# SUPPORTING DOCUMENTS

## A - EMPLOYEE GRIEVANCE FORM

|  |  |  |
| --- | --- | --- |
| **EMPLOYEE NAME** | | **DATE FORM SUBMITTED** |
| Click or tap here to enter text. | | Click or tap here to enter text. |
| **JOB TITLE** | | **EMPLOYEE ID** |
| Click or tap here to enter text. | | Click or tap here to enter text. |
| **EMPLOYEE HOME ADDRESS** | | **WORKPLACE ADDRESS** |
| Click or tap here to enter text. | | Click or tap here to enter text. |
| **EMPLOYEE CONTACT DETAILS** | |  |
| **EM**Click or tap here to enter text.**AIL**  **PHONE NUMBER** | | Click or tap here to enter text. |
| **DETAILS OF EVENT LEADING TO GRIEVANCE** | |  | | |
| **DATE, TIME, AND LOCATION OF EVENT** | | | **WITNESSES** if applicable | | |
| Click or tap here to enter text. | | | Click or tap here to enter text. | | |
| **ACCOUNT OF EVENT** | | | **CONTRAVENTIONS** | | |
| Provide a detailed account of the occurrence.  Include the names of any additional persons involved, when and where it occurred, what happened and why you feel that it is a grievance. | | | Provide a list of any policies, procedures, or guidelines you believe have been contravened in the event described. | | |
| Click or tap here to enter text. | | | Click or tap here to enter text. | | |

|  |
| --- |
| **PROPOSED SOLUTION** |
| Click or tap here to enter text. |

Please retain a copy of this form for your own records. As the grievant, please provide your signature below, as it indicates that the information you've included on this form is truthful.

|  |  |
| --- | --- |
| **SIGNATURES** |  |
|  |  |
| **EMPLOYEE SIGNATURE** | **DATE** |
|  | Click or tap here to enter text. |
|  |  |
| **RECEIVED BY: PRINTED NAME AND SIGNATURE** | **DATE** |
|  | Click or tap here to enter text. |

# B MEETING RECORD FORM

|  |  |  |
| --- | --- | --- |
| **Date of Meeting:** | Click or tap here to enter text. | |
| **Subject:** | Click or tap here to enter text. | |
| **Location:** | Click or tap here to enter text. | |
| **Type of Meeting:** | Grievance Meeting | |
| **Persons Present:** | Click or tap here to enter text. | **Position:**Click or tap here to enter text. |
| **Persons Absent:** | Click or tap here to enter text. | |
| **Minutes Competed By:** | Click or tap here to enter text. | |

……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………….……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………..………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………….…………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………….……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………….…………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………….…………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………….…………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………….

# C INVITATION TO MEETING FORM

[add date]

Private and confidential

[add address] Dear [add name]

Further to receiving your Formal Grievance Form dated [add date], you are invited to attend a formal meeting at [add time] on [add date] at [add venue], where your grievance will be discussed.

***If the employee’s form does not contain sufficient details of the grievance, include the following:***

[In order for me to gain a better understanding of the reasons for your grievance prior to the meeting, please provide me with further details in writing of [state information required] by [add date]]

Your grievance will be heard by [add name and title]. [add name] will also be present. You are entitled, if you wish, to be accompanied at the meeting by a work colleague or a trade union representative. Please let me know by [add date], if you wish to exercise this right.

If you have any queries regarding this process, please contact me on [add telephone number].

Yours sincerely

{add name] [add title]

# D NOTIFICATION OF GRIEVANCE ALLEGATIONS

Date ………………..

Dear…………………..

I am writing to inform you that the I have received a grievance from one of your colleagues and have decided it is necessary to conduct an investigation into your alleged actions in relation to:

* **[Summarise details of each issue being investigated in bullet points]**

The person in charge of the investigation will be **[name of investigator]**.

The aim of the investigation is to establish the facts of the matter by gathering as much relevant facts and information as possible. It is currently expected that the investigation will be completed by **[day, month]**.

