



GHANA HEALTH SERVICE

CODE OF CONDUCT AND DISCIPLINARY

PROCEDURES

July 2018

TABLE OF CONTENT

Contents

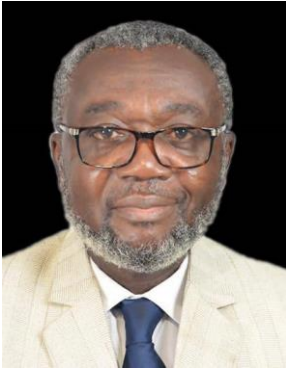
TABLE OF CONTENT	1
FOREWORD	5
ACKNOWLEDGEMENT.....	6
CHAPTER 1	7
PREAMBLE.....	7
CHAPTER 2	9
GUIDING PRINCIPLES	9
CHAPTER 3	11
CONSTITUTIONAL AND CIVIL RESPONSIBILITIES.....	11
CHAPTER 4	12
MISCONDUCT.....	12
4.1 Definition of Misconduct	12
4.2 Types of Misconduct	12
CHAPTER 5	14
DISCIPLINARY AUTHORITY.....	14
5.1 Ultimate Disciplinary Authority	14
5.2 Delegated Authority.....	14
5.2.3 Category C Staff	15
5.2.4 Categories D& E Staff.....	15
5.3 Role of Other Organisations	15
5.4 Establishment of Disciplinary Committee.....	15
5.5 Other Provisions.....	16

CHAPTER 6	17
DISCIPLINARY PROCEEDINGS	17
6.1 Reporting the Incident/Offence.....	17
6.2 Preliminary Investigation	17
6.3 Interdiction	18
6.4 TYPES OF DISCIPLINARY PROCEEDINGS: -	19
DIAGRAM ON SUMMARY PROCEEDINGS	20
DIAGRAM ON FORMAL DISCIPLINARY PROCEEDINGS.....	22
FORMAT FOR ENDORSEMENT OF PROCEEDINGS.....	23
6.5 Report on the Disciplinary Proceedings.....	24
6.6 Confidentiality:.....	25
6.7 Decisions on Recommendations of Proceedings:.....	26
CHAPTER 7	27
GENERAL PROVISIONS	27
CHAPTER 8	28
CATEGORIES OF OFFENCES AND PENALTIES	28
8.1 Minor Offences	28
8.2 Penalties for Minor Offences.....	29
8.3 Major Offences	29
8.4 Penalties for Major Offences	31
CHAPTER 9	33
GRIEVANCES AND PETITIONS.....	33
9.1 Grievance:.....	33
9.2 Petition:.....	33
9.3 Common Causes of Grievances	33

9.4	General Principles of Grievance Redress	34
9.5	Procedure for Petitioning	34
9.6	Frivolous, Vexatious and Unmeritorious Petition(s).....	35
CHAPTER 10		36
APPEAL SYSTEM		36
10.1	Definition of Appeal	36
10.2	The Right to Appeal.....	36
10.3	Appellate Authorities	36
10.4	Conditions for Appeal	36
10.5	Confidentiality of the Appeal Process.....	37
10.6	Stay of Execution (Suspension of Penalty).....	37
10.7	Limitations of Period of Appeal	38
10.8	Filing of Appeal	38
10.9	Membership of Appeal Committee	39
10.10	Conduct of Appeal	39
CHAPTER 11		40
DISPUTES AND MODE OF SETTLEMENT (ARBITRATION AND RECONCILIATION)		
.....		40
11.1	Definition and Conditions Relating to Dispute	40
11.3	Settlement of Disputes outside Official Channels	41
CHAPTER 12		42
CONFLICT OF INTEREST.....		42
12.1	Definition	42
12.2	Conditions for Conflict of Interest	42
12.3	Declaration of Interest.....	43
12.4	Sanctions.....	43

REFERENCES.....	44
APPENDIX 1.....	45
CATEGORIES OF STAFF.....	45
APPENDIX2.....	46
FORMAT FOR SUMMONING AN EMPLOYEE TO APPEAR BEFORE ADISCIPLINARY COMMITTEE.....	46
APPENDIX 3.....	47
FORMAT OF REPORT ON FORMAL DISCIPLINARY INQUIRY.....	47
APPENDIX 4.....	48
SPECIMEN LETTER CONVEYING DISCIPLINARY AWARD BY THE HEAD OF DEPARTMENT.....	48
APPENDIX 5.....	49
GUIDELINES ON DISCIPLINARY AWARDS.....	49
APPENDIX 6.....	50
FORMAT OF REPORT ON APPEAL.....	50
APPENDIX 7.....	51
FORMAT OF LETTER CONVEYING THE RESULT OF APPEAL.....	51
Appendix 8.....	52
EXAMPLES OF OFFENCES UNDER HEALTH RESEARCH.....	52

FOREWORD



In order to operate effectively an organisation must have in place standards for performance and conduct for its employees. After Implementing the first Code of Conduct and Disciplinary Procedures for more than a decade, it was necessary to review and update it to reflect current national and international standards

This revised document provides practical and explicit guidance for handling disciplinary and grievance processes for managers, employees and their representatives. The revised edition of the Code has included new areas like Information, Communication and Technology as well as Research-related offences.

This manual on the Code of Conduct and Disciplinary procedures is primarily meant to guide all managers and employees at the various levels of the Service in their normal relations and dealings with patients, clients, fellow employees and the general public.

In revising this manual, lessons were drawn from available laws, rules, and regulations, GHS Patients' Charter and Code of Ethics, The Commission of Human Rights and Administrative Justice, Code of Conduct for Public Officers of Ghana and Guidelines on Conflict of Interest to Assist Public Officials Identify, Manage and Resolve Conflict of Interest, relevant codes of health professionals.

It is envisaged that all staff will read and adhere strictly to the provisions in this manual with a view to enhancing the corporate image of the Service.

The manual will be reviewed periodically to address any gaps and to incorporate future developments in the Service. Users of this manual are entreated to submit their comments, if any, for its future review.

DR. ANTHONY NSIA - ASARE

A handwritten signature in blue ink, appearing to read 'A. Nsia - Asare', written over a horizontal line.

**DIRECTOR-GENERAL
GHANA HEALTH SERVICE**

ACKNOWLEDGEMENT

The Ghana Health Service Council is grateful to all who contributed to the development of this document especially the following members who constituted the Review Committee: -

1. Mrs. Stella Badu- Chief State Attorney, Attorney-General's Department
2. Dr. Gloria Quansah Asare, Deputy Director-General, Ghana Health Service (GHS)
3. Dr. Cynthia Bannerman, Deputy Director (Quality Assurance) Institutional Care Division, GHS
4. Mr. Yaw Brobbey-Mpiani, Deputy Director (Admin) / Secretary, GHS Council
5. Dr. Maurice Ankrah, Head, Medico-Legal Unit, GHS and
6. Ms. Esther Marley, Stenographer Secretary, Office of the Director-General, GHS, for her secretarial services to the Review Committee

CHAPTER 1

PREAMBLE

1.1 Object of the Service

The Ghana Health Service (GHS) has been established to:

- a. Implement approved national policies for health delivery in the country
- b. Increase access to improved health services and
- c. Manage prudently resources available for the provision of health services

1.2 Purpose of Document

The attainment of the object of the GHS requires good leadership and corporate governance as well as disciplined and dedicated employees. The conduct and attitudes of all employees of the Service should conform to appropriate norms and standards of behaviour which are contained in

- The GHS Administrative Rules and Regulations,
- GHS Code of Ethics,
- The Commission of Human Rights and Administrative Justice, Code of Conduct for Public Officers of Ghana and Guidelines on Conflict of Interest to Assist Public Officials Identify, Manage and Resolve Conflict of Interest,
- Any Legislative Instruments and other relevant policy documents of the Service.

