



Royal College
of Physicians

Raising concerns

Policy

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Raising concerns policy

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1. Purpose of the policy

The Royal College of Physicians (RCP) wants to promote an open and responsive culture where people feel confident to speak up when things go wrong so that we can learn from these situations as an organisation and continually improve. This policy is consistent with the principles set out in the Public Interest Disclosure Act 1998, and enables people to be supported without fear of reprisal when raising genuine concerns about perceived wrongdoing in the workplace. This policy outlines the areas covered and the steps that individuals can and are encouraged to take in bringing any concerns to the attention of the organisation's leadership.

2. Scope

This policy is for individuals working on behalf of the RCP (including the Federation of the Royal Colleges of Physicians), our members and fellows, and users of our services. People working on behalf of the RCP are defined as clinicians working with the RCP in leadership, advisory, elected or representative roles; employees; volunteers (including our lay colleagues supporting RCP work programmes); contractors providing services; agency workers; trainees on work experience or vocational schemes in the UK and international settings.

The policy is intended to deal with concerns related to any of the following:

- inappropriate behaviour that is not consistent with the RCP's values (Appendix 1) and Code of Conduct (Appendix 2)
- a criminal offence (for example, an act of dishonesty relating to the RCP)
- a failure to comply with a legal obligation
- the endangering of an individual's health and safety
- damage to the environment
- deliberate concealment of any of the above.

Any concerns will be treated as being raised in good faith, if supported by narrative and/or evidence of the allegation. This policy aims to promote our values. Should it be found following investigation that the allegation was made maliciously, then the person raising the concern may find themselves subject to disciplinary action. This policy relates to poor behaviours or areas of malpractice and is not intended to cover complaints about an individual's employment, which should be addressed through the RCP's **Grievance procedure policy**.

3. Raising a concern

In the first instance, individuals should raise a concern with the director of HR linda.asamoah@rcplondon.ac.uk. In the absence of the director of HR, the concern should be raised with another senior member of the strategy executive: the chief executive ian.bullock@rcplondon.ac.uk, the president andrew.goddard@rcplondon.ac.uk or the registrar donal.o'donoghue@rcplondon.ac.uk.

We know that raising a concern can be difficult, so the individual is encouraged to seek the support of either a colleague or a staff representative. This policy encourages individuals to put their concerns in writing, saying why they are raising concerns about a colleague's behaviour or why they believe malpractice is happening, or is likely to happen, as this will help with any subsequent investigation.

The origin of the concern will be kept confidential, unless there are circumstances where this is not possible such as criminal or disciplinary proceedings. If this is the case, the individual raising the concern is likely to be asked to provide written evidence or provide testimonial support. For any investigation that does not prove wrongdoing, all related documentation will be destroyed consistent with good GDPR practice.

For investigations that are proven, the outcome will be recorded on the subject of the complaint's personnel files, and the RCP's disciplinary action procedure followed. All relevant documentation relating to the investigation will be kept for the duration of the process, incorporating any appeal proceedings and once completed, then destroyed consistent with good GDPR practice.

4. Responding to a raised concern

Once a concern has been raised, an investigation will be carried out, with due care given towards both the person raising the concern and the person subject to the complaint. The nature of the concern, and its severity, will determine who will lead the investigation. The RCP will aim to keep the individual informed of the progress and any likely outcome of the investigation subject to confidentiality.

If the individual feels that the allegation is not progressing consistent with this policy, and that it is not appropriate to have further communication with the director of HR, then they should contact Ian Bullock ian.bullock@rcplondon.ac.uk or David Croisdale-Appleby croisdaleappleby@aol.com, chair of the RCP Board of Trustees.

Expected timescale for managing a concern

1. Concern raised in writing to linda.asamoah@rcplondon.ac.uk
2. Acknowledged within 2 working days with a commitment to investigate the concern.
3. People directly affected by the concern raised will be communicated with by email, with the request to contact either linda.asamoah@rcplondon.ac.uk or ian.bullock@rcplondon.ac.uk at their earliest convenience over the next 24 hours.
4. An investigation lead will be established and the information gathering process to explore the raised concern will be carried out over the next 20 working days, with the individual who raised the concern updated on any detail that may affect this time frame. Information gathering will include document review, email review and interviews.
5. A summary report with recommendations will be presented by the lead investigator to the director of HR, CEO or chair of the Board of Trustees (as appropriate) within a further 5 working days.
6. Once the outcome is established by the investigation lead (senior RCP employee at director, executive director or COO level) and validated by the director of HR, this will be communicated to the individual who raised the concern and the individual or individuals who have been subject to the investigation within 3 working days.

This means that the process should normally be completed within a maximum of 30 working days.

As part of the investigation, relevant external organisations may be contacted. Examples include:

- General Medical Council
- Medical Women's Federation
- Other relevant professional bodies
- Health and Safety Executive
- HM Revenue and Customs
- The Charity Commission
- Financial Conduct Authority (formerly the Financial Services Authority)
- Competition and Markets Authority
- Environment Agency
- Independent Police Complaints Commission
- Serious Fraud Office.

Further advice about raising a concern may be sought from the independent charity **Public Concern at Work** at www.pcaaw.org.uk.

5. Protecting the person raising the concern

Anyone raising a concern in good faith and following this policy guidance will be protected from any form of disadvantage (including harassment and victimisation) for having done so. People may be assured that voicing a concern made in good faith will not jeopardise them in any way, even if it is subsequently discovered that there was no foundation to the raised concern or that it could not be substantiated.

