

THE CLEAR™ ESCALATION STANDARD PATIENT SAFETY 101

Quick-reference tool · Print it. Pocket it. Pin it to the noticeboard.

"Your voice is not a soft skill. It is a clinical safety intervention."

USE CLEAR WHEN: you believe a patient may be at risk · a clinical decision does not align with your assessment · a safety protocol is not being followed · you are concerned but uncertain. *If in doubt, seek clarification early and escalate if concern remains.*

C

COMMUNICATE THE CONCERN — state what you are worried about, why it matters, and what action you are requesting. *"I am concerned because..."* Structured tools such as SBAR can organise the message.

L

LOOP BACK IF NOT RESOLVED — silence is not reassurance. Return to it explicitly: *"I want to raise this again because I remain concerned about this patient."* Repeat until acknowledged.

E

ESCALATE TO THE NEXT LEVEL — move up your organisation's chain of command (senior nurse, medical team, on-call, site management). *"I need to escalate this now."* Where risk may increase, escalate without delay.

A

ACCOUNT FOR WHAT OCCURRED — document what you observed, what you raised, when, and to whom. *"Concern raised at..."* Documentation protects both patient and practitioner.

R

REPORT THROUGH FORMAL ROUTES — submit through your incident reporting system; use your Freedom to Speak Up Guardian or equivalent, patient safety team, professional body or union where needed. *"I am submitting this..."*

THE TWO-CHALLENGE RULE

If clarification does not ease your concern about possible harm, raise it again (L). If it remains unresolved, escalate through the chain of command (E). The purpose is not confrontation. The purpose is patient safety.

DOCUMENT OBJECTIVELY

"Concern raised to Dr X at 14:10 regarding increased NEWS score and reduced urine output. No new review plan documented at that time. Escalated to nurse in charge at 14:25."

**A concern that has not been acknowledged has not been resolved.
Silence is not reassurance. Delay increases risk.**