In 2003 the Code of Conduct and Disciplinary Procedures of the Service was developed to regulate the conduct of all managers and employees at the respective levels of the Service in their normal relations and dealings with patients, clients, fellow employees and the general public. This was to address the pertinent issues relating to general administrative rules and regulations, professional codes of ethics, staff conduct and policy guidelines.

To comply with changes in the law and policy and to conform to international best practices it has become necessary to revise the Code.

The implementation of the provisions in this document will accordingly ensure that discipline is maintained within the Service to improve its corporate image.

In the light of the foregoing all employees especially management are expected to be fully conversant with the provisions in this document.

1.3 Scope

The Code is applicable to the following personnel:

- a. All GHS employees.
- b. Personnel on contract or secondment to the GHS.
- c. Personnel of the GHS on leave of absence with or without pay.
- d. Any other person(s) working with the GHS under approved terms.

1.4 Definition of Discipline and Indiscipline

- Discipline in this context refers to orderly behaviour of employees in the Service and adherence to existing rules and regulations.
- Any act of omission or commission contrary to the above definition constitutes indiscipline.

CHAPTER 2

GUIDING PRINCIPLES

The vision of the GHS is “A Healthy Population with Universal Access to Quality Health Service”.

Our mission is:

To provide and prudently manage comprehensive and accessible quality primary health care in accordance with approved national policies.

The following guiding principles and core values form the basis of this document.

- a. Delivering quality health service in a humane and equitable manner within the resources of the country.
- b. Upholding the dignity and interest of patients/clients at all times.
- c. Upholding the dignity and welfare of all staff and service providers
- d. Adhering to the provisions of the Patient’s Charter.
- e. Exhibiting high levels of professionalism and excellence.
- f. Promoting the corporate image of the Service
- g. Demonstrating high sense of efficiency, integrity, transparency, confidentiality and dedication to duty.
- h. Ensuring high degree of justice, fairness and accountability within the laws of the land.
- i. Exhibiting competent and effective leadership at all times.
- j. Avoiding discrimination against patients, clients and employees based on the nature of illness, political affiliation, occupation, disability, culture, ethnicity, language, race, age, religion, gender etc. in the performance of their duties.
- k. Promoting continuous quality improvement in health services.

The above mentioned guiding principles and core values shall form the basis of this document and the document shall be predicated on the following existing legal and administrative documents: -

- The relevant laws of the Republic of Ghana,
- GHS Administrative Rules and Regulations,
- GHS Code of Ethics,
- Patient's Charter,
- Legislative Instruments,
- Code of Conduct and Disciplinary Procedures (2003),
- The Code of Conduct of the various Professional Regulatory Bodies and Associations within the Health Sector,
- Commission of Human Rights and Administrative Justice, Code of Conduct for Public Officers of Ghana and Guidelines on Conflict of Interest to Assist Public Officials Identify, Manage and Resolve Conflict of Interest,
- Collective Agreements between Health Agencies and Unions/Associations within the public health service.

CHAPTER 3

CONSTITUTIONAL AND CIVIL RESPONSIBILITIES

All employees of the GHS shall serve the Government and the State in accordance with the principles set out in the Constitution of the Republic of Ghana and in this document.

Employees of the Service shall: -

- a. Be accountable to the Republic of Ghana.
- b. Be accountable also to the public.
- c. Be accountable to their immediate superiors and the governing Council of the Service.
- d. Conduct themselves at all times officially and privately in a manner not to bring the image of the Service into disrepute and to gain the respect of the Service, colleagues and members of the general public.
- e. Maintain political neutrality whilst in the Service.
- f. Act in accordance with any enactment relating to the Service and the Laws of Ghana.
- g. Avoid putting themselves in a position where their personal interest conflicts or is likely to conflict with the legitimate performance of their duties.

CHAPTER 4

MISCONDUCT

4.1 Definition of Misconduct

Misconduct is any act of commission or omission by any employee (including managers) of the Service which may:

- a. Result in or is likely to result in failure to perform in a proper manner any lawful duty assigned to them.
- b. Cause or is likely to cause financial and/or material loss to the GHS contrary to existing law.
- c. Bring the GHS into disrepute; for the avoidance of doubt, the conviction of an employee of the Service for e.g. any offence involving fraud, dishonesty or moral turpitude tends to bring the name of the GHS into disrepute.
- d. Tarnish the corporate image of the Service.
- e. Affect Patient Safety (Impacts negatively on the health or health outcome of a patient/client).
- f. Cause damage to or the loss of property of a patient/client under their care
- g. Cause damage to or the loss of property of an institution within the GHS through their negligent acts.

4.2 Types of Misconduct

The following are some of the acts of omission or commission that may amount to misconduct:

- a. Reporting late for duty or closing earlier than the official time without permission.
- b. Absenting oneself from duty without approved leave or reasonable excuse.
- c. Insubordination (i.e. refusing to obey lawful instructions of or showing disrespect to superior authority)

- d. Disregarding or wilfully refusing to carry out any lawful order or instruction by any person having authority to give that order or instruction.
- e. Being under the influence of alcohol or narcotics drugs during working hours.
- f. Taking alcoholic drinks and narcotic drugs at the workplace.
- g. Smoking at the workplace
- h. Using without approval from the prescribed authority, facilities and other resources of the Service for purposes not connected with official duties.
- i. Engaging in any activity which is likely to result in conflict of interest.
- j. Failure to submit reports or information or both as prescribed in the course of one's duties
- k. Disclosure of confidential information or documents to any person or institution not entitled to such information.
- l. Making false declarations or representations.
- m. Use or aid the use of false documents.
- n. Failure to report or take disciplinary action against employees found to have misconducted themselves.
- o. Professional malpractice, incompetence, negligence or misconduct.
- p. Contravening provisions in the GHS Code of Ethics and Patient's Charter
- q. Contravening provisions in the Code of Ethics of the various Health Regulatory Bodies, Commission of Human Rights and Administrative Justice, Code of Conduct for Public Officers of Ghana and Guidelines on Conflict of Interest to Assist Public Officials Identify, Manage and Resolve Conflict of Interest,

CHAPTER 5

DISCIPLINARY AUTHORITY

5.1 Ultimate Disciplinary Authority

The President of the Republic of Ghana is the Appointing Authority and shall be the Ultimate Disciplinary Authority of the Ghana Health Service, however this responsibility is delegated to the GHS Council and other bodies authorised to deal with disciplinary matters within the Service.

5.2 Delegated Authority

The Disciplinary Authority for exercising discipline in the Service shall be delegated in accordance with the structure stated below:

- a. **National Level** - The GHS Council, or the Director General or the Divisional Directors.
- b. **Regional Level** - The Regional Director of Health Service.
- c. **District Level** - The District Director of Health Service.
- d. **Institutional Level** - The Head of an Institution.

The Disciplinary Authority at each level may constitute a Disciplinary Committee and also choose its Chairperson.

5.2.1 Category A1 Staff (The Director General and the Deputy Director General)

The Ghana Health Service Council shall make recommendations to the President of the Republic of Ghana through the Minister of Health for appropriate disciplinary actions to be taken.

5.2.2 Category A2 and B Staff (see Appendix 1)

The appropriate disciplinary authority shall take disciplinary action in minor offences. In the case of major offences, a report shall be made to the Director-General who shall make recommendations to the Ghana Health Service Council for Disciplinary action to be taken.

5.2.3 Category C Staff

The Regional Directors, District Directors, Institutional Heads and Divisional Directors shall take disciplinary action against such staff in minor offences. In the case of major offences he/she shall make recommendations to the Director General for appropriate action.

