

SPEAKING UP & RAISING CONCERNS

A learning session designed for healthcare students

SESSION OVERVIEW

What to expect in this session



Icebreaker

Video examples

Mini informative session

Closing activity

Reflection and Summary

Share with the person next to you:

Have you ever seen something wrong in practice or training and stayed silent? Why?

VIDEO EXAMPLES

You will now be shown 2 different videos.

Instructions:

1. Observe these videos as if you see them happening in real life
2. Note down for yourself things that you think were done poorly
3. Note down how you might bring the situation up to someone
4. Do not share them with other people (yet)

*Imagine these Medical staff are registered under HCPC

VIDEO 1

- Instructions:
- 1. Observe these videos as if you see them happening in real life
 - 2. Note down for yourself things that you think were done poorly
 - 3. Note down how you might bring it up to someone
 - 4. Do not share them with other people (yet)



*Imagine these Medical staff are registered under HCPC

VIDEO 2

- Instructions:
- 1. Observe these videos as if you see them happening in real life
 - 2. Note down for yourself things that you think were done poorly
 - 3. Note down how you might bring it up to someone
 - 4. Do not share them with other people (yet)

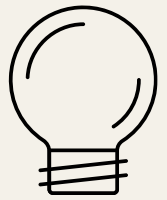


INFORMATIVE SESSION

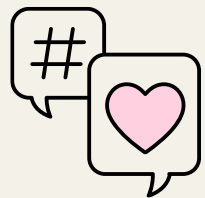
LEARNING OBJECTIVES



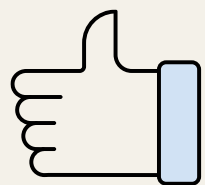
Understanding HCPC standards related to raising concerns and the professional duty of candour



Explain why speaking up and raising concerns is important



Understand and be able to demonstrate at least two constructive approaches for speaking up effectively and respectfully



Evaluate when different approaches are appropriate, considering urgency, relationship, and power dynamics

The professional duty of candour

General Medical Council

“Every health and care professional **must** be **open and honest with patients and people in their care** when something that goes wrong with their treatment or care causes, or has the potential to cause, harm or distress. This means that health and care professionals **must**:

- tell the person (or, where appropriate, their advocate, carer or family) when something has gone wrong
- apologise to the person (or, where appropriate, their advocate, carer or family)
- offer an appropriate remedy or support to put matters right (if possible)
- explain fully to the person (or, where appropriate, their advocate, carer or family) the short and long term effects of what has happened.

Health and care professionals **must also be open and honest with their colleagues, employers and relevant organisations**, and take part in reviews and investigations when requested. They must also be open and honest with their regulators, **raising concerns where appropriate**. They must support and encourage each other to be **open and honest**, and **not stop** someone from raising concerns.”

HCPC standards relating to raising concerns

*this is from the guidance and conduct ethics **for students** from HCPC

7. Report concerns about safety

You should inform an appropriate member of staff at your education provider or practice placement provider if you **witness bullying, harassment or intimidation of a service user, carer, a learner or a member of staff** at your education provider or practice placement provider.

If you are worried about the safety or wellbeing of service users, carers or others, you should **speak to an appropriate member of staff at your education provider or practice placement provider promptly.**

You should put the safety and wellbeing of service users **before any personal concerns**, for example about assessments, marks, other work related to your programme, employment prospects or other personal gain.

HCPC standards relating to raising concerns

*this is from the guidance and conduct ethics **for students** from HCPC

8. *Be open when things go wrong*

You should tell an appropriate member of staff at your education provider or practice placement provider **if a service user or carer wants to raise concerns** about any care, treatment or other services they have received.

You should tell an appropriate member of staff at your education provider or practice placement provider **if something has gone wrong in any care, treatment or other services** you have carried out involving a service user.

You should **co-operate** with members of staff at your education provider and practice placement provider to **apologise** to a service user or carer when something has gone wrong with the care, treatment or other services that you have carried out.

You should **co-operate** with members of staff at your education provider and practice placement provider if something has gone wrong in any care, treatment or other services you have carried out involving a service user. You should **learn from this experience**.

WHY IS IT IMPORTANT?

