

Disciplinary Policy & Procedure Version 7.0

Version:	Owner:	Created:
7.0	Sarah Aubertin (People Business Partner)	13 April 2026
Published:	Approving Director:	Next Review
6 th October 2026	Mike Duncan (Director of People)	6 th August 2028

Contents

Introduction	3
<i>Scope</i>	<i>3</i>
<i>Principles of Fair Discipline</i>	<i>3</i>
<i>Roles and Responsibilities</i>	<i>4</i>
Process Overview.....	5
<i>Governance and Safety Check</i>	<i>5</i>
<i>Informal Resolution</i>	<i>5</i>
<i>Investigation</i>	<i>6</i>
<i>Suspension.....</i>	<i>6</i>
<i>Formal Disciplinary Procedure</i>	<i>7</i>
<i>Possible Outcomes.....</i>	<i>8</i>
Right to Be Accompanied	9
Special Circumstances	9
<i>Trade union representatives.....</i>	<i>9</i>
<i>Criminal charges or convictions</i>	<i>9</i>
Right of Appeal	9
Confidentiality and Record Keeping.....	10
Appendices	11
<i>Appendix 1: Glossary of Terms</i>	<i>11</i>
<i>Appendix 2: Examples of Misconduct (Normally Excluding Dismissal)</i>	<i>12</i>
<i>Appendix 3: Examples of Gross Misconduct</i>	<i>12</i>
<i>Appendix 4: Flow Chart of Disciplinary Procedure</i>	<i>13</i>
<i>Appendix 5: Equity, Inclusion & Values Impact Assessment.....</i>	<i>14</i>
<i>Appendix 6: Version Control.....</i>	<i>16</i>

Introduction

At BrisDoc, we recognise that maintaining clear standards of conduct and behaviour is essential to ensuring patient safety, service quality, and a respectful working environment. We also recognise that most issues arise from misunderstanding, pressure, or temporary difficulty rather than intent. This policy reflects our commitment to addressing concerns fairly, proportionately, and with compassion, while upholding our responsibilities to patients, colleagues, and the organisation.

The purpose of this Disciplinary Policy & Procedure is to provide a clear framework for managing concerns about conduct or behaviour in a way that is consistent, lawful, and supportive. Wherever possible, we aim to resolve issues through early conversation, guidance, and support. Formal disciplinary action will only be taken where informal approaches are inappropriate, have not been successful, or where the seriousness of the matter requires it.

This policy is aligned with the ACAS Code of Practice on Disciplinary and Grievance Procedures and relevant UK employment legislation. It should be read alongside BrisDoc's Sickness & Wellbeing Policy, Managing Performance Policy, and Equality, Diversity, and Inclusion commitments. Disciplinary action is not a substitute for performance management, wellbeing support or capability processes, and managers are expected to consider the most appropriate route in each case.

This policy will be applied firmly but sensitively, with a true sense of natural justice, equality, and consistency.

Scope

This policy applies to all BrisDoc co-owners employed on permanent, fixed-term, casual, or temporary contracts.

Where concerns arise in relation to self-employed contractors or other non-employees, BrisDoc will not apply employee disciplinary sanctions, but may review the matter in line with the core principles of fairness, fact-finding, the opportunity to respond, and reasoned and proportionate decision-making. In such cases, the outcome may include a decision not to offer further work or future engagements.

Any such decision will be made fairly, proportionately, and with due regard to patient safety, service requirements, and relevant contractual arrangements.

This policy does not apply to termination of employment or engagement arising from redundancy, the expiry of a fixed-term contract, or the conclusion of a specific engagement where no further work is required.

Although statutory protection against unfair dismissal depends on length of service, BrisDoc will apply the principles of fairness, natural justice, and equality to all co-owners, regardless of service length. All decisions will be made in a way that is consistent with the Equality Act 2010 and free from unlawful discrimination.

Nothing in this policy prevents BrisDoc from taking immediate action where this is necessary to protect patients, colleagues, or the organisation.

