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Grievances raised against Staff and Managers

All information is requested within the calendar period between January 2024 – to date:

1. The number of grievances raised (i) against staff at Band 5, 6 and 7 and (ii) against Managers at Band 8a and above levels.

We are unable to answer this question. A grievance against a person does not fall within the scope of the BHSC Trust Grievance Policy. Section 3.1. of the Grievance policy outlines the concerns that fall within the scope of Grievance Policy. These are as follows: -

- ***Concerns about how the allocation or distribution of resources affects the employee.***
- ***Concerns about the action or inactions of the Trust that may impact the employee.***
- ***Concerns about the application of a policy.***

Matters concerning interpersonal relationships are managed in line with the Trust's Conflict Bullying and Harassment policy.

2. The number of these which have been upheld (i) in part, (ii) in full and (iii) dismissed/not upheld.

Unable to respond. Please refer to response to Q1.

3. Of those, how many have been completed (from submission of NOR through to recommendations actioned and implemented), within (i) 3 months, (ii) 6 months, (iii) 12 months, (iv) 18 months, (v) 24 months and (vi) greater than 24 months.

Unable to respond. Please refer to response to Q1.

4. How many of these have not been completed within the Belfast HSC Trust policy & procedure? Of these, how many have cited "organisational pressures" as the reason for any/all delays.

The Trust can confirm that the information you have requested is not recorded. (While FOI provides a right of access to data held by the organisation, it does not require us to create new information or records to respond to a request.)

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5. Of the number of grievances identified in Point 1 (i) and (ii), how many staff have also been subject to a grievance process and disciplinary investigation simultaneously. This references the number of staff who have been involved in the grievance process and then become subject to a disciplinary process, not vice versa.

The Trust can confirm that the information requested is not recorded therefore we are unable to respond to this question.

6. Copy of BHSCCT guidance provided to the Commissioners of Investigations in Point 5 circumstances.

The Trust do not provide specific guidance to the Commissioner of Investigations. The attached document outlines the role of Commissioner. This document is from investigation training delivered by the ER team and is not typically shared with the Commissioner unless specifically requested.

7. Number of staff subject to Disciplinary Investigation at (i) Band 7, (ii) Band 8a, (iii) Band 8b. Further to this, the number of these where BHSCCT has imposed informal/formal action.

This number is less than 5 therefore specific information cannot be given due to potential for identifying individuals.

8. Referencing 7 (i)-(iii) categories, number of staff where the disciplinary investigation and/or action is related to (i) conduct & behaviour, (ii) adult safeguarding concerns, (iii) a complaint from patient/service user/family, (iv) fraud. Further to this, the number of staff where the basis of disciplinary investigation/action (TOR's) are a combination of (i) two of these categories, (ii) three categories and (iii) all four.

Please refer to number 7.

9. Of the total number of grievances identified in Point 1 (i) and (ii), how many of these have (i) been audio/video/electronically recorded, (ii) had an appropriately qualified note-taker present, (iii) had notes taken by the investigating panel members themselves.

The Belfast Trust can confirm that the information you have requested is not recorded therefore we are unable to respond to this question.

10. What is the specific timeframe that Belfast HSC Trust would consider a meeting that "is envisaged to last several hours".

The Belfast Trust can confirm that it has no specific policy that stipulates specific timeframes for meetings.

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11. Of the total number of disciplinary investigations identified in 7 (i)-(iii), how many of those have been (i) audio/video/electronically recorded, (ii) had an appropriately qualified note-taker present, (iii) had notes taken by the investigating panel members themselves.

The Belfast Trust can confirm that the information you have requested is not recorded therefore we are unable to respond to this question.

12. Of the number of disciplinary investigations identified in 7 (i)-(iii), how many of those meetings have lasted (i) up to one hour, (ii) up to two hours, (iii) the specific timeframe identified in Point 10.

The Belfast Trust can confirm that the information you have requested is not recorded therefore we are unable to respond to this question.

13. Of the total number of disciplinary investigations, how many staff were informed by the Commissioning Panel that they're case would proceed to investigation, before HR had been involved in the required screening process.

This information is not known or held within HR.

When a concern is raised concerning a disciplinary matter a screening form is completed jointly by the line manager and HR, including the relevant professional lead when appropriate. (There are several outcomes to the screening process which include no further action, learning outcomes, capability, Informal structured conversation, Fast Track procedure or Formal disciplinary procedure). If the outcome of the screening process is a formal disciplinary investigation an appropriate senior manager is appointed as a commissioner. (The Commissioner will agree the Terms of Reference at the commencement of the investigation with the Investigating Officers). The Commissioner will meet with the employee to advise them that they are the subject of a formal investigation and that they will receive the Terms of Reference and a copy of the Disciplinary Policy in writing.

14. Are Commissioning Panels, for Grievance and Disciplinary processes, responsible for informing any/all Investigating Panels of any/all underlying health issues of the subject employee, prior to any/all meetings. Is this stipulated within the related BHSCCT policies and within the training provided for all staff involved in these processes.

It is not the responsibility of the Commissioner to inform the investigation team of underlying health conditions.

