Introduction

This document has been developed to help registered nurses identify and communicate their concerns about issues which may impact on their ability to deliver safe and effective care to patients. It is anticipated that this guidance will be used by any registered nurse irrespective of position or grade who has concerns about aspects of patient care within the independent sector.

The primary responsibility of the registered nurse is to ensure that patients within their area of clinical responsibility receive care that is safe and effective. This is achieved in a number of ways including:

- communicating, maintaining and monitoring standards
- ensuring the correct number of staff, with the necessary knowledge and skills
- ensuring the correct resources
- ensuring the environment is safe and fit for purpose
- asking for advice and support when necessary.

If the registered nurse feels that their ability to ensure delivery of safe and effective care is being compromised, it is their duty to communicate these concerns to their line manager. They must do this in order to make their line manager aware of the situation and to give him/her the opportunity to resolve the issue or escalate the concerns to the next level.

All registered nurses irrespective of their position or place of employment have a duty under the NMC Code to raise and, if necessary, escalate any concerns they may have about patient or public safety, or the level of care people are receiving. (NMC 2015)

Additional guidance by the NMC also advises registrants that failure to report concerns may bring their fitness to practise into question and put their registration at risk. If a registrant experiences any negative reactions within the workplace after raising a concern appropriately, they should contact their professional body or trade union for support and advice. (NMC 2017)
Registered nurses must be able to raise their concerns about patient care and safety without fear of repercussion and the majority of organisations will rightly value and be receptive to the registered nurse bringing forward any concerns they may have. The registered nurse should also be aware that all independent sector healthcare providers are required to have a **whistle blowing policy** in place, which clearly identifies the process for raising concerns both within and outside the organisation.

This guidance document does not focus on safeguarding issues. It is therefore important that all registered nurses are familiar with the **safeguarding policy and reporting protocol** that all independent sector healthcare providers are required to implement. This will guide nurses if they believe a patient or patients have been harmed or are at risk of harm. Each organisation is required to have a **designated Adult Safeguarding Champion** (ASC) and whilst the usual protocols for reporting concerns through the line manager will apply, the ASC may also be contacted to discuss specific concerns about patient safeguarding.

Registered providers and registered managers have a duty of care to their staff and should ensure that staff can work in an environment that allows them to carry out their duties according to the expected professional standards of practice and behaviour.

**Before raising concerns**

Raising concerns about issues that impact on patient care is not about trying to shift problems or abdicating responsibility for the issues being raised. Rather, it should allow both parties to work together to develop solutions to address the issues.

It is vital that registered nurses are able to recognise when standards of care within their area of responsibility are deteriorating. In order to be able to do that they need to know what is “normal” for their area and when things are deviating from normal. They should be aware of issues such as:

- agreed staffing levels
- actual staff in post/available to work
- changes in dependency of patients
- workload
- audit results
- quality indicators.

This information should be readily available in all organisations and deviation from expected standards may indicate that concerns about patient care and safety need addressed urgently.
How to raise a concern

First steps
Before you think about raising a concern you should ask yourself a few questions:

• what have I done to try to address the situation within my own resources?
• are there any other options open to me?
• is there anything more that I can do before I involve my manager?
• could I prioritise things to reduce the impact on the patient?
• what am I concerned about specifically?
• what do I need to help me deal with this situation safely?
• what do I want from my manager?

When you have considered these options and done what you can to alleviate the immediate situation, you then need to decide what the appropriate course of action should be.

Second steps
Concerns should normally be raised internally with your line manager in the first instance, either verbally or in writing. You should keep a record of the concern raised, the steps you have taken to address it, the name of the person you raised it with and the date the concern was raised. Written concerns can be raised by e-mail or letter and/or by using your employers’ incident reporting system if that is appropriate.

If for any reason you feel unable to raise your concern with your line manager, you should raise your concern with the designated person in your organisation. You should be able to find out who this is by looking at your employer’s whistleblowing policy. If your line manager is the registered manager and you feel unable to raise the concern with this person, then in most cases you should raise your concern with the responsible individual or registered provider, or someone acting on their behalf such as a regional manager. The name of this person should also be recorded in the organisation’s whistle blowing policy.