Principles of Fair Discipline

BrisDoc's approach to disciplinary matters is guided by the following principles:

- Concerns will be raised and addressed promptly, but without unnecessary haste
- Co-owners will be fully informed of any concerns or allegations and given the opportunity to respond
- Appropriate and proportionate investigations will be undertaken before decisions are made
- Each case will be considered on its own facts and circumstances
- Support, guidance, training or adjustments will be considered wherever appropriate
- Disciplinary action will be reasonable and proportionate to the issue
- Dismissal will always be a last resort

- Managers will seek guidance from the People Team to ensure consistency and legal compliance
- Equality Act 2010 duties will be met throughout

BrisDoc will consider and make reasonable adjustments to enable co-owners to participate fully in the process. This may include adjustments to the timing, location or format of meetings; the way information is provided; communication support; or, where appropriate, allowing an additional support person or interpreter. Co-owners are encouraged to raise any adjustment needs as early as possible, although a late request will still be considered.

These principles apply equally at all stages of the process.

Where concerns relate to clinical practice, professional judgement, or patient safety, BrisDoc will ensure that appropriate clinical oversight and advice is obtained alongside HR processes. This may include referral to the Patient Safety and Professional Standards Group (PSPSG)¹, whose role is to provide expert clinical input to support fair, proportionate, and informed decision-making.

Roles and Responsibilities

Co-owners

- Behave in a manner consistent with BrisDoc's values, policies, and Code of Expectations
- Engage openly and constructively in discussions where concerns are raised
- Attend meetings as required and participate in the process in good faith

Line Managers

- Address concerns early and proportionately
- Use informal approaches wherever possible
- Seek advice from the People Team before progressing to formal action
- Identify at an early stage whether the concern raises patient safety, safeguarding, information governance, data protection, regulatory or other governance issues requiring specialist advice or parallel action.
- Conduct investigations fairly, objectively, and confidentially
- Keep accurate, factual records

People Team

- Provide guidance and support at every stage of the process
- Ensure procedures comply with legislation and ACAS guidance
- Support managers and co-owners
- Support consistency of approach across the organisation

Patient Safety and Professional Standards Group (PSPSG)

The Patient Safety and Professional Standards Group (PSPSG) is a clinically led advisory group that provides oversight and expert advice where concerns relate to clinical practice, professional performance, patient safety, or professional standards.

PSPSG's role is to:

- support patient safety and quality of care
- provide expert clinical advice to inform management decisions
- consider whether concerns indicate a need for professional support, remediation, or further review
- advise whether referral to external bodies (e.g. regulator or Responsible Officer) should be considered

¹ Patient Safety and Professional Standards Group (PSPSG)*

*PSPSG is the successor group to the Performance Advisory Group (PAG). Until the PSPSG arrangements are formally implemented, references to PSPSG should be read as referring to PAG.

PSPSG is advisory in nature and does not replace formal HR or disciplinary decision-making. Any decisions regarding disciplinary action, capability processes, or employment outcomes remain the responsibility of BrisDoc management, supported by the People Team.

Senior Leaders

- Chair disciplinary or appeal hearings where appropriate
- Ensure governance standards are upheld
- Provide oversight of complex or high-risk cases

Process Overview

Governance and Safety Check

When a concern is first identified, the manager, supported by the People Team and relevant Service Leads, should consider whether it also raises issues outside the employment process that require separate or parallel action. This may include:

- patient safety or clinical governance
- safeguarding
- information governance, confidentiality or data protection
- health and safety
- fraud or financial governance
- professional or regulatory requirements
- other significant organisational or legal risks.

Where any of these considerations arise, advice should be sought promptly from the appropriate BrisDoc lead or governance function. Any necessary governance, safety, regulatory or reporting action may proceed alongside the disciplinary process.

The existence of a parallel process does not determine the disciplinary outcome. Employment decisions will continue to be made fairly and, on the evidence, established through this procedure.

Informal Resolution

Most conduct concerns can and should be resolved without recourse to formal disciplinary action. Informal resolution supports early intervention, shared understanding, learning, and sustained improvement.

Informal action may be appropriate where:

- the matter is minor in nature
- there is no immediate risk to patients, colleagues, or the organisation
- improvement is likely through guidance, clarification, or support

Informal approaches may include:

- a private conversation about expectations or behaviour
- clarification of policies or procedures
- coaching, mentoring, or training
- wellbeing or workload support

Managers may keep brief, factual notes to record that an informal discussion has taken place. These notes do not constitute a disciplinary warning and will not be relied upon as a prior warning in any future disciplinary process.

