**Raising Dignity Concerns: A Guide for Postgraduate Doctors, Dentists and Public Health Clinicians**

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## Executive Summary

This guidance has been written by the North West Deanery to enable you to take safe and effective action when you have a dignity concern. This executive summary contains the main points; further detail can be found in the main document. The appendices contain flow charts to help you understand your options and the process involved, as well as resources and sources of support.

### What is a dignity concern?

Dignity concerns are issues where someone’s behaviour or the workplace culture makes you feel disrespected or unsafe. Examples include:

* Bullying or harassment.
* Discrimination or unfair treatment.
* Sexual harassment.
* Microaggressions or exclusion.
* Rude or inappropriate behaviour from colleagues or patients.

### What to do if this happens to you

1. Act early: Don’t wait until things get worse, act when something doesn’t feel right.
2. Write it down: Note what happened, how it made you feel, when it happened, and any evidence or witnesses.
3. Talk to someone: Start with someone you trust, like your Clinical or Educational Supervisor. If you don’t feel comfortable talking to them, there are other options:

* Peer Allies: Trainees from a range of specialties, who have been trained to listen and help you decide what to do.
* Freedom to Speak Up Guardian: An independent person who can raise concerns on your behalf. They are particularly useful for patient safety concerns, when you don’t feel comfortable to raise them yourself.
* Deanery EDI Leads: Experts in equality, diversity and inclusion.
* Lead Employer HR Team: For support and advice.
* Senior Deanery Team: If other routes haven’t helped.

### What happens when a concern is raised

* You will be listened to, believed, and treated with respect.
* You and the person you speak to (First Listener) will decide what to do next.
* Your concern may be handled informally (e.g. a conversation or mediation) or formally (e.g. an investigation).
* Your identity will be kept confidential unless there is a serious safety risk.
* You will be supported throughout; your training or career should not be negatively affected.

### What if the concern is serious?

You will receive extra support when:

* You feel unsafe or unable to speak up.
* The issue involves bullying, discrimination, or sexual misconduct.
* Your wellbeing is affected.
* You raise a formal complaint.
* There is a risk to others.

### What if the concern is about someone else?

* Speak to them first if you can and offer support.
* Respect their wishes unless there is a safety risk.
* You can still raise the concern if needed.

### What if a concern is raised about you?

* You will be treated fairly and supported.
* The process will be handled with care and confidentiality.

### What if I am not satisfied?

If your concern has not been properly addressed, you can escalate to:

* Associate or Deputy Deans.
* The Postgraduate Dean.
* The Lead Employer.
* Your union representative.

**Peer Allies**

**A group of people sitting at tables

AI-generated content may be incorrect.**

## Introduction

The aim of the North West Deanery is to ensure that your training environment supports you to thrive. When you are valued, supported and engaged you can learn effectively and provide excellent patient care. However, we understand that unfortunately, this is not always the case.

We know that raising concerns can be very worrying, especially when the concerns relate to how you have been treated. New questions added to the GMC Survey have told us many of you are experiencing unacceptable and discriminatory behaviours in the workplace.

Therefore, we want to ensure any concerns you have can be raised early, in a safe way, and be addressed effectively. Work done with the trainee-led Allyship Network in the North West has shown that there are many potential barriers to raising concerns.

These include:

* Fear of repercussions.
* Fear of standing out.
* Navigating the normalisation of poor behaviour.
* A lack of clarity around how to raise concerns.

If you are feeling unwell due to a negative workplace experience or experiences, please don’t suffer in silence. Support is available for you, a list of sources of support can be found at the end of this document

**If you are experiencing a mental health crisis, you should seek immediate support**

The work of the Allyship Network has led to the development of this guidance, as well as guidance for supervisors and the wider education team to ensure the process is clear for those your concern is being raised to.

This guidance has been developed primarily for dignity concerns: bullying, harassment, including sexual harassment, unfairness, discrimination, microaggressions and exclusion. However, this guidance is useful for any concern, particularly if you are anxious about raising it.

### Terminology

The term “trainee” is used throughout this document to include all Postgraduate Doctors, Dentists and Public Health Clinicians. This guidance can also be used by Locally Employed doctors.

## Dignity Concerns

Dignity concerns are usually issues relating to the behaviour of an individual, or the wider culture of the workplace. They can include the behaviour of patients and service users towards you (such as racism or abuse), when appropriate action and support was not provided.