The RCP will not tolerate any attempt to harass, victimise or in any other way prevent someone from raising a legitimate concern. In such cases, appropriate action (for example, disciplinary action that could result in dismissal) will be taken against any individual or individuals preventing a legitimate concern to be raised. Personal reputation will be protected throughout the process, and while the person who raised the concern will be updated on the process as per this policy, the detail emerging will not be shared, and may not be appropriate to share.

6. Appeal process

1. The request for the investigation outcome to be reviewed will be acknowledged within 2 working days.
2. An appeal lead will be established, report reviewed and individual meetings held over the next 20 working days.
3. The appeal outcome will be reached and provided to the individual requesting the appeal within a further 5 working days. The appeal process will therefore be completed within 27 working days.



Appendix 1

RCP values

We are committed to taking care, learning and being collaborative. These values drive the way we behave, how we interact with each other, and how we work together to achieve our vision and improve patient care.



We value taking care

This means we behave respectfully towards people, whatever their role, position, gender or background. It means we act as representatives of the RCP, and take decisions in the interests of the organisation as a whole.

We value learning

This means we continuously improve through active learning and honest reflection, so that we grow personally and as an organisation, while striving for excellence. We support learning and development opportunities.

We value being collaborative

This means we work together towards the RCP's vision in a collaborative and professional way, understanding that individuals bring different strengths and approaches to our work. We value diversity and each other's contributions.

Appendix 2

RCP Code of Conduct

The RCP Code of Conduct is intended to provide a clear set of expectations as to how RCP members, fellows and other healthcare professionals conduct themselves when working for or representing the RCP.

The standards identified should be seen as an adjunct to guidance provided by the GMC and published in documents such as *Good medical practice*,¹ *Leadership and management for all doctors*² and *Doctors' use of social media*,³ in addition to the Nolan principles of public life.⁴ The document does not diminish an individual's duty to act in accordance with their employing organisation's requirements and their contract of employment.

Standards

The following standards apply to all members, fellows and other healthcare professionals when representing the RCP, working on the RCP's behalf or attending an RCP event (business or social, in any location).

The standards relate to all forms of communication including written, verbal, non-verbal, electronic and social media, especially where the professional concerned could be deemed to be representing the RCP or if there are potential implications for the RCP's reputation.

Members, fellows and other healthcare professionals have collective responsibility to maintain these standards. They should be aware that if they fail to meet them, after full ascertainment of the circumstances, steps may be taken to address their behaviour and appropriate sanctions applied.

RCP500 Code of Conduct

1. Treat others with respect and consideration
2. Recognise and value diversity and individual differences
3. Behave with integrity, honesty, kindness and patience
4. Be a role model for professional behaviours
5. Undertake our work in good conscience and to the best of our ability
6. Foster collaborative and supportive working with others
7. Promote trust and a just culture
8. Hold ourselves and others accountable for professional and personal behaviours
9. Take responsibility for the stewardship of our position of authority, mindful of our impact on others
10. Respect the RCP's standards and rules and be a guardian of its reputation.

How concerns about conduct may be escalated

Escalation of concerns needs to be without fear of reprisal and in accordance with the RCP **Raising concerns policy**. When concerns are registered, the process laid out in this policy will be followed.



The RCP's ability to set rules concerning disciplinary issues derives from its bye-law 168 and there is further clarification of the process in the document, procedure for the conduct and discipline of fellows and members (April 2014). This procedure 'has been drawn up to describe the process that will be followed if any member of the RCP breaks its rules or brings it into disrepute' and will be used 'when a member's behaviour or conduct is regarded as unacceptable to a degree that makes informal measures inappropriate' (p 1). One of the definitions of a breach of discipline is acting 'in a dishonourable or unprofessional manner' (p 3). The document clarifies that the matter should be referred to the registrar, who will investigate the circumstances; in doing so, the registrar may call upon the censors or other fellows as appropriate.

If the matter cannot be resolved informally, or the matter is of sufficient gravity, the registrar (Donal.O'Donoghue@rcplondon.ac.uk) will determine whether a disciplinary investigation into the member's conduct is required. Stage two (disciplinary panel) involves referral to the senior censor and consultation with the censors regarding appointment of a panel; stage three (appeals panel) is overseen by the president and will involve councillors who are representative of the fellowship as a whole.

NB: The RCP's **Disciplinary and capability policy and procedure** (September 2011) outlines the disciplinary procedures related to matters of conduct and capability for all members of staff.

There are various stages to the process involving informal and formal attempts to resolve matters, including written warnings and disciplinary hearings. Cases involving gross misconduct will usually lead to summary dismissal. The type of behaviours described in these disciplinary policies particularly reference gross misconduct and are rarely used.

The RCP500 Code of Conduct provides the standards of conduct expected of its members and fellows and those working on behalf of, or representing, the RCP. Breaching these standards may not amount to gross misconduct but may still result in poor and/or inappropriate behaviours that others should not be expected to tolerate. Gross misconduct should be escalated as outlined in the existing RCP disciplinary policies.

References

- 1 General Medical Council. *Good medical practice*. London: GMC, 2013.
- 2 General Medical Council. *Leadership and management for all doctors*. London: GMC, 2012.
- 3 General Medical Council. *Doctors' use of social media*. London: GMC, 2013.
- 4 See RCP document: Nolan principles of public life: Guidance to trustees and holders of RCP positions.
- 5 RCP leaflet: Setting the highest standards: Our values, and your rights and responsibilities as employees.