5.2.4 Categories D& E Staff

In the case of Categories D& E staff, Department/Unit Heads, Programme Heads, Institutional Heads/Directors, District Directors, Regional Directors and Divisional Directors shall take disciplinary action against such staff in minor offences but in the case of major offences recommendations may be made to the Director-General or Regional Directors where applicable for appropriate disciplinary action.

5.3 Role of Other Organisations

Cases bordering on national security or breaches of the laws of the country shall be reported to the appropriate agencies. Where in doubt, the relevant Disciplinary Authority should consult their Superior Authority. In the case of seconded staff who are found liable for minor offences, the GHS shall investigate and make recommendations to the parent organisation for action to be taken without prejudice to any action GHS might have instituted.

Where an offence has been committed against the laws of the Republic of Ghana (i.e. criminal offences) the case shall be reported to the Police.

Major professional misconduct, shall be referred by the Director-General and Regional Directors of Health Services to the appropriate Professional Regulatory body for further action without prejudice to the initial disciplinary action that might have been taken.

5.4 Establishment of Disciplinary Committee

Disciplinary Committees shall be established at the National, Regional, Divisional, District and Institutional levels of the Ghana Health Service to handle cases which attract formal proceedings. These committees may be ad-hoc or permanent.

5.4.1 Membership

The membership of a Disciplinary Committee at any level of the GHS shall be five (5) and shall include a representative of the Union or a Professional Association to which the accused employee belongs.

5.4.2 Co-opted Membership

A Disciplinary Committee may co-opt any person(s) to assist at any of its meeting(s). A co-opted member shall have no voting rights.

5.5 Other Provisions

A member of a disciplinary authority shall not be a member of any disciplinary committee that he/she shall constitute. Any person who has an interest in a case being investigated either directly or indirectly shall not be a member of the disciplinary committee investigating the matter.

A member of an appellate authority shall not be a member of a disciplinary committee, the decisions of which are likely to be referred to him/her.

No person shall sit on both the disciplinary and appellate bodies involving the same case.

An officer, junior in rank to the employee under investigation shall not be a member of the disciplinary committee or the appellate body.

Employees appointed to serve on such committee shall declare their interest if any. Such employees shall recuse themselves from serving on the committee on grounds of conflict of interest.

CHAPTER 6

DISCIPLINARY PROCEEDINGS

6.1 Reporting the Incident/Offence

When an employee commits an offence, the offence/incident shall be reported to or notified by the officer in charge of the Unit, Institution, District etc.

He/she shall document the incident.

He/she shall then make a formal report within three (3) working days to his/her immediate superior authority where applicable (especially in cases of major offences) for his or her attention and then initiate further action accordingly.

6.2 Preliminary Investigation

The officer in-charge shall institute preliminary investigations into the case to establish its authenticity and further details within three (3) working days of the receipt of the report.

The investigation may take the form of:

- a. Interview(s)
- b. Inspection of documents and premises
- c. Letter(s) of enquiry to the person(s) concerned.

The officer in-charge shall thereafter take appropriate action based on the findings.

Where the results of the preliminary investigation point conclusively to a minor offence or misconduct, the officer in-charge shall apply the appropriate sanctions within 3 (three) working days.

Where the results point to a major offence the officer in-charge shall inform their superior authority to proceed with formal disciplinary proceedings and take the following additional actions with the approval of the disciplinary authority:

- a. Issuance of a query (see Appendix 2 for format).

- b. Interdiction where necessary- interdiction may be effected ONLY at the regional or national level. Where an officer is interdicted at the regional level, the Regional Director shall formally inform the Director-General within 3 working days with the facts of the alleged offence
- c. Setting up a Committee of Inquiry.

6.3 Interdiction

This is the suspension from duty of an employee who is alleged to be involved in a case of a major misconduct. Interdiction shall not be punitive.

Interdiction shall not exceed six months and can only be extended by the GHS Council for three (3) months for good reason(s).

6.3.1 Circumstances for Interdiction

- a. Where the employee concerned is likely to interfere with the formal investigation process.
- b. Where criminal proceedings are being instituted against an employee.
- c. Where the employee is being investigated on grounds of professional incompetence or malpractice.

6.3.2 Conditions of Interdiction

- a. The interdiction shall remain in force until an inquiry has been concluded and the decision of the disciplinary authority has been conveyed to the employee but in any case should not exceed nine (9) months.
- b. An employee on interdiction shall receive his/her gross monthly salary however no allowances shall be paid during this period.
- c. Where the employee has not been found guilty, his/her appropriate allowances withheld shall be restored and reimbursed to him/her in full where appropriate.

- d. An employee on interdiction shall make himself/herself available to his/her immediate supervisor and the investigating authority when requested to do so.
- e. An employee on interdiction shall not travel outside the country without express permission from the Director-General of the Service.
- f. An interdicted employee can petition the GHS Council if he/she is dissatisfied with the interdiction or the decision of the Director-General.

6.4 TYPES OF DISCIPLINARY PROCEEDINGS: -

6.4.1 Summary Disciplinary Proceedings

Summary disciplinary proceedings are applicable to minor offences or misconduct, which require immediate action.

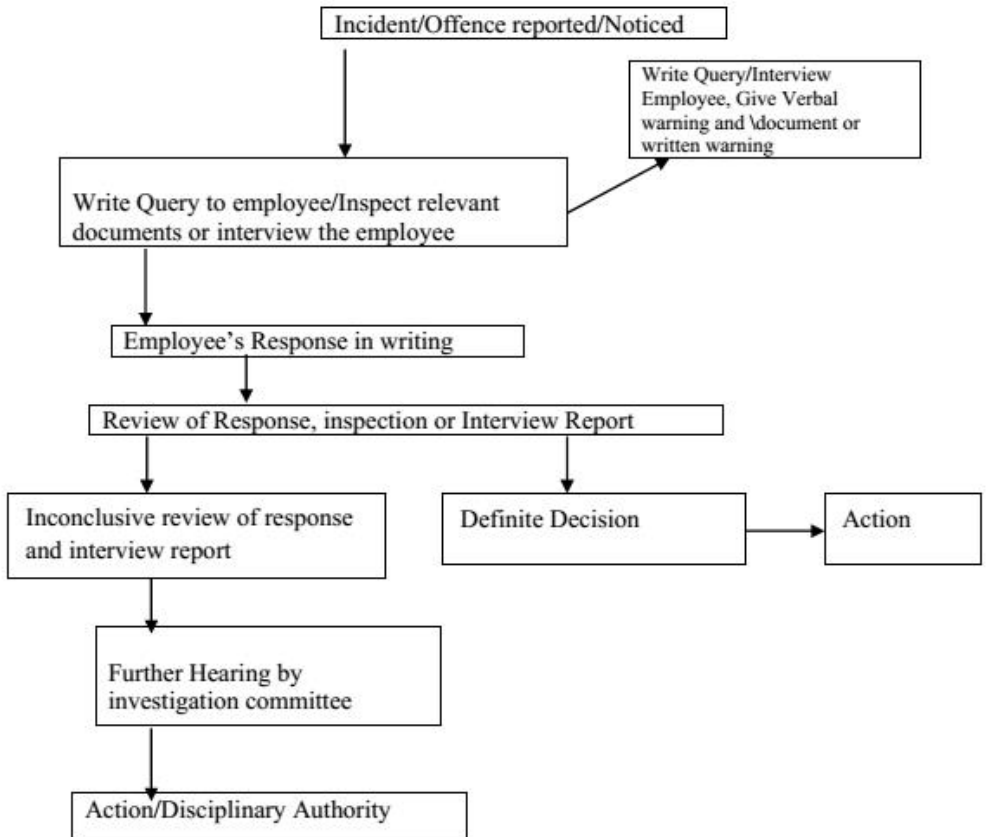
It may involve the superior authority, a delegated officer or a supervisor. Such an officer must notify the employee of the offence in writing and give him/her five (5) working days to respond to the charge(s).

