

GRIEVANCE POLICY

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	Relevant	Screening	Full / Completed	Outcome
Equality Impact Assessment	Yes	Yes	No	No Issues Identified
Sustainability Impact Assessment	Yes		Yes	No Issues Identified
Privacy Impact Assessment	Yes	No	No	No Issues Identified
Bribery Checklist	No			
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	Yes	Yes		No

The on-line version is the only version that is maintained. Any printed copies should, therefore, be viewed as 'uncontrolled' and as such may not necessarily contain the latest updates and amendments.

POLICY AMENDMENTS

Amendments to the Policy will be issued from time to time. A new amendment history will be issued with each change.

New Version Number	Issued by	Nature of Amendment	Approved by & Date	Date on Intranet
DRAFT	SRCCG	Draft policy for CCG	Senior Management Team	
DRAFT	SRCCG	Draft Policy for CCG	JTUPF	28.05.14
DRAFT	SRCCG	GDPR Review	SPF 10.01.18	

Approval Record

Applicable Y/N	Committee / Group	Consultation / Ratification	Date taken to group	Date last Approved
	Governing Body	Ratification		
	Council of Clinical Representatives	Ratification		
Yes	SMT	Ratification	Feb 18	Feb 18
	Remuneration Committee	Ratification		
	Audit and Governance Committee	Ratification		
	Finance and Contracting Committee	Ratification		
	Business Committee	Ratification		
	Communications and Engagement Committee	Ratification		
	Other	Ratification		
	All Employees	Consultation		
	Public	Consultation		
Yes	Yorkshire and Humber Social Partnership Forum	Consultation	Jan 18	Jan 18

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Appendix 7: Equality Impact Analysis **Error! Bookmark not defined.**

Appendix 8: Sustainability Impact Assessment **Error! Bookmark not defined.**

1 INTRODUCTION

Any worker may at some time have problems or concerns with their work, working conditions or relationships with colleagues that they wish to raise with management.

Grievances are best dealt with at an early stage, informally with the immediate line manager. However, organisations should have formal procedures in place to handle cases left unresolved. Having formal grievance procedures in place allows employers to give reasonable consideration to any issues which can't be resolved informally and to deal with them fairly and consistently. Pursuing the formal route should be a last resort rather than the first option.

2 ENGAGEMENT

- Joint Trade Union Partnership Forum/Policy Development Group
- SRCCG staff via team meetings/team brief/internet
- SRCCG Senior Management Team

3 IMPACT ANALYSES

3.1 Equality

In applying this policy, the CCG will have due regard to the need to eliminate unlawful discrimination, promote equality of opportunity, and provide for good relations between people of diverse groups, in particular on the grounds of the following characteristics protected by the Equality Act (2010); age, disability, gender, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, and sexual orientation, in addition to offending background, trade union membership, or any other personal characteristic.

An Equality Impact Assessment is attached at Appendix 7. As a result of performing the analysis, the policy does not appear to have any adverse effects on people who share *Protected Characteristics* and no further actions are recommended at this stage. However, monitoring the use of the policy will be essential in order to ensure it is implemented equitably.

3.2 Sustainability

A Sustainability Impact Assessment has been completed for this policy and is attached at Appendix (3).

3.3 Bribery Act 2010

The Bribery Act is particularly relevant to this policy. Under the Bribery Act it is a criminal offence to:

- Bribe another person by offering, promising or giving a financial or other advantage to induce them to perform improperly a relevant function or activity, or as a reward for already having done so; and

- Be bribed by another person by requesting, agreeing to receive or accepting a financial or other advantage with the intention that a relevant function or activity would then be performed improperly, or as a reward for having already done so.

These offences can be committed directly or by and through a third person and other related policies and documentation (as detailed on the CCG intranet) when considering whether to offer or accept gifts and hospitality and/or other incentives.

Anyone with concerns or reasonably held suspicions about potentially fraudulent activity or practice should refer to the Local Anti-Fraud and Corruption Policy and contact the Local Counter Fraud Specialist

4 SCOPE

This policy applies to all employees of the CCG in all locations. This policy does not apply to the settling of differences where separately agreed appeals procedures are in place for specific policies.

5 POLICY PURPOSE & AIMS

It is the Scarborough and Ryedale Clinical Commissioning Group (the CCG) policy that all employees have recourse to a publicised and well defined grievance procedure. This procedure also covers both collective and individual grievances concerning terms and conditions of service.