An informal conversation will not itself result in a formal warning or other formal disciplinary action. If formal disciplinary action is being considered, the informal conversation should be brought to an end and the formal procedure followed.

BrisDoc actively encourages co-owners and managers to seek to resolve concerns informally wherever this is appropriate and safe to do so. To support this approach, BrisDoc provides an Informal Resolution Guide, which offers practical advice and examples on how to have effective informal conversations, identify appropriate support, and recognise when a matter may need to progress to the formal disciplinary procedure.

If informal action does not result in improvement, or if the issue is more serious, managers should seek advice from the People Team before progressing to the formal disciplinary procedure.

Investigation

Where concerns cannot be resolved informally, or the seriousness of the matter requires it, an investigation may be required to establish the facts.

The purpose of an investigation is to:

- understand what has happened
- gather relevant evidence
- determine whether there is a case to answer

An investigation is fact-finding only and does not assume wrongdoing.

The extent of the investigation will be objective, reasonable and proportionate to the nature and seriousness of the concern. In some cases, this may involve reviewing relevant records or documentation only. In others, investigatory meetings or witness evidence may be required.

Where concerns also raise patient safety, clinical governance, safeguarding, information governance, data protection, regulatory or other significant governance issues, BrisDoc will ensure that appropriate specialist advice and oversight are obtained alongside the employment process. Where the concern relates to clinical practice, professional judgement or patient safety, this may include referral to the Patient Safety and Professional Standards Group (PSPSG).

Referral to PSPSG ensures that clinical expertise informs the investigation and helps identify whether supportive or remedial actions may be appropriate alongside, or instead of, formal disciplinary steps.

Investigations may involve:

- investigatory meetings with the co-owner
- statements from witnesses
- review of relevant records, emails, or systems

Following the investigation, BrisDoc will consider the most appropriate next step. Depending on the facts, this may include no further action, informal resolution, training or support, mediation or a facilitated conversation, another appropriate process, or referral to a formal disciplinary hearing.

Investigatory meetings will normally be conducted by a manager who has not been directly involved in the matter. Under this policy, co-owners may be accompanied at investigatory meetings by a trade union representative or work colleague.

If further concerns arise during an investigation, these may form part of the same investigation or be addressed separately, depending on the circumstances.

Investigations will normally be completed within three weeks, where reasonably practicable. In more complex cases, or where availability of evidence or key individuals requires it, investigations may take longer. Co-owners will be kept informed of progress where timescales need to be extended.

If a co-owner resigns during an investigation or before a disciplinary hearing takes place, BrisDoc will decide whether it is appropriate to discontinue, conclude or continue aspects of the process. In making that decision, BrisDoc will take account of patient safety, safeguarding, regulatory obligations, organisational risk, and the need for a fair and proportionate outcome.

Suspension

Suspension will only be considered where it is reasonably believed to be necessary to:

- protect patients, colleagues or the co-owner under investigation
- protect the organisation or its property, systems or interests
- protect the integrity of the investigation, including preventing interference with evidence or witnesses
- comply with a legal, regulatory or contractual requirement.

Suspension will not be used automatically because an allegation may amount to gross misconduct.

Before deciding to suspend, BrisDoc will consider whether the identified risks could be managed through alternatives such as:

- temporary redeployment
- amended or restricted duties
- additional supervision
- restricted access to premises, systems or information
- another reasonable and proportionate measure.

Where suspension is considered necessary, it:

- will normally be on full contractual pay
- is a neutral act and does not imply wrongdoing
- will be for the shortest possible period
- will be reviewed regularly, normally every five working days.

The decision will be communicated sensitively and privately. The co-owner will be told:

- the reason for the suspension
- that suspension is not disciplinary action
- the next steps in the process
- who they can contact with questions or concerns
- what support is available.

Where concerns relate to a clinician's fitness to practise or immediate patient safety, advice may be sought from the relevant Clinical Lead and/or the Performance Advisory Group.