Examples of behaviours which may violate your dignity include:

|  |  |
| --- | --- |
| * Microaggressions (can include a wide range of behaviours which are not always intended to cause harm) | * Unacceptable and unaddressed behaviour from patients or the wider team |
| * Bullying or harassment | * Discrimination |
| * Undermining or belittling | * Exclusion |
| * Unfair or unequal treatment | * Stereotyping |
| * Sexual misconduct | * Incivility |
| * Interpersonal conflict |  |

### What to do if your dignity is being violated

You may be very distressed if you have experienced either a single incident, or ongoing behaviours which have violated your dignity. Writing things down can be very helpful in this situation. This will be useful for providing accurate and timely information while things are fresh in your mind and will help you decide who to speak to. You should record:

* What happened: what was said, body language and tone, actions or behaviours.
* How it made you feel.
* Dates and times of incident or incidents.
* Any evidence, for example emails or screenshots, rotas, log books.
* Any witnesses.

### Who to raise a dignity concern with

Whether your issue relates to the behaviour of one or more people, or the wider workplace culture, there are always people you can approach to help you. We use the terminology First Listener to describe the person you first raise a concern to, whoever that person may be. This might include (but is not confined to):

|  |  |
| --- | --- |
| * Clinical Supervisor | * Freedom to Speak Up Guardian |
| * Educational Supervisor | * Trust EDI Team |
| * College Tutor | * Lead Employer |
| * Trust Specialty Training Lead | * Deanery EDI Team |
| * Peer Ally | * Head of School / Associate Dean |
| * Training / Foundation Programme Director | * Trust / School Education Team |

If you have already tried this approach without success, or you don’t feel comfortable doing so, it may be easier to speak to someone outside the situation. Here, there are also a range of options:

|  |  |
| --- | --- |
| * Peer Ally | * Deanery EDI Team |
| * Freedom to Speak Up Guardian | * Senior Deanery Team |
| * Lead Employer Team |  |

If you are uncertain who to contact, we would suggest speaking with a [Peer Ally](https://www.nwpgmd.nhs.uk/raising-dignity-concerns) to begin with.

Refer to [Appendix A](#_Appendix_A:_First) for further details on the above options.

### What you can expect when you raise a dignity concern

The person you first raise your concern with is called a First Listener and we expect that:

|  |  |
| --- | --- |
| * You will be listened to. * You will be thanked. | * You will be believed. * You will be treated with kindness and respect. |

**Documentation**

Some details will be recorded to facilitate decision making; however, this will remain confidential until a plan has been agreed.

**Who will be informed?**

An initial decision will be made with your First Listener as to whether your concern constitutes a serious concern. If there is any doubt, the First Listener will seek advice from a more senior educator.

You and your First Listener may agree the concern does not need to be escalated. You may feel better for having had the conversation and have a strategy for how to deal with the situation, should it happen again.

If you and / or your First Listener believe the concern is more serious, the concern is to be escalated. This will usually be to a nominated senior educator in your school, but in certain circumstances may be a more senior member of the Deanery team.

**Confidentiality**

Your concern will be kept confidential; the only exception is when there is a serious risk to your safety, other members of staff, patients or the public. If this is the case, the minimum detail deemed necessary will be shared, you will be kept informed and supported.

Anonymised information may be shared with the Deanery Quality Team, the Lead Employer, and the trust Freedom to Speak Up Guardian to enable patterns to be detected relating to specialties, trusts and departments that may need further intervention.

**Support**

You should always have access to the support you need to keep you safe, look after your wellbeing, and ensure there is no negative impact on your training progression or career

prospects. You may be directed to all or some of the following:

* An individual who will provide you with practical and pastoral support.
* Wellbeing resources.
* Occupational health.
* A senior educator if you have concerns about career progression.

**Informal action**

* Support to address the concern yourself, if you feel able and willing to do so.
* A supervisor or more senior educator having an informal conversation with the individual concerned (or their manager in the case of a nurse or other staff member) to make them aware of the impact of their behaviour. This should lead to an improvement in the behaviour and an apology if appropriate.
* Mediation undertaken by a trained mediator, who will be independent from the situation. Mediation can either take place with both of you present, or the mediator may speak to each of you individually. Mediation is usually arranged by the Lead Employer, or the Host HR team if you are employed locally.
* Quality Team intervention if the concern relates to several people or the wider culture of the workplace and a pattern emerges of multiple cases, the Deaney Quality Team may liaise with the education team at your host organisation to discuss and offer support for appropriate interventions. They may use supporting data such as the GMC survey to identify themes.
* If your First Listener is a Freedom to Speak Up Guardian, they will follow a similar process and may undertake informal conversations or escalate to senior members of the trust.