All charges and responses must be in writing. Where a decision cannot be taken based on the interviews and/or written response(s) then a committee shall be set up for further hearing of the matter.

Action must be taken on any decisions arrived at.

The superior authority shall ensure that the employee is given a fair hearing.

DIAGRAM ON SUMMARY PROCEEDINGS



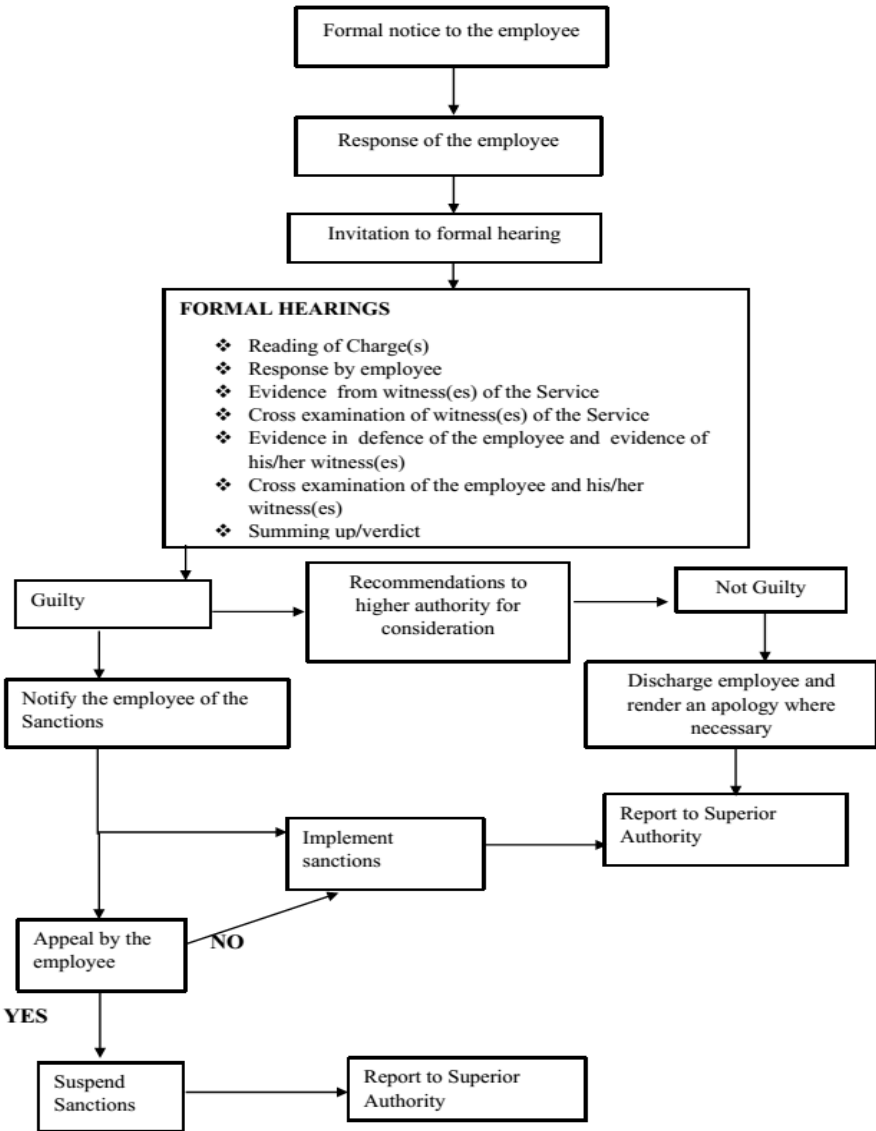
6.4.2 Formal Disciplinary Proceedings for major offences

These are disciplinary proceedings against any employee, where the offences are major.

The formal proceedings shall entail: -

- a. The presentation of written charge(s) against the employee accused of an offence.
- b. An accused employee being given the opportunity to inspect or study any documentary evidence against him/her including the report of any preliminary investigations.
- c. The employee being given the opportunity to submit his/her response(s) to the charge(s) in writing
- d. The employee being given adequate notice to appear before a Disciplinary Committee.
- e. A letter inviting the employee to appear before a Disciplinary Committee. The letter shall contain:
 - i. Details of offence(s)
 - ii. Date, time and place of meeting.
 - iii. Relevant documents required.
 - iv. A statement indicating his/her right to legal representation and witness (es) if he/she chooses. (Refer to Appendix 2)
- f. The employee being given the opportunity to cross-examine witness (es) or to call his own witness (es), if any.
- g. The employee having the right to make fresh written statement(s) if he/she so desires.
- h. Adequate written documentation in order to facilitate the work of the relevant Appellate Body or subsequent proceedings. The sessions of the proceedings shall be recorded.

DIAGRAM ON FORMAL DISCIPLINARY PROCEEDINGS



6.4.3 Additional Provisions:

- a. At the formal disciplinary proceedings, the employee has the right to legal representation.
- b. No witness should be present when another witness is giving evidence.
- c. At the conclusion of the inquiry, the Chairperson of the committee which conducted the proceedings in the presence of the other members must inquire from the employee whether he/she is satisfied with the manner in which it has been held and if not his/her reasons for dissatisfaction. The reply should be recorded (with his/her signature entered there-under) as follows:

FORMAT FOR ENDORSEMENT OF PROCEEDINGS

I am satisfied with the conduct of this inquiry for the following reason(s):

.....

I am dissatisfied with the conduct of this inquiry for the following reason(s):

.....

SIGNATURES:

ACCUSED EMPLOYEE

CHAIRPERSON

WITNESS

DATE

- d. Any employee of GHS who fails to comply with an order from a Disciplinary Authority to provide evidence in a disciplinary proceeding, shall be guilty of an offence and shall be liable to a disciplinary award.
- e. Any Employee of the GHS who is required to attend disciplinary inquiries to give evidence or produce exhibits shall be eligible to receive travelling and night allowances where appropriate.
- f. Non-employees of GHS, formally requested to attend a Disciplinary inquiry, shall be compensated where appropriate.

Quorum: Three (3) members of the committee present and sitting shall form a quorum.

Verdict: The verdict of the committee shall be by consensus. Any dissensions must be recorded

If for any reason a member of the Committee cannot continue to serve on the Committee, he/she must be replaced as soon as possible to avoid delay in the disciplinary proceedings. In this case the proceedings must start again.

A member of the committee shall recuse himself or herself on the grounds of conflict of interest after declaring such interest.

6.5 Report on the Disciplinary Proceedings

1. The report on Disciplinary Proceedings shall be submitted to the Disciplinary Authority within ten (10) working days from the date of completion of proceedings.

The Report of the Proceedings shall:

- a. Indicate the following among others,
 - i. The date(s), time and place of proceedings
 - ii. Background of the case.
 - iii. Methodology.
 - iv. Record of attendance of the employee.
 - v. The relevant rules or regulations under which the employee is being charged.
 - vi. The recording(s) shall be in direct speech.
 - vii. Each statement recorded during the inquiry shall be signed by the Chairperson of the committee holding the inquiry
 - viii. Statements of witness (es).

- b. State definitely whether the employee is guilty or not in respect of each of the charges preferred against him/her; and
- c. Set forth lucidly the facts and inferences in support of the conclusions in respect of each of the charges.