The decision to suspend a co-owner may only be made by two of the following: the co-owner's line manager, the Head of Service or a Director.

Formal Disciplinary Procedure

Where it is decided that there is a case to answer, the co-owner will be invited in writing to a disciplinary hearing. Usually the co-owner will be given at least five working days' notice unless a shorter period is agreed or the circumstances require otherwise.

The invitation will include:

- the allegations or concerns being considered
- enough information about the concerns and their possible consequences to enable the co-owner to prepare a response
- details of any steps already taken to resolve the concern informally, or an explanation of why informal resolution was not considered appropriate
- the date, time and location or format of the hearing
- copies of the written evidence to be considered, including witness statements where appropriate
- the possible outcomes
- confirmation of the right to be accompanied.

The disciplinary hearing will be conducted by a manager who has not materially been involved in the investigation wherever reasonably practicable.

At the hearing, the co-owner will have the opportunity to:

- respond fully to the allegations
- present their version of events
- ask questions
- call relevant witnesses

A written record of the hearing will be kept.

Where a co-owner is unable to attend, BrisDoc will consider the reasons, any reasonable adjustments required, and whether the hearing should be rearranged or conducted in another appropriate way.

Where a co-owner is persistently unable or unwilling to attend without good reason, BrisDoc may proceed and make a decision on the available evidence, having first given the co-owner a reasonable opportunity to provide written representations.

Witness attendance at disciplinary hearings is voluntary. The hearing manager may decide whether witness evidence is heard in person or considered in written form and may limit witness attendance or lines of questioning where this is reasonable, relevant, and consistent with a fair hearing, considering the relevance of the evidence, the need to conduct the hearing efficiently, and the interests of all parties.

In cases involving clinicians, disciplinary procedures may run alongside clinical governance or professional review processes. Where PSPSG is involved, relevant information may be shared appropriately to ensure decisions are informed, consistent and proportionate, while respecting confidentiality and data protection requirements.

Possible Outcomes

When deciding on an outcome, the hearing manager will consider all relevant circumstances, including the seriousness of the conduct, the impact on patients, colleagues and the organisation, any live warnings, mitigating circumstances, length of service and conduct record, whether support or reasonable adjustments may be appropriate, and consistency with previous comparable cases.

Possible outcomes include:

- No further action - case not upheld, no ongoing action
- No formal action - with management guidance and expectations confirmed in writing
- Written warning (normally live for 12 months)
- Final written warning (normally live for 24 months)
- Dismissal with notice
- Summary dismissal (gross misconduct only)

Training, coaching, support, mediation, a facilitated conversation or another developmental action may be used as the sole outcome or alongside a formal warning where this is appropriate and proportionate.

For clinicians, outcomes may also include recommendations arising from PSPSG, such as clinical supervision, mentoring, additional training, reflective practice, or monitored support arrangements. These outcomes are intended to be developmental and may be used alongside, or instead of, disciplinary sanctions where appropriate.

Any formal warning will confirm the allegations considered, the decision and reasons for it, the level and duration of the warning, what improvement is required, any support to be provided, the timescale for review, the consequences of further misconduct, and the right of appeal.

Expired warnings will be disregarded for disciplinary purposes.

Outcome letters will normally be issued within 5 working days of the hearing.

Where the outcome is dismissal, the written decision will confirm the reason for dismissal, the effective date of termination, any notice entitlement or payment in lieu of notice, and the right of appeal.

Right to Be Accompanied

Co-owners have the statutory right to be accompanied at formal disciplinary and appeal hearings.

The purpose of being accompanied is to provide the co-owner with support, to help them understand the process, and to contribute to a fair and balanced hearing. BrisDoc encourages co-owners to exercise this right where it is helpful for them to do so.

A companion may be:

- a recognised trade union representative, or
- a work colleague.

The companion may:

- attend the hearing with the co-owner
- put and sum up the co-owner's case
- respond on the co-owner's behalf to views expressed during the hearing
- ask questions or seek clarification
- confer privately with the co-owner during the hearing.

The companion may not:

- answer factual questions addressed directly to the co-owner
- address the hearing contrary to the co-owner's wishes
- prevent BrisDoc from explaining its case or prevent another person from contributing
- disrupt or unreasonably delay the hearing.