Staff are advised to raise issues informally with their line manager in the first place, however where this does not resolve the matter staff are encouraged to use the grievance procedure to deal with issues promptly.

In some instances where a dispute occurs between employees it may be of use to consider a mediation service which aims to find mutually agreeable outcomes where conflict has occurred. It is important to note that the service is informal, 'non-binding' and does not impact on the individual's right to instigate formal procedures if the mediation is unsuccessful. Further details of the service can be found by contacting the CSU Workforce Department.

It is recognised that the procedure itself cannot guarantee the resolution of any particular grievance as this depends on all concerned adopting a reasonable attitude to the matter, and taking positive action to resolve the problem. The fundamental principle is that staff grievances should be dealt with fairly, quickly and as close as possible to the point of origin.

Staff using the grievance procedure will be treated in a fair and equitable manner and care will be taken to ensure that the principles set out within the General Data Protection Regulation are maintained.

6 DEFINITIONS

A grievance is defined in the 2009 ACAS Code of Practice for Disciplinary and Grievance Procedures as 'Concerns, problems or complaints that employees raise with their employers'.

An individual grievance is defined as a complaint from an individual employee that is specific to that employee and related to their terms and conditions of service and any other issue related to employment.

A collective grievance is defined as a complaint from a number of employees which is common to the employees concerned and related to their terms and conditions of service. It may be more appropriate for the problem to be resolved through collective agreements between the trade union(s) and the employer.

7 Roles / Responsibilities / DUTIES

It is the duty of each Line Manager to acquaint him/herself with the procedure, and to ensure that each member of staff is aware of the steps taken in airing a grievance.

8 IMPLEMENTATION

This policy will be communicated to staff via team meetings/team brief and will be available for staff on the intranet.

Breaches of this policy may be investigated and may result in the matter being treated as a disciplinary offence under the CCGs disciplinary procedure.

9 TRAINING & AWARENESS

A copy of the policy will be available on the CCG intranet. Training needs will be identified via the appraisal process and training needs analysis.

10 MONITORING & AUDIT

The implementation of this policy will be audited on an annual basis by the CCG and reported to CCG Governing Body.

11 POLICY REVIEW

The policy and procedure will be reviewed after 3 years for the CCG Governing Body in conjunction with Trade Union representatives. Where review is necessary due to legislative change, this will happen immediately.

12 REFERENCES

For further information please refer to the following reference sources:

- Employment Rights Act 1996
- General Data Protection Regulation 2018
- NHS Code of Practice on Records Management (Department of Health 2006)

- ACAS Code of Practice on Discipline and Grievance

13 ASSOCIATED DOCUMENTATION

- Disciplinary Procedure
- Equality and Diversity Policy

SECTION TWO – PROCEDURE

The grievance procedure is a staged process that consists of 2 distinct elements:

- initial informal procedure (Stage 1); followed by
- formal procedure (Stages 2 and 3)

Stage 2 should not normally be initiated until after the informal procedure (Stage 1) has been followed and no resolution has been found at that stage.

See appendix 3; Flowchart of Standard Grievance Procedure

1 STAGE 1 – INFORMAL PROCEDURE

Before an employee or, in a collective grievance, a representative of the group takes up a formal grievance under this procedure they are advised to raise the matter informally with their immediate supervisor/line manager in an attempt to resolve the issue by informal discussion(s).

If the matter is not resolved through informal discussion(s) with their immediate supervisor/line manager, the grievance should be put in writing and escalated to a manager at the next level within the management structure, or as appropriate, not previously involved in the issue. Employees should use the form at Appendix 1, Notification of Grievance. However, any form of written communication indicating a grievance or concern(s) from an employee may be considered a formal grievance.

The CCG may, where necessary, investigate a grievance raised informally even when the complainant does not want to place the grievance in writing. It is recognised that this may restrict the ability to properly investigate the complaint. The CCG will do this to protect the health and safety of the staff and to fulfil its obligations as an employer.

2 STAGE 2 – FORMAL PROCEDURE

The relevant manager and a Workforce Representative will meet with the employee or representative of the group as soon as possible, to discuss the issues and to seek a resolution. See section 21 for rights to representation. Following the meeting the manager will write to the employee or representative confirming the outcome.

If the employee remains dissatisfied after Stage 2, the employee has the option to appeal at Stage 3.

The procedure for handling a grievance hearing is outlined at Appendix 2.

3 STAGE 3 – FORMAL PROCEDURE

If the employee still remains dissatisfied after Stage 2, they can submit an appeal to the Chief Officer within 14 days of receipt of the letter confirming the outcome.

