

**Meeting:** Ayrshire and Arran NHS Board

**Meeting date:** Monday 23 May 2022

**Title:** Whistleblowing Report – Quarter 4, January to 31 March 2022

**Responsible Director:** Jennifer Wilson, Nurse Director

**Report Author:** Karen Callaghan, Corporate Governance Coordinator

## 1. Purpose

This is presented to the NHS Board for:

- Discussion

This paper relates to:

- Government policy/directive

This aligns to the following NHSScotland quality ambition(s):

- Safe
- Effective
- Person Centred

## 2. Report summary

### 2.1 Situation

The National Whistleblowing Standards and Once for Scotland Whistleblowing policy (the Standards) were introduced on 1 April 2021. Board Members are asked to discuss the report on organisational activity in relation to Whistleblowing concerns raised in Quarter 4 (January – 31 March 2022).

### 2.2 Background

The National Whistleblowing Standards (the Standards) set out how the Independent National Whistleblowing Officer (INWO) expects all NHS Boards to manage, record and report whistleblowing concerns. It is a requirement of the Standards that whistleblowing data is reported quarterly to the NHS Board and under our local governance arrangements to the NHS Board.

The Standards also require that Boards publish an annual report setting out performance in handling whistleblowing concerns. The annual report will summarise and build on the quarterly reports produced by the board, including performance against the requirements of the Standards, Key Performance Indicators (KPIs), the issues that have been raised and the actions that have been or will be taken to

improve services as a result of concerns. The first annual report will be presented in August 2022.

In NHS Ayrshire & Arran the agreed governance route for reporting on whistleblowing is to Staff Governance Committee and then to the NHS Board. The NHS Board report will be shared with Integration Joint Boards following the NHS Board meeting.

## 2.3 Assessment

As zero Whistleblowing concerns were received in Quarter 4 (Q4) a detailed report is not possible and a summary is provided below to provide information on Whistleblowing cases received, progress with investigations and improvement plans. The first Annual report for Whistleblowing is being progressed and will be submitted to Staff Governance committee and the NHS Board in August 2022.

- Chart 1 below shows the total number of concerns investigated as Whistleblowing in 2021/22.



Chart 1

- Investigations: One case remained open from Q3. This was concluded at the end of March 2022 with the concern upheld. The investigation lead is meeting with the senior management team of the area concerned to discuss the recommendations prior to drafting of the improvement plan. The plan will be owned and managed by the senior management team and reported through the Site and Mental Health Governance Committee.
- Improvement plans: Table 1 shows status of investigations. Of five completed investigations, four required improvement plans and one required a learning plan. These are monitored through Directorate Governance routes with feedback on closure to the Whistleblowing Oversight Group.

Number Investigations closed	Numbers of Improvement Plans		Number of Learning Plans	
	In Progress	Closed	In Progress	Closed
5	3	1	1	

Table 1

- Experience of individuals raising concern/s: A feedback survey is being piloted, with a response rate of 25%. Although feedback received has been limited this has been positive, for example, when asked: "What was your impression of the staff that were dealing with the concerns?" the response was "Very helpful and I truly felt I was being taken seriously".

Further information from the feedback survey will be available in the Annual report.

- **Communications:** Whistleblowing communications will be refreshed in the coming month. This will remind staff about how to raise a WB concerns and will include refreshed and updated 7 minute briefings. An anniversary communication is also being considered to mark the one year anniversary of The National Whistleblowing Standards going live. As zero concerns were received consideration on how communications are shared will be reviewed.
- **Training:** Reminders will be issued to remind managers and staff to complete the mandatory Turas Learn modules. To date 2233 staff and 450 managers have accessed the training modules. A review of the benefits of continued Facilitated Sessions for managers and offering lunch time learning sessions for staff is underway.
- **Review of process:** Given the one year anniversary since the launch of The Standards a review of our processes and guidance is being undertaken. This will consider learnings from cases received over the past year, advice and guidance from the INWO and best practice from other health boards which is shared through the Whistleblowing Practitioners Forum, attended by the Head of Corporate Governance and Corporate Governance Coordinator. Feedback from those involved in the process will be considered. The review will also be informed by the outcomes of an Internal Audit into Compliance with Whistleblowing Policies and Procedures taking place during April 2022.

#### **2.3.1 Quality**

Procedures for raising concerns should provide good-quality outcomes through a thorough but proportionate investigation. The approach to handling whistleblowing concerns ensures that learning and improvement is progressed for upheld whistleblowing concerns and are shared across all relevant services.

#### **2.3.2 Workforce**

The Standards support our ambition for an open and honest organisational culture where staff have the confidence to speak up and all voices are heard. This is focused through our organisational Values of 'Caring, Safe and Respectful' and promoting a culture of psychological safety.

#### **2.3.3 Financial**

There is no financial impact.

#### **2.3.4 Risk assessment/management**

If staff do not have confidence in the fairness of the procedures through which their concerns are raised, or do not feel assured that concerns raised will be acted upon, there is a risk that they will not raise valid concerns about quality, safety or malpractice. The opportunity to investigate and address these concerns will have been lost, with potentially adverse impact on quality, safety and effectiveness of services.

There is also a wider risk to organisational integrity and reputation, if staff do not believe they will be listened to and do not feel senior leaders in NHS Ayrshire & Arran are fulfilling the organisation's Values of 'Caring, Safe and Respectful' and promoting a culture of Psychological Safety.

### 2.3.5 Equality and diversity, including health inequalities

A local Equality Impact Assessment (EQIA) for the Standards is in place and published on our [public facing web](#). This assesses the impact of the Whistleblowing Standards on staff and those who provide services on behalf of the NHS with protected characteristics.

### 2.3.6 Other impacts

- **Best value:** Governance and accountability and Performance management. The delivery of an effective process for whistleblowing concerns will support the Board's commitment to safe, effective and person-centred care. Effective handling of concerns supports the delivery of the Healthcare Quality Strategy.
- **Compliance with Corporate Objectives** - Create compassionate partnerships between patients, their families and those delivering health and care services which respect individual needs and values; and result in the people using our services having a positive experience of care to get the outcome they expect.

### 2.3.7 Communication, involvement, engagement and consultation

There is no requirement for formal engagement with external stakeholders in relation to the formulation of this paper. There has been wide communication of the Standards across the organisation.

### 2.3.8 Route to the meeting

This has been previously considered by the following groups as part of its development. The groups have either supported the content, or their feedback has informed the development of the content presented in this report.

- Whistleblowing Oversight Group by email
- Staff Governance Committee on 3 May 2022

## 2.4 Recommendation

The Board are asked to discuss the paper for Quarter 4 (January – 31 March 2022).