**Formal action**

* It is usually better for everyone for concerns to be addressed through informal routes. This does not mean that the concern is taken less seriously, but it does allow for a more nuanced approach, with a better chance of learning and a restoration of working relationships. However, in certain circumstances, it may be necessary to raise an allegation formally to determine if misconduct has taken place. You also have the right to make a formal allegation if that is your preference.
* Details of what you can expect to happen if you raise a formal allegation can be found in the [Lead Employer Respect and Dignity at Work policy](https://leademployer.merseywestlancs.nhs.uk/online-policies?policy=17) and you can discuss this process further with a member of the HR Advisory Team.
* In some cases, where the allegation is of a serious nature, an investigation may be instituted in the absence of a concern being raised formally.
* If you are unhappy with the action plan, or you are not satisfied with the outcome, or you feel you have not been taken seriously, you should escalate to the Senior Deanery Team or the Lead Employer. You also have the option to speak to your BMA representative or indemnity provider.
* You will not usually be moved from your placement mid-rotation; however, there may be occasions where this warranted, such as when your wellbeing is deemed to be at risk. If a concern is considered serious enough to warrant a mid-rotation move, you will usually be asked to submit a formal allegation. This is to allow an investigation to take place, firstly to prevent any future harmful behaviours, and secondly in the interests of fairness to the alleged perpetrator(s).

### Serious concerns

Where any of the conditions below apply, you will be offered dedicated support from the Professional Support and Wellbeing Service in addition to any other health or pastoral support.

* You do not feel safe or able to raise the concern to your Clinical Supervisor, Educational Supervisor or Training Programme Director.
* The concern involves discrimination, bullying or sexual safety.
* Your wellbeing is significantly affected.
* You have decided to raise a formal allegation.
* There is the potential for wider staff or patient safety impact.

The Senior Deanery Team will be made aware to ensure you are being supported, and the concern is being dealt with appropriately. Again, you will not be disadvantaged by raising a concern.

### Sexual misconduct

NHS England recently released its [Sexual Safety Charter](https://www.england.nhs.uk/long-read/sexual-safety-in-healthcare-organisational-charter/), which towards the end of 2024 was supported by a Sexual Misconduct policy template. All NHS organisations in England are required to sign up to the Sexual Safety Charter. Work undertaken with the Allyship Network, supported by the Deanery EDI Team, Medical Directors and the Lead Employer produced guidance for organisations outlining the additional risks faced by trainees.

It is extremely important that you report any instances of unwelcome sexual advances or behaviours so that immediate action can be taken. Steps will be taken to keep you safe, and you will be provided with pastoral support and an occupational health referral if required. There is also a national [NHS Sexual Misconduct Policy](https://www.england.nhs.uk/long-read/sexual-misconduct-policy/#appendix-1-support), which has a useful list of resources.

## Concerns Unrelated to Dignity

Concerns unrelated to dignity include:

* Issues relating to patient safety.
* Issues relating to training.
* Issues relating to the work environment (without interpersonal issues), examples include:
* Excessive workload.
* Rota issues.
* Poor facilities.

### Who should I speak to?

Where you have a concern unrelated to dignity, in the first instance you should speak with your Clinical or Educational Supervisor, if you are not comfortable doing this or you have tried without effect, you can raise your concern with the following:

|  |  |  |  |
| --- | --- | --- | --- |
|  | Patient Safety | Training | Work Environment |
| Clinical Supervisor |  |  |  |
| Educational Supervisor |  |  |  |
| Freedom to Speak Up Guardian\*\* |  |  |  |
| College Tutor |  |  |  |
| Trust Specialty Training Lead |  |  |  |
| Training Programme Director / Foundation Programme Director | * \* |  |  |
| Head of School |  |  |  |
| Patch Associate Dean | * \* |  |  |
| Peer Ally |  |  |  |
| Trust education team |  |  |  |
| Departmental Manager |  |  |  |
| Rota Co-ordinator |  |  |  |
| Guardian of Safe Working |  |  |  |

\*For GP trainees when their Clinical and/or Educational Supervisor is unresponsive.