An Appeal Panel will consist of three members including at least one Lay/GP Member of the CCG, who will act as chair to the panel. Other members will be drawn from the Senior Management Team or Governing Body plus a workforce representative. No member of the panel will have had any previous involvement in the case.

A hearing will be held as quickly as possible, and certainly no later than 6 weeks from receipt of the appeal, unless otherwise agreed.

Appeal hearings will be conducted in accordance with the Appeals procedure as outlined in the CCG Disciplinary Policy (appendix 5).

Dependant on the nature of the grievance a professional advisor may be available to offer advice to the panel on technical points, if required. The professional advisor would not be a decision making member of the panel.

This is the final stage in the grievance procedure. The decision of the panel will be binding. The panel will write to the employee or representative confirming the outcome of the meeting.

4 UNRESOLVED COLLECTIVE GRIEVANCE

Where a collective grievance remains unresolved following exhaustion of the procedure, both parties – subject to joint agreement, may be referred to the Advisory, Conciliation and Arbitration Service (ACAS) for conciliatory and/or mediation. This is on the basis that ACAS is empowered to provide advice on procedures for avoiding and settling disputes and workers grievances. Such intervention must be agreed by all parties involved.

5 INVESTIGATION

A formal investigation will not be required in all Grievances raised. However, there will be occasions where an investigation is appropriate. In this instance a member of management will investigate the matter promptly and adequately supported by a CSU Workforce representative. A suitable Investigating Officer, who had not previously been involved in the procedure, will be appointed to undertake the investigation. The employee(s) will be informed in writing of the name of the Investigating Officer and any Workforce representative supporting the Investigating Officer.

The Investigating Officer may propose a timeframe within which the investigation could reasonably be expected to be completed. However, it is difficult to attach time limits to the process and all parties will be kept informed of any changes (and the reasons) to the proposed timeframe.

When the investigation is concluded, the employee(s) and their representative (if any) will be informed in writing of the outcome of the investigation. The Investigating Officer will write to the manager with their recommendation as a result of the investigation.

6 HEARINGS/APPEALS

The outcome of grievances hearings at Stage 2 and 3 will be confirmed in writing to the employee or representative within 7 calendar days following the meeting.

Where there has been a failure to agree at previous stages of the procedure, an appeal should be made in writing to the next level of management within 7 calendar days of written receipt of the decision at the previous stage. *Note:* At Stage 1, this will be on receipt of the verbal decision at the informal discussion. Appendix 1, Notification of Grievance Form, can be used for this purpose.

Where no appeal is raised within this timescale the grievance will be deemed to have been resolved. Every effort will be made to hold grievance hearings in a timely manner.

Adequate time should be allowed for the preparation of the Appeal paperwork at Stage 2 & 3, which must be submitted prior to the Hearing. Mutual exchange of papers prior to the hearing will take place by agreement on the same date. This should be at least 7 calendar days before the hearing unless agreed otherwise between the parties. The complainant or representative will be kept informed if there is to be a delay in arranging the Appeal hearing.

The procedure for handling a grievance hearing or appeal is outlined at Appendix 2.

7 REPRESENTATION

Employees have the right to be accompanied by a companion to grievance hearings, at all stages who can be either:

- A trade union official who has been certified by the trade union as having had experience or having received training in acting as a worker's companion in such circumstances e.g. an accredited staff representative; or
- Another fellow worker employed by the CCG

This right does not include the right to be accompanied by a person acting in a legal capacity or any other person.

In the case of a collective grievance, the employee(s) involved must appoint a single representative to act as a spokesperson during a grievance hearing or appeal.

The purpose of representation is to assist or represent the employee in stating their grievance and to provide support and guidance.

Where the grievance involves accredited staff representatives no investigation or action will be taken until the case has been discussed with a full-time official of the organisation concerned.

8 WORKFORCE SERVICES

At any stage of the procedure the complainant/manager can approach a CSU Workforce representative for guidance on the process or attendance at meetings to consider the matter and seek a resolution. (This may not always be appropriate at Stage 1)

Workforce advice should be obtained at every stage of the procedure and a CSU Workforce representative must attend meetings from stage 2 onwards.

9 STATUS QUO WORKING

It is agreed that in the event of a Grievance being lodged which cannot immediately be resolved, then whatever practice or agreement existed prior to the difference shall continue to operate pending a settlement or until the agreed procedure has been exhausted.

