

# Listening and responding

What to do when someone comes  
to you with a concern



# Contents

<b>Introduction</b> .....	<b>3</b>
<b>Types of concern</b> .....	<b>4</b>
Patient safety .....	4
Working environment .....	4
Team or individual working .....	4
Health and wellbeing .....	4
Behaviour .....	4
Sexual harassment .....	4
<b>Your role as a leader</b> .....	<b>5</b>
Easy wins as a leader .....	5
<b>Guidance to give those raising a concern confidentially</b> .....	<b>6</b>
<b>What is meant by barriers to speaking up?</b> .....	<b>6</b>
<b>What to do when a member of staff raises a concern</b> .....	<b>7</b>
<b>Raising a concern pathways</b> .....	<b>8</b>
Patient safety .....	8
Behaviour of a colleague .....	8
The colleague's own health .....	9
Working environment or equipment .....	9
Sexual harassment .....	10
A manager's behaviour .....	10
Bullying .....	11
Violence or harassment from a member of staff .....	11
Violence or harassment from a member of the public .....	12
<b>Case studies</b> .....	<b>13</b>
<b>Further training available</b> .....	<b>16</b>



**// We encourage our staff to raise concerns openly, or anonymously if they prefer. To be safe in the knowledge that they will be supported if they do. This will help make our Trust a positive and trustworthy place to work and receive care."**

---

## Introduction

### Vision for speaking up

As leaders, we are supported by the Trust Board, to create an open and honest culture to take the time to find out what staff say and to give them the support they need to feel confident and safe to raise any concerns.

This guide aims to help colleagues at ESNEFT to respond to concerns. Naturally, the nature of the concern will determine how it is responded to. A series of pathway documents are included in this guide which will help identify the most appropriate route to take.

Speaking up encompasses a range of matters, which may be referred to as any of the following: raising concerns, making suggestions for improvement, whistle-blowing and protected or qualifying disclosures. If you have any concerns with a particular topic we have the Trust's *Raising Concerns/Freedom to Speak Up policy* for further guidance.

If staff make a complaint about how they are personally treated at work (such as conditions of employment), then you should follow our *Grievance and Collective Grievance Policy and Procedure*.



## Types of concern

### Patient safety

- Unsafe patient care or dignity being compromised.
- Increased workloads or inability to meet the care of patients.
- Unsafe staffing (reduced or insufficient staff numbers and/or skill mix).
- Inadequate response to a reported patient safety incident.
- A breach of code of conduct.
- Safeguarding concerns (resolved with ESNEFT *safeguarding procedures*).

### Working environment

- Unsafe working conditions.
- Infection control.
- Danger or risk to health and safety guidelines.

### Team or individual working

- Lack of support.
- Inadequate induction or training for staff.
- Flexibility.

### Health and wellbeing

- Mental health, stress and anxiety.
- Burnout.
- Physical health.
- Financial wellbeing.
- Issues relating to the health of a colleague, which may affect their ability to practise safely.

### Behaviour

- Bullying towards patients or colleagues, or a bullying culture.
- Violence and aggression.
- Line manager or colleague behaviour, for example unprofessional attitudes or behaviour.
- Discrimination, harassment or hate crime.
- Suspicions of criminal activity such as fraud.

### Sexual harassment

- Unwanted conduct relating to sex.
- It will have the purpose or effect of violating someone's dignity.
- If an individual does not intend to violate someone's dignity but the effect is that it does, this would still be considered sexual harassment.





## Your role as a leader

Leadership has a significant impact on how staff behave. Staff take their cues on how to behave from their manager's behaviour, decisions and communication style. It is essential that you embody the culture and behaviours you want to see.

- You need to demonstrate that you welcome everyone to speak about ideas, issues, problems, challenges, opportunities and innovations.
- Pro-actively encourage staff to provide feedback and raise concerns. This should be encouraged in group settings as well as one-to-ones, such as at huddles or team meetings.
- Show that everyone's voice matters. Identify the barriers to speaking up that staff encounter and teamwork to overcome them.
- Show that you value what you are told by thanking people and sharing updates on the actions you have taken.

## Easy wins as a leader

- Regularly ask staff for their opinions.
- Share examples of how you value speaking up as an opportunity to improve.
- Acknowledge that people face barriers to speaking up, understand where they exist, who they affect and work to reduce them.
- Be visible and approachable, and welcome approaches from colleagues.
- Listen with gratitude and respond with curiosity rather than defensiveness.
- When someone speaks up, take the time to listen well, thank them, act and follow-up providing feedback.
- Take a 'learn, not blame' approach to resolving concerns and be willing to embrace new ways of working.



## Guidance to give those raising a concern confidentially

We hope staff feel comfortable raising concerns openly. We would always recommend that staff give their name. This makes it easier for a concern to be investigated and the best way for them to be protected legally.