It is the co-owner's responsibility to arrange their companion's attendance. Where the chosen companion is unavailable at the proposed time, the hearing will be postponed to a reasonable alternative time proposed by the co-owner that is no more than five working days after the original date. BrisDoc may agree a later date where this is reasonable in the circumstances and does not cause unreasonable delay.

No co-owner or companion will be treated unfavourably for exercising the right to accompaniment.

Special Circumstances

Trade union representatives

Where disciplinary action is being considered against an accredited trade union representative, the normal disciplinary procedure will apply. With the co-owner's agreement, BrisDoc may discuss the matter at an early stage with an appropriate official employed by the trade union.

Criminal charges or convictions

A criminal charge or conviction will not automatically result in disciplinary action. BrisDoc will consider the relevance of the matter to the co-owner's role, patient or colleague safety, regulatory requirements, organisational reputation and the employment relationship before deciding whether action is appropriate.

Right of Appeal

All co-owners have the right to appeal against any formal disciplinary outcome.

An appeal provides an opportunity for the disciplinary decision to be reviewed and ensures that the process has been fair, reasonable, and proportionate. It is not intended to be a re-hearing of the original disciplinary case unless significant new information has become known.

Appeals should be submitted in writing within five working days of receipt of the disciplinary outcome letter and should clearly outline the grounds of appeal.

Appeals may be based on one or more of the following grounds:

- procedural unfairness during the disciplinary process
- the disciplinary decision being unreasonable or disproportionate in the circumstances
- new evidence that was not available at the time of the original hearing
- relevant mitigating circumstances that were not adequately considered
- concerns regarding consistency with outcomes in comparable cases

Appeals will be heard by a manager who has had no prior involvement in the case and, where appropriate, supported by the People Team. The co-owner has the right to be accompanied at the appeal hearing.

An appeal may result in one of the following outcomes:

- the original decision being upheld
- the original decision being overturned
- a different sanction being substituted

The outcome of the appeal will be confirmed in writing and will be final.

Confidentiality and Record Keeping

All disciplinary records will be:

- Held securely by the People Team
- Treated as confidential
- Managed in line with GDPR

Records will be retained only for as long as necessary and in line with BrisDoc retention schedules.

Appendices

Supporting documents, including template letters and manager tools, are available from the People Team. These documents support consistent application of this policy but do not form part of the policy itself.

Appendix 1: Glossary of Terms

TERM	DEFINITION
Co-Owner	Any individual employed by BrisDoc, whether on a permanent, fixed-term, casual, or temporary basis.
Investigating Manager	The manager appointed to conduct a fact-finding investigation into an alleged conduct issue. Wherever reasonably practicable, this individual should not later function as the Hearing Manager. This person may be the co-owner's direct line manager, another line manager, or a Manager from another service team. This is dependent on the role of the co-owner.
Investigatory meeting	A meeting held as part of an investigation to establish facts. It is not a disciplinary hearing and does not imply wrongdoing.
Hearing Manager	The manager responsible for chairing a formal disciplinary hearing and determining whether disciplinary action is appropriate.
Management case	The evidence relied upon by BrisDoc in a disciplinary hearing, including investigation findings, witness statements, and documentary evidence.
Disciplinary Hearing	A formal meeting convened to consider concerns relating to conduct or behaviour, following an investigation. The purpose of a disciplinary hearing is to provide the co-owner with a fair opportunity to understand the concerns, respond to the information presented, and put forward their perspective before any decision is made. A disciplinary hearing is chaired by a manager who has not been materially involved in the investigation wherever reasonably practicable. The co-owner has the right to be accompanied, and the outcome will be confirmed in writing.
Appeal Hearing	A formal meeting held to review the outcome of a disciplinary hearing where a co-owner has submitted an appeal. The purpose of an appeal hearing is to ensure that the disciplinary process and outcome were fair, reasonable, and proportionate, and that any grounds of appeal have been carefully considered. An appeal hearing is not intended to be a re-hearing of the original case unless significant new information has become known. It will be chaired by a manager who has had no prior involvement in the matter, and the co-owner has the right to be accompanied.
Gross Misconduct	Conduct of such seriousness that it fundamentally undermines trust and confidence and may justify dismissal without notice, following a fair process
Live Warning	A disciplinary warning that remains active for disciplinary purposes for a defined period
PSPSG (Performance Advisory Group)	A clinically led, advisory group responsible for providing expert clinical oversight and guidance where concerns relate to clinical practice, professional performance, or patient safety. PSPSG's role is to: support patient safety and quality of care provide expert clinical advice to inform fair and proportionate management decisions consider whether concerns indicate a need for professional support, learning, remediation, or further review