Except where there is a manifest emergency situation in relation to services provided and /or health and safety matters and in such circumstances it may be difficult to operate the 'status quo'. In these circumstances a decision regarding the 'status quo working' will be made following discussions with the CSU Head of Workforce. It is recognised these are likely to be isolated or exceptional cases.

10 TIMING

Every effort will be made by both sides to resolve the grievance at the lowest level and with the minimum delay.

11 RECORDS

Records will be kept detailing the nature of the grievance raised, the CCG's response, any action taken and the reason for it. Managers are expected to maintain a written record on the appropriate Grievance Tracking Form (Appendix 6) at all stages of the process in accordance with the Grievance Policy.

A copy of the Grievance Tracking form will be retained on the employee's personal file for the duration of the process and for 12 months following the resolution or completion of the process. A copy of relevant background papers and the outcome correspondence will be kept on the file.

The CSU Workforce department will retain all other papers relating to a grievance, e.g. investigation/meeting notes.

All records will be kept in a confidential environment and retained in accordance with the General Data Protection Regulation NHS Code of Practice on Records Management (Department of Health 2006).

12 CONFIDENTIALITY

Grievance issues should be considered confidential. Only those persons who need to know should be given access to relevant information and they in turn, should treat that information as confidential in line with the General Data Protection Regulation. All those involved should be informed that any breach of confidentiality (including informal discussions with colleagues) may prejudice a fair outcome and may also constitute a disciplinary offence.

13 APPENDICES

- Appendix One – Procedure for Handling a Grievance Hearing or Appeal at Stages 2 and 3
- Appendix Two – Flow Chart of Standard Grievance Procedure
- Appendix Three – Equality Impact Assessment
- Appendix Four – Sustainability Impact Assessment
- Appendix Five – Privacy Impact Assessment

14 ASSOCIATED DOCUMENTATION

The following documents are saved separately in word version on the CCG shared folder [Y:\SCARCCG\Admin\ADMIN\Policies, Frameworks, Templates, Processes\Published Documents \(Policies etc\)\Current Policies](Y:\SCARCCG\Admin\ADMIN\Policies, Frameworks, Templates, Processes\Published Documents (Policies etc)\Current Policies) and on the CCG [website](#)

- Notification of Grievance
- Standard Letters
- Statement of Case – standard format
- Grievance Tracking Form

APPENDIX ONE – PROCEDURE FOR HANDLING A GRIEVANCE HEARING OR APPEAL AT STAGES 2 AND 3

Procedure for Handling a Grievance Hearing or Appeal at Stages 2 and 3

Administration

Hearings at Stage 2 of the Grievance Procedure will be heard by the appropriate level of management (Officer) and supported by a Workforce Representative.

Stage 3 will be heard by a CCG panel chaired by a Lay Member/GP Governing Body Member as detailed in section 17.1 and supported by a Workforce Representative.

A minimum notice period of 14 calendar days will be given before a hearing or appeal (unless a mutually agreed shorter timescale is agreed between the parties).

Mutual exchange of papers prior to the hearing will take place by agreement on the same date. This should be at least 5 calendar days before the Grievance hearing unless agreed otherwise between the parties.

Copies of all papers to be considered at the hearing must be provided for each panel member, workforce representatives, management side representative, the employee and the employee's representative if applicable.

Procedure for Hearing:

At the outset of the hearing the Officer/Chair of panel hearing the grievance will:

Outline the purpose of the hearing

Confirm to the employee and all present that the hearing will be conducted in line with the grievance procedure

Introduce all present and state the capacity in which they are there

If the employee is not represented / accompanied, the Officer / Chair hearing the grievance will check that he/she is aware of his/her right to be represented/accompanied and whether or not he/she is happy to proceed without representation/accompaniment.

The employee or their representative is asked to present their case and may call witnesses.

The management side representative may ask questions of the employee, their representative and witnesses, in order to clarify the issue.

The Officer/panel members hearing the Grievance may ask questions of the employee, their representative and witnesses, in order to gain a comprehensive understanding of the issue.

The employee or their representative may re-examine their witnesses on any points raised by the Officer or management side representative.

The management side representative shall present its case and may also call witnesses.

The employee or their representative may question the management side representative and witnesses.

The Officer/panel members hearing the Grievance may then question the management side representative and witnesses.

The management side representative may re-examine its witness on any points raised by the employee or representative and the Officer.

Nothing in the foregoing procedure shall prevent the Officer/Chair, panel members or Workforce Representative from inviting the representative of either party to elucidate or amplify any statement they may have made or from asking them questions as may be necessary.

