# Quality Recording Form

Raising Dignity Concerns

This form is to be completed by the First Listener; a copy of the completed form is to be sent to the NHSE NW Quality Team at: [england.quality.nw@nhs.net](mailto:england.quality.nw@nhs.net)

#### First Listener Information

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Surname |  | First Name |  | |
| Specialty |  | Trust |  | |
| E-Mail |  | | Grade |  |

#### Trainee Information

|  |  |  |  |
| --- | --- | --- | --- |
| Specialty |  | Grade |  |
| Trust |  | | |

#### Details of Concern

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Summary of concern (Agreed with trainee) | | | | |
|  | | | | |
| Are there any sexual safety concerns? | Yes |  | No |  |
| Is there any potential discrimination (conscious or unconscious)? | Yes |  | No |  |
| Do you have any concerns for the trainee’s wellbeing? | Yes |  | No |  |
| If you have concerns for the trainee’s wellbeing, please provide further details: | | | | |
| Does the trainee feel able to discuss with their ES/CS or TPD? | Yes |  | No |  |
| Does the trainee want to raise a formal allegation? | Yes |  | No |  |
| Has the concern been escalated? | Yes |  | No |  |
| Please provide the date and details of who the concern was escalated to: | | | | |
| If the concern has not been escalated, what actions have been agreed (e.g. will the trainee address this, has the line manager been informed etc.)? | | | | |
|  | | | | |
| What pastoral and/or wellbeing support has been offered? | | | | |
|  | | | | |
| Is a referral to Occupational Health required? | Yes |  | No |  |
| Have any actions been identified to prevent further issues? | Yes |  | No |  |
| If actions have been identified, please provide further details: | | | | |