Deeping St Nicholas Parish Council Grievance Form

Introduction

Any and all reference/s below to an Employee shall also be taken to mean a Councillor, being a person in a voluntary role who is not employed by the Council, unless the context would make that unreasonable.

This form should be completed by the employee or their representative, in conjunction with the Council's Grievance policy, for raising a formal grievance. If you have not already tried to resolve your concern or complaint through the informal procedure you should do so before submitting this form.

Your details
Name
Role (e.g. employee, councillor)
Phone number we may use to contact you about this issue
Email address we may use to contact you about this issue
Your representative's details (if any) Name
Role (e.g. employee, councillor, union representative)
Phone number we may use to contact him/her about this issue
Email address we may use to contact him/her about this issue
Topic of concern
Please tick one of the following to indicate the main category of your concern.
Grievance () Continue to section 1 Alleged bullying () Continue to section 2 Alleged sexual harassment () Continue to section 2 Alleged non-sexual harassment () Continue to section 2 Alleged discrimination () Continue to section 2 Please state here one or more main type of discrimination, e.g. race, sex, age, sexual orientation, etc. from the Equality Act 2010:

Section 1 – Details of your concern or complaint Please include the following information in your description: • Who is your complaint against (if applicable) • Why you are not happy?
Who is your complaint against (if applicable)
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 What happened – the specific nature of the incident/s The date and time it/they took place Where it/they took place The name(s) of the individuals responsible (if applicable) The names of those who witnessed the incident(s) (if applicable) How the issue of your complaint has affected you personally – how does it make you feel? What effect has it had on you? How you feel your complaint could be resolved?
What outcome do you want from raising this concern / complaint?
What outcome do you want from raising this concern / complaint?
Please omit section 2 and go to section 2

Section 2 – Raising a harassment, discrimination or bullying grievance
Who are you complaining about? Please provide the name or names of all those to whom this complaint refers, and explain what your concern / complaint is relating to each individual. If your complaint is about more than one person, please use a separate sheet for each individual.
Please explain what your concern / complaint is relating to each individual. If you are describing
an incident or a series of incidents, please include:The date and time it/they took place
Where it/they took place
The names of any other people present (if applicable)
 How the issue of your complaint has affected you personally – how does it make you feel? What effect has it had on you?
If you wish to include more incidents, please use a separate sheet
If you wish to include more incidents, please use a separate sheet.

Please confirm whether you intend to submit any documentary evidence Y / N
Have you considered mediation? Y/N
What is mediation? Please read the mediation process at https://www.gov.uk/guidance/a-guide-to-civil-mediation#what-is-mediation before completing and submitting this form as mediation can be a very successful and less stressful way of resolving issues. If you have decided not to use the mediation service, please explain the reason:
How do you feel your complaint could be resolved?
What outcome do you want from this complaint?
Have you attempted to resolve your issue(s) through the informal procedure? Y/N
If yes, please explain what has now led you to use the formal procedure:
Please continue to section 3
Section 3 – Employee Availability Please state any dates in the next 2 weeks when you are not available to attend a meeting:
IMPORTANT
Please note that: • Neither you nor your representative should attempt to approach any witnesses yourself • Details of your complaint will be shown to the person you are complaining about.
Signed (employee) Date
Signed (representative) Date

When completed, please return this form to the Chair of the HR Committee.

Date of document: November 2023 Approving committee: HR Committee

Date of committee meeting: 14th November 2023

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Supersedes: N/A

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