The conclusions should always be based on facts and not on mere conjecture. Such inferences as the facts justify may be drawn if they clearly arise from those facts.

2. The Committee holding the inquiry may comment on the demeanour of any witness (es), including that of the employee, in the course of the proceedings.
3. If the employee has made a statement expressing satisfaction/dissatisfaction with the conduct of the inquiry/Committee holding the inquiry shall include the statement and make their comments thereon in the report.

6.6 Confidentiality:

The Committee holding the inquiry should on no account disclose to the accused employee, or to any other person not authorized to receive such information, findings and recommendations from the inquiry before the report is approved by the Disciplinary Authority.

Exceptions may be made in the following circumstances;

- When requested by a judge in a court of law.
- Where necessary to protect the interest of the employee involved.
- Where necessary to protect the welfare of the larger society and the integrity and credibility of the disciplinary committee or authority.
- Where necessary to safeguard the welfare of another individual employee or patient (as the case may be).

6.7 Decisions on Recommendations of Proceedings:

The report including recommendations of a Disciplinary Committee shall be submitted to a higher Authority for consideration and the following decisions may be arrived at:

6.7.1 Acquittal and Exoneration

- A. An employee acquitted by an inquiry or investigative report shall be recalled to work, if he/she is on interdiction within thirty days of the adoption of the report.
- B. An employee who has been exonerated by an inquiry or investigative report shall be recalled to work if on interdiction and shall be offered due apology in writing by the complainant and the Disciplinary Authority as appropriate.

6.7.2 Guilty Verdict:

If an employee is found guilty the appropriate sanctions shall be applied within thirty days from the date of adoption of the report.

6.7.3 False Accusation:

The Complainant/Service where necessary, should be required to apologise in writing to the employee against whom the false accusation has been made. Additionally, the complainant should be reprimanded in writing.

CHAPTER 7

GENERAL PROVISIONS

Where criminal proceedings are concluded by a court of competent jurisdiction, appropriate disciplinary actions shall then be taken by the GHS upon receipt of relevant court proceedings therein.

No employee shall be transferred/posted, promoted or given training or fellowship within GHS when disciplinary proceedings are pending against him/her.

An employee of the GHS, who has been acquitted of a criminal charge by a court of competent jurisdiction, shall not be punished by the GHS for the same offence.

The GHS however, reserves the right to take appropriate administrative action on any other charges related to the incident or case which constitutes misconduct under the rules and regulations of the Service.

CHAPTER 8

CATEGORIES OF OFFENCES AND PENALTIES

Offences shall be categorized as minor or major and shall be dealt with and managed under the various provisions of this code and shall attract corresponding degrees of punitive action.

8.1 Minor Offences

The following shall be classified as minor offences under the provisions of this Code.

- a. Reporting late for work or leaving or closing earlier without permission.
- b. Absence from duty without reasonable cause/excuse
- c. Any attitude or act(s) of rudeness and insubordination to his/her superiors, colleagues or clients at the workplace.
- d. Inappropriate and unauthorized use of office, medical and other equipment being the property of the Service for unofficial/personal jobs.
- e. The use of materials, stationery, medication and other supplies belonging to the Service without authority.
- f. Providing false information to discredit the Service or cause disaffection from the public.
- g. Withholding vital information with the intention of misleading management, clients or the public.
- h. Pre-empting clinical and other decisions or actions.
- i. Disclosure of official/client information to unauthorized persons.
- j. Sexual harassment.
- k. Sleeping while on duty.
- l. Use of abusive language.
- m. Loafing.
- n. Undue interference with other peoples jobs.
- o. Occasional intoxication or drunkenness while on duty.
- p. Non-compliance with official dress code.
- q. Taking part in illegal demonstration(s) or industrial actions

- r. Unnecessary noise making.
- s. Failure to handover administrative duties and official properties properly.
- t. Quarrelling within official premises.
- u. Failure to submit requisite data and reports.
- v. Illegal or unauthorized collection of fees from clients/patients.
- w. Misuse of corporate computing and networking equipment, internet access and network resources.
- x. Failure to put in place /ensure appropriate safeguards for the physical security and monitoring of computing devices assigned to employees for corporate use.
- y. Circumventing certain minor aspects of human-subject requirements in the course of research.
- z. Inadequate record keeping related to research projects

8.2 Penalties for Minor Offences

The under-listed are a range of penalties that could be selectively used as disciplinary measures for minor offences.

- a. Verbal warning in the first instance.
- b. Warning in writing.
- c. Suspension from duty without pay and allowances for not more than ten (10) working days.
- d. Reduction/forfeiture of annual leave.
- e. Temporary change of schedule to a less responsible one.
- f. Refund of illegal/unauthorised money from clients/patients.

8.3 Major Offences

The under-listed offences shall be considered as major offences.

- i. Theft, embezzlement, fraud, or any other situation of negligence leading to financial loss to the Service.
- ii. Rape or sexual harassment of co-workers, patients/clients or their relations.
- iii. Physical assault of co-workers, patients/clients.

- iv. Persistent /habitual intoxication while at the work place.
- v. Trafficking in and use of narcotic drugs.
- vi. Smoking at the work place.
- vii. Improper demand or collection of unauthorized fees.
- viii. Falsification of official/client's records.
- ix. Criminal conviction by a court of competent jurisdiction.
- x. Gross insubordination or refusal to perform an authorized duty.
- xi. Negligence and misuse of equipment, vehicles, buildings and furniture of the Service.
- xii. Divulging confidential information without lawful authority to other staff, clients or any member of the general public.
- xiii. Persistent/habitual absence from duty without permission or reasonable cause.
- xiv. Refusal to attend to or responding late to an emergency duty/call.
- xv. Unauthorized absence while on emergency duty.
- xvi. Indecent exposure of parts or all of the body while on duty.
- xvii. Failure to adhere to official dress code.
- xxviii. Vacation of post, refusal to go on posting and desertion of station or post.
- xix. Impersonation.
- xx. Professional misconduct, malpractice and negligence.
- xxi. Breaching financial policies and procedures.
- xxii. Disclosure of official information to unauthorized persons which brings the Service into disrepute.
- xxiii. Wilful destruction of official documents/property.
- xxiv. Seduction of patient/client or their relations while under the care of the institution.
- xxv. Refusal to handover or improper handing over of official responsibility when required.
- xxvi. Failure to appear before a disciplinary committee without prior permission in writing.
- xxvii. Failure to comply with disciplinary penalties/awards.
- xxviii. Persistent failure to answer queries despite reminders/warnings.

- xxix. Circumventing or subverting ICT and other security systems within the Service.
- xxx. Failure to comply with the country’s legislative framework governing the use, storage and transmission of healthcare electronic data.
- xxxi. Misuse of corporate computing and networking equipment, internet access and network resources.
- xxxii. Use of Illegal copyright or intellectual property right materials (electronic and manual).
- xxxiii. Failure to put in place /ensure appropriate safeguards for the physical security and monitoring of computing devices assigned to employees for Corporate use
- xxxiv. Failure to adhere to policies and procedures governing the privacy, confidentiality and integrity of electronic medical records, other official electronic records and ICT systems.
- xxxv. Use of suggestive, vulgar and/ or obscene language when using the Corporate ICT system.
- xxxvi. Use of corporate email or other messaging services for private business activities.
- xxxvii. Use of corporate ICT systems for cyber crimes.
- xxxviii. Use of corporate ICT systems to create, view, publish or transmit pornographic materials.
- xxxix. Use of unauthorized/illegal software (purchased or downloaded) including browser toolbars or hardware.
 - xl. Falsifying research data.
 - xli. Ignoring major aspects of human-subject ethical requirements.
 - xlii. Using another’s ideas without obtaining permission or giving due credit (plagiarism).
 - xliii. Unauthorized use of confidential information in connection with one’s own research.
 - xliv. Failing to present data that contradict one’s own previous research.
 - xlv. Publishing the same data or results in two or more publications.