The name of the registered manager and the responsible individual or registered provider is also recorded on the registration certificate issued by the Regulation and Quality Improvement Authority (RQIA). The certificate is at all times displayed in a public area and should therefore be accessible to you.
**Incident report forms:** these forms are used to gather data about untoward incidents, accidents, and near misses. They help organisations to look at patterns and trends and can be a great source of evidence to support the raising of concerns, for example, increased numbers of patient falls; increased incidence of healthcare acquired infections or increased numbers of medication errors. The difficulty with relying on incident reporting systems to raise concerns is that they are not immediate and often they are not actionable on their own. They do not always capture the urgency that you may feel a situation requires.

**A direct email/letter:** this method of raising concerns is more immediate, can generate a quick response and allows other people to be copied into the correspondence (the downside to an email is that it is instant, therefore think carefully about what you write and why you are sending it).

In the busy, complex world of healthcare many managers are overwhelmed by emails and it is easy for urgent emails to be overlooked. It is important to ensure that the person you are sending the email to is actually on duty and not on leave. Always mark as urgent and request a ‘read receipt’ when you send an email identifying issues of concern.

Independent sector healthcare organisations are smaller and generally have fewer layers of management in their operational structures than organisations within HSC Trusts. This brings with it many benefits such as issues being dealt with promptly as it is easier to access the person empowered to make decisions. However it must be acknowledged that the familiarity of smaller organisations may also deter staff from putting concerns in a letter or email, and they may be more inclined to raise concerns face to face, preferring the informal approach. Whilst raising concerns face to face may get the desired response and outcome, there is no formal record that the situation has arisen and that the concern was raised. It is therefore important that you keep a written record of the concern raised, who the concern was raised with, the date raised and the action taken.

**Evidencing your concerns:** The following list provides information and facts you should know and consider before raising your concern:

- the agreed staffing levels for the establishment
- if you consider the agreed staffing levels to be inadequate you will need to articulate why you believe this to be the case
- do staff have the necessary experience and competency levels for their individual roles?
- do you consider that the staffing skill mix is safe?
• do you have an over-reliance on bank and agency nurses to fill your shifts?
• do you have unfilled shifts?
• how many staff hours are vacant?
• what is your bed occupancy/case load?
• what is your patient dependency?
• is sickness absence contributing to the situation?
• are the assessed needs of patients appropriate for the categories of care that the establishment has been registered to accommodate?
• do you have adequate equipment and resources to deliver care safely?
• what do audit results indicate?
• have there been any missed episodes of care?

When you are ready to raise your concerns, identify what specifically you are concerned about.

For example:
• do not only comment on staffing numbers/shortages/skill mix. It is important that you describe the impact that these deficits have on: your ability to deliver safe care to patients; on the patient’s experience; and/or staff morale, e.g. failure to deliver care over a period of time and on an ongoing basis
• any increase in errors or adverse incidents
• any decrease in agreed quality indicators e.g. infections, falls, patient nutrition
• increased levels of sickness/absenteeism, low morale or an increase in signs of work-related stress within the team
• the number of times you have had to change duty rotas at short notice, including cancelling annual leave and mandatory training to fill shifts
• staff working excessive hours to cover shifts
• difficulties in ensuring staff can keep up to date with mandatory training
• any increase in the numbers of complaints or an increase in numbers of patients and/or relatives raising concerns about care, both written and verbal
• an inappropriate reliance on relatives to deliver aspects of personal care to patients
• complaints from the multidisciplinary team about standards of care.
Identify what actions you have already taken

Clearly describe the actions that you have already taken to try and address your concerns.