Once the investigation has been completed, you will be informed in writing of its outcome. If it is found that there is a case to answer, you will be invited to attend a formal meeting.

The investigator may invite you to attend an investigation meeting where you can explain your version of events. If this is required, you will be informed of the time and date of the meeting in advance.

In the meantime, should you have any information that might be of assistance to the investigation or wish to discuss anything, please do not hesitate to contact **[name of investigator/line manager]**.Their contact details are **[telephone number, email address]**.

To ensure that the investigation can be conducted as fairly as possible we request that you keep the matter confidential. Any breach of confidentiality may be considered to be a disciplinary matter.

Please note that you should continue to attend work while the investigation takes place **[amend if suspension of the employee was necessary]**.

Yours sincerely

Signed ..................................................

# E INVESTIGATION PLAN

[Amend as required]

|  |  |
| --- | --- |
| **Investigator** |  |
| **Terms of reference** |  |
| **Provisional time-frame** |  |
| **Policies and procedures to review and follow** |  |
| **Issues that need to be explored/clarified** |  |
| **Sources of evidence to be collected** |  |
| **Persons to be interviewed**  (including planned order of interviews) |  |
| **Investigation meetings further arrangements**  (When/where/notes to be taken by) |  |
| **Persons to supply own statement** |  |
| **Investigation meetings to be completed by** |  |
| **Collection of evidence to have been completed by** |  |
| **Further considerations** |  |

# F WITNESS STATEMENT

|  |  |  |
| --- | --- | --- |
| **WITNESS NAME** |  |  |
|  |  |
| **WITNESS MAILING ADDRESS** |  |
|  |  |
| **WITNESS PHONE NUMBER** |  |
|  |  |
| **WITNESS EMAIL ADDRESS** |  | **RE: An incident / contravention that occurred on or about:** |
|  |  | [ DATE ] |
| **DATE REPORT SUBMITTED** |  | **ISSUE TITLE / ISSUE ID / REF. NO.** |
|  |  |  |

|  |  |
| --- | --- |
| **WITNESS STATEMENT** State only the facts. |  |
|  |  |
|  | | |

Attach additional sheets as needed. As a witness, your signature below indicates that the information you've provided on this form is truthful.

|  |  |
| --- | --- |
| **SIGNATURES** |  |
|  |  |
| **WITNESS NAME** | **WITNESS SIGNATURE** | **DATE** |
|  |  |  |
|  |  |  |
| **RECEIVER NAME** | **RECEIVER SIGNATURE** | **DATE** |
|  |  |  |

# G TEMPLATE GRIEVANCE REPORT

|  |  |
| --- | --- |
| **Introduction** | **Investigation authorised by:** [Name and role] |
| **Investigator:** [Name and role] |
| **Date investigation began:** |
| **Terms of reference:** [include if they were amended and how] |
| **Background to the investigation:** [Brief overview of the matter] |

|  |  |
| --- | --- |
| **Process of investigation** | **The investigation process:** [Explain how the investigation was authorised] |
| **Evidence collected:**  [List all evidence collected] |
| **Evidence not collected:** [List all evidence that could not be collected and why |
| **Persons interviewed:** [List all people interviewed] |
| **Persons not interviewed:** [List any witnesses that could not be interviewed and why] |
| **Anonymised statements:** [If any, explain why and provide details of any enquiries into witness] |

|  |  |
| --- | --- |
| **The investigation findings** | **Summary of written and physical evidence:** [name and summarise each document contained, set out how the evidence supported or did not support your findings and why] |
| **Summary of witness evidence:** [name and summarise each witness statement, quote from statement where relevant, set out how the witness statement supported or did not support your findings and why] |
| **Facts established:** [detail what the investigation has established] |
| **Facts that could not be established**: [detail any part of the investigation that was inconclusive] |
| **Mitigating factors:** [detail if there were any mitigating factors uncovered that are relevant to the investigation] |
| **Other relevant information:** [detail any other information that is relevant to the matter] |

|  |  |
| --- | --- |
| **Conclusion**  [if required] | **Recommendation:**  **Formal action/Informal action/No action required** |
| **Further details on recommendation**: [such as the type of action suggested for example, formal disciplinary meeting, and if there are any other recommendations related to the matter. In disciplinary matters, the investigator should not recommend a possible sanction. This should only be considered at a disciplinary hearing] |
| **Investigator’s signature:**  **Date:** |

|  |  |
| --- | --- |
| **Supporting documents** | [List all documents collected as part of investigation and included in report] |