Management side representative makes a final statement without introducing new evidence.

The employee or their representative makes a final statement without introducing new evidence.

At the completion of the hearing of the evidence, the employee, their representative, and the management side shall withdraw.

The Officer/Chair, panel members hearing the Grievance together with the Workforce Representative shall adjourn and consider the evidence in private, only recalling both parties and the representative to clear points of uncertainty on evidence already given.

If possible the Officer/Chair conducting the meeting will give his/her decision at the time. Both parties will be informed of:

The decision

The reason for the decision

What action will be taken (where applicable / if any)

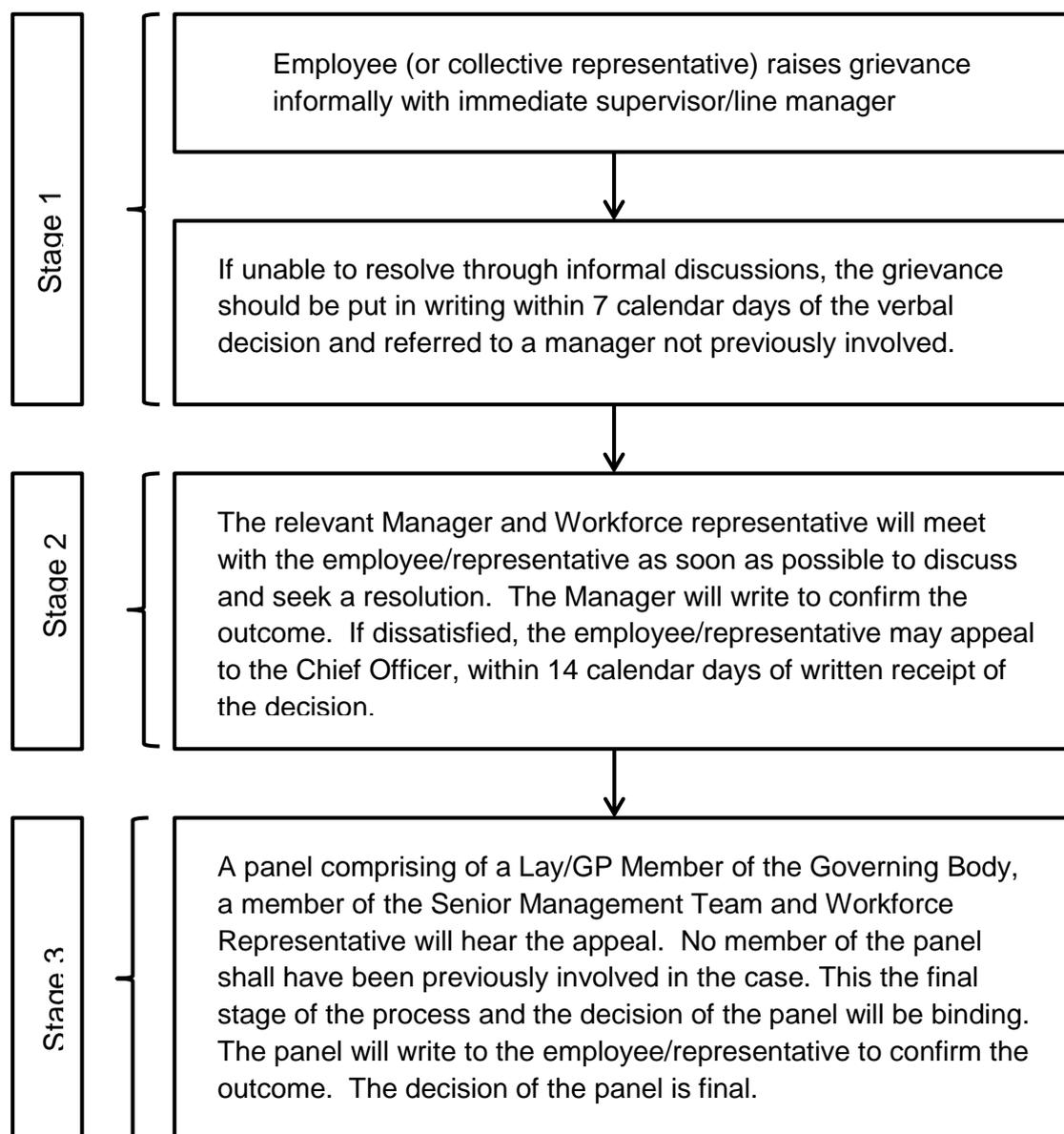
The decision will be communicated in writing within 7 calendar days

The employee's right to appeal the matter to the next stage of the formal procedure (other than at Stage 3)

Note:

The CSU Workforce Representative appointed to support the Officer/Chair, panel members shall be in attendance throughout the hearing/appeal, recording the proceedings and shall remain with the Officer/Chair, panel members whilst they consider their decision. He/she shall advise the Officer/Chair, panel members on points of procedure and may ask questions for clarification. He/she shall not have been involved in the case previously.