8.4 Penalties for Major Offences

The following punitive measures may be applied alone or in combination in the case of established major offences.

- a. Suspension of salary for one month
- b. Deferment of due promotion for 1 to 3 years depending on the gravity of the offence.
- c. Dismissal and subsequent forfeiture of end of service benefits (if any) with exception of social security contributions.
- d. Removal from office.(termination of engagement without loss of end of service benefits)
- e. Reduction in rank.(immediate demotion in grade and accompanying salary reduction)
- f. Change of work schedule or place.
- g. Postponement or cancellation of training and any awards.
- h. Refund of monies lost to the Service.
- i. Refund of monies illegally collected from patients/clients.
- j. Withholding of salary increment for one year.

In all cases of vacation of post the employee's salary must be immediately suspended and indicated in the report sent to the higher authority.

In case of suspension or reduction of salary or suspension of salary increment, written information must be submitted to the Controller and Accountants General's Department to effect the needed action.

Without limiting or contradicting the provisions of this section and for the avoidance of doubt, the persistence and gravity of the offence shall form the basis of determining whether it is a minor or a major offence and the right to determine such cases shall be the prerogative of the disciplinary authority. Any act of misconduct by an employee of the GHS not expressly mentioned in this document or any regulations operating within the Service shall be reported to the Director-General, who may, after consultation with the GHS Council and other authority/authorities, issue instructions as to how it should be dealt with.

CHAPTER 9

GRIEVANCES AND PETITIONS

9.1 Grievance:

A grievance is a challenge by an employee to a specific disciplinary action, policy or practice of the employer.

A grievance may arise from an administrative act of omission or commission or disciplinary action which may result in an employee complaining that he/she has been denied a right to which he/she considers himself/herself justifiably entitled to or that he/she has been unfairly treated.

9.2 Petition:

A petition is a request or an application by an employee to an authority seeking to draw attention to a grievance, decision or indecision that the employee perceives to have adversely affected him/her or another person.

9.3 Common Causes of Grievances

Some of the common causes of grievances in the Service are:

- a. Delayed promotion.
- b. Delayed processing of salaries and allowances.
- c. Dissatisfaction with Posting.
- d. Not benefiting from fellowship awards and other training programmes.
- e. Perceived victimization.
- f. Favouritism.
- g. Discrimination.
- h. Dissatisfaction with allocation, non-allocation of accommodation or non-availability of accommodation.
- i. Dissatisfaction with allocation or use of official vehicle.
- j. Dissatisfaction with allocation of private vehicles purchased for employees.
- k. Poor remuneration and incentives.
- l. Wrong placement on salary scale.
- m. Inadequate resources for work.
- n. Poor work environment.

- o. Occupational health and safety concerns.

9.4 General Principles of Grievance Redress

Good corporate governance is a pre-requisite for effective and efficient management and enhancement of management-employee relations. It also minimizes the occurrence of grievances in the Service.

Disciplinary Authorities must demonstrate a just cause or show that they have enough evidence before disciplinary action is meted out to employees of the Service.

- a. All employees must be aware of the performance expectations and the Rules and Regulations of the Service. The onus however lies first and foremost with the employer to let the employee(s) know the expectations of the Service.
- b. In order to ensure fairness and justice the penalty meted out to an employee should be commensurate to the offence committed, be consistent with sound disciplinary principles and in line with the provisions of the Code.
- c. Equity and impartiality must be demonstrated in the enforcement of any penalty and employees who commit similar offences should be subject to related penalties.
- d. Disciplinary action taken and redress given should be done within the shortest possible time.

9.5 Procedure for Petitioning

- a. An employee who feels aggrieved must make sure that there is indeed an act of omission or commission against him/her
- b. He/she may submit a petition in writing to the immediate authority who shall arrange an interview to resolve the grievance.
- c. A group of employees having a common grievance may be represented by a colleague of their choice.
- d. If the employees are still aggrieved, they may lodge another petition to a higher authority with a copy to the immediate authority who dealt with the initial complaint.

- e. The recipient higher authority shall immediately appoint a Committee or Inquiry Officer, if he/she finds it necessary, to investigate the matter and make appropriate recommendations.
- f. Upon receipt of the recommendations the Authority concerned must take immediate steps to implement them.
- g. The petitioner(s) should be informed in writing within ten (10) working days of the recommendations given and the action initiated to redress the grievance with copies to all relevant bodies or authorities.

9.6 Frivolous, Vexatious and Unmeritorious Petition(s)

In the event of a petition being adjudged frivolous, vexatious and unmeritorious or without adequate grounds, the petitioner shall be so informed officially and the facts shall be recorded in his/her personal record.

The petitioner shall be reprimanded and made to apologise to anybody accused in such a petition.

CHAPTER 10

APPEAL SYSTEM

10.1 Definition of Appeal

An appeal is a process that allows an aggrieved employee or staff of the GHS to take a grievance or disputed disciplinary decision from a lower to a higher authority for rehearing of the whole or part of the decision.

10.2 The Right to Appeal

Any employee or staff of the GHS who is aggrieved or dissatisfied with a decision or disciplinary award may file an appeal with the higher authority for redress.

10.3 Appellate Authorities

- a. A dissatisfied or aggrieved employee may file an appeal with the immediate higher appellate authority. The hierarchical order in filing appeal will be from the Sub-district, to District, to the Regional Level and then to the National Level and the GHS Council. At the National Level the hierarchical order shall be from Divisional Directors to the Director-General and to the GHS Council.
- b. Appeals must be submitted directly to the higher appellate authority with copies to the disciplinary authority that made the initial decision.
- c. The recipient appellate authority must constitute a committee to re-examine the case in part or in whole.
- d. The GHS Council shall be the final appellate body for staff of the Service after which the appellant, if still dissatisfied or aggrieved may, if he/she so desires, take his/her case to the Commission of Human Rights and Administrative Justice (CHRAJ) or the Law Courts of Ghana/ Labour Commission.

10.4 Conditions for Appeal

- a. An aggrieved employee of the Service who intends to appeal against a decision of a Disciplinary Authority must within thirty (30) days on receipt of the decision /verdict, notify in writing, the Director- General/

Head of Department or the appropriate disciplinary authority (as the case may be) of his/her intention to appeal.

- b. An employee who is dissatisfied or aggrieved with the findings and recommendations of a disciplinary committee may use the laid down hierarchical order stated above.
- c. An appeal, which must be in writing, must be lodged with the higher authority within three (3) months on receipt of the Disciplinary Committee's decision after which no appeal must be entertained.
- d. Unless the laid down procedure and structures for an appeal are adhered to it must not be heard.

10.5 Confidentiality of the Appeal Process

- a. An employee summoned before any of the appellate authorities may request that the hearing be open and that a chosen observer of his/her be admitted to the hearing.
- b. If the case involves more than one employee, then the hearing will be open only if all the employees concerned agree that it must be so.
- c. The number of observers admitted in this instance will be at the discretion of the Chairman of the appellate authority.
- d. It shall be open to either party to request that certain sections of the evidence be reserved as confidential.
- e. The Chairman of the appellate body may at his/her discretion declare the hearing confidential.
- f. Exceptions may be made of these prescribed principles of confidentiality for the release of part or whole proceedings only in the following circumstances:
 - When required / stipulated by a Judge in a Court of Law.
 - When necessary to protect the interests of the employee involved.
 - When necessary to protect the welfare of the larger society and the integrity and credibility of the appellate authority.
 - When necessary to safeguard the welfare of another individual employee or patient (as the case may be).
 - Where necessary to safeguard the integrity and credibility of the Service.