	advise, where appropriate, on escalation to external bodies (such as a professional regulator or Responsible Officer) PSPSG operates in a supportive and advisory capacity and does not replace formal Human Resources, disciplinary or capability processes. Any decisions regarding employment outcomes, disciplinary action or suspension remain the responsibility of BrisDoc management, supported by the People Team.
--	---

Appendix 2: Examples of Misconduct (Normally Excluding Dismissal)

Misconduct refers to behaviour that falls below the standards expected of co-owners. The examples below are illustrative rather than exhaustive, and each case will be considered on its own facts and circumstances.

Minor Misconduct

Minor misconduct typically includes isolated or low-level concerns that do not present an immediate risk to patient safety, colleagues, or the organisation.

Examples may include:

- Failure to follow BrisDoc policies, procedures, or reasonable management instructions
- Persistent lateness or unauthorised absence
- Inappropriate use of BrisDoc IT systems or resources
- Discourteous or unprofessional behaviour
- Failure to adhere to agreed working practices

Minor misconduct will normally be addressed through informal resolution or lower-level disciplinary action. Where minor misconduct is repeated or forms part of a wider pattern, it may be treated more seriously.

Serious Misconduct

Serious misconduct refers to behaviour that is more significant in nature, or which has a greater potential impact on patients, colleagues, service delivery, or organisational trust.

Examples may include:

- Repeated failure to follow policies or procedures following advice or a warning
- Behaviour that undermines professional standards or working relationships
- Serious unprofessional conduct
- Misuse of systems or resources with a significant impact
- Failure to comply with reasonable instructions where consequences are more substantial

Serious misconduct is more likely to be addressed through formal disciplinary action and may result in a higher-level warning, depending on the circumstances.

Depending on the facts and seriousness of the case, serious misconduct may, following a fair disciplinary process, justify dismissal with notice even where there is no prior live disciplinary warning.

Where misconduct is repeated, or where a pattern of behaviour develops over time, BrisDoc may consider progressing up the disciplinary scale. This means that conduct previously addressed at a lower level may be treated more seriously if expected improvements are not sustained.

Appendix 3: Examples of Gross Misconduct

Gross misconduct is behaviour of such seriousness that it may justify dismissal without notice following a fair investigation and hearing.