APPENDIX TWO – FLOW CHART OF STANDARD GRIEVANCE PROCEDURE



All stages of the process will be undertaken in as timely a manner as possible

APPENDIX THREE – EQUALITY IMPACT ASSESSMENT

General Information

Policy:	Grievance Policy	
Date of Analysis:	25 February 2014	
Policy Lead: (Name, job title and department)	HR eMBED	
What are the aims and intended effects of this policy?	It is the Scarborough and Ryedale Clinical Commissioning Group (the CCG) policy that all employees have recourse to a publicised and well defined grievance procedure. This procedure covers both collective and individual grievances concerning terms and conditions of service.	
Are there any significant changes to previous policy likely to have an impact on staff, patients or other stakeholder groups?	None	
Please list any other policies that are related to or referred to as part of this analysis	Disciplinary Procedure Equality and Diversity Policy	
Who is likely to be affected by this policy?	General Public	
	Service Users	
	Staff	Yes
What engagement / consultation has been done, or is planned for this policy and the equality impact assessment?	Consultation have taken place nationally and locally with Trade Union representatives	
Promoting Inclusivity and NHS Scarborough and Ryedale CCG's Equality Objectives. How does the project, service or function contribute towards our aims of eliminating discrimination and promoting equality and diversity within our organisation? How does the policy promote our equality objectives	This Policy does not directly promote inclusivity, but provides a framework to settle grievances in the workplace. This should contribute towards eliminating discrimination	

Employee Equality Data

General	Total number of employees in the CCG is 87
Age	11.5% of staff are under 30 54.02% of staff aged 30 - 55 34.48 of staff are over 55
Gender	81.61% of staff employed are female 18.39% of staff employed are male
Race / Nationality	87.36% of staff employed in the CCG declared themselves White 10.34% of staff are not stated/undefined 2.30% of staff declared themselves Mixed
Disability	75.86% of staff employed declared themselves as having no disability 22.99% of staff did not declare /undefined 1.15% of staff declared a disability
Sexual Orientation	63.22% of staff described themselves as heterosexual 1.15% of staff described themselves as gay 35.63% did not wish to respond /undefined
Gender Reassignment	No information available
Religion / Belief	Christianity is the largest religious group declared by staff in the CCG 42.53% 35.63% were undefined or did not wish to declare 21.84% of staff declared other faith or religious beliefs
Pregnancy and Maternity	No information yet as the CCG has not been established long enough to build meaningful data
Marriage and civil partnership	58.61% of employees are married. 24.14% of employees are single 6.90% of employees are divorced 9.20% of employees were undefined or did not wish to declare 1.15% of employees are in a civil partnership

Assessing Impact

Is this policy (or the implementation of this policy) likely to have a particular impact on any of the protected characteristic groups?

(Based on analysis of the data / insights gathered through engagement, or your knowledge of the substance of this policy)

Protected Characteristic:	No Impact:	Positive Impact:	Negative Impact:	Evidence of impact and, if applicable, justification where a <i>Genuine Determining Reason</i> ¹ exists (see footnote below – seek further advice in this case)
Gender	X			Considered and no evidence of a positive or negative impact.
Age	X			Considered and no evidence of a positive or negative impact.
Race / ethnicity / nationality	X			Considered and no evidence of a positive or negative impact.
Disability	X			Considered and no evidence of a positive or negative impact.
Religion or Belief	X			Considered and no evidence of a positive or negative impact.
Sexual Orientation	X			Considered and no evidence of a positive or negative impact.
Pregnancy and Maternity	X			Considered and no evidence of a positive or negative impact.
Transgender / Gender reassignment	X			Considered and no evidence of a positive or negative impact.
Marriage or civil partnership	X			Considered and no evidence of a positive or negative impact.

What measures have been put in place to mitigate any potential impact?

1. ¹ The action is proportionate to the legitimate aims of the organisation (please seek further advice)

Action Planning:

As a result of performing this analysis, what actions are proposed to remove or reduce any risks of adverse impact or strengthen the promotion of equality?