10.6 Stay of Execution (Suspension of Penalty)

The enforcement of a decision against which a notice of appeal has been given must be suspended until after the determination of the appeal.

10.7 Limitations of Period of Appeal

- a. An aggrieved employee who intends to appeal against a decision of a disciplinary committee has three (3) months, effective from the date of his/her receipt of the decision/verdict, to lodge an appeal.
- b. Only one appeal on the same case may be entertained within the appellate system of the Service within the allowed three (3) months period for filing an appeal.
- c. After all the channels of appeal have been exhausted, a further appeal on the same case may be entertained only when new and convincing evidence has been established by the appellant.
- d. The disciplinary appellate authority must be satisfied that there are indeed, new and cogent grounds which will promote the ends of justice.
- e. The appellate authority must also be satisfied that there were adequate reasons for the non-disclosure of such new facts during the original hearing.

10.8 Filing of Appeal

- a. An appeal must be filed in the first instance at the next appellate authority with copies to the disciplinary authority that gave the decision which is subject to appeal.
- b. The recipient appellate authority should request for the record of the proceedings and other relevant documents.
- c. The disciplinary authority must make available copies of the documents tendered in evidence and other relevant documents to the appellate authority.
- d. An employee of the GHS aggrieved by and/or dissatisfied with a disciplinary authority must file an appeal with the appropriate appellate authority and must state:
 - The grounds of appeal.
 - Whether the whole or part of the decision of the committee is the subject of the complaint (if part, which part of the decision) and,
 - The names and addresses of all parties to be directly affected, each of whom must be served with the notice of appeal.
- e. No member of a committee of inquiry or disciplinary authority shall serve on an appellate committee dealing with the same subject.

- f. An appellate authority shall not serve on an appeal committee appointed by him/her.

10.9 Membership of Appeal Committee

- a. An appeal committee shall comprise five (5) officers who are senior to the appellants.
- b. All members of the Appeal committee shall constitute the quorum.
- c. Decisions of the appellate committee shall be by consensus.
- d. If for any reason a member of an appellate committee can no longer serve on the committee he/she must be replaced.
- e. Any member who absents him/herself from the sittings for more than two (2) consecutive occasions shall be replaced.

10.10 Conduct of Appeal

- a. The appellate body shall write to the appellant stating the date, time and venue of hearing.
- b. The Committee shall hold sessions as many times as necessary.
- c. The records of the proceedings must be taken down in writing and/or electronically recorded.
- d. The appellate body, on completion of the hearings, must make recommendations to the authority that constituted the body.
- e. The appellant may be represented by a counsel of his/her choice.

10.11 Register or Records of Appeal

A record of all decisions made on appeal must be kept at the various relevant levels of the Service.

10.12 Action on Appeal Report (See Appendix 5&6)

- a. Once an appeal has been heard and a decision arrived at, it should be conveyed to the appellant's Head of Department/Unit/Directorate and to the appellant himself/herself through the normal administrative channels of communication.
- b. The decision of the appellate committee must be implemented within twenty-one (21) working days.
- c. Management must inform the appellate authority within fourteen (14) working days of the action taken to implement the decision, except where the appellant has again appealed to a higher hierarchy.

CHAPTER 11

DISPUTES AND MODE OF SETTLEMENT (ARBITRATION AND RECONCILIATION)

11.1 Definition and Conditions Relating to Dispute

- a. A dispute is a contention, discord, controversy, strife etc. amongst members of a community or organisation as the case may be.
- b. These disputes may not be as a result of a breach in any of the rules or regulations of the GHS, though they may potentially affect the smooth running of the GHS and the welfare of its staff.
- c. Disputes arising between officials of the GHS or between its official(s) and employees of other agency, clients and members of the general public shall be settled by an Arbitration /Reconciliation Committee.
- d. Arbitration/ Reconciliation Committees may be set up by the Director-General, Divisional Directors, Regional Directors of Health Services, and Heads of Unit/Departments as the case may be.
- e. Membership of an Arbitration Committee shall be five (5) senior officers from within and without the GHS.
- f. Where there is an Arbitration/ Reconciliation Committee, a quorum will only be formed by all of them. Any member of the Arbitration/ Reconciliation Committee who absents himself/herself for more than two consecutive occasions should be replaced.
- g. Decisions must be by consensus.
- h. If one of the parties involved in the dispute is not an employee of the GHS, the composition of the panel should be arrived at in consultation with the non-member of the GHS.

11.2 Functions of Arbitration/ Reconciliation Committee

These shall include:

- a. The investigation of all disputes and establishing their possible causes.
- b. Making recommendations for the resolution of the dispute.

- c. Submission of the arbitration decision to the appropriate authorities for implementation.

11.3 Settlement of Disputes outside Official Channels

- a. Petty disputes which are non-criminal in nature involving staff of the GHS may be settled outside official channels if both or all parties in the dispute agree in writing.
- b. The outcome of such outside settlement shall be communicated in writing to the appropriate authority by the body that settled the dispute.
- c. The decisions of the Arbitration or Reconciliation Committee will be final and binding on all the parties involved.

CHAPTER 12

CONFLICT OF INTEREST

12.1 Definition

Conflict of interest is defined as any situation which has the potential of interfering with the sound managerial, professional and administrative decision of an employee and which could compromise laid down rules, regulations and procedures of the GHS which may result in unfair advantage to the employee or loss of money or property of the GHS.

12.2 Conditions for Conflict of Interest

An employee of the GHS should not put himself/ herself, family or friends in a position where his/ her or their interest conflicts with the functions of his/ her office.

Conflict of interest may arise from the following:

- a. Where an employee of the GHS receives valuable gift(s) from any person whether in the form of money, goods, hospitality or other personal benefits, and it is perceived that the gifts received are intended to influence his/her judgement or action on a case he/she is dealing with or will handle in the future.

In circumstances where a GHS employee is presented with a gift of any kind, he/she should exercise his/her own judgement as to whether he/she should decline the offer; otherwise he/she should consult with his/her superior officer.

- b. Where an employee of the GHS gives valuable gift(s) to any person whether in the form of money, goods, hospitality or other personal benefits, and it is perceived that the gift(s) given is or are intended to influence that person's judgement or action in his/her favour presently or in the future.
- c. Where an employee of the Service acts as an agent for any person who intends to influence a GHS employee with a benefit.

- d. Where a GHS employee in his/her personal or official capacity receives any payment from Government funds on behalf of, or, as agent for any member of the public.
- e. Where an employee sets up a company or enters any enterprise whose interest conflicts with that of the GHS.
- f. Where an employee uses his/her professional qualifications in the promotion of commercial products.

12.3 Declaration of Interest

Any employee of the GHS who has an interest in a case or transaction which in his/her anticipation may result in a conflict of interest with the GHS must declare that interest in writing and in confidence to his/her immediate superior officer prior to the proceedings or transaction. After declaration the employee must not take part in the proceedings or that transaction.

12.4 Sanctions

All actions that amount to conflict of interest constitute misconduct in respect of which the following appropriate sanction(s) or penalty/ penalties will be meted out:

- a. In cases of proven conflict(s) of interest, the employee shall be removed from his/her normal schedule or post where his/her influence will interfere with the interest of the Service.
- b. If a conflict of interest results in huge losses to the Service and/or State, the matter must be referred to the appropriate security agencies.
- c. An employee accused of conflict of interest may be interdicted until the case is determined.

Any employee of the GHS shall be liable to refund/ replace any loss of money or property which is occasioned by any conflict of interest situation.