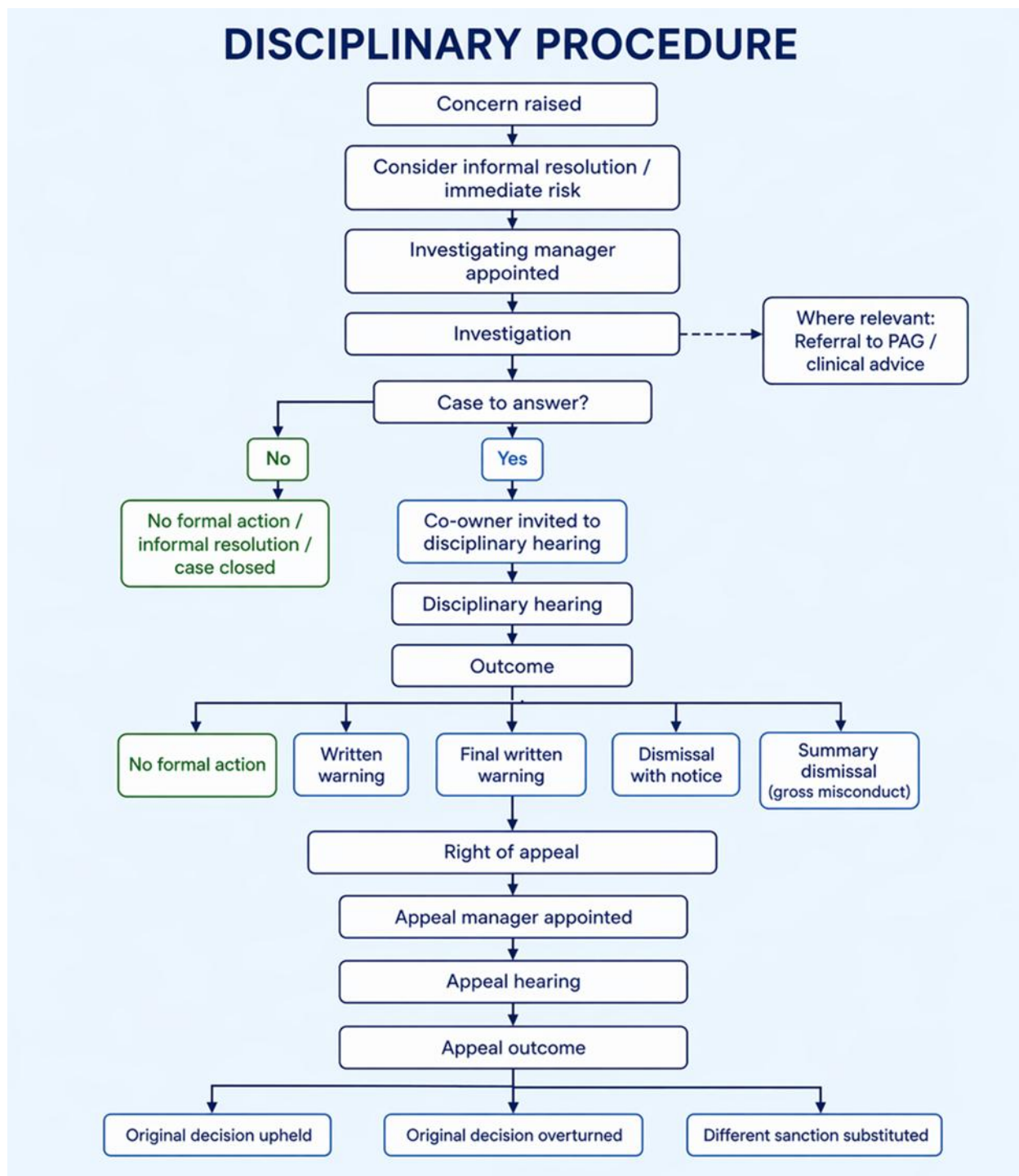
Examples may include:

- Serious breach of confidentiality or data protection

- Fraud, theft, or deliberate dishonesty
- Physical violence, threats, or serious bullying or harassment
- Discriminatory behaviour contrary to BrisDoc values
- Serious insubordination
- Serious breach of health and safety
- Bringing BrisDoc into serious disrepute

This list is not exhaustive. Each case will be assessed on its facts.

Appendix 4: Flow Chart of Disciplinary Procedure



Appendix 5: Equity, Inclusion & Values Impact Assessment

This Equality, Inclusion and Values Impact Assessment ensures that BrisDoc's Disciplinary Policy & Procedure upholds our duties under the Equality Act 2010, supports fair and inclusive practice, and is consistent with BrisDoc's values, expected behaviours and employee-owned culture. It considers both the potential impact on co-owners with protected characteristics and wider factors which may affect an individual's ability to participate fairly in a disciplinary process.

Disciplinary procedures can be complex and emotionally challenging and, without appropriate safeguards, may disproportionately affect certain groups or individuals. This assessment therefore considers procedural fairness, transparency, consistency, accessibility, appropriate support and the avoidance of bias or assumptions. It also considers intersectionality, recognising that overlapping characteristics and personal circumstances may compound disadvantage.