Identified Risk:	Recommended Actions:	Responsible Lead:	Completion Date:	Review Date:

Sign-off

All EIAs must be signed off by a member of SMT

I agree / disagree with this assessment / action plan

If *disagree*, state action/s required, reasons and details of who is to carry them out with timescales:

Signed off by (Name/Job Title)

Signed:

Date:

APPENDIX FOUR – SUSTAINABILITY IMPACT ASSESSMENT

Instructions

Sustainability is one of the CCG's key priorities and consequently the CCG has made a corporate commitment to address the environmental effects of its activities across all service areas. The purpose of the Sustainability Impact Assessment is to record any positive or negative impacts that a Policy / Board Report / Committee Report / Service Plan / Project is likely to have on each of the CCG's sustainability themes. The Sustainability Impact Assessment enables any relevant impacts to be identified and potentially managed.

The Sustainability Impact Assessment is based on assessing the impact of the activity against a series of criteria covering environmental sustainability issues. It would be most desirable for activities to score positively in as many areas as possible, although it is likely that some areas will score positively against some themes, and negatively against others.

Using the Sustainability Impact Assessment template

To complete the Sustainability Impact Assessment template, you should consider whether the Policy / Board Report / Committee Report / Service Plan / Project will have a positive or negative impact on each of the themes by placing a mark in the appropriate column. When you think there is likely to be an impact, please provide some annotations regarding the nature of the impact, and any actions that will be taken to address that impact. Users should note that not every theme will be relevant. Where this is the case the 'No Specific Impact' column should be marked. Users should also consider the following tips:

1. Make relative not absolute judgements (e.g. a new energy efficient service would score positively even if it consumes more energy than if no service were provided).
2. Be aware that small positive changes could be outweighed by negative ones (e.g. new energy efficient lighting in the short term may outweigh the benefits of maintaining current lighting).
3. If there are both positive and negative impacts, these need to be recorded in order to give a balanced view. Be objective and unbiased.
4. Concentrate on the most key significant issues - there is the potential to consider the appraisal in a very detailed way. This should be avoided at this stage.
5. Judge a proposal over its whole lifespan and remember that some impacts may change over different timescales.

If you require assistance in completing the Sustainability Impact Assessment please contact the Corporate Services Team

Domain	Review questions	Assessment of Impact Negative = -1 Neutral = 0 Positive = 1 Unknown = ? Not applicable = n/a	Brief description of impact	If negative, how can it be mitigated? If positive, how can it be enhanced?
Models of Care	<p>Will it minimise 'care miles' making better use of new technologies such as telecare and telehealth, delivering care in settings closer to people's homes?</p> <p>Will it create incentives to promote prevention, healthy behaviours, mental wellbeing, living independently and self-management?</p> <p>Will it provide evidence-based, personalised care that achieves the best possible health and well-being outcomes with the resources available?</p> <p>Will it reduce avoidable hospital admissions or permanent admissions to residential care or nursing homes?</p> <p>Will it pay for services based on health outcomes rather than activity for example through personal budgets?</p> <p>Will it deliver integrated care, that co-ordinate different elements of care more effectively and remove duplication and redundancy from care pathways?</p> <p>More info: http://www.sduhealth.org.uk/areas-of-focus/clinical-and-care-models.aspx</p>	n/a		
Travel	<p>Will it reduce 'care miles' (telecare, care closer) to home?</p> <p>Will it reduce repeat appointments?</p> <p>Will it provide / improve / promote alternatives to car based transport (e.g. public transport, walking and cycling)?</p> <p>Will it support more efficient use of cars (car sharing, low emission vehicles, community transport, environmentally friendly fuels and technologies)?</p> <p>Will it improve access to services and facilities for vulnerable or disadvantaged groups or individuals?</p> <p>More info: http://www.sduhealth.org.uk/areas-of-focus/carbon-hotspots/travel.aspx</p>	n/a		
Facilities Management	<p>Will it reduce the amount of waste produced or increase the amount of waste recycled?</p> <p>More info: http://www.sduhealth.org.uk/areas-of-focus/carbon-hotspots/waste.aspx</p> <p>Will it reduce water consumption?</p> <p>Will it improve the resource efficiency of new or refurbished buildings (water, energy, density, use of existing buildings, designing for a longer lifespan)?</p> <p>Will it improve green space and access to green space?</p> <p>More info: http://www.sduhealth.org.uk/areas-of-focus/carbon-hotspots/energy.aspx</p>	n/a		
Adaptation to Climate Change	<p>Will it support mitigation of the likely effects of climate change (e.g. identifying proactive and community support for vulnerable groups; contingency planning for flood, heatwave and other weather extremes)?</p> <p>More info: http://www.sduhealth.org.uk/areas-of-focus/community-resilience/community-resilience-copy.aspx</p>	n/a		

