hearing, if considered necessary to clarify any points raised. The Grievance Appeal Panel may also seek additional information/clarification in the pursuit of resolution of the grievance.
- f. The decision of the Grievance Appeal Panel will be conveyed in writing to the employee within 10 working days from the date of the hearing, stating clearly the reasons for the acceptance or rejection of the case. The decision of the Grievance Appeal Panel is final.
- g. If a response is not made within the timescales identified above, the Chair of the grievance Appeal Panel should provide the employee with an explanation for the delay.

6. Record Keeping

Managers should forward copies of all documentation and correspondence relating to the grievance to NIMDTA Employment Department for retention on the employee's record.

7. Review of the Procedure

This procedure should be reviewed periodically in consultation with recognised staff side representatives via the HSC (NI) Joint Negotiation Forum.

Signed on behalf of Management



28/11/19

This procedure is effective from November 2019

APPENDIX 1

GRIEVANCE PROCEDURE

NOTICE OF REFERENCE

EMPLOYEE DETAILS

Name Grade

Date appointed to grade

Employer

Department where employed

Staff Organisation/Union

GRIEVANCE DETAILS

Please tick below which type of grievance is involved

A Issues involving differences between an employing authority and an individual employee on a matter which affects the employee's conditions of service including questions of grading

B General grievances, other than those arising out of issues referred at **A**. Where a general grievance involves more than one employee, details of all employees should be attached

Date issue was raised
.....

With whom raised
.....

Does the employee want a personal hearing (*Please tick*)? Yes No

DETAILS OF GRIEVANCE

.....

.....
.....
.....
.....
.....
.....

Please continue on separate page if necessary

Have you any associated documentation or other information you wish to submit with this notice? **YES/NO**

Please list below the associated documentation and include it with this notice

Have you raised the issue outlined above with your line manager? **YES/NO**

If NO, please give reasons

Have you considered the informal process as outlined in the Working Well Together Policy? **YES/NO**

If NO, please give reasons

Do you intend to call witnesses? **YES/NO**

If YES, please give names below:

Signed: _____ **Date:** _____



CONFLICT BULLYING & HARASSMENT IN THE WORKPLACE

JANUARY 2019

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Title:	Conflict, Bullying & Harassment in the Workplace Policy & Procedure		
Author(s)	Regional Joint Negotiation & Consultation Forum		
Ownership:	Director of Human Resources and Corporate Services		
Approval by:	BSO Board	Approval date:	03 June 2019
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Lead Author Position	Regional AD Network		
Additional Author(s)	Regional ER Managers (Peter Lavery, Senior HR Manager - BSO HR Contact)		
Department	Human Resources		
Contact details	bso.humanresources@hscni.net		
Links to other policies	Regional Disciplinary Procedure Regional Grievance Procedure Working Well Together		

1. Our Commitment

Business Services Organisation is an equal opportunities employer. As such, we will comply with the spirit and letter of the law, including equality legislation. We strive to create and promote a harmonious working environment, where all staff feel safe at work and are treated with respect and dignity, regardless of their age, disability status, marital or civil partnership status, political opinion, race, religious belief, sex (including gender reassignment), sexual orientation, with dependants or without dependants.

Poor working relationships, unresolved conflict, bullying and harassment can have a detrimental effect on personal wellbeing, as well as the wider working environment. Evidence shows that effective team working, supported by good communication and responsive line management, impacts positively on patient and client care. Issues which affect the ability of staff to work well together will be taken seriously and addressed promptly. Bullying and harassment in the workplace is unacceptable and will not be tolerated or condoned under any circumstances.

We will help to create the sort of organisation that people want to be a part of and feel proud to work in by fostering a climate of dignity and respect amongst staff at all levels, and in demonstrating our commitment to deal with conflict, bullying and harassment effectively and promptly.