# H OUTCOME LETTER – EMPLOYEE RAISING A GRIEVANCE

STRCTLY PRIVATE AND CONFIDENTIAL

[Add Name]

Date [day month year]

Dear [and name]

**Outcome of Grievance Meeting**

**[\*Delete if not applicable]**

This letter provides formal [\*notification/confirmation] of the decision reached following the formal grievance meeting which took place on <DATE>. The meeting was carried out in accordance with the Berkeley Guardians Grievance Procedure, a copy of which has previously been provided to you.

The meeting was chaired by <NAME (job title)>. Also present as a member of the Panel was <NAME (job title)>. \*<*Specify names/designations of any others present and their reason for attendance, depending on the circumstances of the case e.g. investigators, management respondents, witnesses>.*

Having been invited to bring a companion, i.e. a trade union representative or a work colleague to the hearing you [\*choose not to do so/were accompanied by <name/department/TU>].

Preliminary Matters ***(\*if applicable***)

***Insert*** *a paragraph detailing any requests to delay the meeting, reasonable adjustments to the process etc. and the panel’s response to such requests, including the factors they took into account when considering such requests. Also confirm receipt of any information/documentation from the employee, where relevant.*

Consideration of the Grievance

At the meeting you were also given full opportunity to explain the nature of your grievance and the resolution you were seeking.

***Insert*** *a paragraph detailing what the employee identified during the meeting as to the nature of their grievance and how they identified that they would like to see it resolved.*

***Insert*** *a paragraph for each issue raised, detailing any response/explanation provided by any respondent/findings of any investigation and/or panel. Identify the panel’s findings and conclusions for each issue.*

Decision

***Insert*** *a paragraph, if relevant, identifying any special circumstances the panel took into consideration in reaching its decisions*

***Insert*** *a paragraph advising of the panel’s decision and the reasons for this, including any recommendations considered appropriate, if relevant, to address the issue(s). The potential outcomes are that the grievance was: found (fully or partially), rejected or required a full or partial rehearing.*

**Appeal**

I hope that this resolves the matter that you have raised. However, you have the right to appeal the outcome (please see ‘Appeals’ section of the grievance procedure for further details including examples of relevant grounds for appeal).

Should you wish to exercise this right you should do so in writing within 7 calendar days of receipt of this letter, clearly stating the grounds upon which you wish to do so. It will be your responsibility to state your case and bring to the attention of the Panel all relevant documentary evidence that should be considered. The decision of an appeal panel is final.

Please address your letter to <Director> 1 Berkeley Square, Clifton, Bristol BS8 1HL

Yours sincerely

< Name/Designation of Chair of Panel>

Enc: <Document/s>

Copy of the Grievance Procedure

Cc <Name>

# I OUTCOME LETTER – EMPLOYEE WHOM GRIEVANCE IS AGAINST

[Name]  
[Address]

[Date]

Dear [Name]

RE: Outcome of grievance against you

Following our meeting on [date] at which we discussed grievance dated [date] [, and our subsequent meeting on [date]], I write to confirm my findings.

In addition to meeting with you, I investigated the alleged grievance against you by [set out persons interviewed or documents considered or other investigation undertaken].

In light of this investigation, I have decided [to uphold **OR** not to uphold] the grievance. This is because [set out detailed reasons].

[In light of this decision **OR** Due to issues brought to light by the alleged grievance], we will take the following action [details of action].

[I appreciate you may be disappointed with this outcome.] You have the right to appeal against my decision. If you wish to appeal, you must submit your appeal in writing to [name] within five working days after receiving this letter. You should state the grounds for your appeal in full and explain what action you believe should be taken in respect of the matters raised in your grievance.