REFERENCES

1. GHS Patient Charter, February 2002.
2. GHS Code of Ethics, February 20001.
3. 1992 Constitution of the Republic of Ghana.
4. The General Medical Council, UK Professional Conduct and Discipline: Fitness to Practice, 1993.
5. Code of Conduct for Civil Service, November 1999.
6. A Guide to Ethical Conduct and Behaviour and to Fitness to Practice. The Medical Council, Ireland, January 1004.
7. Disciplinary Grievance Procedures for the Ghana Civil Service, January 2002.
8. Policy on Discipline and Disciplinary Processes for the Health Services of the Government of Ghana, March 1998
9. Extracts of Administrative Rules, Regulations and Professional Codes, MOH Ghana, May 1995.
10. Draft Legislative Instrument (L.I) for the Ghana Health Service, June 2002.
11. UEA Calendar: Code of Discipline, UK, October 2001.
12. The Ghana Health Service and Teaching Hospitals Act (Act 525.1996).
13. The Ghana Health Service at a Glance, September 2002.
14. Manual on General Administrative Practices and Procedures for the Ghana Health Service, August 2002.
15. Ghana Medical and Dental Council Professional Conduct and Ethics/Guide.
16. Code of Professional Conduct for Professional Nurses and Midwives in Ghana.
17. Code of Ethics for Biomedical Laboratory Scientist in Ghana.
18. Code of Ethics for the Pharmaceutical Society of Ghana.
19. Code of Ethics of the Association of Health Service Administrators, Ghana.
20. Conditions of Service for staff of the respective Health Agencies

APPENDIX 1

CATEGORIES OF STAFF

Staff within the GHS shall be categorized in six (6) main classes for ease of administration of the Conditions of Service. The Director General and the GHS Council shall determine the categorization of staff.

The recommended categories of staff are:

CATEGORIES/TYPES OF STAFF

A1 Director General, Deputy Director General

A2 Headquarters and Regional Directors and Consultant Grade staff.

B Specialist, Deputy Directors, National Departments and Programme Heads, District Directors, Hospital Superintendents, Regional Heads of Departments and Programmes and other relevant administrative positions.

C Senior Health Professionals and Health Service Support Grades.

D Junior Professional and Junior Support Service Staff.

E Sub-Technical/Auxiliary Grade.

F Utility Grade

Types of Staff: Types of Staff comprise of a summary of both the managerial and technical positions as defined in the Schemes of Service of the Ghana Health Service. Staff seconded from organizations outside the GHS may be classified based on the criteria defined in the Scheme of Service for the GHS.

Categories: The categories as defined in the conditions of service document are unique and applicable to the Ghana Health Service and shall not be varied without the due process authorized by the Council.

APPENDIX 2

FORMAT FOR SUMMONING AN EMPLOYEE TO APPEAR BEFORE A DISCIPLINARY COMMITTEE

You are to appear before the Disciplinary Committee on (date/time/venue) to answer the following charges:

1.
2.
3.

You are to appear before the Committee without fail.

You may bring one observer if you so wish.

Please acknowledge receipt within five (5) working days.

SIGNATURE.....

DISCIPLINARY

AUTHORITY

APPENDIX 3

FORMAT OF REPORT ON FORMAL DISCIPLINARY INQUIRY

1. **Background:**

- a. Events leading to the decision to set up Inquiry.
- b. Summary of Charges.
- c. Rights and Privileges accorded the accused employee.

2. **Methodology :**

- a. Venue of sittings
- b. Number of sittings
- c. Number of Witnesses and
- d. Documents received
- e. Oral evidence obtained.

3. **Findings**

- a. Facts and inferences in support of conclusions in respect of each charge.
- b. Observations/Comments on general conduct of Accused.
- c. Summary of Evidence.

4. **Recommendations.**

5. **Acknowledgement of contributions by witnesses and Committee members.**

APPENDIX 4

SPECIMEN LETTER CONVEYING DISCIPLINARY AWARD BY THE HEAD OF DEPARTMENT

Dear Sir/Madam,

I am directed to inform you that following an examination of the record of the proceedings of the inquiry held on (date).....and the report of the Inquiry Officer, the Disciplinary Authority has found that of the charges preferred against you under Regulation/Code/Administrative Instruction of the Ghana Health Service, charge(s) no.

.....has/have been established, but that charge(s) no. Has/have not been established.

The Appointing Authority, on the recommendation of the Disciplinary Authority, has decided that in respect of the charges which have been established, the increment for *which you become eligible on (date)* shall be withheld for one year and thereafter restored but treated as deferred.

I am to add that if you wish to petition against this award you must do so within ten (10) working days of the notification of this decision.

Yours faithfully,

.....
SIGNATURE AND DESIGNATION

TO: MR/MRS/MISS.....

APPENDIX 5

GUIDELINES ON DISCIPLINARY AWARDS

PERFORMANCE PROBLEM	FIRST OFFENCE	SECOND OFFENCE	THIRD OFFENCE	FOURTH OFFENCE
1. Reporting to work under the influence of liquor or drugs.	Verbal/Written warning.	5-14 days suspension without pay	Termination	
2. Drinking Alcoholic beverages on the job.	Verbal/Written warning.	10-14 days of suspension without pay	Termination	
3. Using illegal Drugs on the job or bringing such drugs into the office.	10 days suspension without pay/Termination.	Termination		
4. Falsification of records	Written warning.	10 days of suspension without pay /Termination	Termination	
5. Stealing	Written warning.	*10-14 days of suspension/Termination		
6. Violation of written rules, Regulations or policies of a security nature	Written warning.	*5days suspension/termination	Termination	
7. Negligence in carrying out job responsibilities in security or non-security settings	Written warning	*Suspension without pay up to 10 days / termination		

* Depending on the gravity of case. * Refer Chapter 8 for details.

APPENDIX 6

FORMAT OF REPORT ON APPEAL

1. Background

- a. Terms of Appointment.
- b. Application showing grounds of Appeal.
- c. Summary
- d. Charges and corresponding Disciplinary Awards

2. Findings

- a. Summary of submissions/arguments made.
- b. Comments/Observations/Inferences.

3. Recommendations

4. Acknowledgements

APPENDIX 7

FORMAT OF LETTER CONVEYING THE RESULT OF APPEAL

Dear Sir/Madam,

After examining the record of the proceedings of the Appeal held on and the Appeals Committee, I have found that Awards in respect of the charges preferred against you under Regulation/Code/Administrative Instructions of the GHS have been confirmed, but that the following award (mention them) have not been upheld.

1. In respect of the Awards which have been confirmed, I have decided that you must be (state the type of disciplinary action) with effect from.....
2. If you wish to appeal to the Appointing Authority /Regional Director of Health Services against the award, you must do so within ten (10) working days of this decision.
3. Please acknowledge receipt.

Yours Faithfully,

SIGNATURE

TO: MR/MRS/MISS.....

Appendix 8

EXAMPLES OF OFFENCES UNDER HEALTH RESEARCH

1. The use of patients or patients records samples in studies without seeking their consent except in situations like public health emergencies
2. Using information collected from study participants/patients for personal gains
3. Allowing non project staff to have access to participant or patient information
4. Giving unrealistic promises to patient or study participants
5. Not properly disclosing involvement in firms whose products are based on one's own research.
6. Relationships with students, research subjects or clients that may be interpreted as questionable.
7. Overlooking others' use of flawed data or questionable interpretation of data.
8. Changing the design, methodology or results of a study in response to pressure from a funding source (falsification).
9. Inappropriately assigning authorship credit.
10. Withholding details of methodology or results in papers or proposals
11. Using inadequate or inappropriate research designs