2. Purpose and Aims

The purpose and aims of this policy and associated procedure are:

- To provide all staff, particularly managers, with clear guidance on how to handle conflict, bullying and harassment in accordance with best practice and relevant employment legislation;
- To outline to all staff their rights and their collective responsibility to create and maintain a safe, harmonious, positive and enabling working environment for all;
- To provide a mechanism to facilitate prompt resolution of issues that may arise;
- To prevent bullying of all staff members, including agency workers;
- To prevent harassment of all staff members, including agency workers;

3. Scope

3.1 This policy applies where there is general interpersonal conflict within the workplace or when a member of staff believes they have been subject to bullying or harassment, as defined in this policy. Where group conflict exists, the same principles laid down in this policy will apply. All staff have a responsibility to comply with this policy. We expect our staff to both receive and show courtesy and respect to and from colleagues, patients, service users and anyone else with whom they come into contact in the course of their work. There is a particular obligation on managers to ensure the effective application of this policy, and to work to cultivate and maintain a safe and positive working environment within their teams.

3.2 This policy also applies to events which could reasonably be regarded as an extension of the workplace, such as Christmas parties and conferences, the use of social media or any other situation which is an

extension of the working environment. This policy should be read in conjunction with any related social media policy.

3.3 This policy should be read in conjunction with any relevant codes of conduct, and Maintaining High Professional Standards (applicable to medical and dental staff only).

3.4 It is expected that staff members will raise concerns of conflict, bullying or harassment in a timely manner and as close as possible to the alleged issue(s) or event(s). This should not normally be later than four months after the alleged issue(s) or event(s), other than in exceptional circumstances.

3.5 This policy must not be interpreted, or applied in such a way as to detract from the legitimate right and obligation of those in management roles to manage their staff in accordance with other Human Resources (HR) and BSO organisational policies. Constructive and fair criticism of behaviour or performance is not bullying or harassment. Management has a right to identify and address unacceptable standards of behaviour or performance and must do so in a fair, respectful and measured way and in accordance with this policy. Failure to do this in a fair and respectful way may be considered and addressed under this policy and any other relevant HR policy.

3.6 This policy is not applicable where a member of staff believes they are being bullied or harassed by a member of staff from another organisation or a patient, client or member of the public. In such instances, staff should first seek advice from their line manager and HR and/or their trade union as appropriate, in order to progress their concern and receive the right support. Where a concern of bullying or harassment is raised by a member of staff from another organisation or a patient, client or member

of the public against a staff member, this policy may be applied, and in all cases advice must be sought from HR.

3.7 If a concern is raised by a staff member against an agency worker, the line manager should refer the concern to the employment agency from whom they were recruited. The agency should have their own policies and procedures for dealing with concerns about their employees. The line manager will liaise with the employment agency to ensure there is an effective resolution of the concern.

This policy will apply where a concern is raised by an agency worker against a member of staff. The line manager, in conjunction with HR, will work with the employment agency, using this policy, towards an effective resolution of the issues.

4. Definitions and Legal Context

4.1 What is general conflict?

4.1.1 General interpersonal conflict can take many forms, for example: colleagues who simply do not work well together as a result of different styles of working, someone changing their behaviour causing an unpleasant atmosphere, differing opinions and perceptions, personality clashes, or an overspill of personal issues outside of work. Most of us will experience an issue or level of conflict with someone at work at some point in our careers. However, these issues have the greatest chance of resolution if addressed locally and quickly through dialogue and all staff are encouraged to 'test their perception' (see page 16) before labelling their experience or attempting to pre-determine the pathway for resolution.

4.2 What is bullying?

4.2.1 Bullying occurs ‘where one person or persons engage(s) in unwanted conduct in relation to another person which has the purpose or effect of violating that person’s dignity or creating an intimidating, hostile, degrading, humiliating or offensive environment for that person. The conduct shall be regarded as having this effect only if, having regard to all the circumstances and in particular the alleged victim’s perception, it should be reasonably considered as having that effect.’¹

4.2.2 Unlike harassment, bullying need not be related to any of the protected characteristics outlined in Section 4.3.1. Examples of bullying at work may include:

- Subjecting an individual to humiliation or ridicule;
- Inappropriate shouting or use of abusive language;
- Spreading malicious rumours or telling untruths;
- Constantly undermining effort, competence or confidence;
- Deliberately withholding information to affect a staff members’ performance or reputation;
- Persistent adverse criticism in public or in private;
- Isolation or exclusion at work or from work related events;
- Intimidating body language or physical behaviour;
- Changing of work responsibilities unreasonably or without justification.

This is not an exhaustive list, and all cases will be considered individually.