Yours sincerely

[Name of sender]

On behalf of [name of employer]

N.B. It is not compulsory but can be useful to include with this letter the written records of the investigation, if such records were created, provided these records support the conclusion reached.

# J GRIEVANCE APPEAL FORM

|  |  |
| --- | --- |
| **GRIEVANT NAME** | **DATE APPEAL SUBMITTED** |
|  |  |
| **GRIEVANT PHONE NUMBER** | **GRIEVANT EMAIL** |
|  |  |
| **GRIEVANT HOME ADDRESS** | **WORKPLACE ADDRESS** |
|  |  |
| **RECEIVED BY** | **DATE RECEIVED** |
|  |  |
|  | REASON FOR APPEAL (check all that apply): |
|  | New information/evidence is now available that wasn’t considered before |
|  | The process wasn’t followed correctly |
|  | The outcome wasn’t fair and reasonable |
| **FURTHER EXPLANATION OF REASONING** use attachments if necessary | | |
|  | | |
| **DESIRED OUTCOME** use attachments if necessary | | |
|  | | |

Please retain a copy of this form for your own records. As the grievant, your signature below indicates that the information you've provided on this form is truthful.

|  |  |
| --- | --- |
| **SIGNATURES** |  |
|  |  |
| **GRIEVANT SIGNATURE** | **DATE** |
|  |  |
|  |  |
| **RECEIVED BY: PRINTED NAME AND SIGNATURE** | **DATE** |
|  |  |

# K INVITATION TO A GRIEVANCE APPEAL MEETING

[Name]  
[Address]

[Date]

Dear [Name]

Invitation to grievance appeal meeting

I am writing to confirm receipt of your grievance appeal dated [date]. [This will be addressed in accordance with our Grievance Procedure, a copy of which is attached.] I will be responsible for considering your grievance appeal on behalf of [name of employer].

I would like to meet with you at [time] on [date] at [place] in order to ensure that I fully understand the basis for your appeal against the original decision in respect of your grievance. [[Name] will also be present at the meeting to take notes.] You are entitled to be accompanied to the meeting by a colleague or a trade union representative.

If there are any documents you would like me to consider that you feel support your grievance appeal, or are relevant to it, please either send these to me or let me know which documents these are. You do not need to do this before we meet, but it may be helpful to do so if you would like to discuss any of the documents at the meeting.

When we meet, I would also like to understand what practical resolution you are seeking or which you think is realistic, so please give some thought to this in advance.

Please confirm you and any companion are able to attend this meeting, or if not let me know as soon as possible. Please also confirm who, if anyone, you wish to bring as a companion.

Following the meeting, I will consider your grievance appeal, carry out any appropriate investigation, and then contact you again to explain my findings. The grievance appeal process will be [a full rehearing of your original grievance OR limited to a review of the original decision on the grounds you raised in your letter dated [date]].

If you or your companion need any particular assistance at the scheduled meeting, or there is anything else I ought to be aware of, please let me know.

Yours sincerely

[Name of sender]

# L GRIEVANCE APPEAL OUTCOME LETTER

[On headed notepaper of the employer]

[Name]  
[Address]

[Date]

Dear [Name]

Outcome of grievance appeal

Following our meeting on [date] at which we discussed grievance appeal dated [date] [, and our subsequent meeting on [date]], I write to confirm my findings.

In addition to meeting with you, I investigated your grievance appeal by [set out persons interviewed or documents considered or other investigation undertaken].

In light of this investigation, I have decided [to uphold **OR** vary] the original decision [, such that [set out details of variation]]. This is because [set out detailed reasons].

[In light of my decision **OR** Due to issues brought to light by your grievance and grievance appeal], we will take the following action [details of action].

My decision is final and there is no further right of appeal.

Yours sincerely

[Name of sender]

On behalf of [name of employer]

N.B. It is not compulsory but can be useful to include with this letter the written records of the investigation, if such records were created, provided these records support the conclusion reached.