\*\*Refer to [Appendix A](#_Appendix_A:_First) for further information on Freedom to Speak Up Guardians.

##### Escalation hesitancy

There may be times when you feel hesitant or anxious raising a concern to a senior clinician, if you do not feel confident, we advise that you contact a Peer Ally or Freedom to Speak Up Guardian.

## Trade Union Representation

Trade Union representatives can be useful for advice when you want an independent opinion, but they will not be able to take action to rectify your concern. If your allegation is disputed, or if a counter-allegation has been made, it is important to ensure that you have adequate representation.

## Concerns for Another Person

If your concerns relate to the treatment of another person, it is usually a good idea to speak to them first. Your support is likely to be welcomed, but they may not always wish for you to act.

If you decide to speak to your colleague, you should ensure the conversation happens where you will not be overheard. It is important to stick to the facts of what you witnessed and listen to the perspective of the individual. At all times you can emphasise your support and your concern for their wellbeing. You may wish to signpost them to this guidance.

If the individual states that they do not want any action to be taken, you should respect their wishes unless you have concerns for their safety or the safety of others. If you believe this is the case, you may wish to discuss confidentially with a trusted member of the education team.

## Group Concerns

If there is more than one person experiencing issues with an individual or individuals, or the wider culture of your workplace, this guidance is still applicable.

## When a Concern Has Been Raised About You

There may be an occasion where a concern has been raised about you, we understand this will be a very stressful situation. Whilst this concern will need to be approached like any other and the appropriate process followed; you can expect to be supported and treated with kindness and respect.

If there have been concerns raised about your performance and / or conduct, these will be looked at separately and will not influence the approach to the investigation of your own concern.

The sources of support outlined in this document are available to you. If your mental health is affected, it is important to seek help, whether via the Lead Employer’s occupational health department, your own GP, or other crisis support services. Details of these can be found on the [Lead Employer Wellbeing Hub](https://leademployer.merseywestlancs.nhs.uk/welcome-to-your-wellbeing-hub).

## When your Concerns have not been Adequately Addressed

It is very important to the Senior Deanery Team that all concerns can be raised safely, addressed effectively, and changes made as a result. In addition to having their own concern addressed, trainees who do raise concerns often state that they do not want their experience to happen to others.

It is clear from the work undertaken in collaboration with trainees there are significant historic and current barriers to raising concerns. Our ambition is for all these barriers to be dismantled; however, we recognise that such a shift in culture will take time.

If you have followed the guidance in this document and still feel your concern hasn’t been addressed to your satisfaction, the Senior Deanery Team would like to hear from you. Your Programme Support Manager will be able to supply you with the correct contact details.

In most cases, we anticipate that with appropriate escalation, we will be able to support you effectively, help you to find a resolution to your concern, and learn from what we hear.

Ultimately our aim is for you all to be working in a culture which supports you to thrive, where you are valued for who you are, and you feel a sense of belonging as you successfully complete your training.

## Appendix A: First Listeners

### Peer Ally

The Allyship Network is a group of trainees who have volunteered their time to provide support and advice to others. They can be particularly helpful where there is an EDI concern, such as discrimination, unfair treatment, exclusion, microaggressions or sexual misconduct. Peer Allies have a diverse range of characteristics and experiences. Information on how to contact a Peer Ally are on the [EDI page of the Denery website](https://www.nwpgmd.nhs.uk/raising-dignity-concerns).

Peer Allies have undergone training in how to provide the correct support, advice, and guidance. After you have spoken to them, you may feel more able to address the concern yourself, or to access one of the other options you have been signposted to. Alternatively, you may agree with your Peer Ally that they can escalate the concern on your behalf. In this instance, you will need to agree to your contact details being shared with the person to whom the concern is escalated, along with an outline of the concern.

Peer Allies will keep the details of your conversation confidential. If there is a decision for them to escalate on your behalf, they will agree the details to be shared with you first. The only exception to this confidentiality is if there is a serious risk to your safety or to others. In this case, they will tell you they need to escalate your concern but will do so in a way that ensures you are safe and have adequate support.

### Freedom to Speak Up Guardian

A Freedom to Speak Up Guardian (FTSUG) is an individual employed by an NHS organisation (usually a hospital trust) to support workers to speak up when they feel unable to do so by other routes. They ensure that people who speak up are thanked, that the issues they raise are responded to, and make sure the person speaking up receives feedback on the actions taken.

