



The Royal College of Surgeons of England

# Raising Concerns

A Quick Guide for Surgeons

Professional Standards  
April, 2014

### INTRODUCTION

Since the publication of the Francis report in February 2013, the NHS has committed itself to a culture change that supports greater openness and transparency. It is imperative that everyone working within the healthcare system is able to speak up and take responsibility for acting on concerns relating to patient safety and quality of care that come to their attention. This guide provides a quick map of the key elements of surgeons' responsibility to raise concerns and identifies resources for further guidance and support.

### GOOD SURGICAL PRACTICE

According to the GMC's Good Medical Practice (GMC, 2013) it is the duty of all doctors to promote and encourage a culture that allows all staff to raise concerns openly and safely. They must take prompt action if they think that patient safety, dignity or comfort may be seriously compromised. The College's Good Surgical Practice (GSP, 2014), elaborates on this principle describing three courses of action when concerns for patient safety arise, and three steps for raising concerns:

#### A. Rectify the problem

Where appropriate, you should take prompt action to rectify any incident of poor quality of care, or notify someone who is responsible or able to do so right away.

#### B. Raise a concern – in three steps

##### ***First step: explore local avenues***

Use local organisational frameworks and policies for raising your concern in the first instance. Normally, you should raise your concern to your immediate superior, followed by the Medical Director and Chief Executive.

##### ***Second step: escalate to a regulator***

If your concern has not been adequately addressed through local channels, you should escalate your concern to a regulator. The CQC is the regulator for organisational standards of quality and safety, and the GMC is responsible for doctors' fitness to practise.

##### ***Third step: make your concern public***

As a final recourse, if neither local nor regulatory processes have appropriately addressed your concern you should consider bringing it to a wider public audience, taking care that you do not breach patient confidentiality.

#### C. Support others who want to raise a concern

Raising a concern is not easy. Someone who attempts to act on a concern about patient safety is likely to need every support they can get. If you share a colleague's concern, you should put your own knowledge, understanding, advice and any evidence of wrongdoing available to you at their service. If you are not satisfied that they have taken effective action, it is your responsibility to support them in doing so, or take action instead.

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## WHAT CONSTITUTES A REASON FOR CONCERN

It is a matter for your professional judgement to determine whether patient safety and quality of care are compromised in any instance. Although you should try to gather any available evidence in support of your concern, keep in mind that it is not your responsibility to prove your case. You are only required to have a reasonable belief that something is amiss which may lead to patient harm, and make your disclosure in good faith.

You should not wait until grave harm has occurred to raise a concern. Incidents that compromise safe care include any professional wrongdoing, inadequate organisational systems for quality assurance and control and the mis-use or shortfalls in resources such as equipment, facilities and support services.

It is important to separate a legitimate concern around patient safety from a personal grievance. The legal protection given to an employee for raising concerns does not apply to purely private employment grievances.

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## HOW TO HANDLE THE CONVERSATION

When submitting or discussing your concern, you should bear in mind the following advice:

**1. Stick to the facts**

Be specific about the issues that concern you and the particular code or policy that is being violated. Stick to the facts and do not overstate your case.

**2. Be objective**

Remain objective, and present your evidence in a dispassionate and professional manner, even if you are upset. Do not conflate a concern around patient safety with a personal grievance or with an employment complaint.

**3. Get support**

Seek advice at each stage of the process and, where possible, raise the concern with the support of your colleagues.

**4. Keep a record**

Establish an audit trail that demonstrates what you did, when and why. Keep a record of discussions and actions and make notes of any evidence that supports your concerns.

**5. Remember patient confidentiality**

Be clear about the kind of patient information you can share and with whom. If patient confidentiality stands in the way of public interest, you should seek the advice of the safeguarding team or the Caldicott guardian in your organisation.

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## MAKING BEST USE OF LOCAL PROCESSES FOR IDENTIFYING AND RAISING CONCERNS

It is critical that concerns are raised at the earliest opportunity, so that they can be addressed at an early stage and minimize the risk of harm. There are a number of routine local clinical governance processes aimed to ensure quality and safety. These channels can be used to voice a concern as a matter of course, often before it affects patient care. You should make full use of such processes and resources, including:

- Audits for assessing team and individual performance
- Morbidity and mortality meetings
- Multi-disciplinary team meetings for perioperative care and assessment
- Critical Incident reporting and review (e.g. via CORESS or Datix softwares), including follow up root-cause analyses
- Operational team and department meetings
- Annual appraisal
- Activity and outcome data
- Patient feedback
- Surgical pause (briefing and de-briefing) as part of using the surgical safety checklist

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## WHAT WILL HAPPEN TO MY INFORMATION

If you raise a concern through local avenues there should be an appropriate process for receiving timely feedback regarding the response to your concern.

The Public Interest Disclosure Act (PIDA) protects the employment rights of doctors who act honestly and reasonably in disclosing information in the public interest. However PIDA does not give protection to vexatious action, or to people who are pursuing employment grievances in the guide of raising concerns.

If you seek advice from a helpline or professional service (see resources below), your conversation will remain confidential. Calls are not recorded and you have the option not to disclose your personal details, in which case your call will be logged as anonymous. Remember however that helplines and other sources of professional advice are not the same as making a disclosure and do not replace the need to raise your concern as described in this guide.

You are always encouraged to raise your concern openly rather than anonymously as this will facilitate the responsible person or body to substantiate your concern and give you feedback on actions taken.

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## FURTHER RESOURCES AND GUIDANCE

- GMC [Good Medical Practice \(GMC, 2013\)](#)  
RCS [Good Surgical Practice \(RCS, 2014\)](#)  
RCS [Acting on concerns: Your Professional Responsibility \(RCS, 2013\)](#)  
GMC [Raising and Acting on Concerns about Patient Safety \(GMC, 2012\)](#)  
CQC [Raising a Concern with CQC](#)  
BMA [Whistleblowing](#)  
PCaW [Speak Up for a Healthy NHS \(Public Concern at Work, 2010\)](#)  
NHSE [Top Tips for Reporting Concerns \(NHS Employers, 2014\)](#)  
DH [Building a Culture of Candour \(DH, 2014\)](#)  
DH [Public Interest Disclosure Act 1998](#)

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## HELP AND SUPPORT

- GMC confidential helpline: 01619 236 399  
NHS Whistleblowing helpline: 08000 724 725  
CQC Whistleblowing helpline: 03000 616 161  
Patients Association helpline: 08456 084 455  
RCS Confidential Support and Advice Service for Surgeons: 0207 869 6212  
GMC Employment Liaison Service: [liaison@gmc-uk.org](mailto:liaison@gmc-uk.org)  
RCS Directors for Professional Affairs: [RCS regional professional network](#)  
RCS Invited Reviews (for employers): 0207 869 6222