Protected Characteristic	Potential Impact Identified?	Actions Taken / Considerations
Age	Yes – potential variation in understanding or confidence	Policy uses clear, accessible language and sets out expectations at each stage. Informal resolution and support are emphasised to avoid unnecessary escalation, recognising that age may influence confidence in formal processes.
Disability	Yes – potential procedural barriers	Reasonable adjustments are referenced throughout the policy, including adjustments to meetings, timescales, communication formats, and accompaniment. Managers are instructed to seek People Team advice and consider Occupational Health input where appropriate.
Sex / Gender	Potential impact	The policy avoids gendered assumptions and applies procedures consistently. Safeguards around dignity, accompaniment and respectful conduct in hearings are included to reduce the risk of gender-based disadvantage.
Gender Reassignment	Potential sensitivity	Disciplinary matters are managed confidentially and respectfully. Managers are required to consider individual circumstances and ensure that processes do not expose or disadvantage individuals due to gender identity.
Pregnancy and Maternity	Yes – potential risk of unfair treatment	The policy reinforces fairness, proportionality, and justification for decisions. Managers are expected to consider pregnancy-related factors and seek People Team advice to ensure compliance with legal protections.
Race / Ethnicity	Yes – potential for disproportionate impact	The policy emphasises consistency, evidence-based decision-making and People Team oversight. Managers receive guidance to avoid bias and ensure that decisions are not influenced by cultural misunderstandings or assumptions.

Protected Characteristic	Potential Impact Identified?	Actions Taken / Considerations
Religion or Belief	Low potential impact	The policy allows flexibility around hearing dates, accompaniment, and reasonable adjustments to accommodate religious observance where required.
Sexual Orientation	No specific differential impact identified	The policy applies equally to all co-owners. Standards of respectful behaviour are reinforced, and disciplinary processes are conducted confidentially and without prejudice.
Marriage and Civil Partnership	No differential impact	The policy does not differentiate based on marital or partnership status.

Intersectionality

BrisDoc recognises that co-owners may experience overlapping barriers due to intersecting protected characteristics (for example, a disabled co-owner from a minority ethnic background, or a younger co-owner with limited previous exposure to formal procedures).

The Disciplinary Policy & Procedure is designed to be flexible, person-centred, and proportionate, ensuring that:

- managers avoid one-size-fits-all approaches to disciplinary matters
- individual circumstances are considered at each stage of the process
- reasonable adjustments and support mechanisms are actively explored
- no co-owner is disadvantaged by rigid application of process where flexibility is reasonable and lawful

This approach supports fairness while maintaining consistency and accountability.

- Equality considerations will be reviewed as part of scheduled policy reviews and updates.
- Any concerns or patterns identified through disciplinary outcomes, appeals, or feedback, will be reviewed by the People Team to inform improvements to practice.
- Co-owners are encouraged to raise concerns with their line manager or confidentially with the People Team at workforcesupport@brisdod.org.

Inclusion and BrisDoc Values

The policy has also been considered from the perspective of wider inclusion and BrisDoc's values and co-owner principles.

The policy supports inclusion by requiring individual circumstances to be considered, encouraging early and informal resolution where appropriate, providing access to support and accompaniment, allowing reasonable adjustments and ensuring that decisions are based on evidence rather than assumptions.

The policy supports BrisDoc's values by requiring respectful behaviour, fairness, accountability, openness and proportionate decision-making. It also reflects our employee-owned culture by ensuring co-owners are informed of concerns, able to respond to allegations, contribute their perspective and challenge formal outcomes through the appeal process.

No additional adverse inclusion or values impact has been identified. The principal risks are inconsistent application, unconscious bias, cultural misunderstanding, inappropriate assumptions about behaviour and failure to adapt the process to enable meaningful participation. People Team involvement and the procedural safeguards within the policy are intended to mitigate these risks.

Appendix 6: Version Control

Date	Version	Author	Change Details
27/02/24	6.1	MD	Ownership updated. No substantive policy changes.
08/04/25	6.2	JB	Reviewed. No substantive policy changes. Review period reset to two years.
29/07/2026	7.0	SA	Full scheduled review and revision. Policy restructured and clarified, with strengthened informal resolution, proportionate investigation arrangements, revised suspension safeguards, updated hearing, accompaniment and appeal provisions, clearer clinical and PSPSG interfaces, revised outcomes and appendices, and removal of template letters into separate supporting documents. The policy has also been checked against the July 2026 draft Acas Code of Practice on disciplinary and grievance procedures. The overall purpose and core principles remain unchanged.