¹ ‘Harassment and Bullying in the Workplace’ – A joint publication by the Equality Commission for Northern Ireland and the Labour Relations Agency.

4.3 What is harassment?

4.3.1 Harassment bears very broad similarities to bullying and the behaviour described in Section 4.2.2. However, the crucial difference is that harassment is based on, motivated by or related to one of the equality grounds laid down in anti-discrimination legislation, and summarised in the table below. Harassment can also constitute a civil or criminal offence.

Legislation	Protected Equality Groups
Sex Discrimination (NI) Order 1998 as amended	Gender Gender identity and expression Marital or civil partnership status Pregnancy or maternity Carers
Fair Employment and Treatment (NI) Order 1998 as amended	Community background Religious and philosophical beliefs Political opinion Trade union membership
Employment Equality (Age) Regulations Northern Ireland 2006 as amended	A particular age or range of ages
Disability Discrimination Act 1995 as amended	Disability (Disability is defined as a physical or mental impairment which has a substantial and long-term adverse effect on that person's ability to carry out normal day-to-day activities)
Employment Equality (Sexual Orientation) Regulations Northern Ireland 2003 as amended	Sexual orientation (Whether a person's sexual attraction is towards their own sex, the opposite sex or to both sexes)
Race Relations (NI) Order 2007 as amended	Race Colour Nationality Ethnic or national origin Irish Travellers

4.3.2 Harassment can be a single serious incident or an ongoing campaign. Conduct shall be regarded as harassment only if, having regard to all the circumstances and in particular the alleged victim's

perception, it should be reasonably considered as having that effect. Where it is not mutually acceptable behaviour, this may constitute harassment. Harassment on the grounds of, or related to, a protected characteristic is unlawful discrimination and may constitute a criminal offence.

4.3.3 It is not necessary that a person possesses a particular characteristic themselves, as outlined in the table at 4.3.1, to be a victim of harassment. It can be as a result of their association with a person who falls into one of these categories, or a mistaken belief that they possess one of these characteristics.

4.3.4 Harassment can take many forms, as per the table below. This is not an exhaustive list of examples of behaviour that may amount to harassment, or indeed bullying, if it does not relate to one of the equality grounds listed in 4.3.1.

- **Physical conduct**, ranging from touching to assault or making obscene gestures;
- **Verbal and written harassment** through jokes, racist, sexist, sectarian, homophobic or transphobic comments, comments about a person's disability, offensive language, gossip and slander, sectarian songs, mobile ring tones, threats, use of social media, letters and emails;
- **Visual displays** of posters, screensavers, downloaded images, graffiti, flags, bunting or emblems or any other offensive material;
- **Isolating** a person, including exclusion from social events;
- **Overloading** a person with unreasonable work activities;
- **Forcing** a person to offer sexual favours or to take part in religious or political activities;
- **Intrusion** by pestering, spying or following.

4.3.5 Causing or contributing to conflict, bullying and harassment is unacceptable behaviour which will not be permitted, accepted or condoned. Notwithstanding the legal implications of engaging in

such behaviour, bullying and harassment are contrary to the standards of conduct that we expect of our staff and have the potential to impact on patient and client care. Such behaviours are detrimental to a productive, harmonious working environment, as well as the confidence, morale and performance of those affected by it, including anyone who witnesses or knows about the unwanted behaviour.

4.3.6 If you are experiencing conflict at work, but remain unsure as to whether it is general interpersonal conflict or bullying or harassment, you can seek advice from a trusted colleague, trade union representative or HR, so that the most appropriate course of action is taken to deal with your concerns quickly and effectively. If you believe your concern may constitute harassment as defined in this policy, you should report this to the appropriate manager immediately, to enable prompt resolution and ensure any relevant statutory time limits, such as those of the Employment Tribunals, can be adhered to.

4.3.7 If behaviour is found to be in breach of this policy, it may result in disciplinary action, up to and including dismissal.

5. The Rights and Responsibilities of All HSC Staff

5.1 As HSCNI staff, we have the right to work in an environment that is free from unresolved conflict, bullying and harassment, where all staff feel safe, and are treated with respect and courtesy. HSCNI fully recognises your right to complain about harassment or bullying and as such all concerns will be dealt with seriously, promptly and confidentially. In matters relating to interpersonal conflict, it is expected that all staff

participate in efforts to resolve their issues locally and promptly and without the need for formal investigation.