For example:

• discussed the concerns with staff to hear their views on how the issue might be addressed
• examined duty rotas to ensure maximum efficiency in the use of staff (if appropriate give evidence of how many times within this period that you have cancelled holidays, changed off-duty, cancelled training and development sessions and asked staff to change their plans to help you out)
• examined your workload to identify anything that can be cancelled, postponed or undertaken by someone else that would not impact negatively on the patient. (If appropriate, identify where staffing gaps in other areas such as administration, clerical, housekeeping, maintenance is diverting nursing or care staff away from clinical duties)
• booked bank and agency staff to cover shortages (or attempted to without success!)
• reported your concerns verbally to your line manager
• reported your concerns in writing to your line manager.

What specifically do you need your manager to do to help you manage the situation?

If you know what would help then tell your manager what they can do for you.

For example:

• can the workload be reduced
• improve staffing levels or skill mix (try to be specific about what grade of staff you need: is it a health care assistant or a registered nurse?)
• negotiate with other staff/departments to get help
• get equipment or resources if this is a contributory factor
• give advice and support.
You should always ask your manager to acknowledge receipt of your concern. If they fail to deal with your concerns within a reasonable timeframe then it is your duty to escalate your concerns to the next level.

Remember that no one can prevent you from raising your concerns about patient care. However, it should be done constructively and professionally, through your line management structure and should always protect the confidentiality and dignity of the patient.

Finally, make sure that you keep your RCN representative informed of how the issue progresses.

If you have followed your organisation’s whistleblowing policy, raised your concerns internally and your employer fails to address your legitimate concerns adequately (or at all) you are professionally obliged to progress the matter further. It is important that all registered nurses understand their professional responsibility to follow through and ensure that any concerns raised are adequately addressed. Sometimes this will mean raising it with an external organisation such as the Regulation and Quality Improvement Authority (RQIA), or a Health and Social Care (HSC) Trust. In this event you may wish to seek advice from your RCN Officer as to how to proceed further.

All establishments and agencies within the independent sector are regulated by the RQIA. If you have a concern that has not been adequately addressed you may wish to raise it with this organisation. The first point of contact within the RQIA will be the duty inspector.

**RQIA (Regulation and Quality Improvement Authority).**
9th Floor Riverside Tower,
5 Lanyon Place,
BELFAST,
BT1 3BT
info@rqia.org.uk
Tel: 028 95361111
The HSC Trusts commission the majority of the care provided to patients in the independent sector and therefore have a governance responsibility for the standard of care being provided. If you do not wish to raise your concern with the RQIA then you may raise your concern with the Chief Executive of the HSC Trust where the establishment or agency is located.

**Belfast Health and Social Care Trust**
Trust Headquarters
A Floor
Belfast City Hospital
Lisburn Road
Belfast
BT9 7AB
Tel: 028 9504 0100

**South Eastern Health and Social Care Trust**
Trust Headquarters
Ulster Hospital
Upper Newtownards Rd
Dundonald
BT16 1RH
Tel: 028 9055 3100

**Northern Health and Social Care Trust**
Trust Headquarters
Bretten Hall
Bush Road
Antrim
BT41 2RL
Tel: 028 9442 4000

**Southern Health and Social Care Trust**
Trust Headquarters
Southern College of Nursing
Craigavon Area Hospital
68 Lurgan Road
Portadown
BT63 5QQ
Tel: 028 3833 4444

**Western Health and Social Care Trust**
Trust Headquarters
MDEC Building
Altnagelvin Area Hospital site
Glenshane Road
Londonderry
BT47 6SB
Tel: 028 7134 5171

**References**

Raising concerns: Guidance for nurses and midwives. Nursing and Midwifery Council (2015)

Department of Health, Social Services and Public Safety and Department of Justice (2015) Adult safeguarding: prevention and protection in partnership, Belfast: DHSSPSNI
The RCN represents nurses and nursing, promotes excellence in practice and shapes health policies. Should you require any support in relation to these guidelines please contact an RCN representative in your area.

Royal College of Nursing
17 Windsor Avenue
Belfast BT9 6EE
Telephone: 02890384600
Fax: 02890382188
www.rcn.org.uk/northernireland