You can speak to the FTSUG on a confidential basis; they will discuss options for raising your concern whilst protecting your identity as far as possible. Your confidentiality will always be preserved except where it is required to be disclosed by law. You can read more about the role and responsibility of a FTSUG at: <https://nationalguardian.org.uk/>.

FTSUGs are accountable to the National Guardian’s Office, rather than the trust board, and are therefore able to act independently. If you do not have a FTSUG at your current placement, such as a GP practice, you have access to the FTSUG via the [Lead Employer](https://nationalguardian.org.uk/speaking-up/find-my-ftsu-guardian/) at Mersey and West Lancashire Teaching Hospitals NHS Trust.

Some trusts also have Freedom to Speak Up Champions (FTSUCs). These are volunteers from different professional groups, they are unable to undertake a case investigation and have not all had training. In general, it is better to speak to the FTSUG with your concern, although if you know a particular FTSUC, or have had good feedback about them, you may prefer to speak to them.

### Equality, Diversity and Inclusion Lead

The trust Equality, Diversity and Inclusion Lead may be helpful where you feel there might be a discriminatory element to what has been happening. They can advise on points relating to the Equality Act 2010, and other relevant legislation.

### Lead Employer Team

If you are employed by the Lead Employer (Mersey and West Lancashire Teaching Hospitals NHS Trust) you can access their website or speak to a member of their team. They have a useful [Wellbeing Hub](https://leademployer.merseywestlancs.nhs.uk/health-work-and-wellbeing) and links to [Policies and Forms](https://leademployer.merseywestlancs.nhs.uk/online-policies?policy=17), including:

* Equality and Human Rights.
* Grievance.
* Respect and Dignity at Work.

The Lead Employer has a [helpdesk](https://leademployer.merseywestlancs.nhs.uk/contact-us) where you can speak to a member of the HR Advisory Team for advice and support.

Foundation and Locally Employed Doctors are directly employed by the host trust. In this case, you can contact a member of the Foundation Team or your trust medical staffing department.

### Deanery EDI Team

The Deanery EDI team supports the Allyship Network its members are from the Professional Support and Wellbeing Service and the Associate Deans leading on EDI matters. If there is an EDI element to your concerns, the team would be happy to hear from you via: [england.edinetwork.nw@nhs.net](mailto:england.edinetwork.nw@nhs.net). Alternatively, you can e-mail one of the Associate Deans directly, you can find their contact details on the [EDI page of the Deanery website](https://www.nwpgmd.nhs.uk/raising-dignity-concerns).

### Senior Deanery Team

The Postgraduate Dean is the Head of Training Programme Management for all Postgraduate Doctors, Dentists and Public Health Clinicians in training.

Each specialty has an Associate Dean who supports the Head of School; there are also Deputy Deans with responsibility for Hospital and Community Care, Dentistry, Foundation and General Practice.

If you have exhausted all other routes, you are welcome to contact the relevant member of the Senior Deanery Team. Your Programme Support Manager will be able to supply you with the correct contact details.

## Appendix B: What will happen when I speak up?

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **We will:** | | | | |
| **Thank you for speaking up** | **Help you identify the options for resolution** | **Signpost you to health and wellbeing support** | **Confirm what information you have provided consent to share** | **Support you with any further next steps and keep in touch with you** |

|  |  |  |  |
| --- | --- | --- | --- |
| **Steps towards resolution:** | | | |
| **Support to resolve yourself** | **Engagement with relevant senior educators / managers (as appropriate)** | **Informal resolution such as facilitated conversation or mediation** | **Support to raise formal allegation via local HR or Lead Employer (as appropriate)** |

|  |  |
| --- | --- |
| **Outcomes:** | |
| **The outcomes will be shared with you wherever possible, along with learning and improvement identified** | **Your anonymised report will be collated by the Deanery Quality Team to identify themes and issues to be addressed** |

|  |  |
| --- | --- |
| **Escalation:** | |
| **For serious concerns, when resolution has not been achieved, or you are not satisfied with the outcome, the matter may be escalated** | **There are a number of options for escalation, these include:**   * **Associate Deans for EDI** * **Lead Employer** * **Deputy Deans** * **Postgraduate Dean** * **Union Representative** |

## Appendix C: Support Resources

Your employer has a duty to ensure your health and wellbeing in the workplace. This may be the Lead Employer or a host trust. Both will be able to provide you with access to occupational health support and a range of wellbeing resources and services.