5.2 Business Services Organisation internal procedures do not negate the right of an aggrieved staff member to also pursue complaints through an Industrial Tribunal, the Fair Employment Tribunal or through the courts. If you wish, you can obtain advice from your trade union representative, the Equality Commission and the Labour Relations Agency. There are strict time limits for making complaints to a tribunal, and complainants normally will be expected to have raised their concerns under the relevant HSCNI procedure first, though it is not necessary for the matter to have been brought to a conclusion.

5.3 Line Managers and HR will ensure that any staff member who raises a concern under this policy, or who gives evidence or information in connection with such cases will not be victimised, i.e. they will not be discriminated against, harassed or bullied in retaliation for their actions. Victimisation is also discrimination contrary to equality laws and this policy, and will be treated as misconduct which may warrant disciplinary action, up to and including dismissal.

5.4 It is **not acceptable** for staff to fail to report or deal with serious bullying or harassment. This may be viewed as condoning this behaviour and action may be taken as appropriate.

6. The Role of HSC Staff

All staff have a responsibility to familiarise themselves with this policy, and to ensure that their behaviour complies with what is expected. Staff must recognise that they have a vital role to play in the creation, promotion and maintenance of a good and harmonious working environment, where the dignity of all is respected.

- 6.1** Staff are expected to participate in any relevant training to support this policy and to adhere to all relevant procedures including professional codes of conduct where applicable.
- 6.2** If you raise a concern, you are required to participate in any process that is invoked as a result to resolve the issue. This includes, for example, facilitated meetings and investigation, where this has been deemed necessary. You will also be expected to give due consideration to mediation, where appropriate. Failure to participate in attempts to resolve the issue that you have raised may result in the matter being deemed closed.
- 6.3** If a concern is raised about you, you will be required to participate in any facilitated meetings or investigations, where appropriate, as well as giving due consideration to mediation, if applicable. Failure to meaningfully participate in attempts to resolve the issue may result in management taking action.
- 6.4** Where group conflict exists, staff should work with management to agree an appropriate way forward to progress the matter on behalf of the group.
- 6.5** Staff must not allow situations of misunderstanding to develop into conflict situations. Instead, staff should be proactive in dealing with issues as they arise, so long as they feel confident enough to do so. Where staff lack confidence, they should seek advice from a trusted colleague, trade union representative, manager or HR.

6.6 Any staff member who is aware of or witnesses any instances of conflict, bullying or harassment should support their colleagues and alert a manager or supervisor to enable its swift and effective resolution. Where the behaviour in question is that of a manager, the staff member should either report it to the manager's line manager or seek advice from HR or a trade union representative.

7. The Role of Managers

7.1 Line managers have a specific responsibility in the prevention and resolution of conflict, bullying and harassment. They are responsible for creating a safe, harmonious and enabling working environment, setting a good example for other staff members to follow, intervening when conflict arises and ensuring that their teams are aware of their obligations and relevant policies.

7.2 Managers should ensure they are fully aware of their responsibilities under the relevant policies, and are alert to potential issues of conflict, bullying and harassment; and that they intervene and take appropriate action quickly when issues of conflict, bullying or harassment occur.

7.3 Managers have a responsibility to be responsive and supportive to any member of staff who raises an issue of conflict or makes an allegation of bullying or harassment. They must provide clear advice on the procedure, maintain strict confidentiality throughout the process and actively seek to bring matters to a timely conclusion. They should also seek to prevent a reoccurrence of the same problem, either whilst the concern is being resolved or after it has been dealt with.

7.4 Managers must also take particular care to ensure their behaviour sets an example and must be mindful of their interactions with their team, particularly during sensitive but necessary conversations, for example during appraisals, performance reviews or attendance management meetings.

8. The Role of Trade Unions

8.1 Trade union representatives can help support and guide a member towards the most appropriate course of action in a situation of conflict, bullying or harassment. It is best to involve your trade union representative at the earliest possible stage so they can help you to test your perception and advise appropriately. Trade union representatives can also provide valuable support, advice and representation in relation to bullying and harassment and formal processes as detailed within this procedure.

8.2 Trade union representatives also have a role in supporting and educating members on their rights and responsibilities under this policy.