1 Patient Safety Comes First

- If you see unsafe practice (e.g., poor infection control, incorrect handling, breaches of consent) and stay silent, patients can be harmed physically or psychologically.
- Many healthcare errors are preventable when concerns are raised early.

2 Maintaining Professional Standards

- Speaking up ensures that the care delivered meets HCPC professional standards and workplace policies.
- Staying silent in the face of poor practice can be considered a breach of your duty of care.

WHY IS IT IMPORTANT?

3 Preventing Escalation of Problems

- Small issues, if unaddressed, can snowball into bigger risks — for example, a minor breach in PPE protocol could lead to cross-infection across a ward.

4 Supporting a Safe and Respectful Team Culture

- Raising concerns creates an environment where ethical, safe, and respectful practice is the norm.
- It helps teams learn, improve, and hold each other accountable without blame.

5 Protecting Yourself as a Student

- If something goes wrong and you didn't raise the issue, your silence could be questioned in an investigation.
- Speaking up shows that you acted responsibly and in line with your professional obligations.

2 approaches that are
effective and constructive

The C.U.S. approach

- C – Concerned: State your concern.
- U – Uncomfortable: Express why the situation doesn't feel right.
- S – Safety: Point out the safety risk if the concern is ignored.

Why It Works:

- Structured, non-accusatory language helps overcome hierarchy barriers.
- Promotes early intervention before harm occurs.

I am
CONCERNED

I am
UNCOMFORTABLE

This is a **SAFETY**
issue

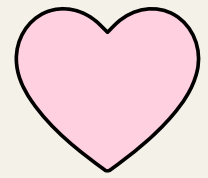


The D.E.S.C. approach

- DESC benefits from all the recommendations on how to effectively share feedback that were described earlier.
- Team unity and quality of care depend on coming to a solution that all parties can live with.
- Frame problems in terms of personal experience and lessons learned.
- Choose the private location – this will allow both parties to focus on resolving the conflict rather than on saving face.
- Use "I" statements rather than blaming statements.
- Remember that critique is not criticism.
- Focus on what is right, not who is right.



HOW DO I KNOW WHEN TO USE WHICH APPROACH?



The C.U.S. approach

Best for:

- Immediate, urgent risks to patient safety or wellbeing.
- When you need to stop the action quickly and draw attention to danger.

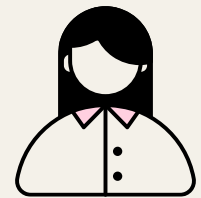
How it works:

- Short, structured escalation.
- Uses keywords (“Concerned,” “Uncomfortable,” “Safety”) that act like “red flag” signals for the team.

Example Situation:

➡ A colleague is about to administer the wrong medication.
“I’m concerned this is not the correct medication.
I’m uncomfortable proceeding without double-checking.
This could be a safety issue for the patient.”

HOW DO I KNOW WHEN TO USE WHICH APPROACH?



The D.E.S.C. approach

How it works:

- D – Describe the situation factually.
- E – Express your feelings or concerns.
- S – Specify what you would like to happen.
- C – Consequences of action/inaction (positive or negative).

Example Situation:

➡ Consistent Late Handovers

“I want to describe that I’ve seen handovers often start late when you’re delayed.

I want to express that it can be difficult to plan the rest of the day when that happens.

Can I specify that we try to start on time?

The consequence will be smoother coordination for patient care.”

Best for:

- Ongoing or recurring issues (e.g., unprofessional behaviour, poor communication, repeated policy breaches).
- Situations where you need a respectful, problem-solving discussion rather than an urgent stop.

CLOSING ACTIVITY

- Task:
 - From the 2 videos shown previously, choose one scenario and write a short script on how you would raise your concerns (5 minutes)
 - Pair up and share your scripts, give feedback, and discuss how you might improve it (5 minutes)
- Prompts:
 - “How did that feel to say?”
 - “Would this work with a peer? A senior?”

D – Describe the situation factually.

E – Express your feelings or concerns.

S – Specify what you would like to happen.

C – Consequences of action/inaction (positive or negative).

C – Concerned: State your concern.

U – Uncomfortable: Express why the situation doesn't feel right.

S – Safety: Point out the safety risk if the concern is ignored.

REFERENCES

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THANK YOU