

Speak-up policy

Policy | WRK-POL-005

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Prepared by	{{roles.quality_lead.name}}, Quality lead
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Replaces	None (new document)
Standards and criteria supported	Standard 2E, criterion 2E.10 (non-negotiable)
Evidence basis	E-006, E-009
Status of this document	Recommended best-practice model. A hospital may adopt, adapt or replace it with an equivalent that meets the same criteria.

At a glance: what to do

1. Any staff member can report a safety concern, misconduct or wrongdoing through a route that bypasses their line manager.
2. Reports can be made in writing, by phone or in person, and can be anonymous.
3. No one who speaks up is treated unfairly for doing so.
4. Every report is acknowledged and followed up, and the reporter is told the outcome.

Stop and get help straight away if: a staff member raises a safety concern and cannot find a route that bypasses their manager, or a retaliation complaint is not investigated.

1. Purpose

To make sure staff can raise safety concerns, misconduct and wrongdoing safely, without going through the person they are concerned about [EC].

2. Scope

Applies to	All workforce members, locums, volunteers and students on placement
Locations	All services and outreach work
When	Always; from the moment a concern is noticed
Does not apply to	Routine workplace issues, which follow WRK-SOP-005

3. Definitions and abbreviations

Term	Meaning in this SOP
Speak-up	Raising a concern about safety, misconduct or wrongdoing through a defined route
Detriment	Any unfair treatment because a person raised a concern
Speak-up lead	A named senior person, independent of line management, who receives and

Term	Meaning in this SOP
	oversees reports

4. Background and rationale

Staff are often the first to see a danger. Where they cannot speak up safely, harm is hidden. This is a non-negotiable criterion because harm can continue while a concern is ignored.

5. Responsibilities

Role	Duties in this SOP	Competence needed
Chief executive	Accountable for the speak-up route and its protection	Executive
Speak-up lead	Receives reports, acknowledges them and oversees investigation	Trained in investigation and confidentiality
Line managers	Do not stop or discourage a report, and pass on concerns they receive	Management
All staff	Speak up when they see a risk	Own role

6. Equipment, materials and resources

Item	Specification or standard	Check before use
Speak-up contact details	Current, displayed in every staff area	Checked monthly

7. Safety and infection prevention

- Concerns about immediate danger to patients are acted on at once. The reporter does not need to be certain, only concerned.

8. Before you start

- Confirm the speak-up lead, and at least one external route, are named and reachable.

9. Procedure

Follow the steps in order. Where a step says "If", take the action for the case that applies. Do not skip a step. If a step cannot be done, use section 11 and section 12.

Step	Action	How to do it	Key point
1	Make the report.	- Use any route: the speak-up lead, a named senior contact outside the line, or an external route. - Anonymous reports are accepted.	The route bypasses the line manager. That is the point.
2	Acknowledge.	Acknowledge the report within 3 working days, if the reporter gave contact details.	Acknowledgement shows the report was received.
3	Investigate.	- Investigate by someone independent of the issue. - Protect the reporter's identity as far as possible.	Investigation starts within 10 working days.
4	Feed back and protect.	- Tell the reporter the outcome and what has changed, as far as the law allows. - Check for any detriment at 3 and 6 months.	Protection is checked, not assumed.

Decision points

- If a report shows immediate danger to patients, the chief executive acts the same day, without waiting for the full investigation.

10. Special situations

Situation	What to do
Concern about the speak-up lead	Report to the chief executive or to the board chair, who appoints an independent person.
Report to an external regulator	Permitted at any time. The organisation does not obstruct it.

11. Problems and escalation

- Any report of detriment, or any report not acknowledged within 3 working days, is reported to the chief executive the same day.

12. Monitoring and compliance

What is checked	Target	How often	Who	If the target is missed
Reports acknowledged within 3 working days	100%	Quarterly	Speak-up lead	Escalate to chief executive
Investigations started within 10 working days	100%	Quarterly	Speak-up lead	Escalate to chief executive
Staff who know the route (survey or spot check)	At least 70%	Yearly	Human resources lead	Re-publish the route and train

13. Records

Record	Where it is kept	Kept for
Speak-up report log	Confidential speak-up files	Employment plus 6 years

14. Training and competence

- All staff are told about the route at induction and at each annual refresher. Managers are trained to receive and pass on concerns.

15. Related documents

ID	Title	Relationship
WRK-SOP-010	Concern handling and protection from retaliation	How reports are handled and protected
WRK-SOP-005	Staff grievance and investigation procedure	Routine workplace issues

16. Evidence

ID	Source and status
E-006	ASF Policy Framework v1.2. Adapted.
E-009	ASF Expert Committee consensus. Route design to be reviewed by the Committee.

EC = ASF Expert Committee consensus. Items marked EC are reviewed by the Committee each year.

17. Change history

Version	Date	What changed	Approver and signature
1.0	{{document.effective_date}}	First version	Pending Expert Committee approval