9. The Role of Human Resources

9.1 HR has a key role to play in the resolution of conflict, bullying and harassment in the workplace. HR is firstly responsible for raising awareness of this policy and procedure, and ensuring that managers are confident and competent to deal with conflict locally and at an early stage.

9.2 It is expected that cases of general interpersonal conflict will be addressed locally by line managers. HR is available for advice and guidance and can assist managers and staff members to test their perceptions and

triage an issue as appropriate. HR may participate in or facilitate a meeting to progress resolution.

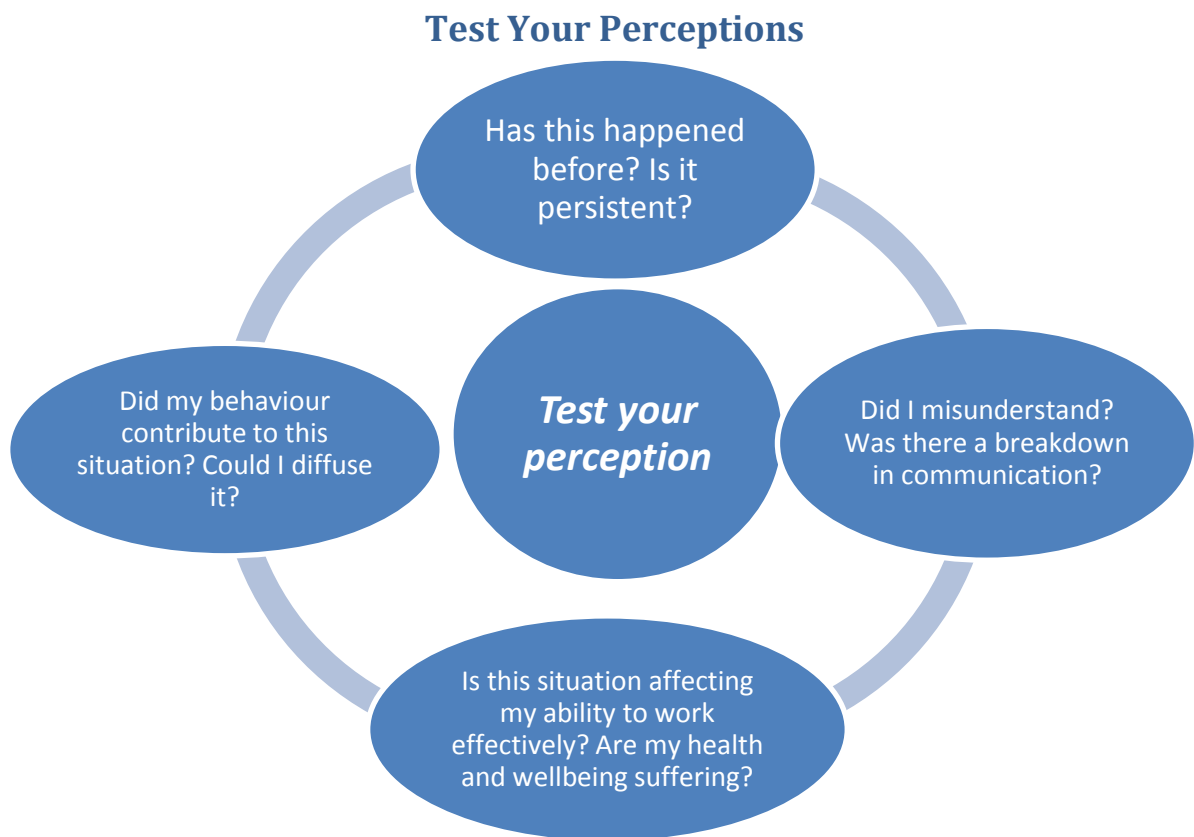
9.3 HR will work with management, the complainant and their trade union representative, if applicable, to identify the most appropriate process for handling the concern.

9.4 Where it is agreed that a formal procedure is necessary to consider bullying or harassment, HR will support the parties concerned by providing advice and guidance on process and policy application, signposting to sources of support for staff, liaising with legal representatives where necessary and case-managing the process in accordance with best practice and employment legislation. HR, in conjunction with the relevant line manager, has a responsibility to progress the formal procedure and bring such matters to a timely conclusion.

