

SAS ADVOCATES | PRACTICAL RESOURCE

A Doctor's Guide to the SAS Advocate

Understand when an advocate may help, what to expect and which other service may be needed.

What this resource contains

- Role and confidentiality prompts
- Writing space for decisions or review
- Independent source and boundary safeguards

IMPORTANT

Independent general guidance. It does not replace clinical, employment, regulatory, immigration or legal advice. Do not include patient-identifiable or unnecessary colleague-identifiable information in worksheets.

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ROLE BOUNDARY

The SAS Advocate supports, navigates, signposts and raises organisational themes. The role does not replace treatment, union representation, formal investigation or legal advice.

Before contact

What has happened?

What do I need from the conversation?

Is anyone at immediate risk?

Is there a deadline or formal process?

Which other adviser is already involved?

Questions for the advocate

What is your remit?

What do you record?

Who can see it?

What are the limits of confidentiality?

Can you support a contact or signpost representation?

How will we review next steps?

What the advocate cannot replace

Clinical treatment

Union or legal representation

Formal investigation

Defence-organisation advice

Emergency or safeguarding action

Source and confidentiality note

The role was developed through SAS contract reform. Local remit, coverage, line management and resources vary. Check the current joint BMA/NHS Employers SAS Advocate guidance and local agreement.

CONFIDENTIALITY

Explain role, records, access, aggregate reporting and limits before inviting detailed disclosure. Do not include patient identifiers or case details that could identify a doctor through specialty, site, grade or timing.

[Open the joint SAS Advocate guidance](#)