However, there may be circumstances where staff would like to keep their identity confidential. This means that while they are willing for their identity to be known to the person they report their concern to, they do not want anyone else to know their identity.

Keep their identity confidential where possible if that is what they request. Ensure this is discussed with them and any limitations to this are highlighted. It is important that the member of staff understands that there may be practical or legal limits to this confidentiality where the concern can't be dealt with without revealing their identity, or that others may guess who has raised the concern. It may be required to disclose identities by law to the police or, if it involves poor behaviours, disclosure may be needed as per the Trust's *Resolution policy*.

If a member of staff raises a concern anonymously, it will be much more difficult for the matter to be investigated, which, in turn, affects public safety and would make it difficult to give them feedback on the outcome.

## What is meant by barriers to speaking up?

Barriers are likely to shift over time, depending on how safe and confident staff feel at work (their internal, psychological wellbeing). There will also be external factors, such as changes in others' behaviour, financial security, and difficulties at home.

Leaders need to understand their workforce and empathy for those who are least heard, those living with disabilities, and staff on lower pay bands feeling that this is a factor.

### Other examples of barriers to speaking up

- Fear of impact on career.
- Lack of confidence in the process.
- Lack of positive experience about the benefits of speaking up.
- Lack of time or knowledge of how to speak up.
- Dissatisfaction with the investigation into, or response to, a previous speaking-up matter.



## What to do when a member of staff raises a concern

They may be nervous, but a simple 'thank you' will go a long way.

Don't take any comments personally or respond in a defensive manner.  
Try to be an active listener.

Don't forget to ask the person raising the concern to share their ideas of how they see the situation being resolved.

Be clear on limitations if they say that they want to raise concerns confidentially, and what the ramifications of this will be. Reassure them that if they feel confidentiality is being compromised, they will not suffer as a result.

Take appropriate action if someone tries to discourage the concern from being raised, or treats them unfairly for having raised the concern.

Be clear to the person that raises the concern about what actions you are going to be taking, and make sure you do it. Also share timescales and give them realistic expectations.

Escalate if necessary or speak to your senior manager if you are not sure of what actions to take.

Give clear feedback to the individual who raised the concern.

Share learning, as appropriate, with the wider team and how raising concerns led to this change.

## Raising a concern – pathways

### Patient safety

- 1 Colleague speaks to their line manager, matron, or manager's manager if appropriate.
- 2 Colleague can speak to the Freedom to Speak Up Guardian or Patient Safety Team.
- 3 Colleague may make a report on Datix (this automatically notifies stakeholders).
- 4 Manager will need to respond by making a service level response within seven days.
- 5 Manager will start an investigation with appropriate escalation.
- 6 Feedback will be given to the individual that raised the concern.

### Behaviour of a colleague

- 1 Employee has a conversation with their line manager as soon as possible.
- 2 If the topic relates to social issues with team members, refer to the *Speaking Up* process for bullying.
- 3 Raise any development deeds or discuss elements of your role with your line manager if appropriate.

## The colleague's own health

- 1 Colleague informs their line manager if they feel comfortable to do so.
- 2 Where appropriate, the manager makes a referral to Occupational Health.
- 3 Colleague may also wish to make a self-referral to gain access to wellbeing support.

## Working environment or equipment

- 1 Colleague informs their line manager and the Health and Safety team.
- 2 Report on Datix and complete a risk assessment if appropriate.
- 3 The situation is investigated by the manager.
- 4 If required, appropriate lead is asked to get involved with the situation.
- 5 Feedback to the individual of appropriate health and safety steps that are being taken to resolve the issue.

## Sexual harassment

- 1 Approach the situation with sensitivity and compassion. Listen carefully and respond with empathy.
- 2 Create a safe space for a discussion to take place where the individual feels secure and supported.
- 3 Present them with the options of moving forward and explain each one clearly.
- 4 Tailor your approach to be considerate to their specific cultural needs and circumstances.
- 5 Discuss how they would like to address the situation and be transparent about their entitlements and the process involved.

## A manager's behaviour

- 1 Colleague can raise the behaviour directly with their line manager.
- 2 There are toolkits in place to help facilitate a conversation.
- 3 If they don't feel comfortable, they can speak to their line manager's manager or their clinical supervisor or professional nurse advocate.
- 4 The manager can set up an informal meeting between them and the colleague with appropriate actions agreed.
- 5 As a last resort the colleague may need to speak to the Employee Relations team.

## Bullying

- 1 Colleague should try to resolve the situation if they can.
- 2 There are toolkits in place to help facilitate a conversation.
- 3 Colleague should inform their line manager if they feel that they need support.
- 4 Manager may wish to set up a formal meeting involving Employee Relations.
- 5 This formal process will have actions set out by Employee Relations.

## Violence or harassment from a member of staff

- 1 Member of staff must report the incident to their line manager.
- 2 Manager must seek advice from the Employee Relations team.
- 3 This formal process will have actions set out by Employee Relations.