9.5 HR will also monitor trends in turnover, sickness absence rates and take particular note of the working lives of rotational staff in order to surface any underlying workplace issues.

1. Procedure

This procedure outlines the steps that should be followed where an employee raises a concern about conflict, bullying or harassment. Before using this policy, you should always test your perceptions. In other words, you should explain your version of events to a trusted colleague, manager or trade union representative. The aim of doing this is to gain greater clarity and perspective on the incident or behaviours and prevent rash decision making. The diagram below outlines some key questions to help you do this.



- 1.1** If at the end of your test you feel you are being bullied or harassed, then report this **immediately** to either your line manager, or their manager, if the concern relates to your own manager. You can also seek support from your trade union representative or HR.

1.2 In terms of conflict, staff should bear in mind their personal responsibility to promote good relations and attempt to resolve conflict where there are instances of staff members not working well together, so long as they feel confident enough to do so. For example, approaching the other individual at an early stage, and making it clear that their behaviour is unwelcome and should stop. It is advisable to keep a written record of any attempts to stop the unwelcome behaviour.

2. Self-Resolution

2.1 If you simply want the behaviour to stop and where the incident was not very serious, then the informal procedure is likely the most appropriate approach to effect swift, confidential resolution to an issue. If you feel confident and able to do so, you should try and resolve conflict yourself, by approaching the person concerned, outlining the event or incident that you are referring to, describing how you felt and explain why you would not wish it to happen again and what steps you will take if it does reoccur. You can do this with the support of a colleague or a trade union representative if you wish.

Informal Procedure

2.2 Where this fails, or where you do not feel able to approach the person, you should discuss the matter with your line manager as soon as is reasonably possible. Should the concern be against the line manager, it should be brought to their line manager who will take it forward.

2.3 The manager dealing with the concern should act promptly, maintaining strict confidentiality at all times. The manager will:

- ❖ **Listen** to what has happened, drawing the person's attention to informal resolution through dialogue and using the 'test your perception' model where appropriate.

- ❖ **Meet²**. with the complainant, and also meet with the person against whom the concern has been made to make them aware. Both parties should be informed that the other person involved is also having an individual meeting. The manager should listen out for recurring and common themes which could be used to direct dialogue when parties are brought together. The manager should remind the parties of their obligation to resolve matters locally and promptly.

- ❖ **Meet with the parties together** this should be a future-focused meeting, with common themes being drawn out and discussed. The meeting should ideally end with an agreement to draw a line under the matter or, where appropriate, with the completion of an action-plan detailing how the parties propose to work well together in future. The manager should make a note of any outcomes or action plans and follow up on these within a suitable time period. Again, it is not usually necessary for parties to be accompanied at these meetings.

- ❖ **Monitor the situation** and be alert to any deterioration of the situation or any patterns of behaviour emerging. Equally, staff should make genuine efforts to embed what was agreed at the meeting and to work well together.

2.4 Once this series of meetings are over, the matter will be considered closed. Only where there are new issues or where the situation deteriorates will the matter be reopened. If this occurs, HR together with the appropriate manager, will triage the issue, making a decision on the way forward by reviewing information and circumstances of the case. It

² It is not usually necessary for HR or trade union colleagues to attend these meetings, but that does not preclude their attendance if necessary.

may be the case that formal mediation is required. Where the issue remains one of interpersonal conflict, there is no automatic right to move to a formal process. Where there is evidence that one or other of the parties has failed to comply with the previous agreement, consideration should be given to the appropriateness of other policies and procedures, including the Disciplinary Procedure, in relation to conduct.

3. Mediation

- 3.1** In cases where informal resolution has not been successful, you will be expected to consider mediation. Whilst it is not mandatory that you participate, you will be expected to give it due consideration.

- 3.2** Mediation is not about placing blame or making judgments. It is designed to help parties gain clarity around the claim of conflict or bullying, and help everyone assess their individual needs, goals and expectations.

- 3.3** Trained mediators will facilitate open and honest communication, in a safe and impartial environment in order to foster better relations, and ultimately help the parties come to an agreement as to how they will work together in future. This will be written and signed by all concerned. The manager concerned will not be privy to the details of what was said or agreed. They will only know if the mediation was successful or not, unless the parties to the mediation agree for particular information to be shared.