If you are employed by a host trust, you will be able to find details of the wellbeing support and occupational health information via the trust intranet.

If you are not receiving the advice or support you need for any reason, please consider contacting one of our [Peer Allies](https://www.nwpgmd.nhs.uk/raising-dignity-concerns) who will be able to listen to your concerns and point you in the right direction.

* [The Lead Employer Wellbeing Hub](https://leademployer.merseywestlancs.nhs.uk/welcome-to-your-wellbeing-hub)
* Guidance on dealing with discrimination and bullying can be found on the [ACAS website](https://www.acas.org.uk/discrimination-and-bullying).
* NHS England has a Sexual Misconduct Policy which has a very useful set of [resources](https://www.england.nhs.uk/long-read/sexual-misconduct-policy/#appendix-1-support) to support you if you have experienced unwelcome sexual conduct.

**If you are experiencing a mental health crisis, you should seek immediate support**

Initial support if you feel you are in crisis might be from a friend, family member or other trusted individual. If you don’t have anyone to talk to, there are always services that can support you:

* [Samaritans](https://www.samaritans.org/how-we-can-help/contact-samaritan/) is an organisation that provides 24-hour support to anyone who believes they may be experiencing suicidal thoughts.
* Samaritans helpline: 116 123
* You can also use the online chat facility or email
* [NHS help for suicidal thoughts](https://www.nhs.uk/mental-health/feelings-symptoms-behaviours/behaviours/help-for-suicidal-thoughts/) provides the details of a variety of crisis support services and guidance.
* [Mind](https://www.mind.org.uk/need-urgent-help/using-this-tool/) is a mental health charity which provides emergency advice and crisis support as well as a range of advice and resources for mental health conditions.
* [NHSE Supporting colleagues affected by sexual misconduct](https://www.england.nhs.uk/supporting-our-nhs-people/support-now/supporting-colleagues-affected-by-sexual-misconduct/) provides information for staff who have experienced or witnessed an instance of **sexual misconduct**.
* [Mental health and wellbeing resources](https://www.england.nhs.uk/supporting-our-nhs-people/support-now/staff-mental-health-and-wellbeing-hubs/) from NHS England. Includes how to access talking therapies, and details of how to access Practitioner Health.

## Appendix D: The Dignity Model

The Dignity Model can be very helpful in thinking about how to work with colleagues to ensure that everyone is valued and accepted for who they are. It was written by Professor Donna Hicks, an expert in international conflict resolution. You should be able to expect that you will be treated with dignity at all times.

Full details can be found in two books:

* Dignity: Its essential role in resolving conflict
* Leading with Dignity: How to create a culture that brings out the best in people

### The Ten Elements of Dignity

1. **Acceptance of Identity**: Approach people as being neither inferior nor superior to you; give others the freedom to express their authentic selves without fear of being negatively judged; interact without prejudice or bias, accepting that characteristics such as race, religion, gender, class, sexual orientation, age, and disability are at the core of their identities.

2. **Recognition**: Validate others for their talents, hard work, thoughtfulness, and help; be generous with praise; give credit to others for their contributions, ideas, and experiences.

3. **Acknowledgment**: Give people your full attention by listening, hearing, validating, and responding to their concerns and what they have been through.

4. **Inclusion**: Make others feel that they belong, at all levels of relationship (family, community, organization, and nation).

5. **Safety**: Put people at ease at two levels: physically, so they feel free from the possibility of bodily harm, and psychologically, so they feel from concern about being shamed or humiliated and free to speak without fear of retribution.

6. **Fairness**: Treat people justly, with equality, and in an even-handed way according to agreed-on laws and rules.

7. **Independence**: Encourage people to act on their own behalf so that they feel in control of their lives and experience a sense of hope and possibility.

8. **Understanding**: Believe that what others think matters; give them the chance to explain their perspectives and express their points of view; actively listen to understand them.

9. **Benefit of the Doubt**: Treat people as if they are trustworthy; start with the premise that others have good motives and are acting with integrity.

10. **Accountability**: Take responsibility for your actions; apologise if you have violated another person’s dignity; make a commitment to change hurtful behaviours.