Procurement	<p>Will it specify social, economic and environmental outcomes to be accounted for in procurement and delivery in line with the Public Services (Social Value) Act 2012?</p> <p>Will it stimulate innovation among providers of services related to the delivery of the organisations' social, economic and environmental objectives?</p> <p>Will it reduce waste, environmental hazards and toxic materials for example by reducing PVC, antibiotic use, air pollution, noise, mining and deforestation?</p> <p>Will it reduce use of natural resources such as raw materials, embedded water, and energy to promote a circular economy?</p> <p>Will it support the local economy through local suppliers, SMEs or engage with third sector or community groups?</p> <p>Will it promote ethical purchasing of goods or services e.g. increasing transparency of modern slavery in the supply chain globally?</p> <p>More info: http://www.sduhealth.org.uk/areas-of-focus/commissioning-and-procurement/procurement.aspx</p>	n/a		
Workforce	<p>Will it provide employment opportunities for local people?</p> <p>Will it promote or support equal employment opportunities?</p> <p>Will it promote healthy working lives (including health and safety at work, work-life/home-life balance and family friendly policies)?</p> <p>Will it offer employment opportunities to disadvantaged groups and pay above living wage?</p> <p>More info: http://www.sduhealth.org.uk/areas-of-focus/social-value.aspx</p>	0		
Community Engagement	<p>Will it promote health, increase community resilience, social cohesion, reduce social isolation and support sustainable development?</p> <p>Will it reduce inequalities in health and access to services?</p> <p>Will it increase participation including patients, the public, health professionals and elected officials to contribute to decision making?</p> <p>Have you sought the views of our communities in relation to the impact on sustainable development for this activity?</p> <p>Will it increase peer-support mechanisms?</p> <p>More info: http://www.sduhealth.org.uk/areas-of-focus/community-resilience.aspx</p>	n/a		
Estimated carbon benefit	<p>What is the estimated carbon benefit (in terms of tCO₂e) from the implementation of this project? As opposed to the current business as usual position. Speak with your sustainability manager and see the following guidance:</p> <p>More info: http://www.sduhealth.org.uk/areas-of-focus/carbon-hotspots/pharmaceuticals/cspm/sustainable-care-pathways-guidance.aspx</p>	n/a		

APPENDIX FIVE – PRIVACY IMPACT ASSESSMENT

Screening Questions

The below screening questions should be used inform whether a PIA is necessary. This is not an exhaustive list therefore in the event of uncertainty completion of a PIA is recommended.

Please contact the Corporate Services Team of IG Manager (eMBED) if you need any assistance

Project title	
Brief description	

Screening completed by

Name	
Title	
Department	
Telephone	
Email	
Review date	

Marking any of these questions is an indication that a PIA is required:

Screening Questions		Tick
1	Will the project involve the collection of identifiable or potentially identifiable information about individuals?	<input type="checkbox"/>
2	Will the project compel individuals to provide information about themselves? i.e. where they will have little awareness or choice.	<input type="checkbox"/>
3	Will identifiable information about individuals be shared with other organisations or people who have not previously had routine access to the information?	<input type="checkbox"/>
4	Are you using information about individuals for a purpose it is not currently used for or in a new way? i.e. using data collected to provide care for an evaluation of service development.	<input type="checkbox"/>
5	Where information about individuals is being used, would this be likely to raise privacy concerns or expectations? i.e. will it include health records, criminal records or other information that people would consider to be sensitive and private.	<input type="checkbox"/>
6	Will the project require you to contact individuals in ways which they may find intrusive? i.e. telephoning or emailing them without their prior consent.	<input type="checkbox"/>
7	Will the project result in you making decisions in ways which can have a significant impact on individuals? i.e. will it affect the care a person receives.	<input type="checkbox"/>
8	Does the project involve you using new technology which might be perceived as being privacy intrusive? i.e. using biometrics, facial recognition or automated decision making.	<input type="checkbox"/>

Please retain a copy of this questionnaire within your project documentation.

***If you have ticked any of the questions above – please complete a full Privacy Impact Assessment –
The most up to date version of the form is available on the CCG website at:***

<http://www.scarboroughryedaleccg.nhs.uk/publications/policies-2/>