- 3.4** Where mediation is agreed, you will take part in the mediation process within 4 weeks (or as soon as is reasonably practicable in view of leave arrangements) of the mediation having been agreed.

3.5 Where it is a matter of general interpersonal conflict, mediation will be the last stage of the process. If you refuse to participate in mediation or where mediation fails, the manager reserves the right to take action as necessary to ensure that a harmonious and safe working environment is achieved. Action may include:

- Moving either or both parties;
- Changing working patterns of either or both;
- Disciplinary action where behaviour warrants it.

Senior management and HR will make the final decision on any redeployment, ensuring this is in line with the relevant terms and conditions, and will not put the employee at a substantive detriment.

4. Formal Procedure

4.1 Concerns should be raised as soon as possible (and not later than 4 months) following an alleged act of bullying or harassment and, where possible, should be set out in writing to the appropriate manager or HR, making it clear which protected characteristic the alleged harassment relates to, if appropriate. Concerns may be raised by a staff member, or someone on their behalf such as a colleague or a trade union representative and should be discussed with HR immediately.

- a.** If the incident(s) reported is so serious that it is deemed by HR and the manager inappropriate to use the informal method, the issue will be addressed through the formal procedure. It is accepted that in making this determination discussion will have taken place with the affected staff member(s) and/or their trade union representative where appropriate to ensure understanding. Acknowledgement of the concern in writing and where available details of the next steps should be provided to

the staff member within 3 working days of receipt by HR. In relation to concerns raised about Medical or Dental staff, consideration must also be given to procedures and timescales laid out within Maintaining High Professional Standards and advice sought on how to proceed.

- b.** In some instances, there may be clear evidence of misconduct that is so serious that it may be appropriate to move straight to disciplinary proceedings. Where there is concern that conduct may constitute a criminal offence, advice should be sought immediately from HR.

- c.** Whilst this is a more formal process, the possibility of mutual resolution in instances of bullying or harassment through mediation at any stage of the process may be considered with the agreement of HR, management, the employee and their trade union representative, if applicable. This will be considered in the context of the case and the seriousness of the incident which gave rise to the concern.

Step One: Appointment of the investigating officer/ team and clarifying the process

- On receipt of a concern and having discussed the matter with HR and the complainant, an investigating officer or team will be appointed without undue delay.
- The team will be required to establish the facts and decide how the matter should be progressed. The investigating officer/team should be clear at the outset about how information will be used and shared throughout the

investigation and where necessary HR should provide guidance on this.

- It is anticipated that most investigations should be completed within a period of 8-12 weeks. The investigating officer/team should draw up an action plan at the outset of proceedings, outlining how the investigation will be conducted. This action plan will be flexible, as relevant parties may need to be interviewed on more than one occasion. It is the responsibility of the investigating officer/team to update the parties on the status of the investigation and provide an explanation for any delays. In any case, the investigating officer/team must provide an update to all relevant parties at the six week mark.
- At this stage, a senior manager will need to decide whether it is necessary to keep the complainant and alleged bully or harasser separated until the issue is resolved. The decision of who is moved to facilitate this will be reasonable and proportionate, considered on a case by case basis, and in consideration of service needs. In most cases, this decision will be made by a senior manager within the relevant department.
- Should a move be deemed necessary, this will be at a post of the same substantive grade for the duration of the investigation. Should there only be a post available at a lower grade, the staff member will retain the pay and benefits of their substantive grade for the duration of the investigation.
- Both parties should be advised of the process and expectations in going forward.
- A decision to suspend the alleged bully/harasser from work on normal pay as a precaution, either at the outset or at any

stage in the process, should only be taken in conjunction with HR.

- Decisions to refer the alleged bully/harasser to a relevant professional body, eg NMC, GMC, DBS, NISCC, HCPC and also to the Police Service of Northern Ireland (PSNI) should be taken in conjunction with HR. The employer is also required, under the Protection of Children and Vulnerable Adults (NI) Order 2003, to make a referral to the Department of Health if a person working in a child care or vulnerable adults position has been dismissed, would have been dismissed, or considered for dismissal had he/she not resigned, or has been suspended, or transferred from a child care or vulnerable adult position.³
- At regular intervals, the manager and HR should remind all staff about the support and counselling services that can be accessed at any stage in the process.