## Violence or harassment from a member of the public

- 1 Member of staff must report the incident to their line manager.
- 2 Colleague will make a report on Datix (this automatically notifies stakeholders).
- 3 Manager will need to respond by making a service level response within seven days.
- 4 Manager will start an investigation with appropriate escalation.
- 5 Feedback will be given to the individual that raised the concern.
- 6 The staff member is offered wellbeing support
- 7 This formal process will have actions set out by Employee Relations.





## Case study one .....

### Type of concern

Patient safety.

### Staff raising the concern

Two clerical members of staff.

### Reason for raising a concern

They had a backlog of work which included hundreds of untyped letters, voicemails left unanswered, and emails without reply.

### What they had done before raising the concern

They had raised the issue with their line manager and were not satisfied that their concerns had an appropriate response.

### What they did next

The approached the guardian and explained the situation. They used anecdotal evidence, which was sufficient, to share their concerns for patient safety.

### How the guardian supported them

The guardian listened to their concerns. As the clerical colleagues had already raised the issue with their line manager, it was reasonable for the guardian to raise the matter with the appropriate directors to investigate further if they wished to escalate themselves.

## Case study two .....

### Type of concern

Sexual harassment.

### Staff raising the concern

A clinical member of staff.

### Reason for raising a concern

They felt it was inappropriate the way another member of staff had been touching them.

### What they had done before raising the concern

Nothing. They had no idea where they should take their concerns.

### What they did next

The approached the guardian and explained what had happened to them.

### How the guardian supported them

The first part of the call was listening to their experience. The guardian then confirmed the behaviour by the other colleague had been inappropriate and the clinician had been sexually harassed. The guardian gave further support and guidance to the clinician through the formal process of reporting to employee relations where formal action was taken.



## Case study three .....

### Type of concern

Inappropriate behaviour by another colleague (including sexual harassment).

### Staff raising the concern

A group of colleagues in the same department, through a representative.

### Reason for raising a concern

There had been a series inappropriate sexually focused behaviours demonstrated by a colleague to other members of staff.

### What they had done before raising the concern

The various team members felt they could not speak to their line manager about the matter.

### What they did next

They had one of the group members be a representative and approached the guardian for advice, whilst requesting to remain anonymous.

### How the guardian supported them

The guardian listened to their concerns and made the appropriate contacts with the line management team.

## Case study four .....

### Type of concern

Bullying.

### Staff raising the concern

Unknown, despite several meetings their name and role were never disclosed.

### Reason for raising a concern

Two colleagues were bullying other members of staff with a covert approach as they were hiding their activities in plain sight through shift and rota patterns.

### What they had done before raising the concern

The unknown colleague had a good relationship with their line manager, but they were worried they would be seen to be telling tales or found out by the bullies if they approached them directly.

### What they did next

They decided to approach the guardian as they knew they could remain anonymous raising the concern in this way.

### How the guardian supported them

After listening to the concerns, the guardian took the matter to their line manager on their behalf, and anonymity was preserved (which the staff member confirmed once the matter was resolved).



## Case study five

---

### Type of concern

Inappropriate behaviour by a manager.

### Staff raising the concern

A group of colleagues in the same area.

### Reason for raising a concern

Each staff member came separately to the raising concerns team in regard to the same senior clinical lead.

### What they had done before raising the concern

Due to the senior clinical lead's position, the colleagues felt were unable to bring their concerns anywhere else.

### What they did next

They each approached the raising concerns team in their own ways and spoke with the guardian about their concerns.

### How the guardian supported them

The guardian raised the matter with the appropriate director and supported the setting up of listening events for the whole group, away from their leaders. The benefits of a listening event means that the a group chat made it harder to identify individual grievances.



## Further training available

The *Freedom to Speak Up in Healthcare in England* programme offers some free e-learning modules.

This training is for everyone, wherever they work in healthcare, and explains in a clear and consistent way what speaking up is and its importance in creating an environment in which people are supported to deliver their best. It will help you understand the vital role you can play and the support available, to encourage a healthy speaking up culture for the benefit of patients and workers.

The training is divided into three parts:

### 1 Speak up

Core training is for all workers, including volunteers, students and those in training, regardless of their contract terms and covers what speaking up is and why it matters. It will help learners understand how to speak up and what to expect when they do.

### 2 Listen up

This training for all line and middle managers is focused more on listening up and the barriers that can get in the way of speaking up.

### 3 Follow up

This training is aimed at all senior leaders including executive board members (and equivalents), non-executive directors, and governors to help them understand their role in setting the tone for a good speaking up culture and how speaking up can promote organisational learning and improvement.

With thanks to University Hospitals Sussex NHS Foundation Trust for their original content.

Your views on this guide are important.  
Share your feedback or if you need additional support at [Raising.Concerns@esneft.nhs.uk](mailto:Raising.Concerns@esneft.nhs.uk)