Underlying health matters are not normally discussed with the investigation team unless reasonable adjustments are specifically requested by the staff member through Occupational Health.

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15. Where the subject employee has attended Occupational Health appointment/s as part of either/or process, who is responsible for informing the Investigating Panel of the findings within these reports.

Any reasonable adjustments required are discussed at the Strategy Meeting with HR, Commissioner and investigation team.

Any other details from Occupational Health reports will only be disclosed at the discretion of the employee during meetings with investigation team.

16. Under what circumstances in either of these processes would BHSCCT find it reasonable and/or appropriate for an employee to “elaborate on their mental health” with the Investigating Panel.

Due to the specific circumstances referred to in this question we are unable to respond to this question. However, we can confirm that the investigation team are required to ask questions pertinent to the investigation.

17. In circumstances where the NOR raises issues with direct line management and an investigation commissioned, what measures are taken to ensure the psychological safety of both employees, through this process.

***A Notice of Reference is relevant to the Trust’s grievance policy.
Investigations are not commissioned under the Trust’s grievance policy.
Where investigations are commissioned, they are normally commissioned for the purposes of Disciplinary or Conflict, Bullying and Harassment nature.
Consideration would be given to the appropriate adjustments on these occasions.***

***In any such process, consideration should be given to the wellbeing and psychological safety of all parties involved. This may include consideration of appropriate management arrangements, reasonable adjustments, Occupational Health input where required, access to staff support services, clear communication about the process, and steps to minimise unnecessary contact between parties where this is appropriate and practicable.
Any measures would be considered on a case-by-case basis, taking account of the circumstances of the matter, the needs of the individuals involved, and the requirement to ensure that the process remains fair, impartial and confidential.***

18. In what circumstances do BHSCCT send special delivery letters to staff.

The Trust do not have guidance on sending correspondence through special delivery.

Where possible all correspondence is sent electronically via email for expedience and cost saving reasons.

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The means of postage is at the discretion of the sender.

19. In what circumstances, within Grievance and/or Disciplinary processes, are BHSCCT permitted to rely on evidence without sharing this with the subject employee, including redacted information.

As a general principle, where information is being relied upon as part of a formal employment process, the employee should be provided with sufficient information about the case to enable them to understand and respond to the issues being considered. This is an important element of procedural fairness. However, there may be circumstances where information cannot be disclosed in full, or where redactions are required. This may include where disclosure would identify third parties, disclose personal data relating to other individuals, compromise confidentiality, or adversely affect the rights or freedoms of others.

20. Copy of presentation delivered by Peter McBride to the Belfast HSC Trust Board in 2023 and list of attendees to this presentation.

A presentation was delivered to Trust Board on 5 July 2023 by Mr Peter McBride while the Board was in confidential session. Papers from such confidential sessions remain confidential.

The information you have requested would have been provided confidentially and there would have been no expectation that it would be released into the public domain. In this context we consider that such information would have been provided to the Trust in a manner to provide a duty of confidence in Common Law. This information would be exempt under Section 41(1) Information provided in confidence.

21. The DATIX W number of incident report detailing the aspiration of staff member xxxxxxxx, submitted on/around xx xx 2024, by witnesses/employees, xxxxxxxx and/or xxxxxxxx.

Under Freedom of Information this would be exempt under Section 40 part (1) – Personal Information. This is an absolute exemption and does not require a public interest test.

This request for information constitutes personal data from the ‘data subject’ and therefore is exempt. Any request made by an individual for their own personal data as a subject access request should be treated under the Data Protection Act 2018.

***Their contact details are as follows –
email: dataprotection@belfasttrust.hscni.net***

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22. Copy of BHSCT policy & procedure and/or training information provided to staff, for the process of reporting an employee to the Counter Fraud Services team.

These are attached and please also find attached the related DoH documents which the policy reflects – these have not been superseded and so remain extant policy. Fraud awareness Training is provided on a team by team basis as requested by individual managers and is incorporated into financial governance training programs delivered throughout the Trust. Additionally, newsletters and webinar details are shared corporately for all staff in conjunction with BSO Counter Fraud on an annual basis.

23. Copy of BHSCT policy & procedure for staff on how to action/implement recommendations received within the report from the CFS team, including timeframes.

The Trust does not have a written policy or procedure on how to action recommendations received within CFS reports – that is the responsibility of the managers who have commissioned the investigation. If for example the recommendation from Counter Fraud Service is that BHSCT consider instigating a disciplinary process in respect of X, the manager will work with HR Employee Relations colleagues to take this forward under the Regional Disciplinary Policy.

24. Copy of BHSCT policy which outlines the employees right to appeal a CFS report, if different to the above.

CFS investigations are carried out to a criminal standard and findings are evidence based. There is no right of appeal by employees who may be subject to a fraud investigation.

25. Copy of BHSCT policy & procedure for Trust Community Staff management of service user/tenant post, specific to ACOPS Supported Housing facilities. Copy of Standard Operating Procedure (SOP) referring to this management of tenant post.

The Trust do not have a policy and procedure for Trust Community Staff management of service user/ tenant post, specific to ACOPS Supported Housing facilities. ACOPS Supporting Housing facilities do not have a Standard Operating Procedure referring to management of tenant post.