Step Two: Initial meeting with complainant

- The investigating officer/team will interview the complainant to clarify and formally record the nature of the concern and ensure it is being handled under the correct procedure. The complainant has the right to be accompanied by a work colleague or trade union representative at this stage.
- The investigating officer/team will advise the complainant that the issue is being dealt with strictly confidentially, but that the details of the concern will be shared with the alleged bully or harasser. They will be advised that the outcome of the investigation will be confirmed in writing.

³ For medical and dental staff, MHPS will also apply.

- The complainant will receive a written note of the meeting to ensure it is an accurate record of what was discussed.

Step Three: Informing the alleged bully or harasser

- The investigating officer/team will meet with the alleged bully/harasser who will be given an opportunity to answer the concern. This meeting should be scheduled within the action plan to take place as soon as is reasonably practicable after the initial meeting with the complainant. They have the right to be accompanied to this meeting by a work colleague or trade union representative. They will also be informed that they should not contact the alleged victim and that the outcome of the investigation will be communicated.
- Where a written complaint has been received, the alleged bully or harasser has a right to see it, but should be made aware that it may be redacted.
- The alleged bully/harasser will receive a written note of the meeting to ensure it is an accurate record of what was discussed.

Step Four: Meeting with other parties/witnesses as part of the investigation

- The investigating team will also meet with those who they have deemed important in helping to establish facts, and/or have been cited as a direct witness.
- In recognising the importance of candour all staff are required to co-operate to enable an investigation to be carried out effectively and promptly.
- Witnesses are not normally represented but can be accompanied by a trade union representative or colleague not involved in the

matter. This is for support only. Witnesses must be reminded about the importance of confidentiality.

- All parties will receive a written note of their meeting, which they agree to be an accurate account of what was discussed.
- The complainant, the alleged bully/harasser and witnesses should all be advised that whilst the investigation process is confidential, records of evidence may be requested, for example, by subject access request and may by law require to be furnished, subject to any appropriate redaction. In addition, records of evidence obtained during the investigation may be discoverable documents and may require to be disclosed where relevant to any subsequent legal proceedings.

Step Five: Reporting the facts

- The investigating officer/team will prepare a report outlining the facts, indicating their findings and whether a case of bullying or harassment is substantiated. They may also make recommendations.
- This will be considered by the relevant manager in collaboration with HR to determine the outcome and whether any further action should be taken.⁴
- Staff should be aware that there are a number of potential outcomes that an investigation may produce. Although this list is **not exhaustive**, examples include:
 - No further action required
 - No further action required at this time, but the situation is to be monitored and kept under review
 - Mediation where both parties agree to take part

⁴ Medical and Dental staff should be aware that further action may be taken under MHPS.

- Invocation of Capability Procedure where there is no evidence of intent to cause harm
- Redeployment of staff where there is an irretrievable breakdown in relationships (any decision to move a member of staff will be reasonable and proportionate, and taken in conjunction by senior management and HR, on a case by case basis, with regard to service need)
- Invocation of the Disciplinary Procedure

Step Six: Communicating the decision and right of appeal

- Once a final report of findings and recommendations has been produced, the complainant and alleged harasser/bully will be informed of the outcome of the investigation in writing, and a meeting will also be held to discuss.
- Potential decisions may include invocation of the formal Disciplinary Procedure without the need for another investigation, mediation if parties agree, or a finding of no evidence to support the concern.
- An investigation into bullying and or harassment under this procedure will afford the complainant a right of appeal against the findings. This should be made in writing to the Director of HR **within 10 working days** of being notified.
- The complainant must set out the specific grounds of their appeal, beyond their dissatisfaction with the outcome, focusing on factual inaccuracies and/or omissions and this will be considered by a final stage appeal panel. The panel will consider the case presented by the complainant. An investigating officer will be in attendance to provide information to the panel.
- In respect of the alleged bully/harasser, the right of appeal is only afforded through the disciplinary procedure at a formal hearing.

Review

The operation of this policy will be monitored and reviewed regularly (every 3 years) to ensure its relevance and effectiveness.

**Signed on behalf of
Trade Union Side:**



Anne Speed

Date:

8th February 2019

Signed on behalf of Employer:

